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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2010

Open to Public Inspection

A For the 2010 calendar year, or tax year beginning , 2010, and ending , 20

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Terminated ☐ Amended return ☐ Application pending

C Name of organization: BEAVERDALE MEMORIAL PARK INC

Doing Business As:

Number and street (or P O box if mail is not delivered to street address): P O BOX 1802 — Room/suite:

City or town, state or country, and ZIP + 4: PROVIDENCE, RI 02901-1802

D Employer identification number: 06-6021577

E Telephone number:

G Gross receipts $ 674,630.

F Name and address of principal officer: SAME AS ABOVE

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) Are all affiliates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: ☐ 501(c)(3) ☒ 501(c) (13) ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

J Website ▶ N/A

K Form of organization: ☐ Corporation ☒ Trust ☐ Association ☐ Other ▶ **L** Year of formation 1933 **M** State of legal domicile CT

Part I Summary

1 Briefly describe the organization's mission or most significant activities: SUPPORTS BEAVERDALE MEMORIAL PARK

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	
5	Total number of individuals employed in calendar year 2010 (Part V, line 2a)	5	NONE
6	Total number of volunteers (estimate if necessary)	6	
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	NONE
b	Net unrelated business taxable income from Form 990-T, line 34	7b	NONE

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)		
9	Program service revenue (Part VIII, line 2g)	28,943	26,800.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-157,348	185,840.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-128,405	212,640.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	102,000	102,000.
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	33,502	34,201.
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ NONE		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	1,615	1,701.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	137,117	137,902.
19	Revenue less expenses Subtract line 18 from line 12	-265,522	74,738.

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	3,299,856	3,372,077.
21	Total liabilities (Part X, line 26)	NONE	NONE
22	Net assets or fund balances. Subtract line 21 from line 20	3,299,856	3,372,077.

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MAY 12 2011
IRS-OSC
OGDEN, UT

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

▶ Signature of officer — 05/05/2011 Date

▶ Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check if self-employed ▶ ☐	PTIN
Firm's name ▶			Firm's EIN ▶	
Firm's address ▶			Phone no	

May the IRS discuss this return with the preparer shown above? (see instructions) ☐ Yes ☒ No

For Paperwork Reduction Act Notice, see the separate instructions. Form **990** (2010)

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ENVELOPE POSTMARK DATE MAY 09 2011

SCANNED JUN 01 2011

Part III **Statement of Program Service Accomplishments**
Check if Schedule O contains a response to any question in this Part III . . . . . ☐

1 Briefly describe the organization's mission:
SUPPORTS BEAVERDALE MEMORIAL PARK

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . . ☐ Yes ☒ No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☒ No
If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 102,000. including grants of $ 102,000.) (Revenue $)
SUPPORTS BEAVERDALE MEMORIAL PARK

4b (Code:) (Expenses $ 20,521. including grants of $) (Revenue $)
TRUSTEE FEES

4c (Code:) (Expenses $ including grants of $) (Revenue $)

4d Other program services. (Describe in Schedule O.)
(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** ▶ 122,521.

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		X
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10		X
11	If the organization s answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a		X
b	Did the organization report an amount for investments other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		X
c	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		X
f	Did the organization s separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Parts I and IV*	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Parts III and IV*	16		X
17	Did the organization report a total of more than $15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I (see instructions)*	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		X
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		X
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? **Note.** Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	X	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K If No, go to line 25*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
25 a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		X
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2* ☐ Yes ☒ No			
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O.	38		X

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . . ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	0		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return .	2a	0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file.* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a			X
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	If Yes, enter the name of the foreign country: ▶ _____ See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a			X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . .	7e			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . . .	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8			
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?	9a			X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b			X
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?	13a			
	Note. See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*	14b			

Part VI Governance, Management, and Disclosure *For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.*

Check if Schedule O contains a response to any question in this Part VI X

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		
b	Enter the number of voting members included in line 1a, above, who are independent	1b		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? . . .	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9		X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b		
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this is done*	12c	X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ▶PRIVATE BANK TAX SERVICES TEL: (401)278-6858
PO BOX 1802; PROVIDENCE, RI 02901-1802

Part VII **Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII . . . . . ☐

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees, officers, key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) BANK OF AMERICA TRUSTEE	40		X					34,201.	NONE	NONE
(2)										
(3)										
(4)										
(5)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees *(continued)*

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
(26)										
(27)										
(28)										
1b Sub-total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶								34,201.	NONE	NONE

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶ 0

		Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*		
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶ 0

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f				
	g Noncash contributions included in lines 1a-1f: $					
	h Total. Add lines 1a-1f ▶					
Program Service Revenue		Business Code				
	2a PERPETUAL CARE DEED		26,800.	26,800.		
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f ▶		26,800.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		109,250.			109,250.
	4 Income from investment of tax-exempt bond proceeds ▶					
	5 Royalties ▶					
		(i) Real / (ii) Personal				
	6a Gross Rents					
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss) ▶					
		(i) Securities / (ii) Other				
	7a Gross amount from sales of assets other than inventory	538,580				
	b Less cost or other basis and sales expenses	461,990				
	c Gain or (loss)	76,590				
	d Net gain or (loss) ▶		76,590.			
	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18 a					
	b Less direct expenses b					
	c Net income or (loss) from fundraising events ▶					
	9a Gross income from gaming activities. See Part IV, line 19 a					
	b Less direct expenses b					
	c Net income or (loss) from gaming activities ▶					
	10a Gross sales of inventory, less returns and allowances a					
	b Less: cost of goods sold b					
	c Net income or (loss) from sales of inventory ▶					
	Miscellaneous Revenue	Business Code				
	11a					
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d ▶					
	12 Total revenue. See instructions ▶		212,640.	26,800.		109,250.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	102,000.			
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	34,201.			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	800.			
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance				
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.)				
a _____				
b _____				
c _____				
d _____				
e _____				
f All other expenses _____	901.			
25 **Total functional expenses** Add lines 1 through 24f	137,902.			
26 **Joint Costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	170,764.	1	122,689.
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a			
	b	Less: accumulated depreciation — 10b		10c	
	11	Investments - publicly traded securities	3,129,092.	11	3,249,388.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	3,299,856.	16	3,372,077.
Liabilities	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities. Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	NONE	26	NONE
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ [X] and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	3,299,856.	27	3,372,077.
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117, check here ▶ [ ] and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	3,299,856.	33	3,372,077.
	34	Total liabilities and net assets/fund balances	3,299,856.	34	3,372,077.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI X

1	Total revenue (must equal Part VIII, column (A), line 12)	1	212,640.
2	Total expenses (must equal Part IX, column (A), line 25)	2	137,902.
3	Revenue less expenses. Subtract line 2 from line 1	3	74,738.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,299,856.
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-2,517.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	3,372,077.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990: ☒ Cash ☐ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
b	Were the organization's financial statements audited by an independent accountant?	2b		X
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3b		

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization

BEAVERDALE MEMORIAL PARK INC

Employer identification number

06-6021577

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Part II can be duplicated if additional space is needed . . . . . ▶ [ ]

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) SEE STATEMENT 1							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations . . . . . ▶

3 Enter total number of other organizations . . . . . ▶ 1

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
N/A					
2					
3					
4					
5					
6					
7					

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

EXPLANATION FOR FORM 990, SCHEDULE I, PART 1, LINE 2

ANNUAL STATMENT

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2010

Open to Public Inspection

Name of the organization

BEAVERDALE MEMORIAL PARK INC

Employer identification number

06-6021577

FORM 990, PAGE 6, PART VI, LINE 11-DESCRIPTION OF PROCESS FOR REVIEW

THE FORL 990 IS PREPARED, REVIEWED AND FILED BY THE TAX DEPARTMENT

EXPLANATION FOR FORM 990, PAGE 6, PART VI, LINE 12c

ANNUAL STATMENT

DESCRIPTION OF PROCESS FOR DETERMINING COMPENSATION

FORM 990, PAGE 6, PART VI, LINE 15b

NOT APPLICABLE, TRUST HAS CORPORATE TRUSTEE

EXPLANATION FOR FORM 990, PART XI, LINE 5

CARRYING VALUE, INCOME, SECURITIES AND ROUNDING ADJUSTMENTS TOTALING $-2,517 NEEDED TO BE MADE.

SCH I, PART II - GRANTS AND OTHER ASSISTANCE TO ORG'S INSIDE THE US

NAME OF ORGANIZATION:
BEAVERSALE MEMORIAL PARK
ADDRESS:
90 PINE ROCK AVE
NEW HAVEN, CT 06515-1307
EIN: 06-0256610
AMOUNT OF CASH GRANT..... 102,000.
METHOD OF VALUATION:
FMV
PURPOSE OF GRANT:
SUPPORTS BEAVERDALE MEMORIAL PARK

TOTAL CASH GRANTS..... 102,000.

ASSET SUMMARY

AS OF 12/31/10

ACCOUNT
42-16-100-8546152 BEAVERDALE MEMORIAL PARK INC

	FEDERAL TAX COST	MARKET VALUE	% OF ACCOUNT	CURRENT YIELD	EST I INC
CASH AND CASH EQUIVALENTS					
MONEY MARKET FUNDS	122,688.99	122,688.99	2.738	0.130	
FIXED INCOME					
GOVERNMENT AND AGENCY	99,740.34	104,027.50	2.322	3.725	3,
CORPORATE BONDS	243,988.00	266,904.50	5.957	4.861	12,
MUTUAL FUNDS-FIXED	610,155.73	639,650.90	14.276	4.652	29,
TOTAL FIXED INCOME	953,884.07	1,010,582.90	22.554	4.612	46,
EQUITIES					
CONSUMER DISCRETIONARY	158,524.00	248,322.10	5.542	1 972	4,
CONSUMER STAPLES	151,161.15	274,700 00	6.131	3.133	8,
ENERGY	143,583.50	252,423.50	5.634	1.573	3,
FINANCIALS	195,569.97	282,651.00	6.308	0.857	2,
HEALTH CARE	200,653.85	263,325.68	5.877	2.224	5,
INDUSTRIALS	172,924.98	260,140.75	5.806	2.064	5,
INFORMATION TECHNOLOGY	229,586.26	450,863.00	10.062	1 327	5,
MATERIALS	110,583.36	124,532.00	2.779	1.560	1,
TELECOMMUNICATION SERVICES	47,311.33	62,690.00	1.399	3.787	2,
UTILITIES	69,674.47	62,508.00	1.395	4 035	2,
MUTUAL FUNDS-EQUITY	133,119.35	191,875.58	4.282	0.174	
OTHER EQUITIES	642,811.58	833,435.05	18.600	2.119	17,
TOTAL EQUITIES	2,255,503.80	3,307,466.66	73.815	1.873	61,
NOTES AND MORTGAGES					
NOTES	40,000.00	40,000.00	0.893	0.000	
ACCOUNT TOTAL	3,372,076.86	4,480,738.55	100.000	2.426	108,

ASSET DETAIL

AS OF 12/31/10

ACCOUNT
42-16-100-8546152 BEAVERDALE MEMORIAL PARK INC

UNITS	ASSET DESCRIPTION	ORIGINAL COST	FEDERAL TAX COST	MARKET VALUE	% OF ACCOUNT	CURRENT YIELD	EST ANI INCOI
	CASH AND CASH EQUIVALENTS						
	MONEY MARKET FUNDS						
17,189.320	BANK OF AMERICA MONEY MARKET SAVINGS ACCOUNT (INCOME INVESTMENT) CUSIP NO: 994458719	17,189.32	17,189.32	17,189.32	0.384	0.130	2
105,499.670	BANK OF AMERICA MONEY MARKET SAVINGS ACCOUNT CUSIP NO: 994458719	105,499.67	105,499.67	105,499 67	2.355	0.130	13
	TOTAL MONEY MARKET FUNDS	122,688 99	122,688.99	122,688.99	2.739	0 130	15
	TOTAL CASH AND CASH EQUIVALENTS	122,688 99	122,688.99	122,688.99	2.739	0.130	15
	FIXED INCOME						
	GOVERNMENT AND AGENCY						
50,000.000	UNITED STATES TREAS NT DTD 08/15/01 5.000% DUE 08/15/11 CUSIP NO: 9128277B2	49,914.06	49,914.06	51,469.00	1.149	4 857	2,50
50,000.000	UNITED STATES TREAS NT DTD 10/31/08 2.750% DUE 10/31/13 CUSIP NO. 912828JQ4	49,826.28	49,826.28	52,558.50	1.173	2.616	1,37
	TOTAL GOVERNMENT AND AGENCY	99,740.34	99,740.34	104,027.50	2.322	3.725	3,87
	CORPORATE BONDS						
50,000 000	SBC COMMUNICATIONS INC GLOBAL NT DTD 02/01/02 5.875% DUE 02/01/12 CUSIP NO: 78387GAH6	50,249.00	50,249.00	52,638.00	1.175	5.581	2,93

A S S E T D E T A I L

AS OF 12/31/10

UNITS	ASSET DESCRIPTION	ORIGINAL COST	FEDERAL TAX COST	MARKET VALUE	% OF ACCOUNT	CURRENT YIELD	EST ANN INCOM
50,000.000	CITIGROUP INC GLOBAL SUB NT DTD 08/26/02 5.625% DUE 08/27/12 CUSIP NO· 172967BP5	49,216.00	49,216.00	52,467.50	1.171	5 360	2,812
50,000.000	TARGET CORP NT DTD 06/11/03 4.000% DUE 06/15/13 CUSIP NO: 87612EAM8	48,514.00	48,514.00	53,400.00	1.192	3.745	2,000
50,000.000	GENERAL ELEC CAP CORP MTN DTD 09/17/04 4.750% DUE 09/15/14 CUSIP NO: 36962GK86	47,795.00	47,795.00	53,461.50	1.193	4.442	2,375
50,000.000	BEAR STEARNS & CO INC GLOBAL NT DTD 11/06/02 5.700% DUE 11/15/14 CUSIP NO: 07385TAJ5	48,214.00	48,214.00	54,937.50	1.226	5.188	2,850
TOTAL	CORPORATE BONDS	243,988.00	243,988.00	266,904.50	5.957	4.861	12,975
MUTUAL FUNDS-FIXED							
12,520.974	COLUMBIA HIGH INCOME FUND CLASS Z SHARES CUSIP NO: 19765H495	95,000.00	95,000.00	100,668.63	2.247	7.114	7,162
38,331.471	COLUMBIA CORE BOND FUND CLASS Z SHARES CUSIP NO: 19765L371	405,183.48	405,155.73	419,729.61	9.367	3.388	14,220
9,029.433	PIMCO COMMODITY REALRETURN STRATEGY FUND CUSIP NO: 722005667	75,000.00	75,000.00	83,883.43	1.872	8.945	7,503

ASSET DETAIL

AS OF 12/31/10

ACCOUNT
42-16-100-8546152 BEAVERDALE MEMORIAL PARK INC

UNITS	ASSET DESCRIPTION	ORIGINAL COST	FEDERAL TAX COST	MARKET VALUE	% OF ACCOUNT	CURRENT YIELD	EST ANN INCOM
3,554.696	ROWE T PRICE INTL FDS INC INTL BD FD CUSIP NO· 77956H104	35,000.00	35,000.00	35,369.23	0.789	2.462	87(
	TOTAL MUTUAL FUNDS-FIXED	610,183.48	610,155.73	639,650.90	14.275	4 652	29,75
	TOTAL FIXED INCOME	953,911.82	953,884.07	1,010,582.90	22.554	4 612	46,60
EQUITIES							
CONSUMER DISCRETIONARY							
200.000	AMAZON COM INC CUSIP NO: 023135106	13,117.50	13,117.50	36,000.00	0.803	0.000	(
300.000	AUTOLIV INC CUSIP NO: 052800109	24,568.50	24,568.50	23,682.00	0.529	2.027	48(
1,000.000	LOWES COS INC CUSIP NO: 548661107	16,282.25	16,282.25	25,080.00	0.560	1 754	44(
1,000.000	MCDONALDS CORP CUSIP NO: 580135101	31,775.00	31,775.00	76,760.00	1.713	3.179	2,44(
1,700.000	NEWS CORP CL A CUSIP NO: 65248E104	12,953.50	12,953.50	24,752.00	0.552	1.030	25
200.000	NIKE INC CL B CUSIP NO: 654106103	12,495.50	12,495.50	17,084.00	0.381	1.452	24
333.000	TIME WARNER INC NEW COM CUSIP NO: 887317303	14,597.06	14,597.06	10,712.61	0.239	2.642	28
83.000	TIME WARNER CABLE INC CUSIP NO: 88732J207	5,125.07	5,125.07	5,480.49	0.122	2.423	13

A S S E T D E T A I L

AS OF 12/31/10

ACCOUNT
42-16-100-8546152 BEAVERDALE MEMORIAL PARK INC

UNITS	ASSET DESCRIPTION	ORIGINAL COST	FEDERAL TAX COST	MARKET VALUE	% OF ACCOUNT	CURRENT YIELD	EST ANN INCOM
150.000	V F CORP CUSIP NO: 918204108	11,810.62	11,810.62	12,927.00	0.289	2.924	378
400.000	VIACOM INC CL B COM CUSIP NO: 92553P201	15,799.00	15,799.00	15,844.00	0.354	1.515	240
TOTAL	CONSUMER DISCRETIONARY	158,524.00	158,524.00	248,322.10	5.542	1.972	4,896
CONSUMER STAPLES							
500.000	COLGATE PALMOLIVE CO CUSIP NO: 194162103	38,187.23	38,187.23	40,185.00	0.897	2.638	1,060
800.000	GENERAL MLS INC CUSIP NO: 370334104	883.86	883.86	28,472 00	0.635	3.147	896
600.000	HEINZ H J CO CUSIP NO: 423074103	25,885.50	25,885.50	29,676.00	0.662	3.639	1,080
500.000	KIMBERLY CLARK CORP CUSIP NO: 494368103	24,467.25	24,467.25	31,520.00	0.703	4.188	1,320
544.000	MEAD JOHNSON NUTRITION CO CUSIP NO: 582839106	2,424.01	2,424.01	33,864.00	0.756	1.446	489
800.000	PEPSICO INC CUSIP NO: 713448108	37,280.00	37,280.00	52,264.00	1.166	2.939	1,536
300.000	PHILIP MORRIS INTL INC CUSIP NO: 718172109	11,836.05	11,836.05	17,559.00	0.392	4.374	768
1,400.000	SYSCO CORP CUSIP NO: 871829107	10,197.25	10,197.25	41,160.00	0.919	3.537	1,456
TOTAL	CONSUMER STAPLES	151,161.15	151,161.15	274,700.00	6.130	3.133	8,605

A S S E T D E T A I L

AS OF 12/31/10

UNITS	ASSET DESCRIPTION	ORIGINAL COST	FEDERAL TAX COST	MARKET VALUE	% OF ACCOUNT	CURRENT YIELD	EST ANN INCOM
ENERGY							
300.000	APACHE CORP CUSIP NO: 037411105	24,148.15	24,148.15	35,769.00	0.798	0.503	18(
200 000	DEVON ENERGY CORP NEW CUSIP NO: 25179M103	17,104.92	17,104.92	15,702.00	0.350	0 815	12(
1,500.000	EXXON MOBIL CORP CUSIP NO: 30231G102	19,432.44	19,432.44	109,680.00	2.448	2.407	2,64(
250.000	MURPHY OIL CORP CUSIP NO: 626717102	18,280.23	18,280.23	18,637.50	0.416	1.476	27:
300.000	OCCIDENTAL PETE CORP DEL CUSIP NO: 674599105	26,125.26	26,125.26	29,430.00	0.657	1.549	45(
500.000	QEP RES INC CUSIP NO: 74733V100	18,677.50	18,677.50	18,155.00	0.405	0.220	4(
300.000	SCHLUMBERGER LTD NETHERLANDS ANTILLES CUSIP NO: 806857108	19,815.00	19,815.00	25,050.00	0.559	1.006	25:
TOTAL	ENERGY	143,583.50	143,583.50	252,423.50	5.633	1.573	3,97]
FINANCIALS							
400.000	BERKSHIRE HATHAWAY INC DEL NEW CL B COM CUSIP NO· 084670702	24,774.24	24,774.24	32,044 00	0.715	0.000	(
200.000	GOLDMAN SACHS GROUP INC CUSIP NO: 38141G104	15,342.00	15,342.00	33,632.00	0 751	0.833	28(
800.000	J P MORGAN CHASE & CO CUSIP NO: 46625H100	31,222.10	31,222.10	33,936.00	0.757	0 471	16(

A S S E T D E T A I L

AS OF 12/31/10

ACCOUNT
42-16-100-8546152

BEAVERDALE MEMORIAL PARK INC

UNITS	ASSET DESCRIPTION	ORIGINAL COST	FEDERAL TAX COST	MARKET VALUE	% OF ACCOUNT	CURRENT YIELD	EST ANI INCOI
1,200.000	LOEWS CORP CUSIP NO: 540424108	37,687.00	37,687.00	46,692.00	1.042	0.643	30(
500.000	METLIFE INC CUSIP NO: 59156R108	12,355.50	12,355.50	22,220.00	0.496	1.665	37(
200.000	PNC FINL SVCS GROUP INC CUSIP NO: 693475105	11,041.76	11,041.76	12,144.00	0.271	0.659	8(
400 000	PRICE T ROWE GROUP INC CUSIP NO: 74144T108	24,994.00	24,994.00	25,816.00	0.576	1.673	43:
400.000	PRUDENTIAL FINL INC CUSIP NO: 744320102	23,646.00	23,646.00	23,484 00	0.524	1.959	46(
1,700.000	WELLS FARGO & CO NEW COM CUSIP NO: 949746101	14,507.37	14,507.37	52,683.00	1.176	0.645	34(
TOTAL	FINANCIALS	195,569.97	195,569.97	282,651.00	6.308	0.857	2,42:
HEALTH CARE							
400.000	ABBOTT LABS CUSIP NO. 002824100	19,405.74	19,405.74	19,164.00	0.428	3.674	70(
300.000	AMGEN INC CUSIP NO: 031162100	16,084.25	16,084.25	16,470.00	0.368	0.000	(
738.000	BRISTOL MYERS SQUIBB CO CUSIP NO: 110122108	3,186.55	2,076.01	19,542.24	0.436	4.985	97(
150.000	CELGENE CORP CUSIP NO: 151020104	8,596.76	8,596.76	8,871.00	0.198	0.000	(
300.000	GILEAD SCIENCES INC CUSIP NO: 375558103	11,863.48	11,863.48	10,872.00	0.243	0.000	(

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UNITS	ASSET DESCRIPTION	ORIGINAL COST	FEDERAL TAX COST	MARKET VALUE	% OF ACCOUNT	CURRENT YIELD	EST ANN INCOM
800.000	JOHNSON & JOHNSON CUSIP NO: 478160104	41,907.20	41,907.20	49,480.00	1.104	3 492	1,728
400.000	LABORATORY CORP AMER HLDGS NEW COM CUSIP NO: 50540R409	26,277 00	26,277.00	35,168.00	0.785	0.000	(
1,261.000	MERCK & CO INC NEW COM CUSIP NO: 58933Y105	36,941.16	36,941.16	45,446.44	1.014	4.218	1,916
800.000	TEVA PHARMACEUTICAL INDS LTD ADR ISRAEL CUSIP NO: 881624209	23,048 00	23,048.00	41,704.00	0.931	1.279	53:
300.000	THERMO FISHER SCIENTIFIC CORP CUSIP NO: 883556102	14,454.25	14,454.25	16,608.00	0.371	0.000	(
TOTAL	HEALTH CARE	201,764.39	200,653.85	263,325.68	5.878	2.224	5,856
INDUSTRIALS							
200.000	DOVER CORP CUSIP NO: 260003108	11,675.00	11,675.00	11,690 00	0.261	1.882	22(
300.000	GENERAL DYNAMICS CORP CUSIP NO: 369550108	20,502.69	20,502.69	21,288.00	0.475	2.368	50
1,800 000	GENERAL ELEC CO CUSIP NO. 369604103	6,992.24	6,887.26	32,922.00	0.735	3.062	1,008
300.000	ILLINOIS TOOL WKS INC CUSIP NO: 452308109	13,351.56	13,351.56	16,020.00	0 358	2.547	408
300.000	L-3 COMMUNICATIONS HLDGS INC CUSIP NO: 502424104	24,550.30	24,550.30	21,147.00	0.472	2.270	48(

ASSET DETAIL

AS OF 12/31/10

ACCOUNT
42-16-100-8546152 BEAVERDALE MEMORIAL PARK INC

UNITS	ASSET DESCRIPTION	ORIGINAL COST	FEDERAL TAX COST	MARKET VALUE	% OF ACCOUNT	CURRENT YIELD	EST ANI INCOI
300.000	NAVISTAR INTL CORP NEW CUSIP NO: 63934E108	17,424.36	17,424.36	17,373.00	0.388	0.000	(
200.000	PARKER HANNIFIN CORP CUSIP NO: 701094104	15,519.50	15,519.50	17,260.00	0.385	1.344	23:
75.000	PRECISION CASTPARTS CORP CUSIP NO: 740189105	5,873.81	5,873.81	10,440.75	0.233	0.086	!
200.000	UNION PAC CORP CUSIP NO: 907818108	11,107.50	11,107.50	18,532.00	0.414	1.640	30
1,000.000	UNITED TECHNOLOGIES CORP CUSIP NO: 913017109	33,345.00	33,345.00	78,720.00	1.757	2.160	1,70(
400.000	WASTE MGMT INC DEL CUSIP NO: 94106L109	12,688.00	12,688.00	14,748.00	0.329	3.417	50
TOTAL	INDUSTRIALS	173,029.96	172,924.98	260,140.75	5.807	2.064	5,36!
INFORMATION	TECHNOLOGY						
200.000	AKAMAI TECHNOLOGIES INC CUSIP NO: 00971T101	10,511.00	10,511.00	9,410.00	0.210	0.000	(
200.000	APPLE INC CUSIP NO: 037833100	39,662.77	39,669.52	64,512.00	1 440	0 000	(
400.000	AUTOMATIC DATA PROCESSING INC CUSIP NO: 053015103	16,138 45	16,138.44	18,512.00	0.413	3.111	57(
1,800.000	CISCO SYS INC CUSIP NO· 17275R102	9,657.00	9,657.00	36,414.00	0.813	0.000	(
100.000	GOOGLE INC CL A COM CUSIP NO: 38259P508	45,808.20	45,808.20	59,397.00	1.326	0.000	(

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2,000.000	INTEL CORP CUSIP NO: 458140100	13,910.00	13,910.00	42,060.00	0.939	2.996	1,26(
700.000	INTERNATIONAL BUSINESS MACHS CUSIP NO: 459200101	12,375.04	12,375.04	102,732.00	2.293	1.772	1,82(
2,600.000	MICROSOFT CORP CUSIP NO: 594918104	55,815.56	55,813.60	72,566.00	1.620	2.293	1,66(
200 000	ORACLE CORP CUSIP NO: 68389X105	4,018.50	4,018 50	6,260.00	0 140	0.639	4(
1,200.000	TEXAS INSTRS INC CUSIP NO: 882508104	21,684.96	21,684.96	39,000.00	0.870	1.600	62(
TOTAL	INFORMATION TECHNOLOGY	229,581 48	229,586.26	450,863 00	10.064	1 327	5,98(
MATERIALS							
100.000	AIR PRODS & CHEMS INC CUSIP NO. 009158106	8,952.50	8,952.50	9,095.00	0.203	2.155	19(
300.000	ALPHA NAT RES INC CUSIP NO: 02076X102	16,013.40	16,013.40	18,009.00	0.402	0.000	(
300.000	CELANESE CORP DEL SER A COM CUSIP NO: 150870103	11,758.50	11,758.50	12,351.00	0.276	0.486	6(
250.000	DU PONT E I DE NEMOURS & CO CUSIP NO: 263534109	11,137.84	11,137.84	12,470.00	0.278	3.288	41(
100.000	MONSANTO CO NEW COM CUSIP NO: 61166W101	7,144.75	7,144.75	6,964.00	0.155	1.608	11(
600.000	PACKAGING CORP AMER CUSIP NO: 695156109	14,392.50	14,392.50	15,504.00	0.346	2.322	36(

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ACCOUNT
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UNITS	ASSET DESCRIPTION	ORIGINAL COST	FEDERAL TAX COST	MARKET VALUE	% OF ACCOUNT	CURRENT YIELD	EST ANN INCOM
300.000	PRAXAIR INC CUSIP NO: 74005P104	20,272.37	20,272.37	28,641.00	0.639	1 885	54(
300.000	RIO TINTO PLC SPONSORED ADR UNITED KINGDOM CUSIP NO: 767204100	20,911 50	20,911.50	21,498.00	0.480	1.234	26:
	TOTAL MATERIALS	110,583.36	110,583.36	124,532.00	2.779	1.560	1,94:
TELECOMMUNICATION SERVICES							
700.000	AT&T INC CUSIP NO: 00206R102	20,488.96	20,488.96	20,566.00	0.459	5.854	1,20
400.000	AMERICAN TOWER CORP CL A CUSIP NO: 029912201	20,410.00	20,410.00	20,656.00	0.461	0.000	(
600.000	VERIZON COMMUNICATIONS INC CUSIP NO: 92343V104	6,415.13	6,412.37	21,468 00	0.479	5.450	1,17(
	TOTAL TELECOMMUNICATION SERVICES	47,314.09	47,311.33	62,690.00	1.399	3.787	2,37
UTILITIES							
500.000	EXELON CORP CUSIP NO: 30161N101	27,583.18	27,583.18	20,820.00	0.465	5 043	1,05(
400.000	NEXTERA ENERGY INC CUSIP NO: 65339F101	20,785.29	20,785.29	20,796.00	0.464	3.847	80(
1,200.000	QUESTAR CORP CUSIP NO: 748356102	21,306.00	21,306.00	20,892.00	0.466	3.217	67
	TOTAL UTILITIES	69,674.47	69,674.47	62,508.00	1.395	4.035	2,52

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AS OF 12/31/10

UNITS	ASSET DESCRIPTION	ORIGINAL COST	FEDERAL TAX COST	MARKET VALUE	% OF ACCOUNT	CURRENT YIELD	EST ANI INCOI
MUTUAL FUNDS-EQUITY							
571.265	COLUMBIA SMALL CAP VALUE I FUND CLASS Z SHARES CUSIP NO: 19765N567	18,119.35	18,119.35	26,826.60	0.599	1.141	30(
3,082.614	COLUMBIA MID CAP GROWTH FUND CLASS Z SHARES CUSIP NO: 19765P232	50,000.00	50,000.00	82,090.01	1.832	0.034	2
2,625.284	COLUMBIA SMALL CAP GROWTH I FUND CLASS Z SHARES CUSIP NO: 19765P596	65,000.00	65,000.00	82,958.97	1.851	0.000	(
TOTAL	MUTUAL FUNDS-EQUITY	133,119.35	133,119.35	191,875.58	4.282	0.174	33
OTHER EQUITIES							
5,785.000	ISHARES INC MSCI AUSTRALIA INDEX FUND CUSIP NO: 464286103	102,105.25	102,105.25	147,170.40	3.285	3.263	4,80
740.000	ISHARES INC MSCI BRAZIL FREE INDEX FUND CUSIP NO: 464286400	36,953.20	36,953.20	57,276.00	1.278	3.627	2,07
4,460.000	ISHARES INC MSCI CDA INDEX FUND CUSIP NO: 464286509	102,134.00	102,134.00	138,260.00	3.086	1.610	2,22
130.000	ISHARES MSCI CHILE INVESTABLE MARKET INDEX FUND CUSIP NO: 464286640	10,191.35	10,191.35	10,348.00	0.231	0.678	7(
3,660 000	ISHARES MSCI SINGAPORE INDEX FUND CUSIP NO: 464286673	35,611 80	35,611.80	50,691 00	1.131	3.054	1,54

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675.000	ISHR MSCI TAIWAN INDEX FUND CUSIP NO: 464286731	10,074.38	10,074.38	10,543.50	0.235	1.857	19
910.000	I SHARES MSCI MEXICO INVESTABLE MARKET INDEX FUND CUSIP NO: 464286822	35,735.70	35,735.70	56,347.20	1.258	0.872	49
650.000	ISHARES MSCI EMERGING MKTS INDEX FUND CUSIP NO: 464287234	18,662 00	18,662.00	30,967.30	0.691	1.356	41
1,165.000	ISHARES RUSSELL MIDCAP INDEX FUND CUSIP NO: 464287499	114,220.13	114,167.72	118,538.75	2 646	1.453	1,72
1,210.000	ISHARES RUSSELL 2000 INDEX FUND CUSIP NO: 464287655	89,724.80	89,670.38	94,670.40	2 113	1 143	1,08
685.000	MARKET VECTORS ETF TR AGRIBUSINESS ETF CUSIP NO: 57060U605	26,221.80	26,221.80	36,674.90	0.819	0.613	22
1,480.000	VANGUARD REIT ETF CUSIP NO: 922908553	61,485.75	61,284.00	81,947 60	1.829	3 415	2,79
	TOTAL OTHER EQUITIES	643,120.16	642,811.58	833,435.05	18.602	2 119	17,65
	TOTAL EQUITIES	2,257,025.88	2,255,503.80	3,307,466 66	73.819	1 873	61,93

NOTES AND MORTGAGES

NOTES

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AS OF 12/31/10

ACCOUNT
42-16-100-8546152 BEAVERDALE MEMORIAL PARK INC

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42161008546152

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AS OF 12/31/10

ACCOUNT
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UNITS	ASSET DESCRIPTION	ORIGINAL COST	FEDERAL TAX COST	MARKET VALUE	% OF ACCOUNT	CURRENT YIELD	EST ANN INCOM
675.000	ISHR MSCI TAIWAN INDEX FUND CUSIP NO: 464286731	10,074.38	10,074.38	10,543.50	0.235	1.857	19
910.000	I SHARES MSCI MEXICO INVESTABLE MARKET INDEX FUND CUSIP NO: 464286822	35,735.70	35,735.70	56,347.20	1.258	0.872	49
650.000	ISHARES MSCI EMERGING MKTS INDEX FUND CUSIP NO. 464287234	18,662.00	18,662.00	30,967.30	0.691	1.356	41
1,165.000	ISHARES RUSSELL MIDCAP INDEX FUND CUSIP NO. 464287499	114,220.13	114,167.72	118,538.75	2.646	1.453	1,72
1,210.000	ISHARES RUSSELL 2000 INDEX FUND CUSIP NO: 464287655	89,724.80	89,670.38	94,670.40	2.113	1.143	1,08
685.000	MARKET VECTORS ETF TR AGRIBUSINESS ETF CUSIP NO: 57060U605	26,221.80	26,221.80	36,674.90	0.819	0.613	22
1,480.000	VANGUARD REIT ETF CUSIP NO: 922908553	61,485.75	61,284.00	81,947.60	1.829	3.415	2,79
	TOTAL OTHER EQUITIES	643,120.16	642,811.58	833,435.05	18.602	2.119	17,65
	TOTAL EQUITIES	2,257,025.88	2,255,503.80	3,307,466.66	73.819	1.873	61,93

NOTES AND MORTGAGES

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