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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 2009

Open to Public Inspection

<u> </u>	For the 200	calendar year, or tax year beginning $07/01/09$, and ending 0	6/30/1	.0_		
- ,	Check if applica Address change	I IRS I	c.		D Emple	oyer identification number
	Name change	print or Doing Business As			03-	-0277640
	Initial return	type Number and street (or PO box if mail is not delivered to street address) See 480 Cadys Falls Road		Room/suite		none number 2-888-5229
	Termination	Specific City or town, state or country, and ZIP + 4		<u> </u>	G Gross rec	1 056 001
	Amended return		7			
	Application pen	F Name and address of principal officer			_ H(a) Is this	a group return for
		Scott Johnson			affiliat	
		245 Maxfield Road			H(b) Are all includ	affiliates Yes No
		Waterville VT 05492			If "No	attach a list (see instructions)
1	Tax-exempt				_	
<u>J_</u>	Website:		· · · · · · · · · · · · · · · · · · ·			exemption number
	Type of organi		L	Year of formation	1976	M State of legal domicile VT
F	Part I	Summary				
		y describe the organization's mission or most significant activities				
Ф	S	ee Schedule O				
은						
簉						
డ్డా	2 Che	sk this box ▶ 🗍 if the organization discontinued its operations or disposed of m	ore than 25°	% of its net assi	ets	
√છું.	3 Num	ber of voting members of the governing body (Part VI, line 1a)	1010 (11011 20	70 01 110 1101 4301	ј ј з ј	9
ኞ	4 Num	ber of independent voting members of the governing body (Part VI, line 1b)			4	9
<u>۾</u>	E Tota	number of employees (Part V, line 2a)			5	61
₽	6 Tota				6	69
Ă	70 Tota	number of volunteers (estimate if necessary) gross unrelated business revenue from Part VIII, column (C), line 12			7a	
	h Not	inrelated business taxable income from Form 990-T, line 34			7 b	0
$\frac{2}{2}$	b Net	inielated business taxable income nom Form 990-1, line 54		Prior \		Current Year
2	8 Con	ributions and grants (Part VIII, line 1h)			46,691	1,835,438
	9 Proc	ram service revenue (Part VIII, line 2g)			7,630	2,052
Re@@@MNED Activifies@coloniance	10 Inve	stment income (Part VIII, column (A), lines 3, 4, and 7d)		-	7,712	9,044
ď	11 Othe	r revenue (Part VIII, column (A), lines 5, 6d=8c, 9c, 10c, and 11e)			6,022	9,857
		revenue – add lines 8 through 11 (must equal Rart VIII, column (A), line 12)		1,5	68,055	1,856,391
		ts and similar amounts paid (Fait & column (A) lines 1–3)		1		
		efits paid to or for members Part IX, column (A) line 4)				
(n	4E Cala	ries, other compensation, employee benefits (Part (x) column (A), lines 5-10)		1,0	77,278	1,326,954
sesued	16a Prof	essional fundraising tees (Rart IX Column (A), line 11e				
ber	b Tota	fundraising experises (Parl IX, column (D), (Inc. 25)				
Ω̈		r expenses (Part IX column (A), Tipes 112-11d, 11f-24f)		4	76,142	477,865
		expenses Add lines 13-17 trius equal Part IX, column (A), line 25)			53,420	1,804,819
		enue less expenses Subtract line 18 from line 12			14,635	51,572
50				Beginning of C		End of Year
sets	20 Tota	assets (Part X, line 16)			<u>67,542</u>	978,837
Net Assets or	21 Tota	liabilities (Part X, line 26)			98,149	
_		assets or fund balances Subtract line 21 from line 20		4	<u>69,393</u>	520,672
F	Part II	Signature Block			<u> </u>	
		Under penalties of perjury, I declare that I have examined this return, including accompanying				
		and belief, it is true correct, and complete Declaration of preparer (other than officer) is ba	sed on all infol	mation of which p	reparer nas ar	ny knowledge
Si	gn	Jen Chron			<u> </u>	719/11
He	re	Signature of officer			Date	
		Scott Johnson	Execu	ıtive Di	rector	
_		Type or print name and title				
_		Preparer's	Date	Chec	ck if	Preparer's identifying number (see instructions)
Pa		signature h and I heldon	02/2	22/11 self- emp	loyed ▶	P00124210
	eparer's	Fum's name /or yours Angolano & Company CPA PC		•	EIN J	03-0322470
US	e Only	f self-employed), PO Box 639			Phone	
		address, and ZIP+4 Shelburne, VT 05482-0639			no	▶ 802-985-8992
Ma	y the IRS d	scuss this return with the preparer shown above? (see instructions)				X Yes No
		ct and Paperwork Reduction Act Notice, see the separate instructions.				Form 990 (2009)
DA	٩					•

Form 990 (2009) Lamoille Family Center, Inc. 03-0277640	Page 2
Part III Statement of Program Service Accomplishments 1 Briefly describe the organization's mission	
See Schedule O	
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Yes X No
If "Yes," describe these new services on Schedule O	i tes A No
3 Did the organization cease conducting, or make significant changes in how it conducts, any program	
services?	Yes X No
If "Yes," describe these changes on Schedule O	
4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses	
Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and	
allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a (Code) (Expenses \$ 262,752 including grants of \$) (Revenue \$	
LEARNING TOGETHER - Offers educational services so	,
pregnant and parenting teens can earn a high school	
diploma or GED, offers on-site childcare and parenting	
classes, and offers a lending library, computer, scanner,	
and internet access.	
4b (Code) (Expenses \$ 292,593 including grants of \$) (Revenue \$	
FAMILY, INFANT, TODDLER - Identifies children less than	,
three years of age who might have developement delays	
or medical diagnoses and provides support.	
, , , , , , , , , , , , , , , , , , ,	
4c (Code) (Expenses \$ 246,290 including grants of \$) (Revenue \$	
LINK - Helps mend the bonds between parents and teenagers	,
who are having trouble getting along.	
All other programs in relation to the organization's	
primary exempt purpose: Home Town Playgroup,	
Early Ed Initiative, Parent Education, Childcare	
Consultant, Healthy Childcare Vermont, Food Program,	
Make it Work, Headstart, Reach Up Case Management,	
Family Resource Project, Supervised Visitation, Healthy	
Babies, Public Awareness, People in Partnership, Evenstart	
Program, Building Bright Futures, Rockinghorse, Children's	
Ad. Other program convece. (Describe in Schodule O.)	
4d Other program services (Describe in Schedule O) (Expenses \$ 1,003,184 including grants of \$) (Revenue \$	١
4e Total program service expenses ► 1,804,819	·

			_		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A			,	x	
2	Is the organization required to complete Schedule B, Schedule of Contributors?			2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to					
	candidates for public office? If "Yes," complete Schedule C, Part I		-	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete		Ī	•		
	Schedule C, Part II		-	4		<u>X</u>
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)		ŀ	_	_	_
-	notice and reporting-requirement and proxy tax? If "Yes," complete Schedule C, Part III			5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have					
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"					x
_	complete Schedule D, Part I		\vdash	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			,		x
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		-	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			8		x
•	complete Schedule D, Part III		-	•		
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"					
	complete Schedule D, Part IV			9		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			-		
10	quasi-endowments? If "Yes," complete Schedule D, Part V			10		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,					
••	VII, VIII, IX, or X as applicable			11	х	
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete					
Ī	Schedule D, Part VI					
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more		İ		3	. 1
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		F			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more				3	
	of its total assets reported in Part X, line 169 if "Yes," complete Schedule D, Part VIII		[- 1		
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets					
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX					
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		1			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		ļ			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X					
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		F			
	Schedule D, Parts XI, XII, and XIII		7	12	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	Yes	No X			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	12A	1~1	4.0	:	v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		-	14a		
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I		ŀ	14b		x
45	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any		 	170		
15	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II			15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance		F			
10	to individuals located outside the United States? If "Yes," complete Schedule F, Part III			16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services		ŀ			
"	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I			17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on		-			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II			18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?					
	If "Yes," complete Schedule G, Part III			19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H			20		X
				Forn	990	(2009)

_ r .c	Checkinst of Required Schedules (Continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		<u> </u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 29 If "Yes," complete Schedule I, Parts I and III	22		<u> </u>
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23_		<u> </u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		_X_
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction		1	
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		<u> </u>
þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part i	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	1		
	Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
-	19? Note. All Form 990 filers are required to complete Schedule O	38	X	

	Statements Regarding Other IRS Filings and Tax Compliance			
4-	Fates the source and die Dougle of Faces 4000. Accord Commence and Transcribed of	<u></u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
L		 		
b		 		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1c	X	Ī
20	gaming (gambling) winnings to prize winners? Enter the number of employees reported on Form W.3. Transmitted of Wage and Tax	16	<u> </u>	
28	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 61			
b	Statements, filed for the calendar year ending with or within the year covered by this return [2a 61] If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	Ī
U	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	20	~	
	instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by			ŀ
- Ou	this return?	3a	•	х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a				
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		х
b	If "Yes," enter the name of the foreign country			_
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank			
	and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding	1		
	Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		:	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			ŧ
	and services provided to the payor?	7a	-	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	_		
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			<u> </u>
θ	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	_		ł
	benefit contract?	7e 7f	·	
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	 		
9 h	For all contributions of qualified intellectual property, did the organization file Form 8899 as required? For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	7g		
•	required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	'''		
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			1
	organization, have excess business holdings at any time during the year?	8		Ť
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter			1
а	Initiation fees and capital contributions included on Part VIII, line 12			1
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			1
11	Section 501(c)(12) organizations. Enter			ŧ
а	Gross income from members or shareholders			I
b	Gross income from other sources (Do not net amounts due or paid to other sources against			1
	amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		ļ
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			<u> </u>

=orm	990 (2009) Lamoille Family Center, Inc. 03-0277640		Р	age 6
	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below	v, and		ugo v
	for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or chan			
	Schedule O See instructions	,		
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body			
b	Enter the number of voting members that are independent 1b 9			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with]		
	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3_	-	X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	X	
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		X
6	Does the organization have members or stockholders?	6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a		_X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
	tion B. Policies (This Section B requests information about policies not required by the Internal			
<u>Rev</u>	renue Code.)			
			Yes	No 32
10a	Does the organization have local chapters, branches, or affiliates?	10a	-	X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,			
	affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			- T
	form?	11		X
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990	40-	X	·····
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a		
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give	406	x	
	rise to conflicts?	12b		
С		12c	x	
40	describe in Schedule O how this is done		X	
13	Does the organization have a written whistleblower policy?	13	X	
14	Does the organization have a written document retention and destruction policy?	'-		ļ
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	x	1
a b	Other officers or key employees of the organization	15b	X	
J	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)	100	1	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
100	with a taxable entity during the year?	16a	Í	х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	<u> </u>		
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard	F		‡
	the organization's exempt status with respect to such arrangements?	16b		
Sec	etion C. Disclosure	<u> </u>	•	
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only)			
-	available for public inspection. Indicate how you make these available. Check all that apply			
	Our unbate Assheds unbate V Hoor request			

Own website Another's website X Upon request 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public State the name, physical address, and telephone number of the person who possesses the books and records of the 20

480 Cadys Falls Rd. organization 🕨 Comptroller

Morrisville

VT 05661

802-888-5229

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- **1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of "key employee."

Check this box if the organization did not compensate any current officer, director, or trustee

- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A) Name and Title	(B) Average	Posi	tion ((0	;)	hat ap	componention		(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Rhoda Bedell										
Board Member	1.00	X						0	0	0
Ronna Ziegel				.						
Board Member	1.00	X						0	0	0
Daniel Regan										
Board Member	1.00	X						0	0	0
Roy Gilbert										
Board Member	1.00	X						0	0	0
Jeffery Hunsberge										
Chair	1.00	X						0	0	0
Sandy Paquette										
Board Member	1.00	X						0	0	0
John Duffy										
Treasurer	1.00	X						0	0	0
Nancy Records (Nor	i)					ì				
Board Member	1.00	X						0	0	0
Keith Thompson										
Vice Chair	1.00	X						0	0	0
David Conner									п	
Co - Exec. Dir.	40.00			X				49,120	0	4,586
Priscilla Matten										
Comptroller	40.00			X				47,573	0	4,586
Scott Johnson										
Co - Exec. Dir	40.00			X				0	0	0
					ļ					
		_			<u> </u>					
		-					ļ			
		<u> </u>		<u> </u>		<u> </u>				
	1									

Part VII 'Sec (A) Name and		(B) Average			((C)	hat ap		d Highest Compensated E (D) Reportable	(E) Reportable		(F) stimated			
		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	con f org ar	amount of other compensation from the organization and related organizations			
	-	-	-		-	-		-							
			_			_									
			_	 		-	_								
					_										
								-			- 				
								_							
	- .					-									
					_										
			·						06.602				170		
				_	nose	liste	d abo	ove)	96,693 who received more than \$1			9,	,172		
		the organization	-	0 or tri	istee	ke.	v emi	nlove	ee, or highest compensated			Yes	No		
employee on I	ine 1a? If "Yes," dual listed on line	complete Sched	ule J of rep	for s ortal	uch de c	ındı. omp	ridua ensa	tion	and other compensation fro	m	-	3	X		
individual									" complete Schedule J for s unrelated organization for	ucn		4	X		
Section B. Indepe	ndent Contract											5	X		
	from the organi	zation	ensate	ed in	depe	ende	nt co	ntra	ctors that received more that	(B) ption of services		(C) Compens			
	Name an	(A) d business address							Descri	ption of services		Compens	ation		
	·					<u></u>									
		contractors (inclu ensation from the					d to t	hose	e listed above) who received	j 		0			
DAA		·										Form 99	U (2009)		

Pa	LT A	III Statement of Reve	nue			/A)	(B)	(0)	(D)
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
SS	1a	Federated campaigns	1a	*********				, , , ,	
ant	b	Membership dues	1b						
ĒΕ	_	Fundraising events	1c		4,533				
ifts ar a	4	Related organizations	1d						
s, g	۵	Government grants (contributions)	1e	1.	616,952				
ion	f	All other contributions, gifts, grants,		- /	330,302				
but	•	and similar amounts not included above	1f		213,953		. ,	***/	,
ntri d o		Noncash contributions included in lines 1a-		 \$					
Sol	9 h	Total. Add lines 1a–1f		•		1,835,438			
- e		Total: Add lines Ta-11			Busn Code	2,000,100			
eun	2a	Program Service Fees	•		Busin Code	2,052	2,052		
Sev.	b	rrogram bervice rees	•				2,002		
8	C								
eZ	d								
S	4								
gra	f	All other program service rever							
Program Service Revenue Contributions, gifts, grants	q	Total. Add lines 2a–2f	ide		•	2,052			
	3	Investment income (including d	ıvıdend	ls interest	and	2,002			
	•	other similar amounts)	· · · · · · · · · · · · · · · · · · ·	15, 1110100	, unu	9,044	9,044		
	4	Income from investment of tax-	exemn	t bond pro	ceeds -				
	5	Royalties	о . р		•			,	
		(ı) Real		(II) P	ersonal				
	6a	Gross Rents				i			
	ь	Less rental exps				;			
	С	Rental inc or (loss)							
	d	Net rental income or (loss)			-				
	7a	7a Gross amount from sales of assets (II) Securities (III) G							
		other than inventory							
	ь	Less cost or other							
		basis & sales exps						=	
	С	Gain or (loss)							
	d	Net gain or (loss)			>				
ø.	8a	Gross income from fundraising ever	nts						
une		(not including \$							
ě		of contributions reported on line 1c)							
×		See Part IV, line 18	а		9,732		<u> </u>		
Other Reve	ı	Less direct expenses	b				:		
J	I	Net income or (loss) from fundr	- 1	events	<u> </u>	9,732	9,732		
	9a	Gross income from gaming activities	S						
	ŀ	See Part IV, line 19	a				•		
		Less direct expenses	b		· · · · · · · · · · · · · · · · · · ·				
		Net income or (loss) from gami	ng acti	vities					
	10a	Gross sales of inventory, less					 		
		returns and allowances	а						
		Less cost of goods sold	b				}		
	<u>c</u>	Net income or (loss) from sales		entory	<u> </u>				· · · · · · · · · · · · · · · · · · ·
	<u> </u>	Miscellaneous Revenue			Busn. Code	4			†
	11a	Other Revenue			ļ	125	125		
	b				ļ		<u> </u>		
	C	All other revenue							
	d	All other revenue Total. Add lines 11a–11d			•	125			
	12	Total Revenue. See instruction	าจ			1,856,391		0	0
	,		.~			<u> </u>		, •	,

Part IX Statement of Functional Expenses

Form 990 (2009)

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must c	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals-outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	105,865	94,961	10,904	
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,035,572	928,154	107,418	
8	Pension plan contributions (include section 401(k)	•			
	and section 403(b) employer contributions)			į	
9	Other employee benefits	93,227	82,168	11,059	
10	Payroll taxes	92,290	82,806	9,484	
11	Fees for services (non-employees)	,			
а	Management	1,457		1,457	
b	Legal	·····			
c	Accounting	4,920	120	4,800	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	9,615	9,605	10	
12	Advertising and promotion	5,865	3,232	2,633	
13	Office expenses	24,300	19,604	4,696	
14	Information technology				
15	Royalties				
16	Occupancy	30,522	26,991	3,531	
17	Travel	53,891	53,460	431	
18	Payments of travel or entertainment expenses	· · · · · · · · · · · · · · · · · · ·			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	224	114	110	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	17,760	9,022	8,738	
23	Insurance	10,986	10,281	705	
	nisa.anss				. 14
24	Other expenses Itemize expenses not	1		‡	
	covered above (Expenses grouped together	1			
	and labeled miscellaneous may not exceed	Ŧ		1	
	5% of total expenses shown on line 25 below)	<u> </u>		-	
а	Contracts	196,331	195,781	550	
b	Program Expenses	73,858	73,640	218	
c	Food Distribution	20,757	20,757		
d	Miscellaneous	8,474	5,376	3,098	<u> ·· ·· · · · · · · · · · · · · · · ·</u>
e	Starting Points	6,935	6,935	-,	
f	All other expenses	11,970	181,812	-169,842	·
25	Total functional expenses. Add lines 1 through 24f	1,804,819	1,804,819		
26	Joint costs. Check here ▶ ☐ If following		_, _, _, _,		
-0	SOP 98-2 Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation				
DAA	idital disting solicitation				Form 990 (200

Pa	ırt X	Balance Sheet								
					(A) Beginning of year		(B) End of year			
	1	Cash—non-interest bearing		·- · · · · · · · · · · · · · · · · · ·	403,262	1	317,101			
ł	2	Savings and temporary cash investments			159,522	2	264,403			
	3	Pledges and grants receivable, net		-		3				
	4	Accounts receivable, net	F	181,235	4	197,905				
	5	Receivables from current and former officers, directors, tru	ev E			23.,300				
	•	employees, and highest compensated employees Comple								
		Schedule L		5						
	6	Receivables from other disqualified persons (as defined u	w + + + + + + + + + + + + +							
	•	4958(f)(1)) and persons described in section 4958(c)(3)(B	t t		1					
		Part II of Schedule L	, compi	lete	:	6				
ध	7	Notes and loans receivable, net	5,230	7	3,876					
Assets	8	Inventories for sale or use		<u> </u>	3,230	8	3,670			
Ϋ́	9	Prepaid expenses and deferred charges		-	49,101	9	34,579			
	-	Land, buildings, and equipment cost or	1 1	<u>L</u>	49,101	9	34,319			
	IVA	other basis Complete Part VI of Schedule D	10a	386,307		1				
ı	h	Less accumulated depreciation	10a	230,639	165,704	40-	155 660			
		·	[100]	230,039	3,488		155,668			
- 1	11 12	Investments—publicly traded securities	-	3,400	11	5,305				
		Investments—other securities See Part IV, line 11	-		12					
	13	Investments—program-related See Part IV, line 11	-	-	13					
	14	Intangible assets	-		14					
	15	Other assets See Part IV, line 11	}	067 542	15	070 027				
\rightarrow	16	Total assets. Add lines 1 through 15 (must equal line 34)		+	967,542	16	978,837			
1	17	Accounts payable and accrued expenses	90,747	17 18	136,091					
	18	Grants payable								
	19	Deferred revenue	372,967	19	322,074					
	20	Tax-exempt bond liabilities	_		20					
.≝ ।	21	Escrow or custodial account liability Complete Part IV of S		ED		21	 			
ΞĮ	22	Payables to current and former officers, directors, trustees	-	-		1				
<u>a</u>		employees, highest compensated employees, and disqual	lified	ŧ						
_		persons Complete Part II of Schedule L		-	24 425	22				
	23	Secured mortgages and notes payable to unrelated third p		-	34,435	23				
	24	Unsecured notes and loans payable to unrelated third part	ties	-		24				
1	25	Other liabilities Complete Part X of Schedule D		-	400 140	25	4EQ 16E			
\rightarrow	26	Total liabilities. Add lines 17 through 25	ন .		498,149	26	458,165			
ě		Organizations that follow SFAS 117, check here ▶ 🗵	and	-						
Ĕ		complete lines 27 through 29, and lines 33 and 34.			200 102	[365 004			
<u>a</u>	27	Unrestricted net assets		<u> </u>	308,123	27	365,004			
	28	Temporarily restricted net assets		}	161,270	28	155,668			
בַ	29	Permanently restricted net assets	▶	<u> </u>		29				
ᄑᆝ		Organizations that do not follow SFAS 117, check her	e ▶	[-	•			
ō	••	and complete lines 30 through 34.		ŧ						
)ts	30	Capital stock or trust principal, or current funds		<u> </u>		30				
386	31	Paid-in or capital surplus, or land, building, or equipment f				31				
~	32	Retained earnings, endowment, accumulated income, or o	other fund	ds _	460 200	32	E00 (E0			
<u>ĕ</u>	33	Total net assets or fund balances		<u> </u>	469,393	33	520,672			
<u>- 1</u>	34	Total liabilities and net assets/fund balances			967,542	34	978,837			

Form **990** (2009)

orm	990 (2009) Lamoille Family Center, Inc. 03-0277640		Pa	ge 12
Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O	-		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	X	
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	1		
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in	-		
_	Schedule O · · · · · · · · · · · ·	1	^~~	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		L
		Forr	n 990	(2009)

SCHEDULE 'A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury
Internal Revenue Service
Name of the organization

Attach to Form 550 of Form 550-EE.

Employer identification number 03-0277640

			Lamoille	Fam:	ily Cente	er, Inc					03-	027	7640		
P	art I	Reas	on for Public Ch	narity S	status (All org	ganizations	must co	omplete	this p	art.) S	ee ins	tructio	ons		
he	orgai	nization is not a	a private foundation b	pecause	t is (For lines 1 t	hrough 11, ch	eck only or	ne box)							
1		A church, con	vention of churches,	or assoc	ciation of churche	s described in	section 1	70(b)(1)(<i>A</i>	A)(i).						
2		A school desc	cribed in section 170)(b)(1)(A)	(ii). (Attach Sche	edule E)									
3	\Box	A hospital or a	a cooperative hospita	al service	organization des	cribed in sect	ion 170(b)	(1)(A)(iii)							
4		A medical res	earch organization o	perated i	n conjunction with	h a hospital de	escribed in	section 1	70(b)(1)	(A)(iii).	Enter th	e hospi	tal's name,		
		city, and state	9		-	•									
5		. •	on operated for the b	enefit of	a college or unive	ersity owned o	r operated	by a gove	ernmenta	al unit de	scribed	ın			
		_	b)(1)(A)(IV). (Comple		•	,		-, - 3							
6		•	te, or local governme		•	escribed in se	ction 170/	b)(1)(A)(v	۸.						
7	X		•	-			-		-	n the ger	neral nu	blic			
•		_	ion that normally receives a substantial part of its support from a governmental unit or from the general public												
8			ın section 170(b)(1)(A)(vi). (Complete Part II) nıty trust described ın section 170(b)(1)(A)(vi). (Complete Part II)												
9	H	•	on that normally rece			-	•	ntribution	s memb	ershin fe	es and	larnes			
•	ш	•	activities related to it							-		-			
		•	gross investment inc	•	•		-					11.5			
			ne organization after				•		· · · · · · · · · · · · · · · · · · ·	om basii	100000				
10		•	-					· · · · · · · · ·	a)(4)						
11	\vdash	An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of to perform the functions of or to carry out the													
•	لـــا	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section													
	509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h														
	a Type b Type c Type Functionally integrated d Type Other														
е		By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified													
•	LJ														
		persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)													
f		509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting													
•		_	check this box	en detem			· 1 / po 1, 1)	po 11, 01 1	, po o	арропп	9				
_		•	17, 2006, has the or	manızatın	n accented any o	uft or contribut	tion from a	ny of the							ι_
g		following per		gamzano	in accepted any s	giit or continue	iioii iioiii u	ny or are							
		•	n who directly or indire	ectly con	trole either alone	or together w	ath nerson	s describe	ed in (ii)					Yes	No
			pelow, the governing	•		-	nui personi	3 40001150	, u ,				11g(ı)		+
		, ,	member of a person	•		janization.							11g(n)		1
		•	ontrolled entity of a p		* *	u) above?							11g(n		1
h			ollowing information										[119]	41	ч—
	Name	e of supported	(II) EIN	about the	(III) Type of c		(IV) Is the	organization	(v) Did v	ou notify	(vi)	s the	(VII) An	nount o	f
١٠,		janization	(,		(described or	-		sted in your	the organ	nization in	organizat	ion in col		port	
				1	above or IR		governing	document?		of your port?	(i) organi	zed in the S ?			
					(see instru	icuons))	Yes	No	Yes	No	Yes	No			
							1		-	<u> </u>					
			:												
				-											
									•						
								!							
					<u> </u>										
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Tot:	al						1								

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2009

14	Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	98.23%
15	Public support percentage from 2008 Schedule A, Part II, line 14	15	98.32%

33 1/3 % support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box

and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support test-2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this

box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2009

Part-III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I)

	tion A. I ubile Support	,	<u>,</u>	,		,	
Ca	lendar year (or fiscal year beginning in)▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
С 8	Add lines 7a and 7b						
٥	Public support (Subtract line 7c from line 6)						
Sec	tion B. Total Support	<u> </u>	1	<u> </u>	1	<u> </u>	
	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6				1		· · ·
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for the organization, check this box and stop here	-	second, third, fourt	h, or fifth tax year a	as a section 501(c)((3)	>
Sec	tion C. Computation of Public Su						
15	Public support percentage for 2009 (line 8,		•	(f))		15	%
16	Public support percentage from 2008 Sche					16	%
	tion D. Computation of Investmer						
17	Investment income percentage for 2009 (Iir			olumn (†))		17	%
18 10a	Investment income percentage from 2008 S			14 and line 15 is -	ore then 22 4/2 m/	18	%
19a	33 1/3 % support tests—2009. If the organ 17 is not more than 33 1/3 %, check this bo						▶ .
b	33 1/3 % support tests—2008. If the organ			•			
~	line 18 is not more than 33 1/3 %, check thi						▶
20	Private foundation. If the organization did		-		-		> ,

Schedule A (Form 990 or 990-EZ) 2009 Lamoill	e Family Center	Inc.	03-0277640	Page 4
Part IV Supplemental Information. Cor	nplete this part to provide	the explanatio	ns required by Part II, line 10,	
Part II, line 17a or 17b; and Part	III, line 12 Provide any	<u>other additional</u>	information. See instructions	
Part II, Line 10 - Other In	come Detail			
Special Events	\$	104,428		
Other Misc.	\$	125		
Sale of Inventory	ė	1 735		

SCHEDULE D (Form,990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047
2009
Open to Public

Open to Public Inspection

Employer identification number

Name	e of the organization		Employer identification number			
L	amoille Family Center, Inc.					
	organizations Maintaining Donor Advised Furthe organization answered "Yes" to Form 990,	nds or Other Similar Funds or Acc				
		(a) Donor advised funds	(b) Funds and other accounts			
1	Total number at end of year					
2	Aggregate contributions to (during year)					
3	Aggregate grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in writing that	the assets held in donor advised				
	funds are the organization's property, subject to the organization's exclu-	usive legal control?	Yes No			
6	Did the organization inform all grantees, donors, and donor advisors in v	writing that grant funds can be				
	used only for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other				
	purpose conferring impermissible private benefit?					
Pa	art If Conservation Easements. Complete if the org	anization answered "Yes" to Form !	990, Part IV, line 7			
1	Purpose(s) of conservation easements held by the organization (check	all that apply)				
	Preservation of land for public use (e.g., recreation or pleasure)	Preservation of an historically impor	rtant land area			
	Protection of natural habitat	Preservation of certified historic stru	ucture			
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualified conser	vation contribution in the form of a conservation	on			
	easement on the last day of the tax year					
			Held at the End of the Tax Yea			
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements		2b			
С	Number of conservation easements on a certified historic structure inclu	uded in (a)	2c			
d	Number of conservation easements included in (c) acquired after 8/17/0	06	2d			
3	Number of conservation easements modified, transferred, released, ext	inguished, or terminated by the organization d	luring			
	the taxable year					
4	Number of states where property subject to conservation easement is k	ocated >				
5	Does the organization have a written policy regarding the periodic moni	toring, inspection, handling of				
	violations, and enforcement of the conservation easements it holds?		Yes No			
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforce	ing conservation easements during the year				
	>					
7	Amount of expenses incurred in monitoring, inspecting, and enforcing c	onservation easements during the year				
	▶ \$					
8	Does each conservation easement reported on line 2(d) above satisfy ti	he requirements of section				
	170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)?		Yes No			
9	In Part XIV, describe how the organization reports conservation easemi	ents in its revenue and expense statement, an	nd			
	balance sheet, and include, if applicable, the text of the footnote to the	organization's financial statements that describ	pes			
	the organization's accounting for conservation easements					
Pa	Organizations Maintaining Collections of Art, Complete if the organization answered "Yes" to		nilar Assets.			
1a	If the organization elected, as permitted under SFAS 116, not to report	in its revenue statement and balance sheet we	orks of			
	art, historical treasures, or other similar assets held for public exhibition					
	provide, in Part XIV, the text of the footnote to its financial statements the					
b	If the organization elected, as permitted under SFAS 116, to report in its	s revenue statement and balance sheet works	of art,			
	historical treasures, or other similar assets held for public exhibition, ed	ucation, or research in furtherance of public se	ervice,			
	provide the following amounts relating to these items					
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$			
	(ii) Assets included in Form 990, Part X		▶ \$ ▶ \$			
2	If the organization received or held works of art, historical treasures, or	other similar assets for financial gain, provide				
_	following amounts required to be reported under SFAS 116 relating to the					
а	5		▶ \$_			
b			\$			
_	·					

Sche	dule D (Form 990) 2009 Lamoille E	amily	Center	, Inc.		03-02	77640	Page 2		
Pa	rt III Organizations Maintaining (Collection	ns of Art, H	istorical Trea	asures, or C	Other Si	milar Assets	(continued)		
3	Using the organization's acquisition, accession, collection items (check all that apply)	and other re	ecords, check	any of the follow	ng that are a si	gnificant u	se of its			
а	Public exhibition		d Loan o	r exchange prog	rams					
b	Scholarly research		e Other							
С	Preservation for future generations									
4	Provide a description of the organization's collection Part XIV	ctions and e	xplain how the	y further the orga	anızatıon's exei	mpt purpos	se in			
5	During the year, did the organization solicit or reassets to be sold to raise funds rather than to be	eceive dona	tions of art, his d as part of the	torical treasures, organization's c	or other simila	r		Yes No		
Pa	Irt IV Escrow and Custodial Arrar					wered "\	es" to Form 9	90, Part		
1a	Is the organization an agent, trustee, custodian									
	included on Form 990, Part X?	or ource mic	omicalary for c		400010 1101			Yes No		
h	If "Yes," explain the arrangement in Part XIV an	d complete	the following ta	ahle						
	Tes, explain the unangement in rate xiv an	a complete	the following to	abic .				Amount		
c	Beginning balance						1c			
d	A 111						1d			
_										
f 2a										
	•	1 990, Part /	A, line Z I r					Yes No		
	if "Yes," explain the arrangement in Part XIV art V Endowment Funds. Comple	te if oraș	nization an	swered "Ves	" to Form 9	00 Part	IV line 10			
FÇ	art v Endowment Funds. Comple		rent year	(b) Prior year	(c) Two ye		(d) Three years back	k (e) Four years back		
4.	Down of washalana	(a) Cui	ient year	(b) Filol year	(c) Two ye	ais back	(d) Tillee years back	(e) I our years back		
	Beginning of year balance									
b							· · · · · · · · · · · · · · · · · · ·			
С	Net investment earnings, gains,									
	and losses		·							
	Grants or scholarships	ļ								
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses	ļ								
g	End of year balance	L				l				
2	Provide the estimated percentage of the year el	nd balance i	held as							
а	Board designated or quasi-endowment ▶		_%							
b	Permanent endowment %									
С	Term endowment ► %									
3a	Are there endowment funds not in the possessi	on of the or	ganization that	are held and adr	ministered for t	пе				
	organization by							Yes No		
	(i) unrelated organizations							3a(i)		
	(ii) related organizations							3a(ii)		
b	If "Yes" to 3a(ii), are the related organizations list	sted as requ	ured on Sched	ule R?				3b		
4	Describe in Part XIV the intended uses of the or	rganization's	s endowment f	unds				<u> </u>		
Pa	art VI Investments—Land, Buildin	gs, and I	Equipment.	. See Form 9	<u>990, Part X,</u>	line 10				
	Description of investment	(a) Cost	or other basis	(b) Cost o	or other	(c) Acc	umulated	(d) Book value		
		(Inv	vestment)	basis (o	other)	depre	eciation			
1a	Land				38,576			38,576		
	Buildings			2	61,476		158,189	103,287		
	Leasehold improvements			<u> </u>						
	Equipment									
	Other									
	il. Add lines 1a through 1e (Column (d) must equ	al Form 990), Part X, colun	nn (B), line 10(c))		•	141,863		

Schedule D (F	Form 990) 2009 Lamoille Family Cente	r, Inc.	03-0277640	Page 3
Part VII	Investments—Other Securities. See Form 99	0, Part X, line 12		• •
	(a) Description of security or category	(b) Book value	(c) Method of valuation	1
	(including name of security)		Cost or end-of-year market	value
Financial deri	vatives			
Closely-held e	equity interests			
Other				
				
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 12)			
Part VIII	Investments—Program Related. See Form 99	00, Part X, line 13.		
	(a) Description of investment type	(b) Book value	(c) Method of valuation	า
			Cost or end-of-year market	value
	* **			
				<u>.</u>
	nn (b) must equal Form 990, Part X, col (B) line 13)			,,
Part IX	Other Assets. See Form 990, Part X, line 15.			
	(a) Description		(1	b) Book value
				
				· · · · · · · · · · · · · · · · · · ·
				
			· · · · · · · · · · · · · · · · · · ·	
			······································	
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 15)	· · ·	b	
Part X	Other Liabilities. See Form 990, Part X, line 2	.5	-	
1	(a) Description of liability	(b) Amount		
Federal incon	ne taxes		7	
			— [
				
			7	
			7	
			_	
			7	
	· · · · · · · · · · · · · · · · · · ·			
			7	
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 25)		1	
	ootnote In Part XIV, provide the text of the footnote to the organ	ızatıon's financıal statemen	ts that reports the	
	s liability for uncertain tax positions under FIN 48			

	edule D (Form 990) 2009 Lamoille Family Center, Inc.	03-027764	0	_ Page 4
Pε	art XI Reconciliation of Change in Net Assets from Form 990 to Audited	Financial Statemer	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	1,856,391
2	Total expenses (Form 990, Part IX, column (A), line 25)	[2	1,804,819
3	Excess or (deficit) for the year Subtract line 2 from line 1	[3	51,572
4	Net unrealized gains (losses) on investments		4	-293
5	Donated services and use of facilities	İ	5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4 through 8		9	-293
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		10	51,279
_	art XII Reconciliation of Revenue per Audited Financial Statements With	Revenue per Retur	'n	
1	Total revenue, gains, and other support per audited financial statements		1	1,868,482
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
а		-293		
b		12,384		
c			1	
d]	
			20	12 091
9	Subtract line 2e from line 1	ł	2e	12,091 1,856,391
3	1	•	3	1,030,391
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		1	
a]	
b			. 1	
C			4c	1 056 201
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	1,856,391
	art XIII Reconciliation of Expenses per Audited Financial Statements With	n Expenses per Rei		1 017 000
1	Total expenses and losses per audited financial statements		1	1,817,203
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	10 204]	
а		12,384	1	
b	, , ,			
С			1	
d	Other (Describe in Part XIV)		1	
9	Add lines 2a through 2d		2е	12,384
3	Subtract line 2e from line 1		3	1,804,819
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b			
b	Other (Describe in Part XIV)		- 1	
С	Add lines 4a and 4b		4c	
5			5	1,804,819
Pá	art XIV Supplemental Information			
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4	, Part IV, lines 1b		
and 2	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4l	b Also complete		
this p	part to provide any additional information			
	- 			
- -				
				

SCHEDULE O (Form 990)

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

OMB No 1545-0047
2009
Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Lamoille Family Center, Inc.

Employer identification number 03-0277640

Form 990 - Organization's Mission or Most Significant Activities The Lamoille Family Center is founded on working toward the prevention of child abuse through parent education and support. Through a variety of programs, families are helped (Sched O) to an awareness of the possibilities for healthier relationships and positive family lives. Through proven programs complemented by creative and innovative projects, workshops, a teen/parent education program w/ child care, support groups, play groups, a preschool program, a getting ready to work program, home visits, & childcaree resources; the Center's services offer assistance in the prevention of serious problems in families. The Center's belief is that being a parent is difficult, that parents need education, and deserve information about child care and developement; and that parents can both learn from and support each other as they grow alongside their children.

Form 990, Part I, Line 6

Volunteers & Interns helped with the annual holiday project, did carpentry work, helped in the Child Care program, did a presentation for the Learning Together program, tutored students, taught art classes and helped in the Learning Together program.

Form 990, Part III, Line 4c - Third Achievement Int. Service & Girls Moving Mountains.

Form 990, Part III, Line 4d - All Other Achievements
SEE ATTACHED LIST OF OTHER PROGRAMS

Form 990, Part V, Line 3b - Form 990-T Not Filed Explanation
There was no income outside the tax-exempt purpose.

Form 990, Part VI, Line 4 - Significant Changes to Organizational Documents See attached amended By-Laws.

Form 990, Part VI, Line 11a - Organization's Process to Review Form 990 Form 990 is reviewed by comptroller & Executive Director prior to mailing.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy
Reenforced in Company Personnel Policies and Corporate By-Laws. Board and
employees are referred to policies on an annual basis.

Form 990, Part VI, Line 15a - Compensation Process for Top Official Executive Director compensation subject to the review and approval of the board.

Form 990, Part VI, Line 15b - Compensation Process for Officers

Accounting Manager compensation subject to the review and approval of the

Executive Director & the board.

Form 990, Part VI, Line 18 - No Public Disclosure Explanation

Name of the organization

Lamoille Family Center, Inc.

Employer identification number 03-0277640

There was no income outside the tax-exempt purpose.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation Governing documents are available upon request to the public.

990 / 990-PF	Oth For calendar year 2009, or		Loans Receiva		6/30/10	2009
Name	For calendar year 2009, or	tax year beginning	07/01/09	, and ending O	7	Lentification Number
Lamoille Fami	ly Center, Inc.				03-027	77640
Form 990, Par	t X, Line 7 - A	Additional	Information	L		
		<u>-</u> .				
(1) Employee Ad	Name of borrower			Relationship to d	squalified perso	on
(2)	vances					
(3)						
(4)					·	
(5) (6)			-			
(7)						
(8)						
(9)	·					·
(10)						
Original amount borrowed	Date of loan	Maturity date	Re	epayment terms		Interest rate
(1)				spaymont terms		10.0
(2)						
(3)						
(4) (5)						
(6)				·····		
(7)						
(8)						
(9)		<u> </u>				
(10)						. <u> </u>
Saa	urity provided by borrower			0	- 4 I	
(1)	anty provided by borrower			Purpose	or loan	
(2)						
(3)						
(4)	······································					
(5) (6)						
(7)						
(8)						
(9)						
(10)						
Considerat	tion furnished by lender		Balance due at beginning of year	Balance due end of yea	at F	aır market value (990-PF only)
(1)			5,230		,876	Zese i i emy
(2)						
(3)						
(4) (5)	·					
(6)						
(7)						
(8)						
(9)	· · · · · · · · · · · · · · · · · · ·					
(10)					07.6	

5,230

Totals

3,876

		-						
Forms 990 / 990-PF			gages and Oth			06/00	(1.0	2009
Namo	For	calendar year 2009, or	tax year beginning	07/01/09	, and ending	06/30/		fication Number
Name						Empl	oyer ideill	meation multiper
Lamoille Far	nily C	enter, Inc	•	· · - · · ·		03-	-0277	640
Form 990, P	art X,	Line 23 -	Additional	Informatio	n			
		of lender			Relationship	to disqualified	person	
(1) Union Ban	<u>k</u>							
(2)					., .			
(3)								
(4)								
(5) (6)				<u> </u>				
(7)	_						_	
(8)								
(9)	•							
(10)					·····			
Original amor	unt		Maturity					Interest
borrowed (1) 131	950	Date of loan 06/30/01	date 06/02/11	369.26 w	Repayment ter			8.000
	, 830	00/30/01	00/02/11	309.20	reekty p	aymenc		0.000
(2)								
(4)				"				
(5)								
(6)								
(7)								
(8)								
(9)				ļ				
(10)								
(1) Land & Bu	Security p	rovided by borrower		Mortgage	Purp	ose of loan		
(2)						 	·	
(3)				_				
(4)		·					 	
(5)								
(6)								
(7)			· · · · · · · · · · · · · · · · · · ·					
(8) (9)				+				
(10)								
	···			Balance	due at		Rala	nce due at
Con	Consideration furnished by lender							d of year
(1)					34,435			
(2)		· · · · · · · · · · · · · · · · · · ·						
(3)				-				
(4)		<u>-</u>	· · · · · · · · · · · · · · · · · · ·					···
(5)								

34,435

(6) (7) (8) (9) (10) Totals

0	3	-0	2	7	7	6	4	0

Federal Statements

Taxable Interest on Investments

Description	 Amount	Unrelated Business Code	Exclusion Code	Postal Code	Acquired after 6/30/75
Investment Income	\$ 9,044			VT	
Total	\$ 9,044				

03-0277640	Federal Sta	Statements		
Forn	Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)	ees for Service (Non-e	mployee)	•
Description	Total	Program Service	Management & General	Fund
Professional Developement	\$ 9,615	\$ 9,605	\$ 10	\$
	\$ 9,615	\$ 9,605	\$ 10	\oldsymbol{O}
	Form 990, Part IX, Line 24	Part IX, Line 24f - All Other Expenses		
Description	Total Expenses	Program Service	Management & General	Fund Raising
Outing Events Activity Expense Accomodations/Meals Asset Disposal Bad Debt Repair & Maintenance the various programs) Total	\$ 4,374 2,258 1,920 1,315 1,125 978 \$ 11,970	\$ 4,374 2,258 1,523 1,125 171,554 \$ 181,812	397 1,315 -171,554 \$ -169,842	Signal of the state of the stat

THE LAMOILLE FAMILY CENTER DEPRECIATION SCHEDULE FY10

				<u> </u>		DEPRECIATION		
		<u></u>				PRESENT	PRESENT	REMAINING
DATE CATE	EGORY	DESCRIPTION	LIFE	COST	YEARS	YEAR	YEAR	_LIFE
DUIL DINO				<u> </u>	1	•		
BUILDING 6/1/1994 BLDC		HOUSE/BUT IN USE 0/45/04)	25	147 000 25	87,027 26	E 002 E2	02.010.70	EA 177 EG
		HOUSE(PUT IN USE 9/15/94)		147,088 35				
4/10/2002 BLDC		ARCHITECT	25			191 77		
		TOTAL BLDG		151,882 71	88,417.62	6,075 31	94,492 93	57,389 78
BUILDING IMPROV	/EN/ENI	, ,		<u>. </u>		 -	<u> </u>	
6/30/1995 BLD		S BUILDING IMPROVEMENTS	25	05 205 64	53,315 16	3,808 23	57,123 38	38,082 26
		BUILDING IMPROVEMENTS BUILDING IMPROVEMENTS	25 25					
9/15/1995 BLDC 2/13/1997 BLDC			25	<u> </u>		· 		
7/31/1997 BLDC		BUILDING IMPROVEMENTS LIVING ROOM CEILING FAN	25	 				
7/31/1997 BLDC		SECURITY SYSTEM	25					
11/7/1997 BLDC		SHED	25					
		<u> </u>	25					
6/30/1998 BLD0		SHED	25					
7/20/1999 BLD0		INSULATE ATTIC/FAN/CATWALK	25	!				
8/27/1999 BLD0		CEILING FANS						
8/20/1999 BLD0		LITTLE HOUSE WALL-DOOR FRA	25					
10/22/1999 BLD0		LITTLE HOUSE	25					
10/20/1999 BLD0		CLOSET TO INCREASED OFFICE	25					
2/11/2000 BLD0		FOLDING DOOR-MEETING ROOM	25					
7/28/2001 BLD0		FLOOD LIGHTS	25					
8/30/2001 BLD0		BUILDING IMPROVEMENTS	25					
9/30/2001 BLD0		COUNTER TOP - FOOD	25					
8/13/2001 BLD0		REMODEL BUSINESS OFFICE	25					
4/7/2008 BLD0	3 IMP	Improved glass and door lock-Front office	25	*		'		
		TOTAL BLDG IMPROVEM	<u> </u>	109,593 21	59,312 69	4,383 73	63,696 42	45,896 79
			· 		i 1	1		
FURNITURE & FIX		i		100.11	10044			
10/1/1988 FURI		FILE CABINET	7		·			
10/1/1990 FURI		FILE CABINET	7					
2/1/1991 FURI		FILE CABINET	7					
12/1/1993 FURI		OFFICE FURNITURE	10					
3/11/1994 FURI		OFFICE FURNITURE	10		I			
5/13/1994 FUR		2 DR FILE CABINET (11)	5					
6/29/1994 FUR		OFFICE FURNITURE(06)	10					
6/29/1994 FUR		2 DR FILING CABINET (10)	5					
6/29/1994 FUR		3 4 DR FILE CABINETS (11)	10					
6/29/1994 FUR		12 2 DR FILE CABINETS(06)	5					
6/21/1995 FUR		2 DRWR FILE CABINET-JEAN	5	·				
6/27/1995 FUR		FOLDING SCREEN-EEI	10		1			
9/30/1996 FUR		DEMCO DISPLAY UNIT	5		·			
10/10/1996 FUR		3 FILE CABINETS-CCRR	7			` 		
10/23/1996 FUR		DESK TOPS	7					
12/4/1996 FUR		4 F CABINETS-ANN, PEG, RITA, CYBE	7					
5/15/1997 FUR		FOOD COMPUTER SOFTWARE-WARR						
6/25/1997 FUR		OUTSIDE FENCE	5					
6/30/1997 FUR		4 DRAWER CABINET W/LOCK-FOOD	7					
6/30/1997 FUR		CENTER DRAWER-JEAN	. 5		 			
7/31/1997 FUR		CHAIR-FOOD		157 49				
10/1/1997 FUR		2 DRWR FILE CABINET-DEBB	7					
10/1/1997 FUR		2 DRWR FILE CABINET-CCRR	7					
10/9/1997 FUR		OUTSIDE FENCE	5					
12/1/1997,FUR		COUNTER TOP - FOOD		235 00				
12/4/1997 _. FUR		2 DRWR FILE CABINET-JEAN	7					
12/29/1997 FUR		HUMIDIFIER						
12/31/1997 FUR		TV-RCA	5					
5/8/1998 FUR		STIHL TRIMMER	5					
7/10/1998 FUR		3 PADDLE CHAIR-SUPV VX		261 33	· · ·			
9/4/1998 FUR		2 DWR FILE W/LOCK-SUBSIDY		105 00				
7/24/1998 FUR		2 DWR FILE W/LOCK-HB		105 00				
1/23/1999 FUR	N/FIX	CHAIR-CCRR SPECIALIST	5	104 99	104 99	0.00	104 99	0 0

THE LAMOILLE FAMILY CENTER DEPRECIATION SCHEDULE FY10

		·					DEPRECIATION		
DATE	CATECORY	DECODIDATION		COOT			PRESENT	PRESENT	REMAINING
DATE				COST			YEAR	YEAR	LIFE
		2 DR FILE CABINET-REFERRAL	5		12 72				
		PLAYGROUND EQUIPMENT	10		51 59				
	FURN/FIX	SWING/PLAY AREA	5		39 73	339 73			
10/13/1999		16 MEETING CHAIRS	5		80 08	1,990 08			
	FURN/FIX	LAPLINK Software	5		7 20	157 20			
	FURN/FIX	BOARDMAKER-WIN - FIT	5		19 00				
		Office Chair - CCRR	5		04-98				
	FURN/FIX FURN/FIX	Computer - Food Program	_5		16 00				
		Computer - FIT	5		00 00	400 00			
	FURN/FIX	VACCUM	5		33 37	383 37			
	FURN/FIX	WATER TANK	5		22 32	522 32			
	FURN/FIX	COMPUTER -GRTW	5		38 28	538 28			
	FURN/FIX	COMPUTER- GRTW>IHPE>standby	5		17 71	2,117 71			
	FURN/FIX	LCD PROJECTOR - GRTW	5		24 00	2,524 00			
	FURN/FIX	TOWER- SUBSIDY	5		50 00				
	FURN/FIX	TOSHIBA 8200 NOTEBOOK PC-ANN>L			50 00		<u> </u>	_!	
	FURN/FIX	2 DELL LAPTOP COMPUTERS "32"	5		99 30				
	FURN/FIX	DISHWASHER	5		19 98				
10/31/2002		SUBSIDY LAPTOP	5		24 10				
	FURN/FIX	COMPUTER UPGRADE-FOOD	5		95				
	FURN/FIX	DELL LAPTOP-FIT	5		23 00				
	FURN/FIX	12 SNOW SHOES	5		45 00				
	FURN/FIX	Vercom Telephone System	7		38 00				
10/28/2003		Computer - FIT	5		15 92				
	FURN/FIX	Computer - B-3->Katy	5		26 59				
	FURN/FIX	ELECTRIC STOVE	5		48 98				
	FURN/FIX	Computer - Debbie (Bus Office)->MIW	5		19 00				
11/24/2005		Quickbooks Software	5		99 00				
	FURN/FIX	LT Refrigerator	5		98 90				
	FURN/FIX	Admin Computer (WS1-Priscilla)	5		39 96				
	FURN/FIX	LT Equipment	5		03 50				
	FURN/FIX	LINK Laptop (Imelda's)	5		17 95				
	FURN/FIX	SUPV VX COMPUTER	5		64 20				
	FURN/FIX	Admin Computer (WS2-Lorin)	5		64 20				
	FURN/FIX	LINK Gateway Laptop (DeAnne's)	5		19 97				
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	FURN/FIX	CCRR Gateway Laptop (Jill's)	5		19 97			1,055 96	264 0
6/30/2006	FURN/FIX	FIT Gateway Laptop (Leah's)	<u>'</u> 5	1,3	19 97			1,055 96	
6/30/2006	FURN/FIX	CCRR Gateway PC (Lorraine's)	5		B9 97	593 97	197 99	91 791 96	198 0
10/1/2006	FURN/FIX	H B Laptop - Heather's	5	7	71 00	424 25	154 20	578 45	192 5
2/27/2007	FURN/FIX	Upstairs colored HP laser printer	5	8	95 52	417 90	179 10	597 00	298 5
2/27/2007	FURN/FIX	3 Laptops for Making It Work clients	, 3	1,0	44 00	812 00	232 0	0 1,044 00	0 0
	FURN/FIX	1 desktop computer-Stuart	5	1,10	07 69	516 93	221 5	4 738 47	369 2
2/28/2007	FURN/FIX	1 desktop computer-Lorin	5	1,10	07 69	516 93	221 5	4, 738 47	369 2
6/13/2007	FURN/FIX	1 Laptop - LINK-Crystal	5	7	34 98	306 25	147 0	0 453 25	281 7
1/28/2008	FURN/FIX	Samsum Laser printer	5	7:	30 00	206 63	0.00	206 63	523 3
6/30/2010	FURN/FIX	Samsum Laser printer	× 15		30100	206-63	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	0y ,-206 63	-523 3
9/10/2008	FURN/FIX	Dell Computer-Debbie	5		09 00		141 8	259 97	7 449 0
1/27/2009	FURN/FIX	B&H Electric-Security equip	5	1,0	08 13	84 01	201 6	3 285 64	722 4
2/9/2009	FURN/FIX	Wii and accessories	5	6	09 92	0 00	121 9	8 121 98	487 9
1/22/2009	FURN/FIX	Wide Screen TV	5	1,3	79 97	0.00			
	FURN/FIX	Dell Computer-Becky	3		54 00				
9/26/2009	FURN/FIX	T V -Teen Ctr	5	6	97 00	0 00			
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	FURN/FIX	4 Dell Lat #5510 - FIT	1 3		32 12				
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		TOTAL FURN/FIX	1	86.2	54 95	62,657 91	7,128 5	6 69,786 47	7 16,468 4
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10/8/2010

THE LAMOILLE FAMILY CENTER DEPRECIATION SCHEDULE FY10

		+	ļ	1	ACC DEP	DEPRECIATION	I'ACC DEP	
					PRIOR	PRESENT	PRESENT	REMAINING
DATE	CATEGORY	DESCRIPTION	LIFE	COST	YEARS	YEAR	YEAR	LIFE
		TOTAL LAND		34,262 71	0.00	0.00	0 00	34,262 71
I AND IME	PROVEMENTS			<u> </u>	·			
		DRIVEWAY CONSTRUCTION	25	3,863 19	2,292 17	154 53	3 2,446 70	1,416 49
12/11/19	997 LAND IMP	PAVEMENT	25	450 00	198 00	18 00	216 00	234 00
	1	TOTAL LAND IMPROVE	1	4,313 19	2,490 17	172 53	3 2,662 70	1,650 49

(Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

	ment of the			File a separate application for each return.				
			tomatic 3-Month Extension,	complete only Part I and check this box		▶ X		
		_		onth Extension, complete only Part II (on page 2 of this fo	orm)			
Do no	t comple	ete Part II uni	ess you have already been gra	anted an automatic 3-month extension on a previously filed	Form 8868			
Par	rt I	Automati	c 3-Month Extension o	f Time. Only submit original (no copies neede	ed)			
A corp		equired to file	Form 990-T and requesting ar	automatic 6-month extension—check this box and complet	te	▶ □		
All oth	er corpor	ations (includi		s,-REMICs, and trusts must use Form 7004 to request an ex	tension of			
Electr	onic Fili	ng (e-file). Ge	enerally, you can electronically	file Form 8868 if you want a 3-month automatic extension of	of time to file			
one of	the retur	ns noted belo	w (6 months for a corporation	required to file Form 990-T) However, you cannot file Form	8868			
electro	onically if	(1) you want t	he additional (not automatic) 3	3-month extension or (2) you file Forms 990-BL, 6069, or 88	70, group			
		•		d, you must submit the fully completed and signed page 2 (I	•			
8868	For more			risit www irs gov/efile and click on e-file for Charities & Nonp	1	· · · · · · · · · · · · · · · · · · ·		
Type of print	or	Name of Ex	empt Organization		Employer i	dentification number		
-	e by the LAMOILLE FAMILY CENTER, INC. 03-0277640							
filing yo	ue date for ling your 480 CADYS FALLS ROAD							
	teturn See astructions City, town or post office, state, and ZIP code For a foreign address, see instructions MORRISVILLE VT 05661-9137							
Check	type of		filed (file a separate applicatio					
	Form 99			Form 990-T (corporation)		Form 4720		
\vdash	Form 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 5227							
П	Form 996	0-EZ		Form 990-T (trust other than above)		Form 6069		
	Form 990	0-PF		Form 1041-A .		Form 8870		
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- 11	ie nooks	are in the can						
Τe	elephone	No ▶ 80	2-888-5229	FAX No ▶ 802-888-5392				
				usiness in the United States, check this box		▶ 🗌		
• If	this is for	a Group Retu	irn, enter the organization's foi	ur digit Group Exemption Number (GEN)	If this is	_		
for the	whole g	roup, check th	ıs box ▶ 📗 lf it i	s for part of the group, check this box	nd attach			
a list v	vith the n	ames and EIN	ls of all members the extension	n will cover		<u>-</u> -		
	•		•	oration required to file Form 990-T) extension of time tion return for the organization named above. The extension	า เร			
	for the or	rganization's re	eturn for					
	▶ 🔲 🤄	calendar year	or					
	▶ X 1	tax year begin	ning 07/01/09, and 6	ending 06/30/10				
2	2 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period							
		•		4720, or 6069, enter the tentative tax,				
			credits See instructions		3a \$			
		-		any refundable credits and estimated tax	3b \$			
			de any prior year overpayment t line 3b from line 3a, Include y	our payment with this form, or, if required,	30 3			
			=	TPS (Electronic Federal Tax Payment				
		See instruction			3c \$			
Cautio	on. If you	are going to		rawal with this Form 8868, see Form 8453-EO and Form 88	79-EO			
for pay	yment ins	structions						

Form 8868 (F	Rev. 1-2011)					Page 2
• If you are	filing for an Additional (Not Automatic) 3-Month Exte	ension, com	plete only Part II and check this box			► X
Note. Only co	omplete Part II if you have already been granted an auto	matic 3-mor	th extension on a previously filed Form	8868		
• If you are	filing for an Automatic 3-Month Extension, complete	only Part I	(on page 1)			
Part II	Additional (Not Automatic) 3-Month Ext	_		o copies	s needed).	
Type or print	Name of exempt organization			1	er identificatio	n number
File by the	Lamoille Family Center, I	nc.		03-0	277640	
extended due date for	Number, street, and room or suite no If a P O box,	see instructi	ons.			
filing your	480 Cadys Falls Road					
return See	City, town or post office, state, and ZIP code For a f	_				
instructions	Morrisville	05661	9137			
Enter the Ret	urn code for the return that this application is for (file a s	eparate app	lication for each return)			01
Applicatio	n	Return	Application			Return
Is For		Code	Is For			Code
Form 990 01						
Form 990-BL 02 Form 1041-A						
Form 990-EZ 03 Form 4720						
Form 990-PF 04 Form 5227						
Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069						11
Form 990-T (trust other than above) 06 Form 8870						12
STOP! Do no	ot complete Part II if you were not already granted ar	n automatic	3-month extension on a previously f	led Form	8868.	
If the org.If this is for the whole	ne No. 802-888-5229 anization does not have an office or place of business in or a Group Return, enter the organization's four digit Group, check this box If it is for part arms and EINs of all members the extension is for.	n the United oup Exempti of the group	on Number (GEN) If this	is attach a		> []
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	endar year, , or other tax year beginning	•	01/09 , and ending 06/30/1	.0		
	ax year entered in line 5 is for less than 12 months, chec	k reason:	Initial return Final return			
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Mor	e time needed to complete a	ın accı	irate audit of the f	iscal	. year.	
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6	6069, enter t	the tentative tax, less any		l .	
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	application is for Form 990-PF, 990-T, 4720, or 6069, en	-				
	ted tax payments made Include any pnor year overpayr	ment allowed	d as a credit and any	<u> </u>		
	t paid previously with Form 8868			8b	\$	
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FTD co	oupon or, if required, by using EFTPS (Electronic Federa			8c	\$	
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	s of perjury, I declare that I have examined this form, including and complete, and that I am authorized to prepare this form	ccompanying s	chedules and statements, and to the best of n	y knowledge	e and belief, it is	
Signature >		т.	itle ▶ CPA		Data ▶ (02/03/11
Signature 🚩						68 (Pey 1-2011)

Statement of Statistical Achievement by Program FY10

Family Infant & Toddler Program (FITP) 139 children served Learning Together Program (LT) & Childcare 36 students and children attended **Healthy Babies** 151 children served Reach Up 53 participants served Supervised Child Access Program 90 parents & children served LINK 19 youth served LINK summer program 25 youth attended LINK teen center 50 teens attended Childcare food program 387 children served Childcare referral 327 referrals made Childcare resource 191 providers trained Childcare subsidy 726 parents and children served Family Resouce 271 children served Accessing for Success (Making It Work) 39 participants served Home Town Play Groups 285 parents and children participated **Parnet Education Classes**

17 participants

Lamoille Family Center By-Laws

Article I. Name of Organization

- Section 1. The name of the organization shall be The Lamoille Family Center, Incorporated, and may hereafter be referred to as LFC.
- Section 2. This organization shall be a non-profit corporation and shall conduct only those activities allowed in these by-laws and permitted under section 501(c)(3) of the United States Internal Revenue Code of 1954 or the corresponding section of any future Federal tax code.
- Section 3. No part of the net earnings of the LFC shall inure to the benefit of any member, trustee, director, officer of the corporation, or any private individual, except that reasonable compensation may be paid for services rendered to or for the LFC.
- Section 4. In the case of the dissolution of the LFC, no member, trustee, director, officer of the corporation, or individual shall be entitled to share in the distribution of any of the corporate assets. Upon dissolution, any assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code of 1954 or the corresponding section of any future federal tax code, or municipal government for a public purpose.

Article II. Purpose and Objectives

- Section 1. To provide information which will help parents/caretakers understand the intellectual and emotional development of their children or children in their care.
- Section 2. To assist parents/caretakers in developing an awareness of the dynamics of parent-child interactions and to provide means by which they may implement positive changes in family patterns.
- Section 3. To assist parents/caretakers in providing competent care for their children through increased knowledge and understanding of physical needs.
- Section 4. To offer support services and referral systems which will help parents/caretakers provide for physical needs and to meet developmental needs not only of their children but themselves.

Article III. Board of Directors

Section 1. The governing body of the LFC shall be the Board of Directors which shall consist of no more than 15 members and no less than 5 members. Board members will be nominated by a nominating committee. There will be an attempt to represent consumers, providers of social and educational services, business and other interested groups that may be identified. Board members should also represent the geographical areas served by the LFC. Only the Board will vote upon Board nominations and other general operational issues.

Section 2. Membership on the Board shall be for a term of three years. Board members (upon approval of the full Board) can serve on the Board of Directors for up to two consecutive terms – or a period of six (6) six years. After which they must step down from the Board of Directors for at least a period of one year before starting a new (3) three year term.

Section 3. The Board of Directors shall have the responsibility of formulating policy to further the objectives of the LFC. The Board shall have the responsibility to employ and discharge an Executive Director with the advice and consent of the personnel committee. The Board of Directors will appoint and maintain a Development/Fundraising committee of LFC Staff (minimum of 3) and Board members (minimum of 2) along with the Director of Development and Executive Director to set goals and oversee all Development/Fundraising activities.

Section 4. The Board of Directors shall meet monthly on a day designated by the Board There shall be an annual meeting of the Board of Directors. Special meetings may be called by the Chairperson Each member will be sent an agenda of each meeting no later than (5) five days prior to a regular monthly or annual meeting Every effort shall be taken to notify all members of special meetings at least two days in advance, circumstances permitting.

Section 5. A quorum shall consist of one more than half of the number of Board members at any given time and a majority of those members present shall constitute basis for action.

Section 6. Members of the Board of Directors shall not knowingly engage in any activities or transaction in material conflict with their duties and obligations to the LFC while serving in such capacity. Director(s) shall not conduct private business in a manner which places them at a special advantage because of their association with the LFC. Any duality of interest of possible conflict of interest on the part of any Director should be disclosed to other members of the Board, Executive Director, and made a matter of record. Any Director having a duality of interest or possible conflict of interest on any matter should not vote or use personal influence on the matter, and should not be counted in determining the quorum for the meeting, even when permitted by law. The minutes of the meeting should reflect that a disclosure was made, the abstention from voting, and the quorum situation.

Article IV. Officers

Section 1. The officers of the LFC Board of Directors shall be the Chairperson, Vice-Chairperson, Secretary and Treasurer. All officers shall be elected from the LFC Board of Directors at the Annual Meeting. The Board of Directors shall fill the remaining term of any vacant office when the vacancy arises

Section 2. The Chairperson shall:

- A. Be the principal officer of the LFC and the subject to the control of the LFC Board of Directors.
- B. Call and preside at all meetings of the LFC Board of Directors.
- C. Produce meeting agendas (or have them produced by LFC staff) and make available the LFC Board of Directors (5) five days prior to any Board meeting
- D. Meet with the LFC staff annually with the Executive Director to hear questions or concerns related to the strategic plan or other Board activities.
- E. Act as an ex-officio member of any committee at his/her discretion.
- F. Be responsible for assembling any executive committee meetings and calling for executive sessions of the Board of Directors.

Sections 3. The Vice-Chairperson shall.

- A. Chair all Board meetings in the absence of the Chairperson.
- B. Serve as a member of the Executive Committee

Section 4. The Treasurer shall.

A. Be responsible for insuring any LFC Financial Reports are presented by the LFC Comptroller (or designee) to the LFC Board of Directors monthly and for insuring review of the agency budget for Board approval annually

Section 5. The Secretary shall.

- A. Keep true and accurate records of all meetings of the LFC Board of Directors Such reports shall include exact notation of al motions proposed and the votes thereon. The Secretary shall deliver a copy of these records to the LFC management for distribution to all Board members.
- B. Oversee special correspondences with and on behalf of the Board, (1 e. cards of thanks, etc.). This task can be assigned to a LFC Staff/Board Member if needed at any given meeting.

Section 6. Ex-officio members may include the management team of the LFC without the power to vote.

Section 7. The LFC relies on the active participation of its Board members. In certain circumstances, a Board member may be granted a leave of absence upon approval of the entire Board. Board members shall not miss more than four regularly scheduled meetings during any one year period or miss more than two consecutive meetings annually without contact by and further consideration by the entire Board for dismissal form the LFC Board of Directors.

Article V. Committees

The Chair(s) of The LFC Board of Directors shall appoint chairs of the standing committees

Section 1. The Nominating Committee will annually prepare a slate of nominees for offices and to fill vacancies on the board. In-the-intervals between annual meetings of the Board, the Nominating Committee shall submit a list of candidates to fill any vacancies in the Board positions to the Chairperson of the Board who will, in turn hold a vote to fill the vacant position.

Section 2. The Personnel Committee shall be responsible for assisting the Executive Director in the interviewing and selection of the Program Level Coordinator/Director positions, the Development Director, and the Comptroller. The committee will also recommend to the Board action regarding personnel issues such as grievances and changes in the personnel policies and procedures. This committee is also charged with supervision of and overseeing the annual evaluation of the Executive Director.

Section 3. The Governance Committee shall be responsible for working with the Executive Director and staff in the development and review of the (5) five year strategic plan. Additionally, this committee shall conduct a semi-annual review of the LFC By-Laws and propose any adjustments deemed necessary. The Governance Committee will also insure that all new LFC Board Members are oriented and trained within in their first three months as to their duties, responsibilities, committee assignments and role on the LFC Board.

Section 4. The Development Committee will develop and present a plan to the entire Board for annual fundraising The Development Committee will work with the LFC Executive Committee, the Director of Development and staff to develop short term and long term development goals and activities. This includes annual giving campaigns and special fundraising projects for various programs. At least two Board members must be in regular attendance at these monthly meetings.

Section 5. Special Committees (Ad – Hoc) shall be appointed by the Chairperson as deemed necessary to carry out the work and purpose of the LFC

Section 6 The Interagency Development Center Committee – this committee was eliminated.

Article VI. Amendments to the By-Laws

The By-Laws may be amended as follows:

- A. A proposed amendment shall be placed on the agenda upon a majority vote of the Board of Directors.
- B. The proposal shall be discussed at such meetings of the LFC Board of Directors and may be amended at that meeting
- C. The final proposed amendment shall then be placed on the agenda for the next regular meeting of the LFC Board of Directors.
- D. The vote of two-thirds of the members at an official meeting shall be sufficient to adopt an amendment. No proposed amendment shall be further amended at any meeting during which a final vote is taken.
- E. All amendments shall become effective immediately unless the LFC Board of Directors votes otherwise.

These By-Laws of the Lamoille Family Center, Incorporated were reviewed and adopted by the Board of Directors on this date of:

Date: August 26, 2009

Members Present: <u>Jeff Hunsberger</u>, <u>Keith Thompson</u>, <u>Rhoda Bedell</u>, <u>Dan Regan</u>, <u>John Duffy</u>. <u>Bryn Fisher</u>, <u>Ronna Ziegel</u>

Chairperson: Jeff Hunsberger

Vice-Chairperson: Keith Thompson

Secretary: Vacant

Treasurer: John Duffy

LIST OF OTHER PROGRAM SERVICES

Home Town Playgroup

Provides parents and children with the opportunity to meet & enjoy other community families.

Early Education Initiative

Provides children with a variety of experiences through the medium of play.

Emergency Needs Family Outreach

Provides families with funding and help for food, clothing and other necessities in emergency situations.

Child Care Resource and Referral

Provides special training, support, development opportunities and advice for childcare providers. Provides referrals to quality childcare programs in the Lamoille Valley.

Child Care Consultation Program

Supports Lamoille Valley childcare providers in the development of effective childcare strategies.

Child & Adult Food Program

Assists registered daycare providers in providing quality, nutritious meals.

People in Partnership

Promotes the growth of shared responsibility among the members of every community in the Lamoille Valley Region.

Healthy Babies, Kids & Families

Family Support Workers visit parents and their children up to age six to help ensure a healthy start in the early years of a child's life. Topics covered might include: discipline, basic infant care, health and safety, immunizations, colic, crying, childcare, baby and Dad issues, sleep habits, growth and development, weaning, eating habits, etc.

Reach Up

For young parents who are receiving RUFA and working toward self-sufficiency, receive support and information on career planning, returning to school, finding a job, balancing work and family demands, being a single parent, etc. Referrals are provided from Economic Services. Reach Up participants are assisted in improving their educational, career, and personal opportunities.

Parenting Workshops

Offer educational workshops throughout the year at the Lamoille Family Center and at various other locations around the county.

Subsidy for Child Care

Assists families with payment for childcare. Eligible families must meet income guidelines and have an established service need such as employment, self-employment, training, education (subsidy does not help pay for graduate students), seeking employment, or family support. A family applying for the childcare subsidy program must complete the application, and submit documentation that is required to determine their eligibility. This program is funded through a combination of state and federal funds.

Supervised Child Access Program

Provides a supervised and structured setting for children to visit with their non-residential parents and extended family members. The Family Center is a safe and neutral ground for visits and exchanges (i.e., drop off and pick up), and offers a homey comfortable atmosphere.

Making It Work

Assists people on Reach Up with the transition of going back to work. MIW provides worksite experiences, training opportunities and classroom training.

Assessing for Success

A strength-based assessment program designed to help Reach Up participants improve their educational, career, and personal opportunities. This program also includes job coaching and career placement.

Child Care Center

Provides high quality care for up to eight children under the age of three on site at the Family Center. The program promotes the physical, social, emotional and cognitive development of young children while responding to the needs of the families.

Specialized Child Care

Assists families experiencing significant stress or with special health needs or exceptional circumstances.

Early Intervention

Provides support and information by building teams of specialists to support families with children up to age three who have a medical diagnosis, a delay, or the high probability of a delay in their development or growth. Children receive services such as speech therapy and physical therapy, while parents receive training, counseling and service coordination.

Supervised Child Access Program

Provides a supervised and structured setting for children to visit with their non-residential parents and extended family members.

TOTAL OTHER PROGRAM'S

\$1,003,184