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

Depa	rtment c	of the Treasury		Treate	d as a Private I	oundatio	n		2010
Interr	al Reve	nue Service		he foundation may be able			state reporting	requirements	
For	calend	ar year 2010, or t	tax year beginning		· · · · · · · · · · · · · · · · · · ·	30/11	· · · · · · · · · · · · · · · · · · ·	<del></del>	
G C	check a	all that apply	Initial return Amended re		turn of a former publi ress change	·	ne change	Final return	
Na	me of fo	oundation	1 / Tunenaca to	7,00	reso analigo	1 1 114	A Emp	oyer identification numl	ber
			ck Memori	al Fund	<u> </u>	Room/suite		hone number (see page 1-7-865-4126	0 of the instructions)
_P	0 1	Box 389					C If exe	mption application is pend	ing, check here
	y or tow alto	n, state, and ZIP cod	le	NY 13856			1 .	reign organizations, check preign organizations meetir	<u> </u>
H C	heck t	ype of organizatio	n X Section 50	11(c)(3) exempt private	foundation		1	% test, check here and at	
	Section	1 4947(a)(1) none	xempt chantable tru	ıst Other taxabl	e private foundation		E If priv	ate foundation status was	terminated under
I Fa	air marl	ket value of all ass	sets at J	Accounting method	X Cash A	ccrual	section	on 507(b)(1)(A), check here	▶
er	nd of ye	ear (from Part II, c		Other (specify)			1	foundation is in a 60-mont	
lin	ie 16) I	<b>\$</b>	734,974 (F	art I, column (d) must b	e on cash basis)		under	section 507(b)(1)(B), che	ck here
· Pa	art I	amounts in column		y not necessanly equal	(a) Revenue and expenses per books	1 ''	investment	(c) Adjusted net income	(d) Disbursements for charitable purposes
	т		lumn (a) (see page 11						(cash basis only)
	1		, grants, etc , received	•				* * *	
	2			required to attach Sch. B	2 1	20	2 102		
	3		gs and temporary		2,18 18,75	_	2,182 18,754	<del> </del>	
	4		iterest from securiti	es	10,73	<del>                                      </del>	10,754		, , , ,
	5a	Gross rents	o or (loss)					-	Î,
ne	6a	Net rental incom	sale of assets not on line 1	0 Stmt 1	-19	97			
en/	b	Gross sales price for al		252,960	-	,			
Revenue	7	•	income (from Part				0		
	8	Net short-term ca	•	v, 2,		-		0	
	9	Income modifica							·
	10a	Gross sales less re	eturns & allowances	]			ı	,	+ 1-
	ь	Less Cost of go	ods sold						, ,
	С	Gross profit or (le	oss) (attach schedi	ıle)					,
	11	Other income (at	ttach schedule)	Stmt 2	12	24			
	12	Total. Add lines	1 through 11		20,80		20,936	0	1
es	13	Compensation o	f officers, directors	trustees, etc	1,38	36	139	<u> </u>	1,247
Se	14	Other employee	salaries and wage	S					
en en	15		mployee benefits						
X	16a	Legal fees (attac		Q++ 2					
ē	b	-	(attach schedule)	Stmt 3	3'	/5	38		337
Ę	C C		fees (attach schedule	)		_			<u> </u>
žť	17	Interest	·) ( 4.4 -6.6b	uctions) Stmt 4	1,9	5.6			
Ë	18,79,70		e) (see page 14 of the thist th schedule) and deple	•	1,3.	-		<u></u>	
Έ	50	Occupancy	ir scriedule) and depie	etton		<u> </u>			
¥	21	• •	ces, and meetings					•	
nd	22	Printing and pub	_						_
e D	23	Other expenses (att. sc		Stmt 5		1			1
Operating and Administrative Expens	21 22 23 24 22 25 26		and administrativ				•		
ā	3	Add lines 13 thro			3,7:	L8	177	0	1,585
þe	25	Contributions g	चिक्ष हेल्किए <u>भी</u>	71	26,20			* * * * * * * * * * * * * * * * * * * *	26,200
		Total expenses	and disbursements.	Add lines 24 and 25	29,9:	L8	177	0	27,785
(	.27 ≹ a	Subtract-line 26	from line 122012 de over expenses a	lol .	-9,0!	55	-4	, , , , ,	- , (
`	b	Net investment	income (if negativ	e, enter (0-)	,		20,759		
	С	Adjusted net in	e me lin hegative	enter-0-)				0	

6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Form 990-PF (2010)

547,614

6

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

Part VI instructions on page 18

		6254479					P	age 4
<b>P</b> Ra	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948-	—see page 18 of	the in	struct	tions)			
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A	N" on line 1.	ר ו					
	Date of ruling or determination letter: (attach copy of letter if necessary—s	ee instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		- ►l	1				415
	here ▶ and enter 1% of Part I, line 27b			ì				
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of		<b>-</b> ↓					
	Part I, line 12, col (b)							
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter	er -0-)	Į	2				0
3	Add lines 1 and 2		Į	3				415
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter	er -0-)	L	_4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			5				415
6	Credits/Payments.		ĺ					
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a		87					
b	Exempt foreign organizations—tax withheld at source 6b							
C	Tax paid with application for extension of time to file (Form 8868)							
d	Backup withholding erroneously withheld 6d							
7	Total credits and payments Add lines 6a through 6d		Į	7				87
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		Į.	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		▶ [	9			,	328
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		▶ [	10				
11	Enter the amount of line 10 to be Credited to 2011 estimated tax ▶	Refunded	<b></b>	11				
. Pa	TrttV∏-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?					1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see p	age 19						
	of the instructions for definition)?					1b		<u> </u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mai	tenals						
	published or distributed by the foundation in connection with the activities							
С	Did the foundation file Form 1120-POL for this year?					1c		<u> </u>
d								
	(1) On the foundation. ▶ \$ (2) On foundation managers ▶ \$			_				
0	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax in	mposed						
	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 instrumer							
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	ges				3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			_	/_	<u>4a</u>		X
þ	If "Yes," has it filed a tax return on Form 990-T for this year?			]	N/A	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					i		
	By language in the governing instrument, or							
	By state legislation that effectively amends the governing instrument so that no mandatory direction	ns 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 Par	t II, col (c), and Pa	art XV	,		7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the					l		
	instructions) NY							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney C	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 494	=: : :						
	4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV	on page						
	27)? If "Yes," complete Part XIV					9		<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule list	ing their						
	names and addresses					10		X

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Form 990-PF (2010)

_	1990-PF (2010) Dr. Abel E Peck Memorial Fund		254479			P	age 6
<u> Pa</u>	art VII-B Statements Regarding Activities for Which Form 4	720 May Be Re	quired (contir	nued)	T	- 155.00	Leeun
5a	During the year-did the foundation pay or incur any amount to:						
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 49)			Yes X No			
	(2) Influence the outcome of any specific public election (see section 4955), or to	carry on,				36	
	directly or indirectly, any voter registration drive?		<u> </u>	Yes X No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?		X	Yes   No			3
	(4) Provide a grant to an organization other than a chantable, etc., organization d			(EE)	order +	<b>/</b>	4
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instru	•		Yes 🗓 No		1	1
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or o	educational					*
	purposes, or for the prevention of cruelty to children or animals?			Yes X No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under				- 55	155	2
	Regulations section 53 4945 or in a current notice regarding disaster assistance (		nstructions)?	. 쓴	5b	*SAH	X
	Organizations relying on a current notice regarding disaster assistance check here			▶ ∐			
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from	the tax	N7 / N	. —		1334	<b>*</b> 0:
	because it maintained expenditure responsibility for the grant?		N/A	Yes   No		<b>38</b>	
_	If "Yes," attach the statement required by Regulations section 53 4945-5(d)					靈	
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay	premiums		🖘		1	
	on a personal benefit contract?			Yes X No	Will !		47.1
р	Did the foundation, during the year, pay premiums, directly or indirectly, on a pers	onal benefit contract	17		6b		X
	If "Yes" to 6b, file Form 8870			Yes X No	121	Z <sub>y</sub> s	**
7a	At any time during the tax year, was the foundation a party to a prohibited tax she						- F
D D	If Yes, did the foundation receive any proceeds or have any net income attributable art VIII Information About Officers, Directors, Trustees, Foundation			N/A	7b		
	and Contractors	inuation manag	jers, nigiliy F	ald Employee	5,		
1 1	ist all officers, directors, trustees, foundation managers and their compensa	tion (see page 22 o	f the instruction	2)			
	and an officer of a factor of the analysis and and the compensation		l	(d) Contributions to	T		
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	employee benefit		pense a	
	(4)	devoted to position	-0-)	plans and deferred compensation	other	r allowa	nces
Na	tional Bank of Delaware County Walton	Trustee					-
	D Box 389 NY 13856	1.00	1,386	: .	,		0
				1	1		
	· · · · · · · · · · · · · · · · · · ·			-	1		
2	Compensation of five highest-paid employees (other than those included or	line 1 — see page	23 of the instruc	ctions).			
	If none, enter "NONE."						
		(b) Title, and average		(d) Contributions to			
	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Exp	pense a r allowa	
		devoted to position		compensation			
NC	NE						
					<u> </u>		
					<del> </del>		
					<u> </u>		
					<u> </u>		
Tota	I number of other employees paid over \$50,000						0

Form 990-PF (2010) Dr. Abel E Peck Memorial Fund	16-6254479	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundand Contractors (continued)	ation Managers, Highly Paid Employ	
3 Five highest-paid independent contractors for professional services (see page 2	3 of the instructions). If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		:
Total number of others receiving over \$50,000 for professional services	<b>&gt;</b>	·
Part IX-A Summary of Direct Charitable Activities		· · · · · · · · · · · · · · · · · · ·
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical organizations and other beneficianes served, conferences convened, research papers produced, etc.	information such as the number of	Expenses
1 Award scholarships to qualified students Central School District in Walton, NY	of the Walton	27,785
2		27,703
3		
4		
Dot IV D. I. Common of Decree Deleted Investments (see more	24 of the instructions)	
Part IX-B   Summary of Program-Related Investments (see page Describe the two largest program-related investments made by the foundation during the tax year on line		Amount
1 N/A	3 Tuliu 2	Amount
2		
•		
All other program-related investments See page 24 of the instructions 3		

Total. Add lines 1 through 3

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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6

Enter 1% of Part I, line 27b (see page 26 of the instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

	990-PF (2010) Dr. Abel E Peck Mem rt XIII Undistributed Income (see page 2		16-625447	9	Page 9
_ Fa	It Ail   Ondistributed income (see page 2	<u> </u>		<del>- ,</del>	
4	Distributable amount for 2010 from Part XI,	(a) Corpus	(b) Years pnor to 2009	(c) 2009	(d) 2010
1					35,231
•	Undistributed income, if any, as of the end of 2010				
2	·		_	34,731	
_	Enter amount for 2009 only			34,731	
b	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2010				
a	From 2005				
b	From 2006				
C	From 2007				
d	From 2008				
	From 2009		-	}	
	Total of lines 3a through e	-			
4	Qualifying distributions for 2010 from Part XII,				
	line 4 ▶ \$ 27,785		_	07 705	
	Applied to 2009, but not more than line 2a		<u> </u>	27,785	<del>_</del>
b	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)				
d	Applied to 2010 distributable amount		ļ		
0	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2010				
	(If an amount appears in column (d), the same			Ì	
	amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:		-[		
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
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				
0	Undistributed income for 2009 Subtract line				
	4a from line 2a Taxable amount—see page				
	27 of the instructions			6,946	
f	Undistributed income for 2010 Subtract lines			ł	
	4d and 5 from line 1. This amount must be				
	distributed in 2011				35,231
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the			j	
	instructions)		-		
8	Excess distributions carryover from 2005 not				
	applied on line 5 or line 7 (see page 27 of the				
	instructions)	·			
9	Excess distributions carryover to 2011.				
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9.				
а	Excess from 2006				
þ	Excess from 2007				
C	Excess from 2008				
d	Excess from 2009				
е	Excess from 2010	I	ı	1	

See Statement 10

Supplementary Information (co 3 Grants and Contributions Paid During the		ture Payment		
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
·	show any relationship to any foundation manager	status of recipient	contribution	Amount
Name and address (home or business)  a Paid during the year  Daniel Gehl & SUNY Bing	or substantial contributor	Scł	olarship	6,000
Daniel Gehl	None	Personal	Expenses	800
Cheryl DuMond & Cornell U	None	Scl	olarship	2,500
Cheryl DuMond	None	College	Expenses	400
Anthony Mead	None	Personal	Expenses	800
Anthony Mead & Baylor U	None	Scł	olarship	6,000
Kristen Wood & Hartwick C	None	Sch	olarship	6,000
Kristen Wood	None	Personal	Expenses	800
Cori O'Connor & Kings Col	None	Sch	olarship	2,500
Cori O'Connor	None	Personal		400
Total	<del></del>	1	▶ 3a	26,200
b Approved for future payment N/A				
Total			▶ 3b	

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Part XVI-A		<u>tivities</u>			····	
Enter gross amo	ounts unless otherwise indicated	Unrelate	d business income	Excluded	by section 512, 513, or 514	(e)
•		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of
1 Program ser				_		the instructions )
a				_		
	<del></del> -					<del></del>
	<del></del>	-				
a		-				
		-		+		<del></del>
f	<del>,</del>	- <del> </del>				
_	d contracts from government agencies					<del> </del>
•	dues and assessments			1 4 4	0.101	
	avings and temporary cash investments		· · ·	14	2,181	1
	nd interest from securities			14	18,754	
	come or (loss) from real estate	-				
	anced property					
	t-financed property					·
	come or (loss) from personal property					
7 Other investi						105
•	s) from sales of assets other than inventory	-				-197
	or (loss) from special events	<del></del>		<del> </del>		
	or (loss) from sales of inventory	-				
11 Other revenu	<del> </del>	-		14	1.0	
	of America litigation	-		14	16	
	ral tax refund	-		14	108	<del></del>
		-		+		
9		- }		0	21 050	106
	d columns (b), (d), and (e)	L		<u> </u>	21,059	-196 20, 863
	ne 12, columns (b), (d), and (e)	>			13	20,863
Part XVI-B	Relationship of Activities to the A		nt of Evennt D	ITDOOO		
	, .	-				<del></del> -
Line No. ▼	Explain below how each activity for which income accomplishment of the foundation's exempt purpo	•				he
•	instructions)	oses (outer than b	y providing lands for	Judii pui pu	ses) (oce page 25 or a	
N/A	,			•		
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Form 99	90-PF (201	o) Dr.	Abel	E Pec	k Memoria	l Fund	16-6254479	1	Pa	ge <b>13</b>
Part			_	-	ansfers To and	d Transaction	s and Relationships Wi	h Noncharitable		
			Organiza							
	•		-		-	- •	er organization described	į	Yes	No
		• •	Code (other	than section	on 501(c)(3) organi	zations) or in sect	ion 527, relating to political		j	
	rganızation								•	
		m the repo	orting founda	ation to a no	oncharitable exemp	t organization of.		<del></del>		
•	l) Cash							1a(		X
•	?) Other as							<u>1a(</u>	2)	X
	ther transa			hl				<u></u>		X
					organization	_		1b(	$\neg$	X
•	•		equipment, o		exempt organizatio	111	•	<u>1b(</u>  1b(		X
•	•		rangements	OI Olliei as:	<b>3</b> C(3			1b(		x
•	b) Loans of		•					1b(		X
•	•	•		mhershin o	r fundraising soliciti	ations		1b(		X
•	•			•	ther assets, or paid			10		X
	•		•	•	•	· •	(b) should always show the fa		<del></del>	
		-			_		e foundation received less than			
							e goods, other assets, or service			
(a) I	Line no	(b) Amou	int involved	(c) Nam	e of nonchantable exe	mpt organization	(d) Description of transfers	transactions, and sharing arrai	ngements	
N/A										
				ļ			ļ			
				ļ				<del> </del>		
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				-						
							· <del>-</del> ·	··		
2a Is	the founda	ation direct	ly or indirect	ly affiliated	with or related to	one or more tax-e	xempt organizations			
			•	~	than section 501(c		· •	П	Yes 3	No
b If	"Yes," com	plete the f	ollowing sch	edule	•	. ,,		_	_	_
		Name of or			(b) Type of	organization	(c) Des	cription of relationship		
N/	/A							· · · · · · · · · · · · · · · · · · ·		
									_	
	7									
	Under pe	nalties of per	ŋury, I declare	that I have e	examined this return, in	ncluding accompany	ng schedules and statements, and to	the best of my knowledge and	10	
Sign	beller, it is	Lin			on or preparer (outer a	I /	iary) is based on all information of w	ici proparer rias any knowledg	,.	
Here	\\ \frac{\sqrt{\sqrt{\sqrt{\color}}}{\sqrt{\color}}	- Doc	• 10 G	toals.				st Officer		
	<del></del>		er or trustee	<i>U</i>		Date Date		<del></del>	<del></del>	
Dela	Print/T	ype preparei	rs name			Preparer's signa	nure	Date	Check	
Paid	mb a		(alla	CDA		Themas E	Kalley CPA	01 /1 2 /1		mployed
Prepare		name ▶	Creat		ax Planni		Kelley, CPA Lates, Inc.	01/12/1   PTIN   P006		5
Use On	- I	address		Main S		ng Roove.	Luces, Inc.	Firm's EIN ▶ 01-07		
		2441633 F	Delhi		13753			Phone no 607-7		
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610190082 Dr. Abel E Peck Memorial Fund

**Federal Statements** 

FYE: 11/30/2011 16-6254479

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ď	Description		HOW Received				
Whom	Date	Date	Sale	Cost	Expense	Depreciation	Net Gain / Loss
Sales-no dain or loss	1		Purchase				
		ς,	212,960 \$	212,960 \$		\$	\$
FHLB called			Purchase				
	5/09/11	8/25/11	20,000	19,600			400
FHLB called			Purchase				
	4/02/10	5/26/11	10,000	9,984			16
FHLB matured			Purchase				
	6/56/09	5/16/11	10,000	10,613			-613
Total		<b>'</b>	252,960 \$	253,157 \$	0	0 \$	\$ -197

## Statement 2 - Form 990-PF, Part I, Line 11 - Other Income

Description	Revenue po Books	venue per Books	Net Investment Income	Adjusted Net Income
Bank of America litigation Federal tax refund	<b>‹</b> ›	16 108	w	٧٠
Total	<b>ν</b>	124	\$	ο       

# Statement 3 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description		Total	Inve	Net nvestment	Adjusted Net		Charitable Purpose	_
Tax Preparation Fees	ఈ	375	ۍ.	38	S	<i>.</i>	337	337
Total	S	375	w.	38	\$	S.	337	337

	•	
1/12/2012 12:42 PM	Charitable stands stand	4-5
	Adjusted Net S O O S O O O O O O O O O O O O O O O	
Federal Statements	Statement 4 - Form 990-PF, Part I, Line 18 - Taxes   Net	
	Total	
610190082 Dr. Abel E Peck Memorial Fund 16-6254479 FYE: 11/30/2011	Description NYS Filing Fees 11/30/10 Form 4720 Excise Taxes 11/30/10 Total  Description  Expenses Legal Advertising Total	

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610190082 Dr. Abel E Peck Memorial Fund	254479	-YE: 11/30/2011
610190082	16-6254479	FYE: 11/3(

### Federal Statements

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٠	Fair Market Value	\$ 266,934	\$ 266,934		Fair Market Value	\$ 371,064	\$ 371,064		Fair Market Value	\$ 40,319	\$ 40,319
ent Investments	Basis of Valuation	Cost		vestments	Basis of Valuation	Cost		ients	Basis of Valuation	Cost	
State Governme	End of Year	261,044	261,044	990-PF, Part II, Line 10b - Corporate Stock Investments	End of Year	189,913	189,913	Form 990-PF, Part II, Line 13 - Other Investments	End of Year	40,000	40,000
a - US and		   	w 	ne 10b - C		<b>တ</b>	s M	t II, Line 1	S	·ω 	ς, <sup> </sup>
Part II, Line 10	Beginning of Year	256,834	256,834	-PF, Part II, Lir	Beginning of Year	189,913	189,913	rm 990-PF, Par	Beginning of Year	78,000	78,000
Statement 6 - Form 990-PF, Part II, Line 10a - US and State Government Investments	Description	w	Ф	Statement 7 - Form 990	Description	· γ	`\$	Statement 8 - For	Description	\$	\
		Total	Total			Total	Total			CDs	Total

610190082 Dr. Abel E Peck Memorial Fund 1/12/2012 12:42 PM

16-6254479

**Federal Statements** 

FYE: 11/30/2011

### Statement 9 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

### Description

Applications available on request from Walton Central School District Guidance Department.

### Form 990-PF, Part XV, Line 2c - Submission Deadlines

Description

April 1

### Statement 10 - Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations

### Description

Scholarships awarded to qualified students of Walton Central School District, Walton, NY.

610190082 Dr. Abel E Peck Memorial Fund

16-6254479

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**Federal Statements** 

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FYE: 11/30/2011

**Taxable Interest on Investments** 

Description	 Amount	Unrelated Business Code	Exclusion Code	Postal Code	US Obs (\$ or %)
Savings CDs	\$ 739 1,442		14 14	NY NY	
Accrued Int - CD IRS	 1,442		14		
Total	\$ 2,182				

### **Taxable Dividends from Securities**

Description	 Amount	Unrelated Business Code	Exclusion Code	Postal Code	US _Obs (\$ or %)_
Dividends Govt Agency Accrued Int Pd	\$ 11,385 7,868 -499		14	NY NY NY	
Total	\$ 18,754				