

### 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 Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

		10-10-	0032
	<b>20</b>	1	2
Ope	n to pub	ic Ins	pection
Ope	I to pub	110 1113	Dec (10)

For calendar year 2012 or tax year beginning		, and ending		
Name of foundation			A Employer identificatio	n number
HENRY F. HURLBURT, III CH	LARITABLE TRUS	ľ		
BRAD GILE, TRUSTEE			02-603772	9
Number and street (or P O box number if mail is not delivered to st	reet address)	Room/suite	<b>B</b> Telephone number	
P.O. BOX 59			603-569 <u>-8</u>	400
City or town, state, and ZIP code			C If exemption application is	pending, check here
WOLFEBORO, NH 03894				F
G Check all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	ns, check here
Final return	Amended return		2 Foreign organizations m	peeting the 85% test
Address change	Name change		Foreign organizations mechanisms check here and attach of the control of the	computation
	exempt private foundation		E If private foundation st	
Section 4947(a)(1) nonexempt charitable trust			under section 507(b)(	1)(A), check here
	inting method: X Cash	L Accrual	F If the foundation is in a	
(from Part II, col. (c), line 16)	Other (specify)		under section 507(b)(	1)(B), check here
►\$ 864,749. (Part I, c	olumn (d) must be on cash b			/4\
(The total of amounts in columns (b), (c), and (d) may no necessarily equal the amounts in column (a)	t (a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received			N/A	
2 Check X if the foundation is not required to attach Sch. B				
3 Interest on savings and temporary cash investments	305.	305.		STATEMENT 1
4 Dividends and interest from securities	28,769.	28,769.		STATEMENT 2
5a Gross rents				_
Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	56,230.			
b Gross sales price for all 174,488	·			
b Gross sales price for all 174,488 assets on line 80  Capital gain net income (from Part IV, line 2)		<u>56,230.</u>		
8 Net short-term capital gain			·	
9 Income modifications Gross sales less returns				
10a and allowances				_
b Less Cost of goods sold				+
c Gross profit or (loss)  11 Other income	1,507.	1,507.		STATEMENT 3
11 Other income 12 Total. Add lines 1 through 11	86,811.	86,811.		STATEMENT 3
13 Compensation of officers, directors, trustees, etc	2,000.	2,000.	<u>"</u>	0.
14 Other employee salaries and wages	2,000.	2,000.		<del>-</del>
15 Pension plans, employee benefits				<del>-</del>
Omer 4	2,310.	2,310.	- <del>-</del>	0.
b Accounting fees		2/0200		<del> </del>
b Accounting fees  c Other professional rees IVED			-	
9 17 Interest RECEIVED				
18 Taxes 5	2,238.	2,238.		0.
19 Depigocation and depletion 2013				
17 Interest 18 Taxes 19 Deprecation and depletion 2013 CO Occupancy 20 Occupancy 21 Travel, conferences, and the etlines 22 Printing and publications				
21 Travel, conferences, and the etlings				
22 Printing and publications				
23 Other expenses STMT 6	1,003.	110.		0.
23 Other expenses STMT 6 24 Total operating and administrative expenses. Add lines 13 through 23				
expenses. Add lines 13 through 23	7,551.	6,658.		0.
25 Contributions, gitts, grants paid	41,800.			41,800.
26 Total expenses and disbursements.				
Add lines 24 and 25	49,351.	6,658.		41,800.
27 Subtract line 26 from line 12:				
Excess of revenue over expenses and disbursements	37,460.	00 17-		_
b Net investment income (if negative, enter -0-)		80,153.	5- /	<u> </u>
C Adjusted net income (if negative, enter -0-)			N/A	5 000 DE couré

HENRY F. HURLBURT, III CHARITABLE TRUST BRAD GILE, TRUSTEE

For	m 99	0-PF (2012) BRAD GILE, TRUSTEE		02-	6037729 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	
<u>-</u>			(a) Book Value	(b) Book Value	(c) Fair Market Value
	l	Cash - non-interest-bearing			<del></del>
	2	Savings and temporary cash investments	44,848.	76,147.	76,147.
	3	Accounts receivable ▶			
	١,	Less: allowance for doubtful accounts			
	4	Pledges receivable ►			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other	<del></del>		<del></del>
	١	disqualified persons			
	7	Other notes and loans receivable			
	'	Less; allowance for doubtful accounts			
Ŋ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges		<del></del>	
As	10a	Investments - U.S. and state government obligations STMT 8	13,716.	13,716.	13,728.
		Investments - corporate stock STMT 9	382,125.	390,364.	774,874.
		Investments - corporate bonds			,,,,,,,,
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis ►			
		Less accumulated depreciation			
	15	Other assets (describe)			
_	16	Total assets (to be completed by all filers)	440,689.	480,227.	864,749.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Liabilities	19	Deferred revenue		<del></del>	
Þ	20	Loans from officers, directors, trustees, and other disqualified persons			
Lia	21	Mortgages and other notes payable  Other liabilities (describe ▶ )			
	22	Other habilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
Ses	24	Unrestricted			
Net Assets or Fund Balances	25	Temporarily restricted			
Ва	26	Permanently restricted			
ဋ	1	Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
ts o	27	Capital stock, trust principal, or current funds	0.	0.	
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ä	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
Ž	30	Total net assets or fund balances	440,689.	480,227.	
			440 500	400 005	
_	31	Total liabilities and net assets/fund balances	440,689.	480,227.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	<u> </u>	-	
'		st agree with end-of-year figure reported on prior year's return)	30	1	440,689.
2		r amount from Part I, line 27a		2	37,460.
		r increases not included in line 2 (itemize)	SEE STA	TEMENT 7 3	2,791.
		lines 1, 2, and 3	DUI VIA	4	480,940.
		eases not included in line 2 (itemize)  INCOME ACCRUED	NOT RECEIVED	5	713.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		6	480,227.
					Form <b>990-PF</b> (2012)

Y

Page 3

Part IV   Capital Gains	and Los	ses for Tax on Inv	estment/	Income						
		d(s) of property sold (e.g., r common stock, 200 shs.			( <b>b)</b> I	How ac - Purc - Dona	nase	(c) Date a (mo., da		(d) Date sold (mo., day, yr.)
1a										
b SEE ATTACHED	STAT	EMENT						<del>.</del>		<del></del>
<u>C</u>					ļ					
<u>d</u>					╁					
(e) Gross sales price	(f) De	epreciation allowed	(g) Cos	t or other basis			<u> </u>	(h) Ga	aın or (loss)	<u> </u>
		(or allowable)	plus e	xpense of sale				(e) plus	(f) minus (	(g)
<u>a</u>										
_c										
d 174 400				110 05			_			F.C. 020
e 174,488. Complete only for assets show		olumn (h) and owned by th	no foundation	118,25	8.			Coupo (C	al (h) aasa	56,230.
Complete only for assets shown	1	Adjusted basis		cess of col. (I)					ol. (h) gaın ıot less thaı	
(i) F.M.V. as of 12/31/69		as of 12/31/69		col. (j), if any			_		(from col. (	
<u>a</u>										
<u>b</u>					_					
<u>c</u>				····						
<u>d</u>										56,230.
<u>e</u>							I			50,230.
2 Capital gain net income or (net c	apıtal loss)	If gain, also enter in the lift (loss), enter -0-			}	2				56,230.
3 Net short-term capital gain or (lo	ss) as defin	ed in sections 1222(5) and	1 (6):		`		ļ			
If gain, also enter in Part I, line 8					•				37/3	
If (loss), enter -0- in Part I, line 8  Part V   Qualification U		ection 4940(e) for	Reduced	Tay on Net	· Inv	3 Astn	ent Inc	ome	N/A	
										<del></del>
(For optional use by domestic private	ie iouridatioi	is subject to the section 4:	940(a) lax on	net investment ii	ICOIII	s.)				
If section 4940(d)(2) applies, leave	this part blai	nk.								
Was the foundation liable for the sec	ction 4942 ta	ax on the distributable amo	ount of any ye	ar in the base pe	rıod?					Yes X No
If "Yes," the foundation does not qua										
1 Enter the appropriate amount in	each colum	n for each year; see the ins	structions bef	fore making any e	ntries	S				(4)
(a) Base period years Calendar year (or tax year beginn	iing in)	(b) Adjusted qualifying distr	ributions	Net value of no	( <b>c</b> ) oncha	ritable:	-use assets		Dıstrıb (col. (b) dıv	oution ratio rided by col. (c))
2011		39	9,491.			82	6,864			.047760
2010			5,850.				2,204			.045253
2009			3,650.				3,668			.040364
2008			2,150.				3,668			.038565
2007		4.4	<u>4,150.</u>			94	7,554	•		.046594
2 Total of line 1, column (d)								2		.218536
3 Average distribution ratio for the	5-year base	e period - divide the total of	n line 2 by 5,	or by the number	of ye	ars				
the foundation has been in exist	ence if less t	han 5 years	• .	·	-			3		.043707
4 Enter the net value of noncharita	ıble-use assı	ets for 2012 from Part X, I	ne 5					4		841,732.
5 Multiply line 4 by line 3								5		36,790.
6 Enter 1% of net investment inco	me (1% of F	Part I, line 27b)						6		802.
7 Add lines 5 and 6								7		37,592.
8 Enter qualifying distributions fro	ım Part XII, I	ine 4						8		41,800.
If line 8 is equal to or greater tha			1b, and comp	lete that part usir	ng a 1	% tax	rate.			
See the Part VI instructions.										

HENRY F. HURLBURT, III CHARITABLE TRUST BRAD GILE, TRUSTEE 02-6037729 Form 990-PF (2012) Page 4 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions Part VI 1a Exèmpt operating foundations described in section 4940(d)(2), check here \( \bigs \) and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) 802. b Domestic foundations that meet the section 4940(e) requirements in Part V, check here \(\bigs\) and enter 1% of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-Credits/Payments: a 2012 estimated tax payments and 2011 overpayment credited to 2012 b Exempt foreign organizations - tax withheld at source 6b 802 c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 6d 802. 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here \_\_\_\_\_ if Form 2220 is attached 5. 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2013 estimated tax Refunded D 11 Part VII-A | Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in X any political campaign? 1a X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b 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. X c Did the foundation file Form 1120-POL for this year? 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0. 0. (2) On foundation managers. > \$ (1) On the foundation. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ X 2 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or Х bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 3 X 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4b X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 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 X remain in the governing instrument? Х 7 Did the foundation have at least \$5,000 in assets at any time during the year? 7 If "Yes," complete Part II, col. (c), and Part XV. 8a Enter the states to which the foundation reports or with which it is registered (see instructions) NH 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 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

Form **990-PF** (2012)

10

year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

HENRY F. HURLBURT, III CHARITABLE TRUST Form 990-PF (2012) BRAD GILE, TRUSTEE 02-6037729 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 11 X section 512(b)(13)? If "Yes," attach schedule (see instructions) 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) 12 13 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A Telephone no.  $\triangleright 603-569-8400$ 14 The books are in care of ▶ BRADFORD GILE ZIP+4 ▶03894 Located at ▶ 15 VARNEY ROAD, PO BOX 59, WOLFEBORO, NH 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here N/A and enter the amount of tax-exempt interest received or accrued during the year **▶** 15 No Yes 16 At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? 16 Х See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required Yes No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year did the foundation (either directly or indirectly): Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after Yes X No termination of government service, if terminating within 90 days.) b 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 instructions)? 1b 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 2012? 1c X 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(1)(3) or 4942(1)(5)): a At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? If "Yes," list the years 2009 2008 b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach X statement - see instructions.) 2b c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

Form **990-PF** (2012)

X

3b

4a

Yes X No

N/A

during the year?

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2012.)

had not been removed from jeopardy before the first day of the tax year beginning in 2012?

b If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

HENRY F. HURLBURT, III C	HARITABLE TRU				
Form 990-PF (2012) BRAD GILE, TRUSTEE  Part VII-B   Statements Regarding Activities for Which I	Form 4720 May Bo E		02-6037	<u>/29</u>	Page 6
	FORM 4720 May be F	sequirea (contin	uea)		
<ul><li>5a During the year did the foundation pay or incur any amount to:</li><li>(1) Carry on propaganda, or otherwise attempt to influence legislation (section)</li></ul>	n 4945(e))?	Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire	ectly,			
any voter registration drive?			s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No	ļ	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			l	
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y€	s X No	ŀ	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	, or educational purposes, or f			ļ	
the prevention of cruelty to children or animals?			s X No	ŀ	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un		n Regulations		j	
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check t			▶□□│		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f					
expenditure responsibility for the grant?		[/A	es 🔛 No 📗		İ
If "Yes," attach the statement required by Regulations section 53 494					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		es 🗓 No		
a personal benefit contract?	Otenstand benefit contract?	Y6	es LAL No	<b>C</b> L	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p If "Yes" to 6b, file Form 8870.	Dersonal Denetit Contract?		ŀ	6b	<del>  X</del> _
7a At any time during the tax year, was the foundation a party to a prohibited tax s	chalter transaction?		es X No	1	
b If "Yes," did the foundation receive any proceeds or have any net income attrib			N/A	7b	<del></del>
Information About Officers Directors Truck		nagers, Highly			
Part VIII Paid Employees, and Contractors	,		•		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
( ) Managand address	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plan and deferred	, (e)	) Expense ount, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	all	lowances
ROBERT C. VARNEY	TRUSTEE		1		
WOLFEBORO, NH 03894	1.00	0.	0	<u>. </u>	0.
CAROLYN SUNQUIST	TRUSTEE				
	1 22				
WOLFEBORO, NH 03894	1.00	0.	0	<u></u>	0.
BRADFORD W. GILE	TRUSTEE				
HOLEBODO MIL 02004	1 200	0.	_		•
WOLFEBORO, NH 03894	2.00	0.	0	<del>-</del>	0.
	-		l	ľ	
	-			Ì	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."	L		
	(b) Title and average		(d) Contributions to employee benefit plan and deferred	, (e	) Expense ount, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	' acci	ount, other lowances
NONE				1	
	1				
				1	
				ļ	
		<u>L</u>	L		
Total number of other employees paid over \$50,000		<del></del>	<u> </u>		0
			For	n <b>990-</b>	<b>PF</b> (2012)

223551 12-05-12

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	е	(c) Compensation
NONE		
		<u> </u>
		_
		-
·		
		1
Total number of others receiving over \$50,000 for professional services	<b>•</b>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the		Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		
1 <u>N/A</u>		
2		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		
1 27/ 22		
2		
		<del>-</del> .
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<b>•</b>	0.
Total Add into 1 tillough o		orm <b>990-PF</b> (2012)

Page 8

P	art X Minimum Investment Return (All domestic foundations mu	ist complete this part. F	oreign four	ndations, see	e instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable,	etc., purposes:			
а	Average monthly fair market value of securities	,, p p		1a	794,052.
b	Average of monthly cash balances			1b	60,498.
C	Fair market value of all other assets			1c	
đ	Total (add lines 1a, b, and c)			1d	854,550.
е	Reduction claimed for blockage or other factors reported on lines 1a and				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		1e	0.		
2	Acquisition indebtedness applicable to line 1 assets	•		2	0.
3	Subtract line 2 from line 1d			3	854,550.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, s	see instructions)		4	12,818.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on F	•		5	841,732.
6	Minimum investment return. Enter 5% of line 5	•		6	42,087.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and foreign organizations check here  and do not complete this part.)	(j)(5) private operating for	ındatıons an	d certain	
1	Minimum investment return from Part X, line 6			1	42,087.
2a	Tax on investment income for 2012 from Part VI, line 5	2a ]	802.		
b		2b			
C	Add lines 2a and 2b	•		2c	802.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	41,285.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	41,285.
6	Deduction from distributable amount (see instructions)			6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part X	III, line 1		7	41,285.
P	art XII Qualifying Distributions (see instructions)				· ·
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpo	oses:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	41,800.
b	Program-related investments - total from Part IX-B			1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable	e, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:				
a	Suitability test (prior IRS approval required)			3a	
b	Cash distribution test (attach the required schedule)			3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and	l Part XIII, line 4		4	41,800.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net invest				
	income. Enter 1% of Part I, line 27b			5	802.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	40,998.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years wh	en calculating whether the	foundation of	qualifies for the	e section

Form **990-PF** (2012)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,				
line 7			;	41,285.
2 Undistributed income, if any, as of the end of 2012			<del></del>	11/2001
a Enter amount for 2011 only			41,084.	
b Total for prior years:			11/001	
2009, 2008,		6,348.		
3 Excess distributions carryover, if any, to 2012:		0/3101		
<b>a</b> From 2007				
<b>b</b> From 2008				
c From 2009				
d From 2010				
e From 2011				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2012 from				
Part XII, line 4: ▶\$ 41,800.				
a Applied to 2011, but not more than line 2a			41,084.	
<b>b</b> Applied to undistributed income of prior			11/0010	
years (Election required - see instructions) *		716.		
c Treated as distributions out of corpus		, 100		
(Election required - see instructions)	0.			
d Applied to 2012 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2012	0.	·		0.
(If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		5,632.		
c 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		0.	-	
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		5,632.		
e Undistributed income for 2011. Subtract line				.,,,
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2012. Subtract				
lines 4d and 5 from line 1. This amount must		:		
be distributed in 2013				41,285.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)				
8 Excess distributions carryover from 2007				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2013.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2008				
b Excess from 2009				
c Excess from 2010				
d Excess from 2011				
e Excess from 2012				
* ሮፑፑ ሮጥልጥፑለሞ 10				Form <b>QQA_PF</b> (2012)

III CHARITABLE TRUST HENRY F. HURLBURT, Form 990-PF (2012) BRAD GILE. TRUSTEE 02-6037729 Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2012, enter the date of the ruling 4942(j)(3) or 4942(1)(5) b Check box to indicate whether the foundation is a private operating foundation described in section 2 a Enter the lesser of the adjusted net Tax year Prior 3 years (c) 2010 (b) 2011 (d) 2009(a) 2012 (e) Total income from Part I or the minimum investment return from Part X for each year listed **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 e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c 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 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 (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: 🔟 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or e-mail of the person to whom applications should be addressed: SEE STATEMENT 11 b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines:

Form **990-PF** (2012)

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Form 990-PF (2012)

Page 11

Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or Foundation show any relationship to **Amount** status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year AMERICAN RED CROSS NONE NOT FOR PROFIT GENERAL 2 MAITLAND STREET 500. CONCORD NH 03301 APPLACHIAN TEEN PROJECT NONE NOT FOR PROFIT GENERAL P.O. BOX 1597 WOLFEBORO NH 03894 1,500, BREWSTER ACADEMY NONE NOT FOR PROFIT GENERAL 80 ACADEMY DRIVE WOLFEBORO, NH 03894 3,000. CARROLL COUNTY HEALTH AND HOME NONE NOT FOR PROFIR GENERAL P.O. BOX 420 CHOCORUA, NH 03817 900. CARROLL COUNTY MENTAL HEALTH NONE NOT FOR PROFIT GENERAL 25 WEST MAIN STREET CONWAY NH 03860 500. SEE CONTINUATION SHEET(S) Total ▶ 3a 41 800 b Approved for future payment NONE Total

Part XVI-A Analysis of Income-Producing Activities

Form 990-PF (2012)

	Linrelated	business income	Evolue	ied by section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.  1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
a	Code		1000		
b					
C					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					305.
4 Dividends and interest from securities					28,769.
5 Net rental income or (loss) from real estate:					
Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal			1		
property					
7 Other investment income					1,507.
8 Gain or (loss) from sales of assets other					
than inventory	-				56,230.
9 Net income or (loss) from special events					<u>.</u>
10 Gross profit or (loss) from sales of inventory	1		1		···
11 Other revenue:					
a				<del>-</del> -	
b		· · · · · · · · · · · · · · · · · · ·	-		
C	<del>                                     </del>		+	<del></del>	
d	-				
40 Cubtotal Add calumna (b) (d) and (a)	<del>                                     </del>	0.		0.	06 011
12 Subtotal. Add loss 12 celumns (b), (d), and (e)			<u> </u>		
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)				13	00,011.
Part XVI-B Relationship of Activities t	o the Acco	mplishment of E	xemp	t Purposes	
Line No. Explain below how each activity for which inco	me is renorted in	column (e) of Part XVI-4	\ contrib	uited importantly to the accor	mnlishment of
the foundation's exempt purposes (other than			1 00111111	ated importantly to the accor	Aphonition of
INCOME FROM ALL OF THE			ISED	: (1) TO SATT	SFY THE
OPERATING AND ADMINIST					
TO MAKE DONATIONS TO V					
INSTITUTIONS OR TO WOR'					
	<del> </del>				
					-
				-	
		<del></del>			
					·=
		···	<u> </u>	<u>-</u>	
				<u></u>	
•					

Form 990-PF (2012) BRAD GILE. TRUSTEE 02-6037729 Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: Х (1) Cash 1a(1) Х (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) X (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees X 1b(5) Х (6) Performance of services or membership or fundraising solicitations 1b(6) X Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No Yes in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes." complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this return with the preparer t, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign shown below (see instr.)? Here X Yes No Signature of officer or trustee Title Date Date Check PTIN Print/Type preparer's name ıf Preparer's signature self- employed Paid /06/13 P00663096 Preparer Firm's name LEONE, MCDONNELL & ROBERTS, Firm's EIN  $\triangleright 02 - 0417217$ 

Form **990-PF** (2012)

603-569-1953

**Use Only** 

Firm's address ▶ 645 SOUTH MAIN STREET

WOLFEBORO,

NH 03894

Phone no.

٢	art IV   Capital Gains and Los	sses for Tax on Investment Income			
_		describe the kind(s) of property so rick warehouse; or common stock, 2		(b) How acquired P - Purchase D - Donation	(c) Date acquired (d) Date sold (mo., day, yr.)
1a	100 SHS DISCOV	ER FINANCIAL SER	VICES	P	07/24/0712/10/12
b	345 SHARES EXX			P	01/01/9312/10/12
c	1,000 SHS FLEE	T CAPITAL		P	06/25/0907/25/12
	300 SHS HALIBU			P	01/09/0804/10/12
		THEAST UTILITIES	<b>,</b>	P	01/01/9307/13/12
f	285 SHS PROCTO	R & GAMBLE		P	01/01/9312/10/12
g	1,000 SHS PUBL	IC STORAGE		P	09/29/0407/13/12
<u>h</u>	800 SHARES UBS	CAPITAL XII		P	01/25/0705/18/12
	800 SHS UBS CA	PITAL VIII		P	12/21/0502/22/12
	800 SHS WACHOV	IA IX		P	08/28/0706/15/12
_k	CAPITAL GAINS	DIVIDENDS			
_m					
<u>n</u>					
0				i	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		) Gain or (loss) blus (f) minus (g)
<u>a</u>	3,990.		2,615.		1,375.
<u>b</u>	30,099.		943.		29,156.
<u>c</u>	25,000.		18,041.		6,959.
<u>d</u>	9,982.		11,379.	-	
<u>e</u>			2.		18.
<u>f</u>	19,718.		1,010.		18,708.
g	25,050.		25,425.		-375.
<u>h</u>	20,000.		20,000.		0.
	20,000.	, , _ ,	20,000.		0.
<u>_</u>	20,000.		18,843.		1,157.
<u>k</u>	629.	_	<del>                                     </del>		629.
<u>+</u>					
<u>m</u>					
<u>n</u>	<u> </u>				
0	Complete only for assets showing	ı ng gain in column (h) and owned by	the foundation on 12/31/69	/I) L o	page (from pol. (h))
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess	sses (from col. (h)) of col. (h) gain over col. (k), not less than "-0-")
a	<del>-</del>				1,375.
b	·				29,156.
c					6,959.
d			1		-1,397.
e					18.
f				•	18,708.
g	•				-375.
h					0.
-			1		0.
$\overline{I}$	* ***				1,157.
k					629.
Ī					
m					
<u>n</u>					
0					
2	Capital gain net income or (net ca	apital loss) { If gain, also enter	r in Part I, line 7 0-" in Part I, line 7	2	56,230.
	•		_	_	
	If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line		)	3	N/A

02-6037729

Part XV Supplementary Informati	on			
3 Grants and Contributions Paid During th				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
CARROLL COUNTY RSVP	NONE	NOT FOR PROFIT	GENERAL	
BOX 1182				
NORTH CANWAY, NH 03860				200.
EDIENDO OD WYD LIDDY MIGDIN	L <sub>vov</sub>	TOT TOD DOORS		
FRIENDS OF THE LIBBY MUSEUM BOX 2062	NONE	NOT FOR PROFIT	GENERAL	
WOLFEBORO, NH 03894				500.
GOOD BEGINNINGS	NONE	NOT FOR PROFIT	GENERAL	
P.O. BOX 1620				700
WOLFEBORO, NH 03894				700.
GOVERNOR WENTWORTH ARTS COUNCIL BOX 1578	NONE	NOT FOR PROFIT	GENERAL	
WOLFEBORO, NH 03894				500.
HABITAT FOR HUMANITY	NONE	NOT FOR PROFIT	GENERAL	
25 ABENAUKEE DRIVE				1.500
WOLFEBORO, NH 03894				1,500.
VIDDTVIN III DOG 10				
P.O. BOX 145	NONE	NOT FOR PROFIT	GENERAL	
WOLFEBORO, NH 03894				500.
J. SNOWDONE & UNH	NONE	INDIVIDUAL	SCHOLARSHIP	
KINGSWOOD HIGH SCHOOL WOLFEBORO, NH 03894				3,500.
				3,000.
KINGSWOOD YOUTH CENTER	NONE	NOT FOR PROFIT	CENERAL.	
P.O. BOX 697	NONE			
WOLFEBORO FALLS, NH 03896				1,500.
LIFE MINISTRIES	NONE	NOT FOR PROFIT	GENERAL	
P.O. BOX 476 WOLFEBORO FALLS NH 03896				2,000.
MEALS ON WHEELS	NONE	NOT FOR PROFIT	GENERAL	
P.O. BOX 912				
WOLFEBORO NH 03894  Total from continuation sheets				500.
Total Hom continuation Silects				35,400.

BRAD GILE, TRUSTEE

02-6037729 Part XV | Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient MOUNTAIN VIEW NURSING HOME NONE NOT FOR PROFIT GENERAL 10 COUNTY FARM ROAD OSSIPEE NH 03864 500. NONE P. GIBSON & UVT INDIVIDUAL SCHOLORSHIP KINGSWOOD HIGH SCHOOL WOLFEBORO, NH 03894 3,500. PERFORM IT NONE NOT FOR PROFIT GENERAL P.O. BOX 2093 <u>500.</u> WOLFEBORO, NH 03894 S EDWARDS & KEENE STATE NONE INDIVIDUAL SCHOLORSHIP KINGSWOOD HIGH SCHOOLW 1,500. WOLFEBORO, NH 03894 T. COCHRANE & UNH NONE INDIVIDUAL SCHOLARSHIP KINGSWOOD HIGH SCHOOL WOLFEBORO, NH 03894 3 500. NONE TUFTONBORO CHRISTMAS FUND NOT FOR PROFIT GENERAL P.O. BOX 98 500. TUFTONBORO, NH 03816 TUFTONBORO HISTORICAL SOCIETY NONE NOT FOR PROFIT GENERAL P.O. BOX 372 1 000. MELVIN VILLAGE, NH 03850 TUFTONBORO LIBRARY NONE NOT FOR PROFIT GENERAL 221 MIDDLE ROAD CTR TUFTONBORO, NH 03816 1,000, NONE NOT FOR PROFIT GENERAL VILLAGE PLAYERS P.O. BOX 770 500. WOLFEBORO, NH 03894 VNA/HOSPICE CARROLL COUNTY NONE NOT FOR PROFIT GENERAL P.O. BOX 1620 WOLFEBORO, NH 03894 1,000.

Total from continuation sheets

02-6037729

3 Grants and Contributions Paid During the		<del>,</del>		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
WOLFEBORO AREA CHILDREN'S CENTER 180 SO. MAIN STREET WOLFEBORO, NH 03894	NONE	NOT FOR PROFIT	GENERAL	1,50
WOLFEBORO AREA RECREATIONAL ASSOCIATION P.O. BOX 833	NONE	NOT FOR PROFIT	GENERAL	1,30
WOLFEBORO, NH 03894				5,00
WOLFEBORO DINNER BELL P.O. BOX 359 WOLFEBORO, NH 03894	NONE	NOT FOR PROFIT	GENERAL	50
WOLFEBORO HISTORICAL SOCIETY	NONE	NOT FOR PROFIT	GENERAL	
P.O. BOX 1066 WOLFEBORO, NH 03894				1,00
WOLFEBORO LIBRARY P.O. BOX 710 WOLFEBORO, NH 03894	NONE	NOT FOR PROFIT	GENERAL	1,00
Z. MCKENZIE & NICHOLAS KINGSWOOD HIGH SCHOOL	NONE	INDIVIDUAL	SCHOLARSHIP	
WOLFEBORO, NH 03894				1,50
<del></del>				

FORM 990-PF INTEREST ON SAVINGS AT	ND TEMPORARY CAS	SH INVESTMENTS	STATEMENT 1
SOURCE			AMOUNT
PEOPLES UNITED PEOPLES UNITED BANK		•	290. 15.
TOTAL TO FORM 990-PF, PART I, LINE	3, COLUMN A		305.
FORM 990-PF DIVIDENDS AND	INTEREST FROM S	SECURITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
CEDAR FAIR FEDERATED GNMA TRUST KINDER MORGAN KINDER MORGAN ENERGY PARTNERSHIP WEDBUSH	-4. 390. 151. 126. 28,735.	-4. 0. 151. 0. 482.	0. 390. 0. 126. 28,253.
TOTAL TO FM 990-PF, PART I, LN 4	29,398.	629.	28,769.
FORM 990-PF O	THER INCOME		STATEMENT 3
DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
KINDER MORGAN CEDAR FAIR	1,4!	55. 1,455 52. 52	
TOTAL TO FORM 990-PF, PART I, LINE	11 1,50	1,507	•

FORM 990-PF	LEGAL	FEES	S	TATEMENT 4	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LEONE, MCDONNELL AND ROBERTS PEOPLES UNITED BANK	1,810. 500.			0.	
TO FM 990-PF, PG 1, LN 16A	2,310.	2,310.		0.	
FORM 990-PF	TAXES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
STATE OF NH US TREASURY	75. 2,163.			0.	
TO FORM 990-PF, PG 1, LN 18	2,238.	2,238.		0.	
FORM 990-PF	OTHER EXPENSES		STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INSURANCE BOND PROBATE COURT INVESTMENT INTEREST OTHER	65. 850. 45. 43.	0. 45.		0. 0. 0.	
TO FORM 990-PF, PG 1, LN 23	1,003.	110.		0.	

FORM 990-PF OTHER INCREASES IN	NET ASSET	S OR FU	ND BALANCES	STATEMENT	7
DESCRIPTION				AMOUNT	
DISTRIBUTION FROM MASTER LIMITED FRONTIER	2,775. 16. 2,791.				
TOTAL TO FORM 990-PF, PART III,					
FORM 990-PF U.S. AND STATE	E/CITY GOV	ERNMENT	OBLIGATIONS	STATEMENT	8
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKE	r
INVESTMENTS	x		13,716.	13,72	28.
TOTAL U.S. GOVERNMENT OBLIGATION	s	_	13,716.	13,72	28.
TOTAL STATE AND MUNICIPAL GOVERN	MENT OBLIG	RATIONS			
TOTAL TO FORM 990-PF, PART II, L	INE 10A	=	13,716.	13,72	28.
FORM 990-PF	CORPORATE	STOCK		STATEMENT	9
DESCRIPTION			BOOK VALUE	FAIR MARKET	r
INVESTMENTS		-	390,364.	774,8	74.
TOTAL TO FORM 990-PF, PART II, L	390,364.	. 774,874.			

FORM 990-PF

ELECTION UNDER REGULATIONS SECTION 53.4942(A)-3(D)(2) TO APPLY EXCESS QUALIFYING DISTRIBUTIONS TO PRIOR YEAR'S UNDISTRIBUTED INCOME STATEMENT 10

TAXPAYER ELECTED TO APPLY \$39,025 OF 2011 DISTRIBUTIONS TO 2010 UNDISTRIBUTED AMOUNT AND THE REMAINING \$725 OF 2011 DISTRIBUTIONS TO THE UNDISTRIBUTED AMOUNT OF \$7,073 FROM 2008 AND 2009.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 11

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

BRAD GILE, TRUSTEE 42 HOPEWELL POINT WOLFEBORO, NH 03894

TELEPHONE NUMBER

603-569-2299

FORM AND CONTENT OF APPLICATIONS

LETTER

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

CONTRIBUTIONS ARE MADE TO RELIGIOUS, CHARITABLE, OR EDUCATIONAL ORGANIZATIONS, OR TO WORTHY INDIVIDUALS FOR EDUCATIONAL OR OTHER CHARITABLE PURPOSES. CONTRIBUTIONS ARE GIVEN ONLY TO THOSE ORGANIZATIONS AND INDIVIDUALS WHICH ARE LOCATED IN WOLFEBORO OR TUFTONBORO, NEW HAMPSHIRE.

#### Form **8868**

(Rev January 2013)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

<ul><li>If you a</li></ul>	re filing for an Automatic 3-Month Extension, complet	te only Pa	rt I and check this box		<b>•</b>	· [X]	
<ul><li>If you a</li></ul>	re filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of t	his form).			
Do not co	omplete Part II unless you have already been granted a	an automa	tic 3-month extension on a previous	ly filed For	m 8868		
Electroni	c filing (e-file). You can electronically file Form 8868 if y	ou need a	3-month automatic extension of tim	ne to file (6	months for a corp	oration	
required t	o file Form 990-T), or an additional (not automatic) 3-moi	nth extens	sion of time. You can electronically fi	le Form 88	368 to request an e	xtension	
of time to	file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for T	ransfers A	Associated With Ce	rtain	
Personal	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details o	n the elec	tronic filing of this t	form,	
visit www	irs gov/efile and click on e-file for Charities & Nonprofits						
Part I	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies ne	eded).			
A corpora	ation required to file Form 990-T and requesting an autor	natic 6-mc	onth extension - check this box and o	complete			
Part I only	<b>/</b>		•		•	·	
	corporations (including 1120-C filers), partnerships, REM ome tax returns.	ICs, and t	rusts must use Form 7004 to reques	t an exten	sion of time		
Type or	Name of exempt organization or other filer, see instru	ctions.		Employer	identification num	ber (EIN) or	
print	HENRY F. HURLBURT, III CHAM	RITAB	LE TRUST				
	BRAD GILE, TRUSTEE			02-6037729			
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, s P.O. BOX 59	ee instruc	tions	Social se	curity number (SSN	1)	
return See instructions	City, town or post office, state, and ZIP code. For a fo	oreign add	ress, see instructions.				
	WOLFEBORO, NH 03894						
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4	
			,		•		
Applicati	on	Return	Application			Return	
Is For		Code	Is For			Code	
Form 990	or Form 990-EZ	01	Form 990-T (corporation)			07	
Form 990	P-BL	02	Form 1041-A			08	
Form 472	0 (individual)	03	Form 4720			09	
Form 990	)-PF	04	Form 5227			10	
Form 990	9-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990	P-T (trust other than above)	06	Form 8870			12	
	BRADFORD GILE						
	ooks are in the care of   15 VARNEY ROAD	, PO :	<u> BOX 59 - WOLFEBORO</u>	<u>, NH</u>	03894		
Teleph	none No. ► 603-569-8400		FAX No				
	organization does not have an office or place of busines				•	• 🗀	
<ul><li>If this</li></ul>	is for a Group Return, enter the organization's four digit	<b>-</b>					
box 🕨	. If it is for part of the group, check this box				ers the extension is	s for.	
1   re	quest an automatic 3-month (6 months for a corporation						
	-	t organiza	tion return for the organization name	ed above.	The extension		
	or the organization's return for:						
	X calendar year 2012 or						
	tax year beginning	, an	id ending		<u> </u>		
0 14 1					_		
2  ft	ne tax year entered in line 1 is for less than 12 months, o	neck reas	on. Initial return	Fınal retur	11		
	Change in accounting period						
3a  f t	nis application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069. e	enter the tentative tax, less any		<del></del>		
	nonrefundable credits See instructions 3a \$						
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and						802.	
estimated tax payments made. Include any prior year overpayment allowed as a credit  3b \$					\$	0.	
c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required,							
	using EFTPS (Electronic Federal Tax Payment System).	-		3c_	\$	802.	
	If you are going to make an electronic fund withdrawal			orm 8879-	EO for payment ins		
	or Privacy Act and Paperwork Reduction Act Notice.				Form <b>8868</b> (F		

223841 01-21-13

#### Form **8868**

(Rev. January 2013)

Department of the Treasury

# **Application for Extension of Time To File an Exempt Organization Return**

File a separate application for each return.

OMB No 1545-1709

 $\triangleright \mathbf{X}$ 

<ul><li>If you a</li></ul>	re filing for an Automatic 3-Month Extension, complet	te only Pa	rt I and check this box			▶ L	<u> </u>
• If you a	re filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of	this form).			
Do not co	omplete Part II unless you have already been granted a	an automa	tic 3-month extension on a previous	sly filed Fo	m 8868.		
Electroni	c filing (e-file). You can electronically file Form 8868 if y	ou need a	3-month automatic extension of tin	ne to file (6	months fo	r a corpora	ation
required t	o file Form 990-T), or an additional (not automatic) 3-moi	nth extens	sion of time. You can electronically f	ile Form 88	368 to requ	est an exte	ension
of time to	file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for	Transfers A	Associated	With Certa	มท
	Benefit Contracts, which must be sent to the IRS in pap	-					
visit www	urs gov/efile and click on e-file for Chanties & Nonprofits		<u> </u>				<u> </u>
Part I	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies ne	eded).			_
A corpora	ation required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and	complete		_	
Part I only						►L	
	corporations (including 1120-C filers), partnerships, REM ome tax returns.	IICs, and t	rusts must use Form 7004 to reques	st an exten	sion of time	9	
Type or	Name of exempt organization or other filer, see instru	ctions.		Employer	ıdentıficatı	on number	r (EIN) or
print	HENRY F. HURLBURT, III CHAI	RITAB	LE TRUST				
	BRAD GILE, TRUSTEE			02-603772			9
File by the due date for filing your	Number, street, and room or suite no If a P O. box, s P · O · BOX 59	ee instruc	tions.	Social se	curity numb	ber (SSN)	
return See instructions	City, town or post office, state, and ZIP code For a fo	oreign add	ress, see instructions.	·			
	WOLFEBORO, NH 03894						
			<del></del>				
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			Į	0 9
Applicati	on	Return	Application				Return
Is For		Code	Is For				Code
	or Form 990-EZ	01	Form 990-T (corporation)				07
Form 990		02	Form 1041-A				08
	20 (individual)	03	Form 4720				09
Form 990		04	Form 5227				10
	0-T (sec 401(a) or 408(a) trust)	05 Form 6069					11
	O-T (trust other than above)	06	Form 8870				12
	BRADFORD GILE					•	
• The bo	ooks are in the care of ▶ 15 VARNEY ROAD	, PO	BOX 59 - WOLFEBORO	, NH	03894		
	none No. ► 603-569-8400		FAX No. ▶				
	organization does not have an office or place of busines	s in the Ur	nited States, check this box			▶ [	
• If this	is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN)	If this is fo	r the whole	group, che	eck this
box 🕨	. If it is for part of the group, check this box	and atta	ach a list with the names and EINs o	f all memb	ers the ext	ension is fo	or.
1 I re	quest an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time	until			
	AUGUST 15, 2013 , to file the exemp	t organiza	tion return for the organization nam	ed above.	The extens	sion	
ıs f	or the organization's return for						
<b>▶</b>	X calendar year 2012 or						
<b>▶</b>	tax year beginning	, ar	nd ending				
2  ft	he tax year entered in line 1 is for less than 12 months, c	check reas	on: Initial return	Final retur	n		
	Change in accounting period						
3a If ti	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any				
	nonrefundable credits. See instructions. 3a \$			1,	<u>,690.</u>		
b If t	his application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and				
estimated tax payments made. Include any prior year overpayment allowed as a credit.  3b \$					0.		
c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required,						_	
	using EFTPS (Electronic Federal Tax Payment System)			3с	\$		<u>,690.</u>
	If you are going to make an electronic fund withdrawal			orm 8879-			
LHA F	For Privacy Act and Paperwork Reduction Act Notice,	, see instr	uctions.		Form	8868 (Rev	/. 1-2013

223841 01-21-13