

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



٠	O	90-PF		eturn of Priva							OMB No 1545-0052
	partme	nt of the Treasury	or Sec Note. The foundation may b	tion 4947(a)(1) Nonexo Treated as a Priva	emp te F	t Char ounda	itable Trust tion	<b>!</b>		4 -	201 <b>0</b>
_		evenue Service		e able to use a copy of thi	s ret		0, and endi		quiren	nents	. 20
_		ck all that apply	or tax year beginning Initial return	Initial return o	of a f						Final return
G	Cile	ck all that apply	Amended return	Addres				X Nam	e cha	سا ممم	_ r marretum
N:	me o	f foundation	Amended retuin	Addles	3 (1	anye					cation number
140	11116 0	i louridation						^ '	_iiipio;	, or identili	Cation named
Q	ጥተተ	LER FAMILY F	'OIINDATTON							82-	0542046
_			pox number if mail is not delivered	to street address)			Room/su	ute B	Telenho		ee page 10 of the instructions)
140	IIIIDÇI	and street (or F O t	SOX Hamber if mail is not delivered	to sacci address)			1100111/30		ecpilo	no namber (s	nee page 10 of the trist detections,
D	Λ D	OX 2263								1	\ _
_		own, state, and ZIP	code					- c	If exemp	tion applicati	ion is
Ů.	ıy Oı ı	own, state, and zir							_	, check here	<b>►</b> I
c	∩rimi	H BURLINGTON	VT 05407					I -			ons, check here
_		ck type of organiz		c)(3) exempt private for	ında	tion			85%	est, check he	ere and attach
7	$\neg$	••					otion		comp	utation .	▶□
+		market value of a	nexempt charitable trust	unting method X Ca			Accrual	_	-		status was terminated
'				ther (specify)	a511		CCIuai				(1)(A), check here . P
	•	ear (from Part II, o ▶ \$		tner (specify) column (d) must be on		sh basi	s)	1			a 60-month termination (1)(B), check here
			venue and Expenses (The	column (d) made be on	out	,,, 500.	<u> </u>	<del></del>	unuer se	schon sor(b)	(d) Disbursements
_	arri		columns (b), (c), and (d)	(a) Revenue and	(t	•	vestment		djuste		for charitable
			ily equal the amounts in age 11 of the instructions) )	expenses per books		inc	ome	"	ncome	•	purposes
_	4			0.2							(cash basis only)
	1 2	of the	s, etc., received (attach schedule) .e foundation is not required to	0.			· · · · · · · · · · · · · · · · · · ·	<del> </del>			
		- <u> </u>	ch Sch B	16.			16.		_		ATCH 1
	3	-	d temporary cash investments	10.							AICH I
	4		rest from securities	· · · · · · · · · · · · · · · · · · ·							
					_					1	
		,	loss)				RECEI	<del>NFD</del>			
Ę	ьа b	Gross sales price for a	n sale of assets not on line 10 all			ſ			<del>18</del>		
Revenue	7	assets on line 6a	ome (from Part IV, line 2) .			22	AUG 3 1	2011	<del>\                                    </del>		
8	7 8	, ,	tal gain				AUG U		10	1	
	9		ns · · · · · · · · · · · · · · · · · · ·			L	2.255		<del>] 🖺</del>		
		Gross sales less return	ns				OGDEN	<del>√, U I</del>		j	
	ь	and allowances • • • Less Cost of goods so								_	
		•	s) (attach schedule)								- "
	11		ch schedule)	3,475.							ATCH 2
	12		hrough 11	3,491.		•	16.				
_	13		ers, directors, trustees, etc	0.							
	14		laries and wages						-		
S	15		ployee benefits			•					
'nS(			schedule) ATCH 3	534.			0.			0.	534
œ,			ttach schedule) ATCH 4	3,312.			0 .			0.	3,312
Ü	c		fees (attach schedule)				-				
and Administrative Expenses	17										
tra	18		le) (see page 14 of the instructions)								
inis	19	,	h schedule) and depletion .								
Ę	20										
Ĭ	21		s, and meetings								
anc	22		ations								
	23		ttach schedule) ATCH 5	42,668.							42,668
Operating	24		d administrative expenses.								
per		Add lines 13 through	•	46,514.	L		0 .			0.	46,514
ō	25	_	grants paid	143,092.							143,092
	26	=	bursements. Add lines 24 and 25	189,606.			0.	<u>.                                    </u>		0.	189,606
	27	Subtract line 26 fro									
			expenses and disbursements	-186,115.	L			<u>L</u>			
			come (if negative, enter -0-)				16.				
			me (if negative, enter -0-)								

Form **990-PF** (2010)

Form 990

P	art II	Balance Sheets description column should be for end-of-year	Beginning of year		End o	of year
_	ar t II	amounts only (See instructions )	(a) Book Value	(b) Book Value		(c) Fair Market Value
Į	1	Cash - non-interest-bearing	26,838.	5 <b>,</b> 4	172.	5,472.
	2	Savings and temporary cash investments				
ı	3	Accounts receivable				
		Less allowance for doubtful accounts				
ļ		Pledges receivable ▶				
	•	Less allowance for doubtful accounts	ľ			
		Grants receivable		<del></del>		
		Receivables due from officers, directors, trustees, and other				
- 1	6	1				
	_	disqualified persons (attach schedule) (see page 15 of the instructions)				
		Other notes and loans receivable (attach schedule)				
		Less allowance for doubtful accounts				
ţ		Inventones for sale or use				
Assets	9	Prepaid expenses and deferred charges				
As	10 a	Investments - U S and state government obligations (attach schedule)				
	b	Investments - corporate stock (attach schedule)				
	11	Investments - corporate bonds (attach schedule) Investments - land, buildings, and equipment basis				
		and equipment basis Less accumulated depreciation (attach schedule)				
	12	Investments - mortgage loans				
	13	Investments - other (attach schedule)				
		Less accumulated depreciation (attach schedule)				
ı	15	Other assets (describe  ATCH 6 )	2,960.		0.	0.
	16	Total assets (to be completed by all filers - see the				
		instructions Also, see page 1, item I)	29,798.	5,4	172.	5,472.
T		Accounts payable and accrued expenses				
		Grants payable				
S		Deferred revenue				
Liabilities			0.	161,7	8.9	ATCH 7
þi		Loans from officers, directors, trustees, and other disqualified persons			<del></del>	AICH /
Lia		Mortgages and other notes payable (attach schedule)				
	22	Other liabilities (describe				
		Total Cabilities (add be as 47 through 00)		1.61 7	0.0	
_		Total liabilities (add lines 17 through 22)	0.	161,7	89.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.				
ances	24	Unrestricted				
ä	25	Temporarily restricted				Į
	26	Permanently restricted		· · · · · · · · · · · · · · · · · · ·		
or Fund Ba		Foundations that do not follow SFAS 117,				
Ē		check here and complete lines 27 through 31. $\blacktriangleright X$				
ō	27	Capital stock, trust principal, or current funds				
	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	29,798.	-156,3	17.	
! A	30	Total net assets or fund balances (see page 17 of the				
Ne		instructions)	29,798.	-156,3	17.	
	31	Total liabilities and net assets/fund balances (see page 17				
		of the instructions)	29,798.	5.4	172.	
P	art III					
		net assets or fund balances at beginning of year - Part		must agree with		
•		of-year figure reported on prior year's return)			1	29,798.
2		5 67			2	-186,115.
					3	100,113.
						-156,317.
		ines 1, 2, and 3			4	-130,317.
		eases not included in line 2 (itemize)  net assets or fund balances at end of year (line 4 minus line	E) Dod II ookuwa (h) k		_5	_ 156 217
<u>0</u>	rotal	het assets of fund balances at end of year (line 4 minus line	: 5) - Part II, column (b), II	ne 30	_ 6	-156,317.

	and Losses for Tax on Inv		(b) How acquired	(c) Date	(d) Date sold
• •	d describe the kind(s) of property sold (e rick warehouse, or common stock, 200 s	<del>-</del>	P-Purchase D-Donation	acquired (mo , day, yr )	(mo , day, yr )
1a	=				
b					
<u>c</u>		····			-
_d		-		<del> </del>	<del></del>
<u>e</u>	(f) Depreciation allowed	(g) Cost or other basis		(h) Gain or (lo	1
(e) Gross sales price	(or allowable)	plus expense of sale		(e) plus (f) mini	
а					
<u>b</u>					
<u>c</u>			ļ <u> </u>		
					<del></del>
e Complete only for assets s	howing gain in column (h) and owned by	the foundation on 12/31/69	(1)	Gains (Col. (b) a	ala minua
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		Gains (Col. (h) g (k), but not less t Losses (from co	han -0-) <b>or</b>
a					
b					
С					
<u>d</u>				-	
<u>e</u>		goin also enter in Part I line 7			
2 Capital gain net income or (	(net capıtal loss)	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		
3 Net short-term capital gain	 or (loss) as defined in sections 1222	,			
If gain, also enter in Part I, I	line 8, column (c) (see pages 13 and	1 17 of the instructions)			
	ine 8		3		
	Jnder Section 4940(e) for Redu private foundations subject to the se				·
	eave this part blank.  he section 4942 tax on the distributa not qualify under section 4940(e) Do	* *	period?		Yes X No
	unt in each column for each year, se		e makıng	any entries	<u> </u>
(a)	(b)	(c)	I	(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
2009	73,210.	63,001.			1.162045
2008	61,374.	99,396.			0.617470
2007	48,414. 71,990.	3,493.			3.860292
2006 2005	41,351.	4,874. 3,857.			4.770209 0.721027
2003	11,001.	3,037.			0.721027
2 Total of line 1, column (d)			2	4	1.131043
3 Average distribution ratio f	or the 5-year base period - divide the	e total on line 2 by 5, or by the			
number of years the found	ation has been in existence if less th	nan 5 years	3		8.226209
		5 (2) 5			15 040
4 Enter the net value of none	charitable-use assets for 2010 from	Part X, line 5	4		15,248.
5 Multiply line 4 by line 3			5		125,433.
o manpy mic r by mic o					120, 100.
6 Enter 1% of net investmen	t income (1% of Part I, line 27b)		6		
7 Add lines 5 and 6	• • • • • • • • • • • • • • • • • • • •		7		125,433.
8 Enter qualifying distribution	ns from Part XII line 4		8		189,606.
If line 8 is equal to or gr Part VI instructions on page	eater than line 7, check the box i	n Part VI, line 1b, and complete	that part	using a 1% tax	rate See the

rar	Excise Tax based on investment income (Section 4940(a), 4940(b), 4940(e), or 4940 - See page 10 of the in	Structi	ons	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			_
	here X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			
6	Credits/Payments			
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 6a			
b	Exempt foreign organizations-tax withheld at source 6b 0.			
С	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			0.
11	Enter the amount of line 10 to be Credited to 2011 estimated tax ▶ Refunded ▶ 11			0.
Par	t VII-A Statements Regarding Activities			,
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	. <u>1a</u>	<u> </u>	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	. 1b	<u> </u>	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c		X
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation  \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers \$	2		x
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?  If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes ATCH, 8	3	X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	<u>4a</u>	<u> </u>	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5	<b></b>	Х
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		١.,	
	conflict with the state law remain in the governing instrument?	· <u>  6</u>	X	-
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	. 7	X	<del> </del>
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) $\blacktriangleright$ DE, VT,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G?If "No," attach explanation	8b	Х	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		1	
	4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page		1	
	27)? If "Yes," complete Part XIV	9	<u> </u>	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		1	
	names and addresses	10_	<u> </u>	Х
		Form 99	)0-PF	(2010)

₽ar	t VII-A Statements Regarding Activities (continued)		_	
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		<u> X</u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?			X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ▶ BETSY STANFORD Telephone no ▶			
	Located at ▶PO BOX 2263 SOUTH BURLINGTON, VT ZIP+4 ▶ 05407			$\top$
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here · · · · · · · · · · · · · · · · · ·		•	ـــا
40	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
16	over a bank, securities, or other financial account in a foreign country?	16	162	X
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-221 If "Yes," enter	"	ı	
	the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		İ	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	ŀ		
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit of use of a disqualified person/?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
L	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	1b		Х
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
•	were not corrected before the first day of the tax year beginning in 2010?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2010?			
	If "Yes," list the years			
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	25		х
	all years listed, answer "No" and attach statement - see page 22 of the instructions)	2b	+	
C	the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
2 -	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	}		
36	at any time during the year? Yes X No			
r	of "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or			
•	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2010 )	_3b		
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?		O PE	(2010)
		-omn 9	90-PF	(2010)

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Part	VIIII Statements Regarding Activities for	wnich Form 47	zu may Be Requii	rea (continuea)	<del></del>	
5a b	<ul> <li>(3) Provide a grant to an individual for travel, study, or other</li> <li>(4) Provide a grant to an organization other than a charitable section 509(a)(1), (2), or (3), or section 4940(d)(2)? (section 509(a)(1), (2), or (3), or section 4940(d)(2)? (section 509(a)(1), (2), or (3), or section 4940(d)(2)? (section 509(a)(1), (2), or section 4940(d)(2)? (section 509(a)(1), (3), or section 4940(d)(2)? (section 61)</li> <li>(5) Provide for any purpose other than religious, charitable, purposes, or for the prevention of cruelty to children or section answer is "Yes" to 5a(1)-(5), did any of the transaction for a current notice regarding disaster of the answer is "Yes" to question 5a(4), does the foundation</li> </ul>	legislation (section 4 de section 4955), or to de section 4955), or to de section 4955), or to de section 4955, de, etc., organization de page 22 of the instructions fail to qualifying disaster assistance check her claim exemption fro	945(e))? o carry on, described in uctions) educational under the exceptions the (see page 22 of the re	Yes X No A Gescribed in Instructions)?	<u>5</u> b	x
	because it maintained expenditure responsibility for the grain	nt?		. Yes X No	'	
6a b	If "Yes," attach the statement required by Regulations section  Did the foundation, during the year, receive any funds, direct  on a personal benefit contract?	ctly or indirectly, to pa		. Yes X No	6b	x
	If "Yes" to 6b, file Form 8870					
	At any time during the tax year, was the foundation a party	-	=	. Yes X No	<del> </del> -	
	f "Yes," did the foundation receive any proceeds or have ar				7b	X
Part	VIII Information About Officers, Directors and Contractors	, I rustees, Four	idation Managers	, Hignly Paid Emp	loyees,	
1 L	ist all officers, directors, trustees, foundation man	agers and their co	mpensation (see pa	ge 22 of the instructi	ons).	
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allow	
ATI	'ACHMENT 9		0.	0.		0
	ompensation of five highest-paid employees (othe none, enter "NONE."	r than those inclu	ded on line 1 - see p		tions).	
(a)	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allow	
	NONE					
					-	
Total	number of other employees paid over \$50,000 .					

	t VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Empland Contractors (continued)	·
_3	Five h	ighest-paid independent contractors for professional services (see page 23 of the instructions). If n	one, enter "NONE.
		(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
	NONE		
Tota	Lnumbe	er of others receiving over \$50,000 for professional services	NONE
			HONE
Par	t IX-A	Summary of Direct Charitable Activities	
		lation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of and other beneficianes served, conferences convened, research papers produced, etc	Expenses
1	SEE A	TTACHMENT	<del></del> -
• –	. = = = = =		
			42,443
2			
_			
_			
3 _			_
_			
_			
4 _			
_			
	t IX-B	Summary of Program-Related Investments (see page 24 of the instructions)	
		wo largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1_	N/A		
-			
2			
-			
-			
All c	other progi	am-related investments. See page 24 of the instructions	
	NONE		
-			
_			
	I V44 II	nes 1 through 3	

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreig see page 24 of the instructions.)	n foundatio	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	15,480.
C	Fair market value of all other assets (see page 25 of the instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	15,480.
е	Reduction claimed for blockage or other factors reported on lines 1a and		-
	1c (attach detailed explanation)  Acquisition indebtedness applicable to line 1 assets		
2	Acquisition indebtedness applicable to line 1 assets	7 2	0.
3	Suptract line 2 from line 1d	3	15,480.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25 of		· · · · · · · · · · · · · · · · · · ·
		4	232.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	15,248.
6	Minimum investment return. Enter 5% of line 5	6	762.
Pa	To the instruction of the instr		
1	Minimum investment return from Part X, line 6	1	762.
	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010 (This does not include the tax from Part VI)  2b	1	
-	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	762.
4	Recoveries of amounts treated as qualifying distributions	4	
5		5	762.
6	Add lines 3 and 4  Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
-	line 1	7	762.
_		1 - 1	
Pa	rt XII Qualifying Distributions(see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	189,606.
b		1b	0.
2	Program-related investments - total from Part IX-B  Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.		
-	numasas	2	0.
3	Amounts set aside for specific charitable projects that satisfy the	<del>-</del>	
а	0.4144.4.4.100	3a	0.
b	On the district Associated Associated the same and address	3b	0.
4	Cash distribution test (attach the required schedule)  Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	189,606.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	<del>                                     </del>	
•	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	189,606.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when cal		<u>-</u>
	qualifies for the section 4940(e) reduction of tax in those years	oulduring will	cinci ine loutidation

Form **990-PF** (2010)

Рa	rt XIII Undistributed Income (see page	26 of the instruction	าร)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2010 from Part XI,	Corpus	Years prior to 2009	2009	2010
	line 7				762.
2	Undistributed income, if any, as of the end of 2010				
а	Enter amount for 2009 only			0.	
b	Total for prior years 20 08 20 07 20 06				
3	Excess distributions carryover, if any, to 2010				
а	From 2005 41,158.				
b	From 2006 71,746.				
С	From 2007 48,239.				
d	From 2008 59, 338.				
е	From 2009 70,067.				
f	Total of lines 3a through e	290,548.			
4	Qualifying distributions for 2010 from Part XII,				
	line 4 ▶ \$189,606.				
а	Applied to 2009, but not more than line 2a			0.	
	Applied to undistributed income of prior years (Election		<del></del> ·		
	required - see page 26 of the instructions)				
	Treated as distributions out of corpus (Election				
٠	required - see page 26 of the instructions)				
d	Applied to 2010 distributable amount				762.
е	Remaining amount distributed out of corpus	188,844.			
5	Excess distributions carryover applied to 2010				
	(If an amount appears in column (d), the same				
6	amount must be shown in column (a) ) Enter the net total of each column as				
	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	479,392.			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been			,	
	issued, or on which the section 4942(a) tax has				
	been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount - see page 27 of the instructions				
е	Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount - see page				
	27 of the instructions			0.	
f	Undistributed income for 2010 Subtract lines				
	4d and 5 from line 1 This amount must be				
7	distributed in 2011	··			
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
8	instructions)				
•	applied on line 5 or line 7 (see page 27 of the	41,158.			
_	instructions)	41,150.			
9	Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	438,234.			
10	Analysis of line 9				
	Excess from 2006 71,746.				
	Excess from 2007				
	Excess from 2008				
	Excess from 2009				
	Excess from 2010 188,844.				

Pa	rt XIV Private Oper	ating Foundations	see page 27 of the	instructions and Part	t VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter that	t it is a private opera	ting	
	foundation, and the ruling	is effective for 2010, enter	the date of the ruling		. ▶∟	
b	Check box to indicate whe	ther the foundation is a pi	vate operating foundation	n described in section	4942()	)(3) or 4942(J)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part	(a) 2010	(b) 2009	(c) 2008	(d) 2007	ļ
	I or the minimum investment return from Part X for each					
	year listed					<del> </del>
b	85% of line 2a					
C	Qualifying distributions from Part					
d	XII, line 4 for each year listed .  Amounts included in line 2c not	<del></del>		-		<del>                                     </del>
u	used directly for active conduct of exempt activities				- 4	
е	Qualifying distributions made					
	directly for active conduct of exempt activities Subtract line			i		
3	2d from line 2c	ļ			<del></del>	
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying					
	under section					
b	4942(j)(3)(B)(i). "Endowment" alternative test-	<del></del>	<u></u>			-
-	enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test - enter					
	(1) Total support other than					
	gross investment income (interest, dividends, rents,					
	payments on securities					
	loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more		•			
	exempt organizations as					
	provided in section 4942 (j)(3)(B)(iii)					
	(3) Largest amount of sup- port from an exempt					
	organization					<del>-</del>
D <sub>2</sub>	(4) Gross investment income . rt XV Supplementa	any Information /C	omplete this part	only if the founds	tion had \$5,000	or more in assets
ra		during the year - sec			mion nau \$5,000	of more in assets
1	Information Regarding	•				
а	List any managers of before the close of any					ed by the foundation
	•	, , ,	ley have contributed in	(3e	se section 507(d)(2) )	
	ROBERT STIL			· · · · · · · · · · · · · · · · · · ·		<del></del>
b	List any managers of					large portion of the
	ownership of a partner	simp of other entity) of	which the foundation	nas a 10% or greater	interest	
	N/A					
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarshi	p, etc., Programs:		
	Check here ► X if the			•	able organizations a	and does not accept
	unsolicited requests f	or funds If the found	dation makes gifts, g	rants, etc (see page	28 of the instruction	ns) to individuals or
	organizations under oti					·
а	The name, address, an	d telephone number of	the person to whom a	pplications should be a	ddressed	
b	The form in which appli	cations should be subn	nitted and information a	and materials they shou	ıld ınclude	
С	Any submission deadling	nes				
d	Any restrictions or life	mitations on awards,	such as by geogra	phical areas, charitab	ole fields, kinds of	institutions, or other

3 Grants and Contributions Paid Du	If recipient is an individual	Equadras	duio i dyment	· · · · · · · · · · · · · · · · · · ·
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
ATTACHMENT 10				
		İ		
Total		L,	▶ 3a	143,092.
b Approved for future payment		<del></del>		143,032.
		ļ		
Total			> 3h	
10131			■ 2h	

inter gross a	amounts unless otherwise indicated	Unreia	ted business income	Excidued by	/ section 512, 513, or 514	(e) Related or exempt function income
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of the instructions)
-	service revenue				7	
	CATIONAL SEMINARS					3,475
_		<del></del>				
e	·-					
f	<del> </del>					
-	and contracts from government agencies	-				
	ship dues and assessments		<del></del>	14	16.	
	n savings and temporary cash investments		·	<del></del>		
	s and interest from securities at income or (loss) from real estate					
	financed property					
	lebt-financed property					
	income or (loss) from personal property vestment income					-
	oss) from sales of assets other than inventory					<u> </u>
-	me or (loss) from special events			<del></del>		
	ofit or (loss) from sales of inventory					
·	venue a		<del></del>			<del>-</del>
	venue a					
						<del></del>
	<del></del>				·	***
		1 1				
d						
d e					16.	3,475.
d e 2 Subtotal	Add columns (b), (d), and (e)				<u> </u>	
d e 2 Subtotal 3 Total. Ad	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e)				<u> </u>	
d e 2 Subtotal 3 Total. Ac	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to	venfy calcular	tions)		13	
e2 Subtotal 3 Total. Ac See worksh Part XVI-	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to   Relationship of Activities	venfy calcular	tions) complishment of E	xempt Purp		
d e 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to	venfy calcular s to the Ac	complishment of E income is reported	xempt Purp	ooses  e) of Part XVI-A contribu	3,491.
de 2 Subtotal 3 Total. Ac See worksh Part XVI-	Add columns (b), (d), and (e)	venfy calcular s to the Ac	complishment of E income is reported	xempt Purp	ooses  e) of Part XVI-A contribu	3,491.
de 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calcular s to the Ac ty for which on's exemp	complishment of E Income is reported t purposes (other that	xempt Purp in column (en by providing	ooses e) of Part XVI-A contribute g funds for such purpose	3,491.
d e 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to B Relationship of Activities Explain below how each activity accomplishment of the foundationstructions)	venfy calcular s to the Ac ty for which on's exemp	complishment of E Income is reported to purposes (other than the RELATED ACTION COMPANY TO THE R	xempt Purp in column (en by providing	poses e) of Part XVI-A contribut g funds for such purpose	3,491.
d e 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e)	venfy calcular s to the Ac ty for which on's exemple AND OTHE	complishment of E income is reported t purposes (other than CR RELATED ACTIONNESS (OUNDATION ACCOM	xempt Purp in column (en by providing	poses e) of Part XVI-A contribut g funds for such purpose	3,491.
de 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to  B Relationship of Activities  Explain below how each activity accomplishment of the foundationstructions)  EDUCATIONAL SEMINARS  PRIMARY MEANS BY WHICE	venfy calcular s to the Ac ty for which on's exemple AND OTHE	complishment of E income is reported t purposes (other than CR RELATED ACTIONNESS (OUNDATION ACCOM	xempt Purp in column (en by providing	poses e) of Part XVI-A contribut g funds for such purpose	3,491.
de 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to  B Relationship of Activities  Explain below how each activity accomplishment of the foundationstructions)  EDUCATIONAL SEMINARS  PRIMARY MEANS BY WHICE	venfy calcular s to the Ac ty for which on's exemple AND OTHE	complishment of E income is reported t purposes (other than CR RELATED ACTIONNESS (OUNDATION ACCOM	xempt Purp in column (en by providing	poses e) of Part XVI-A contribut g funds for such purpose	3,491.
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de 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to  B Relationship of Activities  Explain below how each activity accomplishment of the foundationstructions)  EDUCATIONAL SEMINARS  PRIMARY MEANS BY WHICE	venfy calcular s to the Ac ty for which on's exemple AND OTHE	complishment of E income is reported t purposes (other than CR RELATED ACTIONNESS (OUNDATION ACCOM	xempt Purp in column (en by providing	poses e) of Part XVI-A contribut g funds for such purpose	3,491.
de 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to  B Relationship of Activities  Explain below how each activity accomplishment of the foundationstructions)  EDUCATIONAL SEMINARS  PRIMARY MEANS BY WHICE	venfy calcular s to the Ac ty for which on's exemple AND OTHE	complishment of E income is reported t purposes (other than CR RELATED ACTIONNESS (OUNDATION ACCOM	xempt Purp in column (en by providing	poses e) of Part XVI-A contribut g funds for such purpose	3,491.
de 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to  B Relationship of Activities  Explain below how each activity accomplishment of the foundationstructions)  EDUCATIONAL SEMINARS  PRIMARY MEANS BY WHICE	venfy calcular s to the Ac ty for which on's exemple AND OTHE	complishment of E income is reported t purposes (other than CR RELATED ACTIONNESS (OUNDATION ACCOM	xempt Purp in column (en by providing	poses e) of Part XVI-A contribut g funds for such purpose	3,491 ted importantly to the
d e 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to  B Relationship of Activities  Explain below how each activity accomplishment of the foundationstructions)  EDUCATIONAL SEMINARS  PRIMARY MEANS BY WHICE	venfy calcular s to the Ac ty for which on's exemple AND OTHE	complishment of E income is reported t purposes (other than CR RELATED ACTIONNESS (OUNDATION ACCOM	xempt Purp in column (en by providing	poses e) of Part XVI-A contribut g funds for such purpose	3,491.
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d e 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to  B Relationship of Activities  Explain below how each activity accomplishment of the foundationstructions)  EDUCATIONAL SEMINARS  PRIMARY MEANS BY WHICE	venfy calcular s to the Ac ty for which on's exemple AND OTHE	complishment of E income is reported t purposes (other than CR RELATED ACTIONNESS (OUNDATION ACCOM	xempt Purp in column (en by providing	poses e) of Part XVI-A contribut g funds for such purpose	3,491.
de 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to  B Relationship of Activities  Explain below how each activity accomplishment of the foundationstructions)  EDUCATIONAL SEMINARS  PRIMARY MEANS BY WHICE	venfy calcular s to the Ac ty for which on's exemple AND OTHE	complishment of E income is reported t purposes (other than CR RELATED ACTIONNESS (OUNDATION ACCOM	xempt Purp in column (en by providing	poses e) of Part XVI-A contribut g funds for such purpose	3,491.
de 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to  B Relationship of Activities  Explain below how each activity accomplishment of the foundationstructions)  EDUCATIONAL SEMINARS  PRIMARY MEANS BY WHICE	venfy calcular s to the Ac ty for which on's exemple AND OTHE	complishment of E income is reported t purposes (other than CR RELATED ACTIONNESS (OUNDATION ACCOM	xempt Purp in column (en by providing	poses e) of Part XVI-A contribut g funds for such purpose	3,491.
de 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to  B Relationship of Activities  Explain below how each activity accomplishment of the foundationstructions)  EDUCATIONAL SEMINARS  PRIMARY MEANS BY WHICE	venfy calcular s to the Ac ty for which on's exemple AND OTHE	complishment of E income is reported t purposes (other than CR RELATED ACTIONNESS (OUNDATION ACCOM	xempt Purp in column (en by providing	poses e) of Part XVI-A contribut g funds for such purpose	3,491.
de 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to  B Relationship of Activities  Explain below how each activity accomplishment of the foundationstructions)  EDUCATIONAL SEMINARS  PRIMARY MEANS BY WHICE	venfy calcular s to the Ac ty for which on's exemple AND OTHE	complishment of E income is reported t purposes (other than CR RELATED ACTIONNESS (OUNDATION ACCOM	xempt Purp in column (en by providing	poses e) of Part XVI-A contribut g funds for such purpose	3,491 ted importantly to the
de 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to  B Relationship of Activities  Explain below how each activity accomplishment of the foundationstructions)  EDUCATIONAL SEMINARS  PRIMARY MEANS BY WHICE	venfy calcular s to the Ac ty for which on's exemple AND OTHE	complishment of E income is reported t purposes (other than CR RELATED ACTIONNESS (OUNDATION ACCOM	xempt Purp in column (en by providing	poses e) of Part XVI-A contribut g funds for such purpose	3,491 ted importantly to the
de 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to  B Relationship of Activities  Explain below how each activity accomplishment of the foundationstructions)  EDUCATIONAL SEMINARS  PRIMARY MEANS BY WHICE	venfy calcular s to the Ac ty for which on's exemple AND OTHE	complishment of E income is reported t purposes (other than CR RELATED ACTIONNESS (OUNDATION ACCOM	xempt Purp in column (en by providing	poses e) of Part XVI-A contribut g funds for such purpose	3,491 ted importantly to the
d e 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to  B Relationship of Activities  Explain below how each activity accomplishment of the foundationstructions)  EDUCATIONAL SEMINARS  PRIMARY MEANS BY WHICE	venfy calcular s to the Ac ty for which on's exemple AND OTHE	complishment of E income is reported t purposes (other than CR RELATED ACTIONNESS ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACC	xempt Purp in column (en by providing	poses e) of Part XVI-A contribut g funds for such purpose	3,491.
de 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to  B Relationship of Activities  Explain below how each activity accomplishment of the foundationstructions)  EDUCATIONAL SEMINARS  PRIMARY MEANS BY WHICE	venfy calcular s to the Ac ty for which on's exemple AND OTHE	complishment of E income is reported t purposes (other than CR RELATED ACTIONNESS ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACC	xempt Purp in column (en by providing	poses e) of Part XVI-A contribut g funds for such purpose	3,491 ted importantly to the
de 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to  B Relationship of Activities  Explain below how each activity accomplishment of the foundationstructions)  EDUCATIONAL SEMINARS  PRIMARY MEANS BY WHICE	venfy calcular s to the Ac ty for which on's exemple AND OTHE	complishment of E income is reported t purposes (other than CR RELATED ACTIONNESS ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACC	xempt Purp in column (en by providing	poses e) of Part XVI-A contribut g funds for such purpose	3,491.
de 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to  B Relationship of Activities  Explain below how each activity accomplishment of the foundationstructions)  EDUCATIONAL SEMINARS  PRIMARY MEANS BY WHICE	venfy calcular s to the Ac ty for which on's exemple AND OTHE	complishment of E income is reported t purposes (other than CR RELATED ACTIONNESS ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACC	xempt Purp in column (en by providing	poses e) of Part XVI-A contribut g funds for such purpose	3,491.
de 2 Subtotal 3 Total. Ac See worksh Part XVI- Line No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) eet in line 13 instructions on page 29 to  B Relationship of Activities  Explain below how each activity accomplishment of the foundationstructions)  EDUCATIONAL SEMINARS  PRIMARY MEANS BY WHICE	venfy calcular s to the Ac ty for which on's exemple AND OTHE	complishment of E income is reported t purposes (other than CR RELATED ACTIONNESS ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACCOMMENTATION ACC	xempt Purp in column (en by providing	poses e) of Part XVI-A contribut g funds for such purpose	3,491.

		Exempt Orga	nizations _								
1 Dı	d the	organization directly	or indirectly	engage in any of	the following	y with a	ny other o	rganization des	cribed	Ye	s No
ın	secti	on 501(c) of the Co	ode (other than	section 501(c)(3)	organizations	) or in s	ection 527,	relating to po	olitical		
or	ganıza	itions?									
a Tr	ansfer	s from the reporting fou	ndation to a none	charitable exempt orga	inization of						İ
(1)	) Cas	h							<u>16</u>	(1)	<u> </u>
(2	) Othe	er assets							18	(2)	X
<b>b</b> O	ther tra	ansactions									- [
(1)	) Sale	es of assets to a noncha	ritable exempt or	ganization					<u>1t</u>	o(1)	<u> </u>
(2	) Puro	chases of assets from a	nonchantable ex	empt organization .		. <b></b>			11	(2)	X
(3	) Ren	tal of facilities, equipme	nt, or other asset	s					<u> 1</u>	)(3)	X
(4	) Reir	nbursement arrangeme	nts	. <i>.</i>					11	(4)	<u> </u>
(5	) Loai	ns or loan guarantees							1	(5)	<u> </u>
(6	) Perf	formance of services or	membership or fu	undraising solicitations					11	(6)	X
c Si	narıng	of facilities, equipment,	mailing lists, other	er assets, or paid emp	loyees				ــا ـــــــــــــــــــــــــــــ	lc	<u> </u>
d If	the	answer to any of t	he above is "	Yes," complete the	following s	chedule	Column (b)	should always	s show t	he fair	market
		f the goods, other		• •							
		n any transaction or		•							
(a) Line	no	(b) Amount involved	(c) Name of n	onchantable exempt org	anization		inption of trans	fers, transactions, a	and sharing	ırrangen	ents
		N/A				N/A					
	+			······································			<u>.                                    </u>	<del>_</del>			<del></del>
	+										
									····	<del></del>	
	+										
	+		<u> </u>								
	+	·	ļ								
	+										
	+	·····									
	+										
	_										
2a Is	the	foundation directly	or indirectly at	ffiliated with or re	elated to or	ne or mo	re tax-exen	not organization	18		
		ed in section 501(c) of	<del>-</del>					-		Yes	X No
		complete the following		556 55 1(5)(5)	, 0, 11, 00011011	·				, [	
		(a) Name of organization		(b) Type of	organization			(c) Description of	relationship		
					· · · · · ·				· · ·		
		- · ·					_				
							_				
	Unde	r penalties of perjury, I de	eclare that I have	examined this return, in	cluding accomp	anying sche	edules and sta	tements, and to the	ne best of n	ıy knowl	edge and
Sign	bellet	, it is true, correct, and con	npiete Declaration	or preparer (other than t		-	d on all informa	ation of which prep	_	٠.	•
Here		SPIC				3-24	-11	tusist	٥٠٤	retu.	44
	Sı	gnature of officer or trustee	, \		Date			Trtle			d
		Print/Type preparer's	name	Preparer's signa	ture		Date		PTI	N	<u> </u>
Paid		100-00	<i>C</i>	No /				Check [	ıf		
	ror	C YOUNG	AURZ_		08/	15/2011	.		oloyed PO		685
Prepa		Firm's name ► BD	· · · · · · · · · · · · · · · · · · ·					Fırm's EfN ▶	13-538	1590	
Use C	nly	Firm's address ▶ 10		\ \ \ \ \ \							
	-		BOSTON	1, MA 🔾		021	110	Phone no 6	17-422	<u>-0700</u>	)
									Form	990-P	F (2010)

ATTACHMENT 1

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

NET INVESTMENT	INCOME	16.
REVENUE AND EXPENSES	PER BOOKS	16.
		BROWN
	DESCRIPTION	DEUTSCHE BANK ALEX. BROWN

TOTAL

16.

DESCRIPTION

EDUCATIONAL SEMINAR

ATTACHMENT 2

FORM 990PF, PART I - OTHER INCOME

REVENUE

AND

EXPENSES

PER BOOKS

3,475.

TOTALS

3,475.

ATTACHMENT 3

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99005	, , ,
FORM	1770

CHARITABLE PURPOSES	534.	534.
ADJUSTED NET INCOME		0
NET INVESTMENT INCOME		0
REVENUE AND EXPENSES PER BOOKS	534.	534.
		TOTALS
DESCRIPTION	LEGAL	

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# FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	3,312.	3,312.
ADJUSTED NET INCOME		0
NET INVESTMENT INCOME		0.
REVENUE AND EXPENSES PER BOOKS	3,312.	3,312.
		TOTALS
DESCRIPTION	ACCOUNTING	

- OTHER EXPENSES

FORM 990PF, PART I

ESCRIPTION	NSTRUCTOR FEES	ANK CHARGE	IISC EXP
	F	B	Σ

REVENUE	AND	EXPENSES	PER BOOKS	100 00

42,441. 106. 121.

42,668.

TOTALS

42,668.

CHARITABLE
PURPOSES
42,441.
106.

PAGE 21

ATTACHMENT 6

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ATTACHMENT 6

FORM 990PF, PART II - OTHER ASSETS

DESCRIPTION

09 FED TAX REFUND

ENDING BOOK VALUE

0

TOTALS

STILLER FAMILY FOUNDATION

2503BO 600K 8/15/2011

ATTACHMENT 7 FORM 990PF, PART II - LOANS FROM OFFICERS, DIRECTORS, ETC.

LENDER: ROBERT STILLER

ORIGINAL AMOUNT: 161,789.

ENDING BALANCE DUE ..... 161,789.

161,789. TOTAL ENDING LOANS FROM OFFICERS, DIRECTORS, ETC.

## FORM 990PF, PART VII-A, LINE 3 - CONFORMED COPY OF THE CHANGES

THE ORGANIZATION CHANGED ITS NAME FROM "INNER SOLUTIONS INSTITUTE" TO "STILLER FAMILY FOUNDATION". PLEASE SEE ATTACHED COPY.

FORM 990PE, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

24
F.
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ATTACHMENT 9

EXPENSE ACCT AND OTHER ALLOWANCES	°	.0	.0	0.
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	.0	·	.0	0
COMPENSATION	.0	.0	.0	0.
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT/DIRECTOR 1.00	SECRETARY/DIRECTOR 1.00	ASSISTANT SECRETARY	GRAND TOTALS
NAME AND ADDRESS	CHRISTINE STILLER 11 VIA VIZCAYA PLAM BEACH, FL 33480	ROBERT STILLER 11 VIA VIZCAYA PALM BEACH, FL 33480	STEPHEN MAGOWAN 156 COLLEGE ST., 3RD FLOOR BURLINGTON, VT 05401	

82-0542046

ATTACHMENT 10

AMOUNT	20,000	35,000.	18,000.	10,000.	30,092
PURPOSE OF GRANT OR CONTRIBUTION	CHARITY	CHARITY	CHARITY	CHARITY	CHARITY
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	501(C)(3) ORGANIZATION	501(C)(3) ORGANIZATION	SO1(C)(3) ORGANIZATION	501 (C) (3) ORGANIZATION	501(C)(3) ORGANIZATION
RECIPIENT NAME AND ADDRESS	CENTRAL ASIA INSTITUTE PO BOX 7209 BOZEMAN, MT 59771	VPR 365 TROY AVENUE COLCHESTER, VT 05446	UNITED WAY OF CHITTENDEN COUNTRY 412 FARRELL STREET, SUITE 200 SOUTH BURLINGTON, VT 05403	HEIFER INTERNATIONAL PO BOX 8058 LITTLE ROCK, AR 72203	TRANS FAIR/FAIR TRADE USA 1500 BROADWAY, SUITE 400 OAKLAND, CA 94612

TOTAL CONTRIBUTIONS PAID

143,092

ATTACHMENT 10 PAGE 25

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## Attachment to 2010 Form 990 PF Part IX-A

Provide basic seminars teaching participants "the Silva Method"; The Silva Life Systems seminar and The Silva Intuition Training Seminar. The Silva Method is a series of mind exercises and meditation that help you: solve problems, sleep better, remember things, stay awake better, relive headaches, enhance perception, etc. Results may include realization of dreams and achievement of goals.

Conduct weekly or bi-weekly one-hour meditation sessions that are relaxing and healing and that promote deep levels of inner awareness. Provide guided visualization sessions for realization, healing and inner awareness. Provide Biofeedback training using multiple techniques. These activities further the purpose of the Foundation to educate the public about certain alternative relaxation, healing and self-improvement techniques.

Income derived from engaging in the above activities is primarily fees based on attendance. In addition, the company may receive contributions from organizational and/or individual donors.

# Delaware

PAGE

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "INNER SOLUTIONS INSTITUTE", CHANGING ITS NAME FROM "INNER SOLUTIONS INSTITUTE" TO "STILLER FAMILY FOUNDATION", FILED IN THIS OFFICE ON THE TWENTY-NINTH DAY OF MARCH, A.D. 2010, AT 3:16 O'CLOCK P.M.

A FILED COPY OF THIS CERTIFICATE HAS BEEN FORWARDED TO THE KENT COUNTY RECORDER OF DEEDS.

3523507 8100

100327265

You may verify this certificate online at corp delaware gov/authver.shtml

AUTHENTY CATION: 7899421

DATE: 03-29-10

State of Delaware Secretary of State Division of Corporations Delivered 03:16 PM 03/29/2010 FILED 03:16 PM 03/29/2010 SRV 100327265 - 3523507 FILE

# STATE OF DELAWARE CERTIFICATE OF AMENDMENT (A CORPORATION WITHOUT CAPITAL STOCK)

The corporation, INNER SOLUTIONS INSTITUTE	
organized and existing under the laws of the State of Delaware, hereby certifies as	
follows:	
(1) That at a meeting a vote of the members of the governing body was take for and against the amendment to the Certificate of Incorporation, said Amendment b	
as follows: RESOLVED THAT the name of the Corporation is changed to STILLER PAMILY FOUNDATION.	
(2) That said amendment was duly adopted in accordance with the provision	ം ന്
• • •	3 01
Section 242 of the General Corporation Law of the State of Delaware.	
IN WITNESS WHEREOF, said corporation has caused this certificate to	be
signed this 29th day of March , A.D. 2010 .	
By: SP Magowan	
Authorized Officer	
Name: Assistant Secretary	
Print or Type	

Form 8868 (Rev	1-2011)				Paga 2
If you are	filing for an Additional (Not Automati	c) 3-Month Extensi	ion, complete only Part II and che	eck this box	<b>▶</b> X
Note. Only o	complete Part II if you have already bee	n granted an autom	natic 3-month extension on a previou	usly filed Form 8868.	
	filing for an Automatic 3-Month Exter				
Part II	Additional (Not Automatic) 3-Mo			copies needed).	
Type or	Name of exempt organization Employer identification				number
print	STILLER FAMILY FOUNDATION 82			82-0542046	
file by the	Number, street, and room or suite no If a P O. box, see instructions				
extended	PO BOX 2263				
due date for filing your retum See Instructions,	City, town or post office, state, and ZIP code. For a foreign address, see instructions.				
	SOUTH BURLINGTON, VT 05407				
Enter the Re	eturn code for the return that this applica	ation is for (file a se	parate application for each return)		0 4
Application	• • • • • • • • • • • • • • • • • • • •	Return	Application		Return
• •		1	* *		
ls For		Code	Is For		Code
Form 990		01		1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1	<u>``</u>
Form 990-BI	<del></del>	02	Form 1041-A		80
Form 990-EZ		03	Form 4720		09
Form 990-PF		04	Form 5227		10
<del>,</del>	(sec. 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-T (trust other than above)  STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8					12
			itomatic 3-month extension on a p	reviously filed Form 880	58.
<ul> <li>The book</li> </ul>	is are in the care of   BETSY STA	NFORD	·····		
4 I reque 5 For ca 6 If the t	e group, check this box  names and EINs of all members the exest an additional 3-month extension of tallendar year 2010, or other tax year execution as year entered in line 5 is for less than Change in accounting period in detail why you need the extension RMATION NECESSARY TO FILE NOT BEEN RECEIVED FROM THI	tension is for.  ime until beginning 12 months, check A COMPLETE A	11/15 ,20, and ending reason: Initial return	, 20 11 .	20
nonref b If this	s application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any fundable credits. See instructions.  8 application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and any ated tax payments made. Include any prior year overpayment allowed as a credit and any				
amour	nt paid previously with Form 8868.			8ь \$	<del></del>
	talance Due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS Electronic Federal Tax Payment System). See instructions.  8c   \$				
Under penaltle	es of perkury, I declare that I have examined to the chi, and complete, and that I am authorized to prep	Signature and this form, including acc	nd Verification companying schedules and statements, and		
3		·····			(Rev. 1-2011)