

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



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

2012

OMB No 1545-0052

Department of the Treasury

			venue Service		ay be able	to use a copy of this	return to satisfy state re							
F	or	cale	ndar year 2012, o	or tax year beginning	7/01	, 2012,	and ending	6/3	0 ,	201	.3			
_								A	Employer ide			nber		
				ESERVATION INC				L	05-051			-		
	31	NO	RTH ROAD	r				В	Telephone nu			instructions)		
	FOSTER, RI 02825							-	401-647-5689					
								c	C If exemption application is pending, check here					
7	G (hec	k all that apply	Initial return	Initial	return of a forn	ner public charity	┪_				at the con-		
	•	5,100	, can that apply	Final return		ded return	pasie silainy	P	1 Foreign organ	lizatio	ons, cnec	ck nere		
				Address change		change		İ	2 Foreign organ	uzatio	ns meet	ing the 85% test, c	heck	
7	Н	Ch	eck type of orgai			xempt private f	oundation	1	here and atta	ch co	mputatio	on	►□	
	•	Γ		(1) nonexempt charitable t				E	If private four	ndatı	on status	was terminated	_	
-		Fair	market value of all a	<u> </u>		method X C		\dashv	under section				•	
		(fro	om Part II, column (c),		Other (spe		ш	F	If the foundat	ion i	sına 60	-month termination	_	
	•	\$	1,6	81,738. (Part 7		(d) must be or	r cash basis)	┪`	under section	507(b)(1)(B)), check here	►□	
Ī	Pa	rt l	Analysis of	Revenue and	(a) D	evenue and	(b) Net investme	nt.	(c) Adjus	tod	not	(d) Disburser	nents	
			Expenses (The total of amounts in		ises per books	income	5111		ome		for chari		
				c), and (d) may not neces- e amounts in column (a)		·						purposes		
			(see instruction		1							basis or	шу)	
-			Contributions, g	gifts, grants, etc, received (att sch)		26,275.								
				the foundn is not req to att Sch B										
			3 Interest on cash invest	savings and temporary		46.		46.			46.			
				interest from securities		24,107.	24,1			7/	107.			
			5 a Gross rents			24,107.	24,1	0 /		<u> , </u>	<u> 107.</u>			
		-	b Net rental incor or (loss)	me	<u> </u>									
	R	.		from sale of assets not on line 10			1			ļ	R	ECEIVE)	
	E	;	b Gross sales pre assets on line 6											
	E	:	7 Capital gain ne	et income (from Part IV, line 2)						4		1		
	N	!	_	erm capital gain						2	Mr)V 1 8 201.	דו כ	
	U		9 Income mo		<u> </u>					<u> </u>			18	
			10 a Gross sales les returns and allowances							1	\cap (SOEN U	T	
(N)			b Less Cost of		1					二		14, W		
Õ		ĺ	goods sold c Gross profit/(loss) (att sch)	 				+			 		
				me (attach schedule)					1			<u> </u>	•	
É				SEE STATEMENT 1	.	39,600.								
洏			12 Total. Add	lines 1 through 11	İ	90,028.	24,1	.53	. 2	24,	153.			
3 .				of officers, directors, trustees, etc		0.								
2				ee salaries and wages										
SCARVIII NOV		l	•	ans, employee benefits	<u> </u>		1		1			<u> </u>		
%		A	16a Legal fees (att	•	 	6 650				_	<u> </u>			
ு		M	b Accounting fee	•		6,650.				ь,	650.			
	0	N	c Other prof fee:	s (attach sch)										
2013	ě	ş		duleXsee instrs) SEE STM 3	ļ	4,964.			+		964.	 		
ω	Ř	S T R	18 Taxes (attach sche 19 Depreciation		' 	4, 904.			+	4,	504.			
	Ť	A	sch) and de	epletion		12,532.						1		
	N G	\	20 Occupancy											
		E		ferences, and meetings	<u> </u>							_		
	A N D	E		id publications enses (attach schedule)	ļ									
	D	P	23 Other expe	SEE STATEMENT 4	1	45,928.				1 /	369.	11	,096.	
		EXPENSES	24 Total opera	ating and administrative	1	43,340.	 		+	-7,	505.	 	,050.	
		Ě	expenses.	Add lines 13 through 23		70,074.				25,	983.	11	,096.	
		۱ "	25 Contributions,	gifts, grants paid										
			26 Total expe	nses and disbursements. 24 and 25										
			Add lines 2	24 and 25	 	70,074.		0	·	25,	<u>983.</u>	11	<u>,096.</u>	
				ne 26 from line 12: revenue over expenses	 		1		1					
			a Excess of and disbur	rsements		19,954.						1		
			_	nt income (if negative, enter -0)			24,1	L53						
				income (if pagative enter i0-)					T -		0.	1		

2 Enter amount from Part I, line 27a 19,954. Other increases not included in line 2 (itemize) 3 44,637. 3 SEE STATEMENT 7 4 4 Add lines 1, 2, and 3 1,198,540. 5 Decreases not included in line 2 (itemize). Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 6 6 1,198,540.

,	(a) List and describe 2-story brick warehouse	(b) How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)		
1 a	N/A				_	
ь						
C						
d						
е					<u> </u>	<u></u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal	e e	(h) Gain or (e) plus (f) m	
a						
b						<u> </u>
<u>c</u>						
d						
e		ng gain in column (h) and owned by	the foundation on 12/31/69	- 	415 Onima (Cal	
	(i) Fair Market Value as of 12/31/69	(i) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a	(1)	(i) Gains (Col gain minus column (l han -0-) or Losses (fi	k), but not less
	·					
a						
d						
		-				
2	Capital gain net income or (net	capital loss). If gain, also If (loss), en	enter in Part I, line 7 ter -0- in Part I, line 7	- 2		
3	Net short-term capital gain or (loss) as defined in sections 1222(5)	and (6)			
	If gain, also enter in Part I, line in Part I, line 8	e 8, column (c) (see instructions). If	(loss), enter -0-	- 3		
Par		Section 4940(e) for Reduce	d Tax on Net Investm	1 -		
		foundations subject to the section				
Was		his part blank N/A tion 4942 tax on the distributable ar ify under section 4940(e) Do not co		se period?	Yes	No
		n each column for each year, see the		ng any entries		
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as		(d) Distribution Distribution (b) divided	
	2011					
-	2010	· · · · · · · · · · · · · · · · · · ·				
	2009					
	2008					
	2007					
2	Total of line 1, column (d)			2		
3	Average distribution ratio for the number of years the foundation	ne 5-year base period – divide the to has been in existence if less than	otal on line 2 by 5, or by the 5 years	3		
4	Enter the net value of nonchar	itable-use assets for 2012 from Pari	t X. line 5	4		
5	Multiply line 4 by line 3			5		
6	Enter 1% of net investment inc	come (1% of Part I, line 2/b)		6	 	
7	Add lines 5 and 6					
8	Enter qualifying distributions fr			8		
	If line 8 is equal to or greater t Part VI instructions	han line 7, check the box in Part VI	, line 1b, and complete that	part using a 1	% tax rate See	the

	990-PF (2012) BORDERS FARM PRESERVATION INC 05-0512998		P	age 4
Par		s)		
	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter: $9/27/06$ (attach copy of letter if necessary – see instrs)			
	Domestic foundations that meet the section 4940(e) requirements in Part V,			N/A
	check here ► ☐ and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			
	foundations only Others enter -0-).			
_	Add lines 1 and 2			
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
_	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			
-	Credits/Payments			
	2012 estimated tax pmts and 2011 overpayment credited to 2012			
	Exempt foreign organizations — tax withheld at source 6 b			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld 6d 6d			
_	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			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11 10 ===	Enter the amount of line 10 to be. Credited to 2013 estimated tax			
·	Statements Regarding Activities		Yes	No
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	162	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1 b		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			
c	Did the foundation file Form 1120-POL for this year?	1 c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \Rightarrow 0. (2) On foundation managers \Rightarrow 0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers			
_	<u></u>	2		v
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			X
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		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		X
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?	4 b	N	/A
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			ii .
	 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	Х	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	N/A			
t	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	8 b	Х	
_				
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 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	9	X	
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names			
	and addresses	10	<u> </u>	X
BAA	, · · · —	orm 99	0-PF (2	2012)

رب ديا	g vara traducting Activities (commede)			
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 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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address N/A	=		
14	The books are in care of ► GEORGE DIXON Telephone no. ► (401) Located at ► 31 NORTH ROAD FOSTER RT FOSTER RT ZIP + 4 ► 02825	_64/	<u>-568</u>	<u>9</u>
15	Located at 31 NORTH ROAD, FOSTER, RI FOSTER RI ZIP + 4 > 02825 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	N/Ā		
13	and enter the amount of tax-exempt interest received or accrued during the year	+1/ +4		∐ N/A
	• • • • • • • • • • • • • • • • • • • •		Yes	No No
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	163	X
_	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If 'Yes,' enter the name of the foreign country ►			
Pa	Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 :	a During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(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			i
	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)?	1 b	N	/A
	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?	1 c		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))			
	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? Yes X No			
	If 'Yes,' list the years 20 , 20 , 20 , 20			
	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 statement – see instructions).	2 b	N	/A
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		ثني	
	► 20 _ , 20 _ , 20 _ , 20 _			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No			
	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, Form 4720, to		_	15
	determine if the foundation had excess business holdings in 2012)	3 b	N	/A
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		Х
	b 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 2012?	4 b		X
BA	A F	orm 9 9	0-PF	(2012)

Form 990-PF (2012) BORDERS FARM PRESE	RVATION INC	1900 11		05-051	2998	Page 6
Part VIEB Statements Regarding Activiti		14/20 May Be Req	uired (cont	inued)		,
5 a During the year did the foundation pay or incur (1) Carry on propaganda, or otherwise attemp	•	n (section 4945(e))?		Yes X	No.	
(2) Influence the outcome of any specific publ	lic election (see section			A.		
on, directly or indirectly, any voter registra (3) Provide a grant to an individual for travel,	ition drive?		H	$oldsymbol{arphi}$	No No	
(A) Provide a grant to an organization other th	nan a charitable, etc. or	roanization described	Ш	ies VI		
in section 509(a)(1), (2), or (3), or section	4940(d)(2)? (see instru	uctions)		Yes X	No No	
(5) Provide for any purpose other than religious educational purposes, or for the prevention	n of cruelty to children	or animals?		Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the excep ding disaster assistance	tions		5 b	N/A
Organizations relying on a current notice regard	5			►		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure responsible. If 'Yes,' attach the statement required by Required by Requirement required by Requirement requirement.	sibility for the grant?	·	N/A	Yes 🔲	No	
		•				
6a Did the foundation, during the year, receive ar on a personal benefit contract?				Yes X		
b Did the foundation, during the year, pay premi If 'Yes' to 6b, file Form 8870	iums, directly or indirec	tly, on a personal bene	fit contract?		6 Б	X
7 a At any time during the tax year, was the found				Yes X	No Est	
b If 'Yes,' did the foundation receive any procee					/A 7b	
and Contractors	irectors, Trustees,	roundation manag	gers, nigni	y Paid Ei	mpioyees	,
1 List all officers, directors, trustees, foundatio	n managers and their	compensation (see inst	tructions).			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contribution employee plans and compen	e benefit deferred	(e) Expense other al	e account, lowances
SEE STATEMENT 8				24.077		
		0.		0.		0.
		0.		- 0.		<u> </u>
		<u></u>				
2 Compensation of five highest-paid employees (of	ther than those included	<u> </u> on line 1 – see instructio	ns). If none, er	nter '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	(d)Contribution employee plans and compens	benefit deferred	(e) Expens other al	e account, lowances
NONE						
			ļ		_	
~~~~~~~~~			1			
		<del> </del>	<del> </del>	<del></del>		

Total number of other employees paid over \$50,000 BAA

Form,99	OO-PF (2012) BORDERS FARM PRESERVATION INC 05-05	12998 Page <b>7</b>
Part V	III Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Employees,
3 Fi	ve 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
NONE		
		<del>                                     </del>
		·
Total no	umber of others receiving over \$50,000 for professional services	0
	X-A Summary of Direct Charitable Activities	<u>-1</u>
- art i	A-A   Julillary of Direct Chartable Activities	<u> </u>
List the fo organizati	oundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ons and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
_	ONTRIBUTION OF FOOD GROWN BY ORGANIZATION TO LOCAL FOOD BANKS AND VER 100 FAMILIES.	
	<del></del>	-
		-
-		_
3 _		
_		_
4 _		_
_		-
Part I	X-B Summary of Program-Related Investments (see instructions)	
Describ	e the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1_		
<u>N</u>	7/A	_
2 _		_
_		_
All oth	er program-related investments. See instructions	<del> </del>
3		
_		
	Add lines 1 through 3	▶ 0.
BAA		Form <b>990-PF</b> (2012)

Form,990-PF (2012) BORDERS FARM PRESERVATION INC 05-0512998

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, 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	404,363.
	b Average of monthly cash balances	1 b	20,361.
	c Fair market value of all other assets (see instructions)	1 c	669,729.
	d Total (add lines 1a, b, and c)	1 d	1,094,453.
	e Reduction claimed for blockage or other factors reported on lines 1a and 1c		1,034,433.
	(attach detailed explanation)  1 e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
	Subtract line 2 from line 1d	3	1,094,453.
		<b>Ŭ</b>	1,034,433.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	16,417.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,078,036.
6		6	53, 902.
<u> </u>	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations	ting f	oundations
	and certain foreign organizations check here \( \nabla \) and do not complete this part.)		
1	Minimum investment return from Part X, line 6 N/A	1	
2	a Tax on investment income for 2012 from Part VI, line 5		
	<b>b</b> Income tax for 2012 (This does not include the tax from Part VI)		
	c Add lines 2a and 2b	2 c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	
Pe	Qualifying Distributions (see Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	11,096.
	<b>b</b> Program-related investments — total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the  a Suitability test (prior IRS approval required)	3 a	
	<b>b</b> Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	11,096.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	_	
_	Enter 1% of Part I, line 27b (see instructions)	5 6	11 000
6	Adjusted qualifying distributions. Subtract line 5 from line 4		11,096.
	<b>Note.</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the fou qualifies for the section 4940(e) reduction of tax in those years	ındatıo	n

Form **990-PF** (2012)

Part XIII Undistributed Income (see Instri	uctions)	N/A		<del></del>
	(a) Corpus	(b) Years prior to 2011	<b>(c)</b> 2011	<b>(d)</b> 2012
Distributable amount for 2012 from Part XI,	Oorpus	rears prior to 2011	2011	
line 7  2 Undistributed income, if any, as of the end of 2012.				
a Enter amount for 2011 only		ļ.		
<b>b</b> Total for prior years: 20 , 20 , 20	· -			
3 Excess distributions carryover, if any, to 2012:		-		
a From 2007				
<b>b</b> From 2008				
c From 2009			:	
d From 2010				
e From 2011				
f Total of lines 3a through e				
4 Qualifying distributions for 2012 from Part	<del></del>	+		
XII, line 4 > \$				
a Applied to 2011, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)				
<ul> <li>Treated as distributions out of corpus (Election required — see instructions)</li> </ul>				
<b>d</b> Applied to 2012 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2012				
(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				
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
<b>d</b> Subtract line 6c from line 6b Taxable amount — see instructions				
e Undistributed income for 2011. Subtract line 4a from line 2a. Taxable amount — see instructions				
f Undistributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013.				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2008	j			
<b>b</b> Excess from 2009	]			
c Excess from 2010				
d Excess from 2011	]			
e Excess from 2012				

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

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

Page 11

3 Grants and Contributions Paid During the Year or Approved for Future Payment						
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	N/A Amount		
Name and address (home or business)	substantial contributor	recipient	551101041011			
a Paid during the year	substantial contributor	recipient				
Total			► 3a			
b Approved for future payment  Total			▶ 31			

#### Pant Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated b	ousiness income	Excluded by	section 512, 513, or 514	(e)	
	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions.)	
1 Program service revenue	<b></b>	<del></del>	code			
a	ļ		<del>                                     </del>			
b			1	<del></del>		
c						
d						
e						
f						
<b>g</b> Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments			14	46.		
4 Dividends and interest from securities			14	24,107.		
5 Net rental income or (loss) from real estate						
a Debt-financed property						
<b>b</b> Not debt-financed property			16	6,605.		
6 Net rental income or (loss) from personal property				·	• •	
7 Other investment income						
8 Gain or (loss) from sales of assets other than inventory						
9 Net income or (loss) from special events.						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue						
a						
b					<u> </u>	
C						
d		<u> </u>			•	
e						
Subtotal. Add columns (b), (d), and (e)				30,758.		
13 Total. Add line 12, columns (b), (d), and (e)				13	30,758	

#### Part XVIB Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions.)
N/A	
	<del></del>
<del></del>	

# Form.990-PF (2012) BORDERS FARM PRESERVATION INC 05-0512998 Part XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

des rel: a Tra (1) (2) b Ott (1) (2) (3) (4) (5) (6) c Sh d If the	scribed atting to ansfers Cash Other train Sales Purch Reim Cannot Performant Cannot C	in section 501(c) of political organization of assets in assets of assets to a normal of facilities, equipment arranges or loan guarantee or facilities, equipment arranges or loan guarantee of facilities, equipment arranges or loan guarantee of facilities, equipment assets, or section of the assets, or section of the assets, or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or section or	of the Code (of tions? g foundation to ncharitable exem a noncharita pment, or other ements es or membershipent, mailing list above is 'Yes,' ervices given by	ble exempt organization	organization of ganization of	mn <b>(b)</b> should alw	vays show th	/alue in		X X X X X X X
	<del></del>	(b) Amount involved		of noncharitable exempt organization		(d) Description of trans			angemen	<del></del>
(a) Line N/A	110.	(D) Amount involved	(C) Name (	or monomaritable exempt organization	VIII (	u) bescription or train	orcio, u arroacut	nis, and snaring att	angemen	
N/A	-		<u> </u>			·				
	+									
			<u> </u>		<u> </u>					
		·-	-							
-										
_							·· -			
			<u> </u>							
de	escribe	indation directly or in d in section 501(c) complete the follov	of the Code (o	d with, or related to, one or r ther than section 501(c)(3)	nore tax-exei ) or in secti	mpt organizations on 527?		Ye	es X	No
		Name of organiza		(b) Type of organi	zation	(c	) Description	of relationship		
N/A										
						<u> </u>				
	Under p correct,	enalties of perjury, I decli and complete Declaration	are that I have examen of preparer (other	nined this return, including accompa than taxpayer) is based on all infor	nying schedules mation of which	and statements, and to preparer has any know	the best of my ledge	knowledge and belief	, it is true	t,
Sign Here		·			•	PRESIDENT		this ret	e IRS disc urn with t er shown structions	the below
	Signa	ture of officer or trustee		Date	/	Title			Yes	No
		Print/Type preparer's n	ame	Prepare sympature	/ ^s	Date	Check	If PTIN		
Paid		JONATHAN W	JAFFE	JONATHAN W	JAFFE	10/29/13	self-emplo	pyed P0037	<u>062</u> 6	<u> </u>
repa	rer		FARM CRED				Firm's EIN	06-0800610	)	
Jse O		-	785 HARTF		-					
			DAYVILLE,	CT 06241-1739			Phone no	860-779-5	418	
BAA								Form 9	90-PF (2	2012)

Return of Certain Excise Taxes Under Chapters 41 and 42 of the Internal Revenue Code

Department of the Treasury Internal Revenue Service

(Sections 170(f)(10), 664(c)(2), 4911, 4912, 4941, 4942, 4943, 4944, 4945, 4955, 4958, 4959, 4965, 4966, and 4967) ► Information about Form 4720 and its separate instructions is at www.irs.gov/form4720.

2012

OMB No 1545-0052

	endar year 2012 or other tax year	beginning 7/01	, 2012, and ending	6/30		, 20 13
Name of o	organization or entity			Employ	er identification	number
BORDI	ERS FARM PRESERVATION	TNC		05-0	512998	
	street, and room or suite no (or P O box if n		<del></del>			e of annual return
31 N	ORTH ROAD				rm 990	Form 990-EZ
	vn. state, and ZIP code				rm 990-PF	
FOST	ER, RI 02825				rm 5227	
						Yes No
A Is	the organization a foreign private	e foundation within the meaning of	section 4948(b)?			
вн	as corrective action been taken on a	iny taxable event that resulted in Cha	pter 42 taxes being reported o	n this form	n? (Enter	<del>                                      </del>
	I/A' if not applicable)	and the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of t	pro. 12 tando bomig reportos o		. (2	│ Lx\/xL
lf	'Yes,' attach a detailed description a	and documentation of the corrective a	ction taken and, if applicable,	enter the	fair market v	alue of any
рі	roperty recovered as a result of the o	correction • \$	N/A If 'No,' (i.e., any unc	orrected a	acts, or trans	sactions), attach
a	n explanation (see instructions)					
Part I		(Sections 170(f)(10), 664(c)	(2), 4911(a), 4912(a),	4942(a)	, 4943(a),	4944(a)(1),
	4945(a)(1), 4955(a)(1),	4959, 4965(a)(1), and 4966	(a)(1))	` '		, , , , ,
1 T	ax on undistributed income - Sch	nedule B, line 4			1	0.
2 T	ax on excess business holdings –	- Schedule C, line 7			2	0.
3 T	ax on investments that jeopardize	charitable purpose - Schedule D,	Part I, column (e)		3	0.
4 T	ax on taxable expenditures – Sch	nedule E, Part I, column (g)			4	0.
5 T	ax on political expenditures – Sci	hedule F, Part I, column (e)			5	0.
6 T	ax on excess lobbying expenditur	es – Schedule G, line 4			6	0.
7 T	ax on disqualifying lobbying expe	nditures – Schedule H, Part I, colu	ımn (e)		7	0.
8 T	ax on premiums paid on personal	benefit contracts			8	0.
	9 . 9 .	tax shelter transactions - Schedul	e J, Part I, column (h)		9	0.
10 T	ax on taxable distributions – Sch	edule K, Part I, column (f)			10	0.
11 T	ax on a charitable remainder trus	t's unrelated business taxable inco	me Attach schedule		11	0.
		nents of section 501(r)(3)-Schedule	e M, Part II, line 2		12	0.
	otal (add lines 1-12)				13	0.
Part I		elf-Dealers, Disqualified Per				lated Persons
		<u>944(a)(2), 4945(a)(2), 4955(a)(2), 4</u>		2), and 49		<del></del>
	(a) Nam	e and address of person subject to	tax		(b) Taxpaye	r identification number
	RLES BORDERS 31 NORTH	ROAD, FOSTER, RI 02	825			
b						
С	·					
	(c) Tax on self-dealing – Schedule A, Part II, col (d), and Part III, col (d)	(d) Tax on investments that jeopardize charitable purpose — Schedule D, Part II, col (d)	(e) Tax on taxable expend — Schedule E, Part II, co			olitical expenditures e F, Part II, col (d)
а						
b						
С						
Total	0.	0.		0.		0.
	(g) Tax on disqualifying lobbying expenditures – Schedule H, Part II, col (d)	(h) Tax on excess benefit transactions — Schedule I, Part II, col (d), and Part III, col (d)	(i) Tax on being a part prohibited tax shelter trans — Schedule J, Part II, co	actions		axable distributions e K, Part II, col (d)
<u>а</u>	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		. ,	<del>`</del>	<del></del> -	<del></del>
b	***************************************			<del>-  </del>		
c				<del></del>		
Total	0.	0.		0.		0.
			44	- ,0.1	(I) Total	Add columns (c)
	(k) Tax on prohibited benefits – Schedule L, Part II, col (d), and		· 大学 · · · · · · · · · · · · · · · · · ·			rough (k)
	Part III, col (d)			1		
а			是一个 <b>不</b> 多的特殊的			
b				بهنداد [		
С				<u> </u>		
Total	0.		The second second	~₹55,2 13, 3 (g t=	<u> </u>	0.
						<del></del>

1 Undistributed income for years before 2011 (from Form 990-PF for 2012, Part XIII, line 6d)
2 Undistributed income for 2011 (from Form 990-PF for 2012, Part XIII, line 6e)
3 Total undistributed income at end of current tax year beginning in 2012 and subject to tax under section 4942 (add lines 1 and 2)
3 0.

4 Tax - Enter 30% of line 3 here and on page 1, Part I, line 1

0.

4

## BORDERS FARM PRESERVATION INC 05-09 SCHEDULE C - Initial Tax on Excess Business Holdings (Section 4943)

If you have taxable excess holdings in more than one business enterprise, attach a separate schedule for each enterprise. Refer to the instructions for each line item before making any entries

Name and address of business enterprise

	<del></del>	<del></del>				<del></del>		<del></del>
		ication number			<del></del>		-	
Form	of enterpri	se (corporation,	partnership, trust, joint venture, sole	prop	rietorship, et (a Voting (profits in beneficial	stock	<b>(b)</b> Value	(c) Nonvoting stock (capital interest)
1	Foundation	n holdings in bus	iness enterprise	1_		%	%	
2 Permitted holdings in business enterprise				2		%	%	
3	Value of ex	xcess holdings in	business enterprise	3				
4	other value	xcess holdings d e of excess holdii explanation)	isposed of within 90 days, or, ngs not subject to section 4943	4				
5	Taxable ex minus line		business enterprise — line 3	5				
6	Tax - Ente	er 10% of line 5		6				
7 Total tax — Add amounts on line 6, columns (a), (b), and (c), enter total here and on Part I, line 2			7		0.			
			ces on Investments That Jeo	pardi	ze Charita	able Purp	ose (Section 4944)	
Par	₹U Inv	estments and	Tax Computation		<del></del>			
	(c) Description of investment (b) Date of investment (c) Description of investment			(d) Amount of investment		(e) Initial tax on foundation (10% of col (d))	(f) Initial tax on foundation managers (if applicable) – (lesser of \$10,000 or 10% of col (d))	
	1 2 3 4 5	(a) Enter here a	and on page 1, Part I, line 3					
			or prorated amount) here and in Par	t II. co	dumn (c) he	alow	0.	0.
Par			Liability of Foundation Man				Payments	<u> </u>
(a) Names of foundation managers liable for tax				(b)	Investment from Part I, col (a)	(c) Tax	from Part I, col (f), rorated amount	(d) Manager's total tax liability (add amounts in col (c)) (see instructions)
BAA	<del></del>					<u> </u>	<del></del>	Form <b>4720</b> (2012)

Form <b>472</b> 0			ERVATION INC			05-05	12998	Page 4
(TS)			Initial Taxes on	Taxable Exper	<u>nditures (</u>	(Section 4945)		
	Expenditures an	T	on of Tax	<del>_</del>				
(a) Item number	(b) Amount	(c) Date paid or incurred	(d) Name	and address of re	ecipient		ition of expendit ses for which ma	
$-\frac{1}{2}$ $-\frac{3}{4}$ $-\frac{4}{5}$								
(f) Qui Part	estion number from Fo VII-B, or Form 5227, I applicable to the exper	Part VI-B,	(g) Initial t	ax imposed on fou (20% of col (b))	undation	(h) Initial ta managers ( \$10,0	x imposed on for if applicable) — 00 or 5% of col	oundation (lesser of (b))
page 1, P	olumn (g) Enter here a art I, line 4					0.		
	olumn (h) Enter total (					Payments		0.
<u> Farring</u>	(a) Names of foundati			(b) Item no from Part I, col (a)	<b>(c)</b> Tax	from Part I, col (h),	(d) Manager' liability (add a col (c)) (se	s total tax amounts in
								e ilistis)
			Initial Taxes on	Political Expe	nditures	(Section 4955)	•	
(a) Item number	(b) Amount	(c) Date paid or incurred	-	of political expend	diture	(e) Initial tax impos on organization or foundation (10% of col (b))	ed (f) Initial tax managers (if (lesser of \$ 2-1/2% of	applicable) \$5,000 or
$-\frac{1}{2}$								
$\frac{-\frac{4}{5}}{}$								
	olumn (e) Enter here olumn (f) Enter total (			t II, column (c) be	low		0.	0.
Part II	Summary of Ta	x Liability of	Organization Ma	nagers or Fou	ndation I	Managers and Pi	oration of Pa	ayments
	(a) Names of org foundation ma	anization manag nagers liable for	ers or tax	(b) Item no from Part I, col (a)		from Part I, col (f), prorated amount	(d) Manager liability (add col (c)) (se	's total tax amounts in e instrs)

Form 4720	· · · · · · · · · · · · · · · · · · ·		SERVATION INC	<del></del>		05129	998 Page <b>5</b>
			Tax on Excess Lobb		-	)	
1 Exce 990-	ess of grassroots expe EZ), Part II-A, columi	enditures over grant n (b), line 1h) (S	assroots nontaxable amou ee the instructions before	nt (from Schedule C (Formaking an entry )	orm 990 or	1	
2 Exce Part	ess of lobbying expen II-A, column (b), line	iditures over lobb 1) (See the ins	ying nontaxable amount (f tructions before making ar	rom Schedule C (Form n entry )	990 or 990-EZ),	2	
<b>3</b> Taxa	able lobbying expendi	tures - enter the	larger of line 1 or line 2			3	
4 Tax	- Enter 25% of line 3	3 here and on Pa	rt I. line 6			4	0.
			es on Disqualifying L	obbying Expendit	ures (Section 4	912)	<u> </u>
Paúl.	<b>Expenditures a</b>						
(a) Item number	(b) Amount	(c) Date paid or incurred	(d) Description of lobb	oying expenditures	(e) Tax imposed organization (5% col (b))		(f) Tax imposed on organization managers (if applicable) — (5% of col (b))
$-\frac{1}{2}$		.					
$\frac{2}{3}-$		· <del> </del>			· <b></b>		
4					·	 	
5			_	<del></del>			
I otal — co	olumn (e). Enter here	and on Part I, III	ne /			0.	
Total - co	olumn (f), Enter total	(or prorated amo	unt) here and in Part II, co	olumn (c), below			0.
PartI		· · · · · · · · · · · · · · · · · · ·	Organization Manage		f Payments		<u></u>
(a) Names of organization managers liable for tax			gers liable for tax	(b) Item number from Part I, col (a)	(c) Tax from Part I, col (f), prorated amou	or	(d) Manager's total tax liability (add amounts in col (c)) (see instructions)
	SCHI	EDULE I — Init	tial Taxes on Excess	Benefit Transactio	ns (Section 49	58)	
Part I		Transactions	and Tax Computation	on			
(a) Transacti numbe	(b) Date of transaction		(c	) Description of transac	tion		
$\frac{1}{2}$							
$\frac{2}{3}$	· - <del> </del>   -						
$\frac{4}{5}$	· <u>-</u>						
(d) Amount of excess benefit			(e) Initial tax on disc (25% of c	nitial tax on disqualified persons (25% of col (d))		le) (les	ation managers sser of \$20,000 col (d))
	·					 	
BAA							Form <b>4720</b> (2012)

1011111 17 20		G IIMDHIANITON IN			03 0312330 Tage 0
	SCHEDULE I – I	nitial Taxes on Excess	Benefit Trans	sactions (Section 495	8) Continued
Part II	Summary of Tax Liab	ility of Disqualified Pe	rsons and Pro	oration of Payments	
(	(a) Names of disqualified per	rsons liable for tax	(b) Trans no from Part I, col (a)	(c) Tax from Part I, c or prorated amou	ol (e), int  (d) Disqualified person's total tax liability (add amounts in col (c)) (see instructions)
	- <del></del>				
				<u> </u>	
				<b> </b>	
Part III	Summany of Tay Liah	iliby of E01(cV2) (cV4)	8. (c)(20) Ora:	anization Managara	and Provention of Payments
rartiii					nd Proration of Payments
	(a) Names of 501(c)(3), (organization managers	s liable for tax	(b) Trans no from Part I, col (a)	(c) Tax from Part I, c or prorated amou	ol (f), nt (d) Manager's total tax liability (add amounts in col (c)) (see instructions)
			L	L	
			<b></b>	<u> </u>	
	· · · · · · · · · · · · · · · · · · ·				
			<u> </u>	<u> </u>	
				L	
	CCUEDIII E I Tour	Daine - Dashi ta	Duahihitad Ta	. Challan Transaction	1065
Part I		es on Being a Party to er Transactions (PTST)			
raiti	(see instructions)		and Tax Impo	osed on the Tax-Exer	npt Entity
(a) Transaction number		(c) Type of transaction 1 — Listed 2 — Subsequently listed 3 — Confidential 4 — Contractual protection		(d) Description of t	ransaction
1					
2					
3					
4					
5					
have rea	ne tax-exempt entity know on ison to know this transaction ST when it became a party t isaction? Answer <b>Yes</b> or <b>No</b>	to the PTST	(g) 75%	6 of proceeds attributable to the PTST	(h) Tax imposed on the tax-exempt entity (see instructions)
			<del></del>	<del></del>	
			-		
		<del></del>			<del></del>
	<del></del>	-			
Total - co	lumn (h) Enter here and on	page 1, Part I, line 9	•		0.

----

SCHEDULE L — Taxes on Prohibited Benefits Distributed From Donor Advised Funds (Section 4967).

See the instructions.

Part I	<b>Prohibited Benefits and</b>	Tax Computation		
(a) Item number	<b>(b)</b> Date of prohibited benefit		(c) Description	n of benefit
1				
2				
3				
4				
5				
<b>(d)</b> Am	ount of prohibited benefit	(e) Tax on prohibited b	penefit (125% of col (d)) tructions)	(f) Tax on fund managers (if applicable) (lesser of 10% of col (d) or \$10,000) (see instructions)
			-	
Part II	Summary of Tax Liabilit	y of Donors, Donor	Advisors, Related Pe	rsons and Proration of Payments
(a) Names of donors, donor advisor, or related persons liable for tax		<b>(b)</b> Item no from Part I, col (a)	(c) Tax from Part I, col (e) or prorated amount	(d) Donor, donor advisor, or related persons total tax liability (add amounts in col (c)) (see instructions)
Part III	Tax Liability of Fund Ma	nagers and Proratio	on of Payments	
<b>(a)</b> Na	ames of fund managers liable for tax	(b) Item no from Part I, col (a)	(c) Tax from Part I, col (f) or prorated amount	(d) Fund managers total tax liability (add amounts in col (c)) (see instructions)

### Schedule M — Tax on Failure to Meet the Community Health Needs Assessment Requirements (Section 501(r)(3)). (See instructions)

Paril	Name of Hospital Facility and Summary of Failure to Meet Section 501(r)(3)							
(a) Item Number	<b>(b)</b> Name of facility	(c) Description of the failure	(d) Tax year hospital facility last conducted a CHNA	(e) Tax year hospital facility last adopted an implementation strategy				
<del>-1</del>		· · · · · · · · · · · · · · · · · · ·						
2								
3								
4								
5								
Partl	Computation of Tax			-				
1 Numl Healt	1							
2 Tax	2 Tax - Enter \$50,000 multiplied by line 1 here and on Part I, line 12							

BAA

Form **4720** (2012)

4/20	(2012) BORDERS FARM PRESER	RVATION INC		05-051299	8 Page 10
4	Under penalties of perjury, I declare that I have exa true, correct, and complete Declaration of prepare	amined this return, including accompany r (other than taxpayer) is based on all ir	ring schedules and statements, information of which preparer ha	and to the best of my knowl s any knowledge	edge and belief it is
	Signature of officer or trustee 9.E. V	DIXON	PRESIDENT	le	// Date
	Signature (and organization or entity name if ap	plicable) of manager, self-dealer, disqua	alified person, donor, donor adv	risor, or related person	Date
Sign Here	Signature (and organization or entity name if ap	plicable) of manager, self-dealer, disqua	alified person, donor, donor adv	risor, or related person	Date
	Signature (and organization or entity name if ap	plicable) of manager, self-dealer, disqua	alified person, donor, donor adv	visor, or related person	Date
	Signature (and organization or entity name if ap	plicable) of manager, self-dealer, disqua	alified person, donor, donor adv	risor, or related person	Date
	May the IRS discuss this return with the preparer sho	own below? (see instructions)	· · · · · · · · · · · · · · · · ·		X Yes No
	Print/Type preparer's name	Preparer's signature	Date	Check If PTIN	· · ·
Paid	JONATHAN W JAFFE	JONATHAN W JAFFE	10/29/13	self-employed P00	370626
	Firm's name FARM CREDIT EAS				
Preparer Use Only	Firm's address > 785 HARTFORD PI			Firm's EIN • 06-0	800610
	DAYVILLE, CT, 0	6241-1739		Phone no 860-7	79-5418
	···				

Form **4720** (2012)

20	12

#### **FEDERAL STATEMENTS**

PAGE 1

#### **BORDERS FARM PRESERVATION INC**

05-0512998

STATEMENT 1	
FORM 990-PF, PART I	, LINE 11
OTHER INCOME	

(A) (B) NET (C)
REVENUE INVESTMENT ADJUSTED
PER BOOKS INCOME NET INCOME

RENTAL INCOME - NONINVESTMENT PROPERTY

TOTAL \$ 39,600. \$ 39,600.\$ 0.\$ 0.

#### STATEMENT 2 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES

(A) (B) NET (C) (D) INVESTMENT ADJUSTED **EXPENSES** CHARITABLE PER BOOKS INCOME NET INCOME **PURPOSES** <u>6,650</u>. ACCOUNTING FEES 6,650. TOTAL \$ 0. 0. 6,650. 6,650.

#### STATEMENT 3 FORM 990-PF, PART I, LINE 18 TAXES

(A) (B) NET (C) (D) **EXPENSES** INVESTMENT ADJUSTED CHARITABLE **PURPOSES** PER BOOKS INCOME NET INCOME 4,964. 4,964. TAXES TOTAL \$ 4,964. 4,964. \$ 0.

#### STATEMENT 4 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANK CHARGES	\$ 178.		\$ 178.	
INSURANCE	11,233.		11,233.	
INVESTMENT FEES	1,947.		1,947.	
MISCELLANEOUS EXPENSES	414.		414.	
OUTSIDE SERVICES	1,855.			\$ 1,855.
PROGRAM EXPENSES	1,588.			1,588.
RENTAL EXPENSES	20,463.			
REPAIRS AND MAINTENANCE	7,388.		161.	7,227.
SECURITY	409.		409.	
SUPPLIES	27.		27.	
WEBSITE EXPENSE	<u>426.</u>			<u>426.</u>
	TOTAL $\frac{$45,928}{}$	<u>\$ 0.</u>	\$ <u>14,369.</u>	\$ 11,096.

201	2

#### **FEDERAL STATEMENTS**

PAGE 2

**BORDERS FARM PRESERVATION INC** 

05-0512998

#### STATEMENT 5 FORM 990-PF, PART II, LINE 14 LAND, BUILDINGS, AND EQUIPMENT

CATEGORY		BASIS	 ACCUM. DEPREC.	 BOOK VALUE	F	AIR MARKET VALUE
MACHINERY AND EQUIPMENT BUILDINGS LAND	\$	11,855. 243,630. 334,126.	\$ 6,943. 54,252.	\$ 4,912. 189,378. 334,126.	\$	0. 538,355. 470,145.
TOT	AL \$	589,611.	\$ 61,195.	\$ 528,416.	\$	1,008,500.

#### STATEMENT 6 FORM 990-PF, PART II, LINE 22 OTHER LIABILITIES

SECURITY DEPOSITS

3,114.

TOTAL \$ 3,114.

#### STATEMENT 7 FORM 990-PF, PART III, LINE 3 OTHER INCREASES

NET UNREALIZED GAINS OR LOSSES ON INVESTMENTS

TOTAL \$ 44,637.

## STATEMENT 8 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
CINDY MELLOR-NEALE 31 NORTH ROAD FOSTER, RI 02825	VICE PRESIDENT 0	\$ 0	. \$ 0.	\$ 0.
RUSSELL C DANAKER 32 BURGESS ROAD FOSTER, RI 02825	TREASURER 0	0	. 0.	0.
GEORGE E. DIXON 26 NORTH ROAD FOSTER, RI 02825	PRESIDENT 0	0	. 0.	0.
THOMAS GOUCHER, JR. 89 WINSOR RD. FOSTER, RI 02825	DIRECTOR O	0	. 0.	0.

2012

### **FEDERAL STATEMENTS**

PAGE 3

#### **BORDERS FARM PRESERVATION INC**

05-0512998

STATEMENT 8 (CONTINUED)
FORM 990-PF, PART VIII, LINE 1
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION		CONTRI- BUTION TO EBP & DC	
JOHN HOWARD 780 VICTORY HIGHWAY, UNIT 2 W. GREENWICH, RI 02817	DIRECTOR 0	\$	0.	\$ 0.	\$ 0.
N. MICHAEL SULLIVAN 133 BEAVER RIVER ROAD W. KINGSTON, RI 02892	DIRECTOR 0		0.	0.	0.
HOLLY HOWARD 26 NORTH ROAD FOSTER, RI 02825	SECRETARY 0		0.	0.	0.
LINDA TIBBETTS 16 MILL ROAD FOSTER, RI 02825	DIRECTOR 0		0.	0.	0.
	TOTAL	Ĺ <u>\$</u>	0.	\$ 0.	\$ 0.