

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



Form 990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No. 1545-0052

2010

Department	nt of the Treasury evenue Service	Note. The fo	undation n	nav he ahle to	use a conv of th	is return to satisf	v state ren	ortino	requirements		
For cale	endar year 2010, or	tax year beginni	ng J	rul 1), and ending				11	
G Che	ck all that apply	Initial return	lnıt	ıal Return	of a former	oublic charity				Fina	al return
No ma add	foundation	Amended ret	urn		Address	change			hange		
	oundation ER RICH CHARI	ייש אין פאיי	ארדיי בר					Α	Employer identifi		mber
	and street (or P O box nur					Room/suite		В	16-15150 Telephone numbe		instructions)
	MAIN ST			_		ļ			(607) 54	7-525	3
City or to					State	ZIP code		С			pending, check here
	ERSTOWN heck type of organiz	ration: Y So	ction 50	1(0)(2) 046	mpt private	13326			1 Foreign organizat	-	<u></u>
	Section 4947(a)(1						tation		here and attach of	computations	ting the 85% test, check on
	ir market value of all ass	sets at end of year				ash X A		Ε	If private founda under section 50		
(fi	rom Part II, column (c), li			Other (speci				F	If the foundation	is in a 60	-month termination
Part I	1,496 Analysis of R	5,515.	(Part I	, column (d) must be o	n cash basis)		under section 50	7(b)(1)(B)), check here
Faiti	Expenses (Th	e total of amoun	ts ın	evnonce	venue and es per books	(b) Net in		nt	(c) Adjusted income		(d) Disbursements for charitable
	columns (b), (c),	and (d) may not amounts in colun	t neces-	CAPCITISC	s per books	"""	,iiie		income		purposes
	(see the instruct	ions).)							<u>-</u>		(cash basis only)
		s, grants, etc, received									
	_	foundn is not req to a avings and tempo				 		\dashv			
	cash investm	ents			1,811.	ļ	1,81	1.	1,	811.	,
	4 Dividends and in	terest from securities				 			· · · · · · · · · · · · · · · · · · ·		
	b Net rental income or (loss)		• •								l
, <u>g</u> 1	6a Net gain/(loss) fro	om sale of assets not o	դ line 10								
re _A	b Gross sales price assets on line 6a		-	RECE	WED	 					
ale 1. 5. 2011	l	ncome (from Part IV, Ir n capital gain .	de 2)	 	} (<u>d </u>					
됴	9 Income modif	. •	33	AUG 1	1 2011	3					
Ą	10 a Gross sales less returns and allowances	1				\$ [
	b Less Cost of goods sold		C	GDEN		1					
Z	c Gross profit/(los	s) (att sch)			***************************************	1			· · · · · · · · · · · · · · · · · · ·		,
	11 Other income	e (attach schedule	e)								
SCANNED	12 Total. Add lin	nes 1 through 11		 	1,811.	 	1,81	-	1	811.	
<u>(I)</u>		officers, directors, trus	tees, etc								
		salaries and wages .					· · · · · · · · · · · · · · · · · · ·				
_	15 Pension plan 16a Legal fees (attac	s, employee beni h schedule)	efits	ļ		·		-	······		
A D M		(attach sch) L-16]			3,000.	1		õ.	3	000.	0.
I N	1	attach sch) L-16			6,000.	-		0.		Ō.	
O Î P S	17 Interest			<u></u>				_			
E T	18 Taxes (attach schedule		18 Stm	ţ	2,827.	 	1	7.	2,	827.	0.
A A	sch) and dep		Stmt		33,235.			٥.		0.	
N V G E	20 Occupancy 21 Travel, confe	rances and mee	tinas			 					
A E	22 Printing and										
A E N X D P	23 Other expens		lule)								21 674
N S	See Line 23 24 Total operati	ng and administ	rative	 	32,993.	 		\dashv	2	735.	31,654.
Ē S	expenses. Ac	dd lines 13 throug	gh 23		78,055.		1	7.		562.	37,654.
	25 Contributions, gi			·	0.			_	·		0.
	26 Total expens Add lines,24	ses and disburse and 25	ments.		78,055.		. 1	7.	8	562.	37,654.
	27 Subtract line	26 from line12:	•								
	a Excess of regard	venue over expe ements	nses		-76,244.	<u></u>		′	<u> </u>		91
	}	ncome (if negative, en	ter -0-)		, , ,	<u> </u>	1,79	4.			
	C Adjusted net inc	ome (if negative, enter	-0-)	T- ' '	-	i				0.	

BAA For Paperwork Reduction Act Notice, see the instructions.

Form	990-	PF (2010) WALTER RICH CHARITABLE FOUNDATION		16-151	
Perá	M	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	
1.84.1	, <u></u>	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1		8,739.	8,442.	8,442.
	2	Savings and temporary cash investments	103,153.	53,899.	53,899.
	3	Accounts receivable			
	١.	Less: allowance for doubtful accounts			
	4	Pledges receivable			
	_	Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)	ļ		
	7	· · · · · · · · · · · · · · · · · · ·			
Ą	l	Less: allowance for doubtful accounts			<u>-</u>
ASSETS	8	Inventories for sale or use	-	· · · · · · · · · · · · · · · · · · ·	
Ę	9	Prepaid expenses and deferred charges			
Ś	10	a Investments – U.S. and state government			
		obligations (attach schedule)			
	!	b Investments — corporate stock (attach schedule)			
	i .	c Investments — corporate bonds (attach schedule)			<u> </u>
	11	Investments – land, buildings, and equipment: basis			1 .
		Less: accumulated depreciation			
		(attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment: basis 1,327,373.			
		Less: accumulated depreciation	1 227 270	1 107 207	1 107 207
	15	(attach schedule) L-14 Stmt - 129,976. Other assets (describe L-15 Stmt)	1,227,278. 233,589.	1,197,397. 236,777.	1,197,397. 236,777.
		Total assets (to be completed by all filers—	233,369.	230,777.	230,111.
		see instructions. Also, see page 1, item l)	1,572,759.	1,496,515.	1,496,515.
Ļ	17	,			
À	18		0.	0.	·
A B I	19			· <u> </u>	
Ļ	20	Loans from officers, directors, trustees, & other disqualified persons			
÷	21	Mortgages and other notes payable (attach schedule)			
Ē	22	Other liabilities (describe)			
E S	23	Total liabilities (add lines 17 through 22)	0.	_0.	
		Foundations that follow SFAS 117, check here			
	1	, , , , , , , , , , , , , , , , , , ,			
N F E U	24		1,572,759.	1,496,515.	
ΤN	25	' '			
A D	26	Permanently restricted			
ASSETS	l	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
ELA	27				
TA	27	Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, building, and equipment fund			
С	29				
O E R S	30		1,572,759.	1,496,515.	
., •	31				
	- Trace 201	(see the instructions)	1,572,759.	1,496,515.	
Par		Analysis of Changes in Net Assets or Fund Balanc			
1	Tota	al net assets or fund balances at beginning of year- Part II, colum	nń (a), line 30 (must agre	ee with	1 570 750
_		-of-year figure reported on prior year's return)		1	1,572,759.
2		er amount from Part I, line 27a		2	-76,244.
3		r increases not included in line 2 (itemize)			1,496,515.
4 5		I lines 1, 2, and 3 eases not included in line 2 (itemize)		5	1, 230, 313.
5 6		al net assets or fund balances at end of year (line 4 minus line 5)	⊢ Part II. column (b) line	 	1,496,515.
	, 016	a not added or rains substitute at one of year time + minds fine of	,	· · · · · · · · · · · · · · · · · · ·	

7	Enter the appropriate amount in	n each column for each year; see the i	instructions before making any entrie	:S	
	(a) Base period years Calendar year (or tax year beginning in) (b) Adjusted qualifying distributions (c) Net value of noncharitable-use assets		(d) Distribution ratio (column (b) divided by column (c))		
	2009		1,519,651.		
	2008	158,258.	59,356.		2.666251
	2007	1,067,432.	74,060.		14.413070
	2006	23,939.	12,086.		1.980722
	2005	23,069.	3,354.		6.878056
	Total of line 1, column (d) Average distribution ratio for th	e 5-year base period — divide the tota	I on line 2 by 5, or by the	2	25.938099
	number of years the foundation	has been in existence if less than 5 y	ears	3	6.484525
4	Enter the net value of nonchar	table-use assets for 2010 from Part X,	, line 5	4	85,809.
5	Multiply line 4 by line 3 .			5	556,431.
6	Enter 1% of net investment inc	ome (1% of Part I, line 27b) .		6	18.
7	Add lines 5 and 6			7	556,449.
8	Enter qualifying distributions from	om Part XII, line 4 .		8	44,196.
	If line 8 is equal to or greater th	nan line 7, check the box in Part VI, lii	ne 1b, and complete that part using a	a 1% tax rate	See the

Form 990-PF (2010)

Part VI instructions.

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the instru	ctions)	
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 letter if necessary – see instr.)		
	Domestic foundations that meet the section 4940(e) requirements in Part V,		36.
	check here ▶ ☐ and enter 1% of Part I, line 27b		
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b).		14.
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		
			<u>0.</u>
	Add lines 1 and 2		36.
	· · · · · · · · · · · · · · · · · · ·	_ -	0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		36.
	, ,		
	2010 estimated tax pmts and 2009 overpayment credited to 2010		
	Exempt foreign organizations – tax withheld at source		
	Tax paid with application for extension of time to file (Form 8868).		
	Backup withholding erroneously withheld		
	Total credits and payments Add lines 6a through 6d		
	Enter any penalty for underpayment of estimated tax. Check here I If Form 2220 is attached 8		
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		36.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		<u>0.</u>
	Enter the amount of line 10 to be: Credited to 2011 estimated tax Page 11		
Pan	VII A Statements Regarding Activities	1	
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1 a	No X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1ь	х
	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.		
_	Did the foundation file Form 1120-POL for this year?	1c	v
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	10	X
	(1) On the foundation > \$ (2) On foundation managers . > \$		
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers.		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	x
_	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	3	х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	. 4a	X
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?	4b	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	X
	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 conflict		
	with the state law remain in the governing instrument?	. 6	X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7 X	
8 a	Enter the states to which the foundation reports or with which it is registered (see the instructions) •		
	NY - New York		
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 X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? Yes, complete Part XIV	9	Х
	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their hames	10	x
BAA	and addresses	Form 990-PF	

<u>Form</u>	999-PF (2010) WALTER RICH CHARITABLE FOUNDATION	16-151500	1	Page 5
Part	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 instructions)		11	х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?		12	x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption	application? .	13 X	
14	The books are in care of ► ROBERT B SCHLATHER Telephone	no.► <u>(607)</u>	547-5	 253
	Located at > 192 MAIN ST COOPERSTOWN, NY ZIP + 4 >	13326		- -
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu oForm 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year	► 15		- []
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other au bank, securities, or other financial account in a foreign country?.	thority over a	16 Ye	s No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the na foreign country	me of the		
Par	VILE 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.	·	Y	s 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		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?(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 or use of a disqualified person)?	Yes X No		
	(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.)	Yes X No		
b	o if any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructio	ns)?	1 b	
	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	Х
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		Yes X No		
	If 'Yes,' list the years ► 20, 20, 20			
t	Are there any years listed in 2a for which the foundation isnot applying the provisions of section 4942(a (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a all years listed, answer 'No' and attach statement—see the instructions.)	ı)(2) to	2 b	
c	of the provisions of section 4942(a)(2) are being applied toany of the years listed in 2a, list the years he			
	► 20 , 20 , 20			
3 8	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? [Yes 🗓 No		
ŧ	of If 'Yes,' did it have excess business holdings in 2010 as a result o(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	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		. 4a	<u>x</u>
ì	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?		. 4b	x
BAA		F	orm 990-F	

Sa Durng the year did the foundation pay or incur any amount to: (1) Carry on propagands, or otherwise attempt to influence legislation (section 4945(c))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or influence) any specific public election (see section 4955); or to carry on, directly or influence) any specific public election (see section 4955); or to carry on, directly or influence) and or any specific public election (see section 4955); or to carry on, directly or influence) agant to an individual for travel, such, or other small pruposes? (4) Provide a grant to an organization of ther than a characteristic election (see instructions). (5) Provide for any purpose other than a characteristic election (see instructions). (6) Provide or any purpose other than resignous, characteristic literary or carried instructions. (7) Provide for any purpose other than resignous, characteristic literary or carried instructions. (8) Provide for any purpose other than resignous, characteristic literary or carried instructions. (9) Provide for any purpose other than resignous, characteristic literary or carried instructions. (9) Provide for any purpose other than resignous, characteristic literary or carried instructions. (9) Provide for any purpose other than resignous, characteristic literary or carried instructions. (1) Provide for any purpose other than resignous, characteristic literary or carried instructions. (1) Provide for any purpose other than resignous disaster assistance for any purpose seems of the carried of the ca	Form 990-PF (2010) WALTER RICH CHARIT			16-15:	15001 Page 6
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(a))?	Part VII B Statements Regarding Activiti	es for Which Form	4720 May Be Requ	uired (continued)	
(2) Influence the outcome of any specific public election (see section 4955); or 16 carry on directly or indirectly, any vother regisfation of week? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an individual for travel, study, or other similar purposes? (5) Provide or any purpose other than religious, charitable, etc. organization described in section 595(6); (7), (7), or section 4940(6)(2)* (see instructions) (6) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes, or for the prevention of citerity to individual or device of the providence of celectronic and purposes. Or the prevention of citerity to individual or celestrated in Regulations section \$2495 or in a current individual or carried in the regulation section \$2495 or in a current individual or carried in the regulation section \$495(6); (3) does the foundation claim exemption from the base because in ramalisance expenditure responsibility for the grant? If Yes, affect the statement required by Regulations section \$2495 5(g). If we have a section \$495(6) and the foundation and the section \$495(6) and the foundation, during the year, review any funds, directly or indirectly, to pay premiums on a personal benefit contract? If Yes, affect the statement required by Regulations section \$4945(5) and the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If Yes to 60, the Form 8570 A 1 and yith me during the tax year, was the foundation a party to a prohibited tax shelter transaction? If Yes is 60, the foundation receive any proceeds or have any net income attributable to the transaction? It is all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address of the previous of the state of the provided to position (c) Compensation (d) Contributions to plant and the provided to position (d) Contributions to plant and deferr	- · · · · · · · · · · · · · · · · · · ·	•			
on, directly or indirectly, any voter registration drive? (S) Provide a grant to an individual for travel, study, or other similar puriposes? (Per S K No. (4) Provide a grant to an organization other than a charatable, etc., organization described in section 59(e)(1)(2) (or (3) or section 49(d)(2))? (or section structions). (S) Provide for any puripose other than religious, charatable, etc., organization described in the form of the prevention of cruelly to chickle or a manuals? (B) Provide for any puripose other than religious, charatable, scientific, literary, or ecucusinoal puriposes, or for the prevention of cruelly to chickle or a manuals? (B) Provide for any puripose other than religious, charatable, secentific, literary, or ecucusinoal puriposes, or for the prevention of cruelly to chickle or a manuals? (B) Provide for any puripose other than religious, charatable, secentific, literary, or ecucusinoal puripose, or for the prevention of cruelly to chickle or a manuals? (C) Companization section 53 4945 or in a current involve regarding disabler assistance check here in manuals assistance structures assistance check here in manuals assistance structures assistance check here in manuals assistance structures are controlled to the foundation of the foundation appropriate that provides the public of the foundation of the foundation provides or appropriate the foundation appropriate that the control of the foundation and provides or appropriate than the foundation appropriate that the control of the foundation according to the foundation and provides or appropriate than the foundation appropriate that the foundation according to the foundation ac	(1) Carry on propaganda, or otherwise attempt	ot to influence legislatio	n (section 4945(e))?	Yes 🗓	No
(a) Provide to a grant to an organization other than a charitable, etc. organization described in section 509(a)(1), (d), or (d), or (e), or section 4940(d)(2) (see instructions). (b) Provide for any purpose other than reliquous, charitable, scientific, literary, or educational purposes, or for the prevention of cruelly to children or animals? b) If any answer is "Yes" to guestion 54945 or in a current notice regarding disaster assistance discribed in Regulations section 54945 or in a current notice regarding disaster assistance. c) If the answer is "Yes" to guestion 52(4), does the foundation claim exemption from the lax because it maintained expenditure responsibility for the grant? c) If the answer is "Yes" to guestion 58(4), does the foundation claim exemption from the lax because it maintained expenditure responsibility for the grant? c) If "Yes" (a thick his statement required by Regulations section 524945-5(d)) 6a Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 at At any time during the lax year, was the foundation a party to a prohibited tax shelter transaction? \[\text{Ves} \] No b) If yes, gift the foundation receive any proceeds or have any net income attributable to the transaction? 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) TRUSTEE/PRES TRUSTEE/PRES TRUSTEE/PRES TRUSTEE/PRES TRUSTEE/PRES 1,00 0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,0,	on, directly or indirectly, any voter registra	ition drive?			No
in section 509(q/1), (2), or (3), or section 4940(q/2)? (see instructions)	(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes X	No la
educational purposes, or for the prevention of crulely to children or animals? Ves No	(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, or 4940(d)(2)? (see instru	ganization described uctions)	🗌 Yes 🗓	No
Cell the answer is "Yes" to question 53(4), does the foundation claim evemption from the lab because it maintained expenditure responsibility for the gran? If "Yes," attach the statement required by Regulations section 53.4945-5(d). Sa Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? b Did the foundation during the year, pay premiums, directly or indirectly, on a personal benefit contract? b Did the foundation during the year, pay premiums, directly or indirectly, on a personal benefit contract? I List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title and average hours, per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation. (c) Compensation (d) Contributions to employee benefit plans and deferred compensation. (e) Expense account, other allowances TRUSTEE/SECY ITRUSTEE/SECY ITRUSTEE/SECY ITRUSTEE TRUSTEE 2 Compensation of five highest-paid employees (other than those included on line 1 see instructions). If none, enter NONE. (a) Name and address of each employee hours per week devoted to position be paid more than \$50,000 Compensation (b) Title and average hours per week devoted to position be paid more than \$50,000 Compensation (c) Compensation (d) Contributions to employee benefit plans and deferred compensation of five highest-paid employees (other than those included on line 1 see instructions). If none, enter NONE. (a) Name and address of each employees (other than those included on line 1 see instructions). If none, enter NONE. (b) Title and average hours per week devoted to position (c) Compensation (d) Contributions to employee b	(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	;, literary, or or animals?	Tes 🗓	No
Crit the answer is "Yes" to question 5a(4), does the foundation claim exemption from the lax because it maintained expenditure responsibility for the grant? "	b If any answer is 'Yes' to 5a(1)-(5), didany of the described in Regulations section 53 4945 or in (see instructions)?	he transactions fail to q a current notice regard		ons	5b
tax because it maintained expenditure responsibility for the grant? If Yes at that the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If Yes' to 6b, file Form 8370 7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? Tax At any time during the tax year, was the foundation aparty to a prohibited tax sheller transaction? Tax At any time during the tax year, was the foundation aparty to a prohibited tax sheller transaction? Tax At any time during the tax year, was the foundation aparty to a prohibited tax sheller transaction? Tax At any time during the tax year, was the foundation aparty to a prohibited tax sheller transaction? Tax At any time during the tax year, was the foundation aparty to a prohibited tax sheller transaction? Tax At any time during the tax year, was the foundation aparty to a prohibited tax sheller transaction? Tax At any time during the tax sheller transaction? Tax At any time during the tax sheller transaction? Tax At any time during the tax sheller transaction? Tax At any time during the tax sheller transaction? Tax At any time during the tax sheller transaction? Tax At any time during the tax sheller transaction? Tax At any time during the tax sheller transaction? Tax At any time during the tax sheller transaction? Tax At any time during the tax sheller transaction? Tax At any time during the tax sheller transaction? Tax At any time during the tax sheller transaction? Tax At any time during the tax sheller transaction? Tax At any time during the tax sheller transaction? Tax At any time during the tax sheller transaction? Tax At any time during the tax sheller transaction? Tax At any time during the tax sheller transaction? Tax At any time during t				▶ [
6a Did the foundation, during the year, receive any funds, directly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If Yes' to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Tax At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction? Tax At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction? Tax At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction? Tax At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction? Tax At any time during the tax year, was the foundation aparty to a prohibited tax shelter transaction? Tax At any time during the tax shelter transaction? Tax At any time during the tax shelter transaction? Tax At any time during the year, pay premiums, directly, on a personal benefit contract? Tax At any time during the year, pay premiums, directly, on a personal benefit contract? Tax At any time during the year, pay premiums, directly, on a personal benefit contract? Tax At any time during the year, pay premiums, directly, on a personal benefit contract? Tax At any time during the year, pay premiums, directly, on a personal benefit contract? Tax At any time during the year, year year year year year year. Tax At any time during the year, year year year, year year year. Tax At any time during the year, year year, year year, year year. Tax At any time during the year, year	c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure respons	the foundation claim ex sibility for the grant?	emption from the	Yes	No No
on a personal benefit contract? bid the foundation, dump the year, pay premiums, directly or indirectly, on a personal benefit contract? If 'Yes' to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 1 List all officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title and average hours per week devoted to position (a) Name and address TRUSTEE/PRES COOPERSTONN NY 13326 1 TRUSTEE/SECY FIX CREEK NY 13337 TRUSTEE/SECY FIX CREEK NY 13335 TRUSTEE BURLINGTON FLATS NY 13315 TRUSTEE (c) Compensation (d) Contributions to entire allowances of the rail own o	If 'Yes,' attach the statement required by Regi	ulations section 53.4945	5-5(d).		
To all any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	on a personal benefit contract?	•	***	∐ Yes X	
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yeb (No 17b) 1/2b (17ts, did the foundation receive any proceeds or have any net income attributable to, the transaction? Yeb (No 17b) 1/2b (No 17b) 1		lums, airectly or mairec	tiy, on a personal bene	rit contract? .	6B X
Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address	,	dation a party to a proh	ibited tax shelter transa	ction? . Yes 🗓	No Section 1
TRUSTEE/SECY FLY CREEK NY 13315 Compensation of five highest-paid employees (other than those included on line 1 see instructions). (a) Name and address (b) Title and average hours per week devoted to position (ff not paid, enter -0-) plans and deferred compensation (the raillowances) and deferred compensation (ff not paid, enter -0-) plans and deferred compensation (the raillowances) and deferred compensation (ff not paid, enter -0-) plans and deferred compensation (the raillowances) and deferred compensation (ff not paid, enter -0-) plans and deferred compensation (ff not paid, enter -0-) plans and deferred compensation (ff not paid, enter -0-) plans and deferred compensation (ff not paid, enter -0-) plans and deferred compensation of the raillowances (ff not paid, enter -0-) plans and deferred compensation of the raillowances (ff not paid, enter -0-) plans and deferred compensation of the raillowances (ff not paid, enter -0-) plans and deferred compensation of the raillowances (ff not paid, enter -0-) plans and deferred compensation of the raillowances (ff not paid, enter -0-) plans and deferred compensation of the raillowances (ff not paid, enter -0-) plans and deferred compensation of the raillowances (ff not paid, enter -0-) plans and deferred compensation of the raillowances (ff not paid, enter -0-) plans and deferred compensation of the raillowances (ff not paid, enter -0-) plans and deferred compensation of the raillowances (ff not paid, enter -0-) plans and deferred compensation of the raillowances (ff not paid, enter -0-) plans and deferred compensation of the raillowances (ff not paid, enter -0-) plans and deferred compensation of the raillowances (ff not paid, enter -0-) plans and deferred compensation of the raillowances of each employee benefit plans and deferred compensation of the raillowances of each employee benefit plans and deferred compensation of the raillowances of each employee plant enter -0-) plans and deferred compensation of the raillowances of each employee plant enter -0-) plans					
1 List all officers, directors, trustees, foundation managers and their compensation (see instructions). (a) Name and address (b) Title and average hours per week devoted to position (c) Compensation (c) Compensation employee benefit plans and deferred compensation (ther allowances) KATHERINE M RICH 331 SEMINARY RD COOPERSTOWN NY 13326 1.00 0. 0. 0. 0. LESTER SITTLER 187 CEMETERY RD TRUSTEE/SECY FLY CREEK NY 13337 5.00 0. 0. 0. 0. STEPHANIE L RICH 6033 ST HWY 51 BURLINGTON FLATS NY 13315 1.00 0. 0. 0. 0. 2 Compensation of five highest-paid employees (other than those included on line 1 see instructions). If none, enter 'NONE.' (a) Name and address of each employee paid more than \$50,000 bit in the see instruction of the remployee benefit plans and deferred compensation (d) Contributions to enter than those included on line 1 see instructions). If none, enter 'NONE.' (b) Title and average hours per week devoted to position compensation of the remployee benefit plans and deferred compensation of the remployee benefit plans and deferred compensation of the remployees plan where the remployees plan where the remployees pland over \$50,000 bit in the remploye	Information About Officers, Di	irectors, Trustees,	Foundation Manag	gers, Highly Paid 8	Employees,
(a) Name and address (b) Title and average hours per week devoted to position (c) Compensation (find paid, enter -b) (find paid, ent		n managers and their	compensation (see inst	ructions)	
Canal Name and address Canal Name Canal Name and Address Canal	List all Officers, directors, trustees, fouridation	[(a) Exposes account
TRUSTEE/PRES COOPERSTOWN NY 13326 1.00 0. 0. 0. 0. LESTER SITTLER 187 CEMETERY RD FLY CREEK NY 13337 5.00 0. 0. 0. 0. STEPHANTE L RICH 6033 ST HWY 51 BURLINGTON FLATS NY 13315 1.00 0. 0. 0. 0. 2 Compensation of five highest-paid employees (other than those included on line + see instructions). If none, enter 'NONE.' (a) Name and address of each employee paid more than \$50,000 0. 0. 0. 0. 0. O. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	(a) Name and address	`hours per week`	(If not paid, enter -0-)	employee benefit plans and deferred	other allowances
COOPERSTOWN NY 13326 1.00 0. 0. 0.	KATHERINE M RICH				
LESTER SITTLER 187 CEMBTERY RD TRUSTEE/SECY FLY CREEK NY 13337 5.00 0. 0. 0. 0. STEPHANIE L RICH 6033 ST HWY 51 TRUSTEE BURLINGTON FLATS NY 13315 1.00 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	331 SEMINARY RD	TRUSTEE/PRES			
TRUSTEE/SECY FLY CREEK NY 13337 5.00 0. 0. 0. 0. STEPHANIE L RICH 6033 ST HWY 51 BURLINGTON FLATS NY 13315 1.00 0. 0. 0. See Information about Officers, Directors, Trustees, Etc Compensation of five highest-paid employees (other than those included on line 1 see instructions). If none, enter 'NONE.' (a) Name and address of each employee paid over \$50,000 b. NONE D Total number of other employees paid over \$50,000 b. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	COOPERSTOWN NY 13326	1.00	0.	0.	0.
FLY CREEK NY 13337 5.00 0. 0. 0. STEPRANIE L RICH 6033 ST HWY 51 BURLINGTON FLATS NY 13315 See Information about Officers, Directors, Trustees, Etc 2 Compensation of five highest-paid employees (other than those included on line 1 see instructions). If none, enter 'NONE.' (a) Name and address of each employee hours per week devoted to position NONE 0 . 0 . 0. 0. Expense account, other allowances of each employees (other than those included on line 2 see instructions). If none, enter 'NONE.' (b) Title and average hours per week devoted to position O 0. NONE NONE None Total number of other employees paid over \$50,000		TDIIGTEE/GECV			
STEPHANIE L RICH 6033 ST HWY 51 BURLINGTON FLATS NY 13315 See Information about Officers, Directors, Trustees, Etc 0. 0. 0. 0. 2 Compensation of five highest-paid employees (other than those included on line 4 see instructions). If none, enter 'NONE.' (a) Name and address of each employee hours per week devoted to position NONE 0 . 0. None and address of each employee with the paid average hours per week devoted to position NONE Total number of other employees paid over \$50,000		· '	0.	0	0
Total number of other employees paid over \$50,000 TRUSTEE TRUSTEE TRUSTEE TRUSTEE 1.00 0. 0. 0. 0. 0. 0. 0. 0.		3.00			- 0.
BURLINGTON FLATS NY 13315 1.00 0. 0. 0. See Information about Officers, Directors, Trustees, Etc. Compensation of five highest-paid employees (other than those included on line 4 see instructions). If none, enter 'NONE.' (a) Name and address of each employee paid more than \$50,000 (b) Title and average hours per week devoted to position (c) Compensation plans and deferred compensation of their allowances of each employee benefit plans and deferred compensation of their allowances of each employee benefit plans and deferred compensation of their allowances of each employee benefit plans and deferred compensation of their allowances of employees paid over \$50,000 (c) Compensation of their employees paid over \$50,000 (c) Compensation of the		TRUSTEE			
See Information about Officers, Directors, Trustees, Etc 0. 0. 0. 0. 2 Compensation of five highest-paid employees (other than those included on line 4 see instructions). If none, enter 'NONE.' (a) Name and address of each employee paid more than \$50,000 (b) Title and average hours per week devoted to position NONE 0		1.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those included on line + see instructions). If none, enter 'NONE.' (a) Name and address of each employee paid more than \$50,000 (b) Title and average hours per week devoted to position NONE (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances of the raillowances Total number of other employees paid over \$50,000	See Information about Officers, Directors, Trustees, Etc.				
2 Compensation of five highest-paid employees (other than those included on line + see instructions). If none, enter 'NONE.' (a) Name and address of each employee paid more than \$50,000 (b) Title and average hours per week devoted to position NONE (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances of the raillowances Total number of other employees paid over \$50,000					
(a) Name and address of each employee paid more than \$50,000 NONE O Total number of other employees paid over \$50,000 (b) Title and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plans and deferred compensation (d) Contributions to employee benefit plans and deferred compensation (e) Expense account, other allowances	2 Compensation of five highest-paid employee	 es (other than those inc			
Paid more than \$50,000 hours per week devoted to position compensation other allowances NONE O Total number of other employees paid over \$50,000 hours per week devoted to position compensation other allowances other allowanc					T
O O O Total number of other employees paid over \$50,000	paid more than \$50,000	hours per week		employee benefit plans and deferred	
O	NONE			<u> </u>	
O					l
O Total number of other employees paid over \$50,000	0				
O Total number of other employees paid over \$50,000					
Total number of other employees paid over \$50,000	0				
Total number of other employees paid over \$50,000				<u></u>	
Total number of other employees pard over \$50,000	0				
Total number of other employees pard over \$50,000					
Total number of other employees paid over \$50,000		-			
Total number of other employees paid over \$50,000	Table without of other areals are and over \$50.000	<u> </u>	L		No.
10111 390-FF (2010)	BAA		 07/23/10		Form 990-PF (2010)

3	Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON		(c) compensation
Total	number of others receiving over \$50,000 for professional services	None
\equiv	Summary of Direct Charitable Activities	None
		,
List th organi	e foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of zations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	Donations to qualified charitable organizations	
		_
2	Building at Main Street, Franklin, New York, is leased to	0.
	Town of Franklin for nominal rent to be used as Town offices	_
		7,226.
3	Operation, maintenance and insurance of building to house Franklin Community & Railroad Museum; process application	-
	for museum charter; plan for museum exhibits	30,428.
4		
		-
Par	Summary of Program-Related Investments (see instructions)	
	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	. Amount
1	Construction of building to house Franklin Community & Railroad Museum, Franklin, New York, for display of historic railcar and railroad memorabilia, and community events	- 3 254
2	Restoration of historic Warwick railcar to be exhibited	3,354.
	at Franklin Community & Railroad Museum	_
All c	other program-related investments. See instructions	3,188.
3	and programme lated investments. See instructions	
		_
Tota	Add lines 1 through 3	6,542.
BAA		Form 990-PF (2010)

BAA

see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc. purposes: a Average monthly fair market value of securities 1 a 87,116. 16 c Fair market value of all other assets (see instructions) 1 c d Total (add lines 1a, b, and c) 1 d 87,116. e Reduction claimed for blockage or other factors reported on lines 1a and 1c Acquisition indebtedness applicable to line 1 assets 3 87,116. Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 1,307. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 85,809. Minimum investment return. Enter 5% of line 5. . 6 4.290. PartXIII Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here \(\subseteq \alpha and do not complete this part.) Minimum investment return from Part X, line 6 . . 1 4,290. 2a Tax on investment income for 2010 from Part VI, line 5. 2a 36. 2 b **b** Income tax for 2010. (This does not include the tax from Part VI.).... c Add lines 2a and 2b 2 c 36. 3 Distributable amount before adjustments Subtract line 2c from line 1... 3 4,254. Recoveries of amounts treated as qualifying distributions. 4 ... 5 4,254. Add lines 3 and 4. Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 4,254. Part XIII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 1 a 37,654. 1 b 6,542. 2 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes ... Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) За **b** Cash distribution test (attach the required schedule) 3 b Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 44,196. 5 Ω. Adjusted qualifying distributions. Subtract line 5 from line 4 6 44,196.

Pan X Minimum Investment Return (All domestic foundations must complete this part, Foreign foundations,

Form **990-PF** (2010)

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,				
line 7	<u> </u>			4,254.
2 Undistributed income, if any, as of the end of 2010: a Enter amount for 2009 only				
		-	0.	
b Total for prior years: 20, 20, 20, 20 3 Excess distributions carryover, if any, to 2010:				
a From 2005	•			
b From 2006	•			
c From 2007 1,063,965.				
d From 2008 . 158,258.				
e From 2009				
f Total of lines 3a through e	1,285,148.			
4 Qualifying distributions for 2010 from Part		·	 	
XII, line 4: ► \$ 44,196.				
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior years				
(Election required – see instructions)		0.		
c Treated as distributions out of corpus				
(Election required – see instructions)	0.			
d Applied to 2010 distributable amount .				4,254.
e Remaining amount distributed out of corpus.	39,942.			
5 Excess distributions carryover applied to 2010	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a).)				
came amount made 20 chom in column (cyty	1			
6 Enter the net total of each column as				
indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 .	1,325,090.			
b Prior years' undistributed income. Subtract		_		
line 4b from line 2b		0.		<u> </u>
c Enter the amount of prior years' undistributed income for which a notice of deficiency				j
has been issued, or on which the section	•	_		
4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount — see instructions		0.		
e Undistributed income for 2009. Subtract line 4a from line 2a. Taxable amount — see instructions			о.	'
THIS Ed. Taxable almost to the second to the	<u> </u>			
f Undistributed income for 2010. Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2011				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2005 not				
applied on line 5 or line 7 (see instructions)	23,069.			
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	1,302,021.			
10 Analysis of line 9:				
a Excess from 2006 . 23,939.	_			
b Excess from 2007 1,063,965.	_			
c Excess from 2008 . 158,258.	-			
d Excess from 2009 . 15,917.	_			
e Excess from 2010 . 39,942.	1	<u></u>	l	l

Form 990-PF (2010) WALTER RICH CHAR:				16-1515001	. Page 10
PantXIV Private Operating Foundati					N/A
1 a If the foundation has received a ruling or is effective for 2010, enter the date of the	ruling .				
b Check box to indicate whether the founda	tion is a private ope	rating foundation de	escribed in section	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for each year listed	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					· <u>. </u>
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test – enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c '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 support from an exempt organization					
(4) Gross investment income					
Supplementary Information assets at any time during the Information Regarding Foundation Management (Information Regarding Foundation Regarding Foundatio	ne year — see in	part only if the structions.)	organization ha	ad \$5,000 or mo	re in
a List any managers of the foundation who close of any tax year (but only if they have NONE	have contributed m	ore than 2% of the than \$5,000). (See	total contributions r section 507(d)(2))	received by the foun	dation before the
b List any managers of the foundation who a partnership or other entity) of which the NONE	own 10% or more of foundation has a 1	of the stock of a cor 0% or greater interes	poration (or an equ est.	ally large portion of	the ownership of
2 Information Regarding Contribution, Gra Check here X if the foundation only requests for funds. If the foundation mak complete items 2a, b, c, and d.	makes contributions es gifts, grants, etc,	to preselected cha (see instructions) t	ritable organization o individuals or org	anizations under oth	ept uńsolicited ner conditions,
a The name, address, and telephone numb	er of the person to	whom applications s	should be addresse	d:	
b The form in which applications should be	submitted and info	rmation and materia	ils they should inclu	ude:	
c Any submission deadlines:			······································	, , , , , , , , ,	
d Any restrictions or limitations on awards,	such as by geograp	phical areas, charita	ble fields, kinds of	institutions, or other	factors:
BAA		EEA0310 02/16/11			Form 990-PF (2010)

BAA

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or contribution show any relationship to status of **Amount** any foundation manager or recipient Name and address (home or business) substantial contributor a Paid during the year FRIENDS OF BASSETT HEALTHCARE ATWELL RD COOPERSTOWN NY 13326 HOSP **GENERAL** 0. SPRINGBROOK 2705 ST HWY 28 ONEONTA NY 13820 CHAR GENERAL 0. CATSKILL AREA HOSPICE 1 BIRCHWOOD DRIVE ONEONTA NY 13820 CHAR GENERAL 0. FRANKLIN FREE LIBRARY 334 MAIN ST CHAR FRANKLIN NY 13775 **GENERAL** 0. FRANKLIN STAGE CHAPEL HALL FRANKLIN 13775 CHAR GENERAL 0. FRANKLIN CONGREGATIONAL MAIN ST FRANKLIN NY 13775 CHAR GENERAL 0. FRANKLIN FIRE DEPT MAIN ST FRANKLIN NY 13775 CHAR **GENERAL** 0. 3 a **Total** 0. b Approved for future payment 3 b Total

Part XVI Analysis of Income-Producing Activities

Enter gros	ss amounts unless otherwise indicated.	Unrelate	ed business income	Exclude	d by section 512, 513, or 514	
1 Pro	gram service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
					······································	
						
d						
				L		
f				<u>. </u>		<u></u>
	s and contracts from government agencies			 		ļ <u></u>
	nbership dues and assessments					<u> </u>
	est on savings and temporary cash investments			14	1,811.	
	dends and interest from securities rental income or (loss) from real estate:			Bis - 2010	March Sales Comment of the State of the Stat	度 のなって、
	t-financed property	Lens or with a		E. (1773)	Kalana ann y Kalan yak	Barrier and the second
	debt-financed property	i				
	ental income or (loss) from personal property			<u> </u>		
	er investment income			<u> </u>	·	
	or (loss) from sales of assets other than inventory			1	····	
	income or (loss) from special events		· · · · · · · · · · · · · · · · · · ·	<u> </u>		
	ss profit or (loss) from sales of inventory .					
11 Oth	er revenue:	STATE OF THE STATE	RESERVE TO THE RESERV		の言語を対すること	Committee but as well
a				ļ		
		<u></u>		ļ		
		ļ		_		<u> </u>
				 		
. e				Participan	1 011	<u> </u>
40 0 1						
13 Tot	al. Add line 12, columns (b), (d), and (e)					
13 Tot (See worl	al. Add line 12, columns (b), (d), and (e) ssheet in line 13 instructions to verify calculation	ns.)		•	13	
13 Tot (See worl	al. Add line 12, columns (b), (d), and (e)	ns.)		•	13	
13 Tot (See worl	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.
13 Tot (See work Part*X\ Line No	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.
13 Tot (See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alient Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.
13 Tot (See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alient Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.
13 Tot (See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alient Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.
13 Tot (See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alient Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.
13 Tot (See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alient Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.
13 Tot (See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alient Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.
13 Tot (See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alient Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.
13 Tot (See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alient Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.
13 Tot (See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alient Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.
13 Tot (See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alient Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.
13 Tot (See work Part X\ Line No	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alient Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.
13 Tot (See work Part*X\ Line No	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alient Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.
13 Tot (See work Part*X\ Line No	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alient Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.
13 Tot (See work Part*X\ Line No	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alient Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.
13 Tot (See work Part*X\ Line No	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alient Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.
13 Tot (See work Part*X\ Line No	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alient Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.
13 Tot (See work Part*X\ Line No	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alient Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.
13 Tot (See work Part*X\ Line No	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alient Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.
13 Tot (See work Part*X\ Line No	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alient Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.
13 Tot (See work Part*X\ Line No	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculation Alient Relationship of Activities to the Explain below how each activity for which incaccomplishment of the foundation's exempt	ns.) Accompli	shment of Exempt	Purpo	ses	1,811.

Form 990-PF (2010) WALTER RICH CHARITABLE FOUNDATION 16-1515001 Part:XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

rei a Tra (1) (2) b Ot (1) (2) (3) (4) (5)	ating transfers Cash Othe her tra Sale Purc Rent Reim Loan	er assets ensactions: es of assets to a n hases of assets fi al of facilities, eq hbursement arrang es or loan guarant ormance of service	rations? Ing found: Oncharitation a not uipment, gements ees es or me	ation to a i	noncha 	arıtable	e exemp	ot organiz	zation of:	her orga	anization s	n 527,			1a (1) 1a (2) 1b (1) 1b (2) 1b (3) 1b (4) 1b (5) 1b (6)	Yes	X X X X X X
	the and good y trans	of facilities, equip swer to any of the is, other assets, o saction or sharing (b) Amount involved	e above is or service i arrange	_	mplete the re	e the fo eporting	ollowing found the v	schedul ation. If alue of th	e Colum(the founda ne goods,						arket value tet value in d. d sharing arra		ts
					_												
									1				-			-	
	\dashv								 				····				
									 								
																	
									 								
_	-								<u> </u>								
									1								
		· — ·													<u>-</u>		
_									<u> </u>								
de	scribe	undation directly of d in section 501 (of complete the follo	c) of the (Code (othe	ed with er than	i, or rel i sectio	lated to n 501(d	, one or (3)) or	more tax- n section	exempt 527?	organiz	zatior			Yes	x	No
		Name of organiz				(b) Typ	e of or	ganizatio	n		(0) De	scripti	on of re	elationship		
			-						_								
	<u>-</u>																
		·															
Sign	Under p correct,	enalties of perjury, I de and complete Declarat	clare that I to	have examined arer (other that	d this rei n taxpay	turn, inclu er or fidu	iding acco iciary) is t	ompanying s pased on all	schedules an information	d statemer of which pi	nts, and to reparer ha				ge and belief,	it is true	•
Here	<u> </u>	nature of officer or trust	tee						() [Date	0 100	rt		TRUS	TEE			
	<u>-</u>	Print/Type preparer's			F	repart	signature			Date	<u>.</u>	-	Check if	ıf	PTIN		
Paid		SCHLATHER	& BIRC	H	_].	A ST		A		08/0	6/11	- I	elf-emp	ш.			
Prepai	rer	Firm's name		THER &	BIR	он							s EIN P				
Use O		Firm's address		AIN ST			91										
	·	i iiii s address	COOPE	RSTOWN			_		NY 13	326		Phon	е по.	(607	7) 547-		
DΛΛ															Form 90	O.PF	(2010)

Form **4562**

Depreciation and Amortization (Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

2010

OMB No 1545-0172

Attachment Sequence No

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

WALTER RICH CHARITABLE FOUNDATION

Identifying number 16-1515001

Busine	ess or activity to which this form relate	es	· <u>·</u>					-1313001
	m 990-PF page 1			x				
Pai	Election To Exp Note: If you have an	ense Certain F ny listed property,	Property Under Sec complete Part V before	tion 179	Part I.			
1	Maximum amount (see ins		<u> </u>				1	Î
2	Total cost of section 179 p	roperty placed in s	service (see instructions				2	
3	Threshold cost of section 1						3	
4	Reduction in limitation, Su						4	
5	Dollar limitation for tax year	r Subtract line 4	from line 1. If zero or le	see ofter 0 If	married fil	ına	<u> </u>	
	separately, see instruction	s				g	5	
6_	(a)	Description of property		(b) Cost (business	use only)	(C) Elected cos	t	y a r
	 							to real state of the state of t
				<u></u>				
7	Listed property. Enter the	amount from line 2	29		. 7			The state of the s
8	Total elected cost of section	n 179 property. A	dd amounts in column ((c), lines 6 and 7	' . 		8	
9	Tentative deduction. Enter						9	
10	Carryover of disallowed de				•		10	
11	Business income limitation	. Enter the smalle	r of business income (r	ot less than zer	o) or line 5	(see instrs)	11	
12	Section 179 expense dedu					· · ·	12	
13					▶ 13			
	: Do not use Part II or Part							····
Par	t II 🙀 Special Depreci	<u>ation Allowand</u>	ce and Other Depre	eciation (Do no	t include I	isted property)	(See	instructions.)
14	Special depreciation allows	ance for qualified (property (other than list	ed property) pla	ced in ser	vice during the		
	tax year (see instructions)				• • •		14	
15	Property subject to section						15	
_16	Other depreciation (includi	ng ACRS)					16	
Pai	till∰ MACRS Depred	iation (Do not in	clude listed property) (See instructions)	<u> </u>			
			Sectio	n A				
17	MACRS deductions for ass	ets placed in serv	ice in tax years beginni	ng before 2010.			17	33,231.
18	If you are electing to group asset accounts, check here	any assets place	d in service during the	tax year into one	or more	general	غر پارس مدر دو	the state of the s
	Section B	- Assets Placed	in Service During 2010	Tax Year Using	the Gener	al Depreciation	Syste	em
	(a) Classification of property	(b) Month and year placed in service	(C) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f)		(g) Depreciation deduction
19a	3-year property					Ī		
	5-year property							
	: 7-year property				*			
	10-year property							
	15-year property .							
	20-year property				1		•	
	25-year property			25 yrs	1	S/L		
	Residential rental			27.5 yrs	MM	S/L		
•	property			27.5 yrs	MM	S/L		
	Nonresidential real	06/11	3,354.	39 yrs	MM	S/L		
'	property	06/11	3,334.	J9 YIS				4.
	<u> </u>				MM	S/L		<u> </u>
		- Assets Placed in	Service During 2010 T	ax Year Using th	ie Alterna		n Sys	stern
	Class life				 	S/L		
	12-year			12 yrs	 	S/L		ļ
	40-year		<u></u>	40 yrs	MM	S/L		
	t.IV蘇 Summary (See in					<u>-</u>	- +	
21	Listed property. Enter amo						21	
22	the appropriate lines of your retur	n. Partnerships and S o	corporations — see instruction	s <u>.</u>	e and on		22	33,235.
23	For assets shown above at the portion of the basis att	nd placed in service	ce during the current ye	ar, enter	23			

Form 990-PF, Page 1, Part I, Line 18

Line	18	Stmt	
Line	10	Simi	

Taxes (see the instructions)	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb_
PROPERTY EXCISE	2,810.	17.	2,810.	0.
Total	2,827.	17.	2,827.	0.

Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Fees	427.		167.	260.
Insurance	15,715.		1,270.	14,445.
Property Maintenance	3,602.		600.	3,002.
Utilities	13,249.		698.	13,947.

Total <u>32,993.</u> <u>2,735.</u> <u>31,654.</u>

Form 990-PF, Page 6, Part VIII, Line 1 Information about Officers, Directors, Trustees, Etc.

			
(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 account, other allowances
1.00		0.	0.
		ļ	
			•
			0.
 האלבה / האלבה			
	0.	0.	0.
TRUSTEE			
1.00	0.	0.	٥.
	Title, and average hours per week devoted to position TRUSTEE 1.00 TRUSTEE 1.00 TRUSTEE 3.00	Title, and average hours per week devoted to position TRUSTEE 1.00 TRUSTEE 1.00 TRUSTEE 3.00 TRUSTEE 3.00 TRUSTEE 3.00 O.	Title, and average hours per week devoted to position TRUSTEE 1.00 TRUSTEE 1.00 TRUSTEE 3.00 TRUSTEE 3.00 Compensation (If not paid, enter -0-) enter -0-) to employee benefit plans and deferred compensation 0. 0. 0. TRUSTEE 1.00 0. 0.

Total

0.	0.	Q.

Form 990-PF, Page 1, Part I Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Schlather & Birch Gruver & Scott	Return Preparation CPA Review	1,000. 2,000.			

Total

3,000.

Form 990-PF, Page 1, Part I

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Robert E Colucci	Management	6,000.			

Total

6,000.

Form 990-PF, Line 19

Allocated Depreciation

Description	Date Acquire	Cost or Basis	Prior Yr. Depr	Mthd	Lıfe	Current Depr	Net Invest Income	Adjusted Net Income
Land & Building	12/31/01	138000	24092	SL	39.00	2821		
Improvements	03/01/02	78157	16617	SL	39.00	2004		
Improvements	12/01/02	8547	1643	SL	39.00	219		
Improvements	07/01/03	3900	696	SL	39.00	100		
Improvements	11/11/04	9100	1311	SL	39.00	233		
Improvements	09/15/06	2378	231	SL	39.00	61		
Museum Building	06/30/08	923183	48328	SL	39.00	23671		
Museum Building	06/30/09	142404	3803	SL	39.00	3651		
Museum Building	06/30/10	18350	20	SL	39.00	471		
Museum Building	06/30/11	3354		SL	39.00	4		

Total

Form 990-PF, Page 2, Part II, Line 14

L-14 Stmt

Line 14b - Description of Land, Buildings, and Equipment	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value
Office Building	138,000.	26,913.	111,087.
Improvements	_78,157.	18,621.	59,536.
Improvements	8,547.	1,862.	6,685.
Improvements	3,900.	796.	3,104.
Improvements	9,100.	1,544.	7,556.

Form 990-PF, Page 2, Part II, Line 14 L-14 Stmt

Continued

Line 14b - Description of Land, Buildings, and Equipment	(a) Cost/Other Basis	(b) Accumulated Depreciation	(c) Book Value	
Improvements	2,378.	292.	2,086.	
Museum Building	923,183.	71,999.	851,184.	
Museum Building	142,404.	7,454.	134,950.	
Museum Building	18,350.	491.	17,859.	
Museum Building	3,354.	4.	3,350.	
Total	1,327,373.	129,976.	1,197,397.	

Form 990-PF, Page 2, Part II, Line 15 Other Assets Stmt

	Beginning	End of Year		
Line 15 - Other Assets:	Year Book Value	Book Value	Fair Market Value	
Warwick railcar (purchased for renovation & donation)	150,986.	154,174.	154,174.	
Robert F Harding railroad memorabilia collection	82,603.	82,603.	82,603.	
Total	233,589.	236,777.	236,777.	