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# Fom **990-PF**

Department of the Treasury Internal Revenue Service

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

Treated as a Private Foundation

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



OMB No. 1545-0052

Fo	or calen	dar year 2011 or tax year beginning July	, <b>201</b>	1, and en	ding	June 30,	<b>, 20</b> 12
_N	ame of fo	undation	0:10-21	A	Employer	identification number	· · · · · · · · · · · · · · · · · · ·
٧	ermont L	uturgical & Music Association, Inc.	364514	-		03 036457	$\supset$
		d street (or P.O. box number if mail is not delivered to street address)		/suite B	Telephone	number (see instructio	ns)
6	The Gree	en				802-457-9910	
	ity or tow	n, state, and ZIP code		10	If exempt	on application is pend	ing, check here ▶
W	oodstock	x, Vermont, 05091				on approximation to post-	
G	Check	call that apply: Initial return Initial return Amended	n of a former public return	charity	•	organizations, check	
		Address change	nge			i organizations meetin nere and attach compt	
Н	Check	type of organization: 🔽 Section 501(c)(3) exempt p	rivate foundation			·	
	Section	on 4947(a)(1) nonexempt charitable trust   Other tax	kable private found	dation		foundation status was 07(b)(1)(A), check here	
ī	Fair m	narket value of all assets at   J Accounting method	l: 🗹 Cash 🗌 A	ccrual	If the four	idation is in a 60-mont	h termination
	end o	f year (from Part II, col. (c), Other (specify)			under sec	tion 507(b)(1)(B), chec	k here ▶ [
	line 16	5) ► \$ 29,776. (Part I, column (d) must be	on cash basis.)				
	Part I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	(a) Revenue and expenses per books	(b) Net inco		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<u>,</u> –	1	Contributions, gifts, grants, etc., received (attach schedule)	10,000			<del> </del>	
- )	2	Check ► if the foundation is <b>not</b> required to attach Sch. B	1			<del></del>	
) )	3	Interest on savings and temporary cash investments	3		3	***************************************	
1	4	Dividends and interest from securities	611	1	611	•	-
	5a	Gross rents	,				
<b>)</b>	Ь	Net rental income or (loss)					
, <u>a</u>	6a	Net gain or (loss) from sale of assets not on line 10		<u> </u>			
	b	Gross sales price for all assets on line 6a		<u> </u>			
	7	Capital gain net income (from Part IV, line 2)			1,825		
<b>a</b>	8	Net short-term capital gain					
3	9	Income modifications		-			
D	10a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold		<u> </u>			
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	10,614		2,439		
u	13	Compensation of officers, directors, trustees, etc.					
2020	14	Other employee salaries and wages		<u> </u>			
Ž	15	Pension plans, employee benefits					
	16a	Legal fees (attach schedule)					
	b	Accounting fees (attach schedule)		<u> </u>			
	С	Other professional fees lattach schedule)					
	17	Other protessional fees lattach schedule)					<u> </u>
	18	(  Cares (areeu scheane) (see hastructions)	ļ	<b></b>		<del></del>	
	19	Depreciation (attachischedule) and depletion				· . · · · · · · · · · · · · · · · · · ·	
	20	Occupancy Occupancy Travel combrences land meetings	<del></del>		· · · · · ·	<del></del>	<u> </u>
	21 (	travel, comerences and meetings		<del> </del>		<del> </del>	
	22	Printing and publications		<del> </del>	<del>,,</del>	<del> , - ,</del>	<u> </u>
	23 24	Other expenses (attach schedule)		<del> </del>		<del></del>	
		Add lines 13 through 23					
	25	Contributions, gifts, grants paid	15,000.			<del></del>	15,000
	26	Total expenses and disbursements. Add lines 24 and 25	15,000	ļ			15,000
	<b>27</b>	Subtract line 26 from line 12:					
	) a	Excess of revenue over expenses and disbursements	(4,359)	<del></del>		<del> </del>	
	b	Net investment income (if negative, enter -0-) .			2,439		ļ
	. с	Adjusted net income (if negative, enter -0-)		1			L

Part II		Attached schedules and amounts in the description column	Beginning of year		nd o	f year
Γċ	I E II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash-non-interest-bearing				
	2	Savings and temporary cash investments	532	1,	394	1,394
	3	Accounts receivable ▶		···		
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶				
. :	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				-
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶				
		Less: allowance for doubtful accounts ▶				
\$	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
Ą	10a	Investments—U.S. and state government obligations (attach schedule)				
	b	Investments – corporate stock (attach schedule)	17,102	17,	407	17,407
	C	Investments - corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment: basis ▶				
		Less: accumulated depreciation (attach schedule) ▶				
	12	Investments-mortgage loans				
	13	Investments—other (attach schedule)	1,523	12,	369	12,369
	14	Land, buildings, and equipment: basis ▶				
		Less: accumulated depreciation (attach schedule) ▶		·		
	15	Other assets (describe ▶)				<del></del>
	16	Total assets (to be completed by all filers—see the				
		instructions. Also, see page 1, item I)	19,157	31,	170	31,170
	17	Accounts payable and accrued expenses				
S	18	Grants payable	-			
Liabilities	19	Deferred revenue		·		ļ
豆	20	Loans from officers, directors, trustees, and other disqualified persons	<del></del>	<del></del>		
<u>ë</u> .	21	Mortgages and other notes payable (attach schedule)				
	22 23	Other liabilities (describe ► )  Total liabilities (add lines 17 through 22)		<del></del>		
	23					
S		Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.				
ances	24	Unrestricted			1	
	25	Temporarily restricted	19,157	31.	370	
Ö	26	Permanently restricted	,	,		
Net Assets or Fund Ba		Foundations that do not follow SFAS 117, check here ▶ □				
Ī		and complete lines 27 through 31.				
ō	27	Capital stock, trust principal, or current funds				
र्घ	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
SS	29	Retained earnings, accumulated income, endowment, or other funds				
Ä	30	Total net assets or fund balances (see instructions)	19,157	31,	170	
Ě	31	Total liabilities and net assets/fund balances (see				
		instructions)				
	rt III	Analysis of Changes in Net Assets or Fund Balances				
1		I net assets or fund balances at beginning of year-Part II, colu				
		of-year figure reported on prior year's return)		<u> </u>	1	19,157
2		er amount from Part I, line 27a			2	(4,359)
3		er increases not included in line 2 (itemize)			3	<del></del>
4		lines 1, 2, and 3		· · ·	4	14,798
5	Decr	reases not included in line 2 (itemize) ► Il net assets or fund balances at end of year (line 4 minus line 5)—I	Doet II. ashima (h) Pi		5	44700
	iota	ii net assets or iung daiances at eng of year (line 4 minus line 5)—I	rart II, column (D), line	3 JU	6	14,798

rart	M Capital Gains an	o Losses for rax on investi	nent income				
		he kind(s) of property sold (e.g., real estatuse; or common stock, 200 shs. MLC Co.		(b) How acquired P-Purchase D-Donation	(c) Date action (mo., day		(d) Date sold (mo., day, yr.)
1a	PNC 62 Shares			D	7/29/0	8	12/2/2011
b	XOM 151 Shares		•	D	7/25/20	09	6/19/12
С	XOM 49 Shares			D	7/20/20	11	6/19/2012
d		<del></del>					
е							•
-	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis		(h) Gain or (e) plus (f) m	
	3,357	0		4,216	L	· · · · ·	(859)
<u>a</u> b	12,684	0	<del></del>	10,000			2,684
	4,067	0	<del></del>	4,067			0
<u>c</u>	4,007			7,007	<del></del>		
<u>d</u>	<del></del>						
e	O-malete and for seests of		h Ab a fa dakia	10/01/00			
	Complete only for assets sn	owing gain in column (h) and owned	<del></del>	<del></del>		Sains (Col. (h)	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col. (i) . (j), if any		Losses (from	ss than -0-) <b>or</b> n col. (h))
а							
b							
С							
d							<u> </u>
е				·			
2	Capital gain net income of	nringt canital local ( "	also enter in Pa , enter -0- in Pa	3	2		1,825
•	Net about town conital as	• • • • • • • • • • • • • • • • • • • •		-	-		1,025
3		iin or (loss) as defined in sections t I, line 8, column (c) (see instru					
				, enter -o- in			
Part		der Section 4940(e) for Redu		· · · · / ;	3		
Was t		e section 4942 tax on the distribu			base period	1?	☐ Yes ☐ No
	<del> </del>	t qualify under section 4940(e). [	<del> </del>			-4-1-	
		ount in each column for each ye	ar; see the instr	actions before m	aking any e	<del></del>	(4)
	(a) Base penod years	(b) Adjusted qualifying distribution	a Not value as	<b>(c)</b> f noncharitable-use a		Distribi	(d) ution ratio
Cale	endar year (or tax year beginning i	")		nonchantable-use a			ded by col. (c))
	2010	<del></del>	0,000	<del></del>	0		0 %
	2009		,000		0		00 %
	2008	<del></del>	,000		0		0 %
	2007	10	,000	-,- <u>,</u>	0		00%
	2006		8090	<u> </u>	0	10	00%
						Ì	
2	Total of line 1, column (d				. 2	L	100%
3		for the 5-year base period—div			the		
	number of years the four	dation has been in existence if le	ss than 5 years		. 3	i	100%
4	Enter the net value of no	ncharitable-use assets for 2011 f	rom Part X. line	5	. 4	i	0
•					·		· · · · · · · · · · · · · · · · · · ·
_	Multiply line 4 by line 3				. 5	i i	0
5	Muluply life 4 by life 3				·   -		<u> </u>
•	Enter 10/ of not investme	ent income (194 of Bort Libe 27h	۸.			í	244
6	Enter 170 OF Net INVESTME	ent income (1% of Part I, line 27b	,,		. 6		
_	Add the section					ı	044
7	Add lines 5 and 6				. 7		244
						ı	
8		ons from Part XII, line 4			. 8	<u> </u>	15,000
		eater than line 7, check the box is	n Part VI, line 1b	o, and complete	tnat part us	ing a 1%	tax rate. See the
	Part VI instructions.						

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	nstru	ctio	ns)		
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. )		-			
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)					
b						
	here ▶ ☐ and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of					
_	Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<del> </del>		
3 4	Add lines 1 and 2	<del></del>		-		
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 5					
6	Credits/Payments:					
a	2011 estimated tax payments and 2010 overpayment credited to 2011   6a					
b	Exempt foreign organizations—tax withheld at source 6b					
c	Tax paid with application for extension of time to file (Form 8868) . 6c					
d	Backup withholding erroneously withheld 6d			ŀ		
7	Total credits and payments. Add lines 6a through 6d					
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10					
11	Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ Refunded ▶ 11	<u></u>		<u> </u>		
	VII-A Statements Regarding Activities	1	100			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		Yes			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	1a		~		
b	of the instructions for definition)?	1b		,		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	- 10	<del></del>	<u> </u>		
	published or distributed by the foundation in connection with the activities.					
С	Did the foundation file Form 1120-POL for this year?	1c		1		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			1		
	on foundation managers. ► \$			ļ		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		~		
•	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3				
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<b>V</b>		
4a b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	4b		1		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		~		
	If "Yes," attach the statement required by General Instruction T.			_		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that					
	conflict with the state law remain in the governing instrument?	6	•			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	1			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶	ļ				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation			ļ		
•		8b	~	<u> </u>		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes,"			<b> </b>		
	complete Part XIV	9		•		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	-		Ť		
••	names and addresses	10	-			

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Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		,
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		,
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	
	Website address ►  The books are in care of ► J Allen Dougherty  Telephone no. ► 802			
14	The books are in care of ▶ J Allen Dougherty  Telephone no. ▶ 802	2-457-9		
	Located at billine Green, woodstock, vermont	05091	1 	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year		•	0
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		-
	the foreign country ▶	ĺ		
Dort		<u> </u>		
raii	VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):		163	110
la	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?   Yes  No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?   Yes  No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?	1c		•
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			·
а	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011?			-
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
þ	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  ▶ 20, 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		,	
b	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or			
-	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2011.)	3b		<del> </del>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		•
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4h		40

om 99	, 00-PF (2011)     .									Page <b>6</b>
Part	VII-B Statements Regarding Activitie	s for V	Vhich Form	4720	May Be R	equir	ed (continue	d)		
5a	During the year did the foundation pay or incur					•				
	(1) Carry on propaganda, or otherwise attempt	to influe	ence legislati	on (sec	tion 4945(e	))? .	☐ Yes 🔽	No		
	(2) Influence the outcome of any specific publi	ic electi	on (see sect	ion 495	5); or to ca	arry on	,			
	directly or indirectly, any voter registration d	rive?					☐ Yes 🗹	No		ļ
	(3) Provide a grant to an individual for travel, stu	udy, or o	other similar	purpos	es?		☐ Yes 🗹	No	il	-
	(4) Provide a grant to an organization other tha	•								
	section 509(a)(1), (2), or (3), or section 4940(							No		
	(5) Provide for any purpose other than religious	s, charit	able, scientif	ic, litera	ary, or educ	cationa				
	purposes, or for the prevention of cruelty to	children	or animals?		· · - · · ·	·	☐Yes 🔽	No		
b	If any answer is "Yes" to 5a(1)-(5), did any of th	e transa	actions fail to	qualify	under the	except				
	Regulations section 53.4945 or in a current notice								5b	
	Organizations relying on a current notice regard	ing disa	ster assistar	nce che	ck here .		🕨	П		
C	If the answer is "Yes" to question 5a(4), does	-				the tax	(	_		
	because it maintained expenditure responsibility							No		
	If "Yes," attach the statement required by Regula	ations s	ection 53.49	45-5(d)						1
6a	Did the foundation, during the year, receive any					emiums	5			
	on a personal benefit contract?							No		İ
b	Did the foundation, during the year, pay premiur						t contract?		6b	1
	If "Yes" to 6b, file Form 8870.	•	•	•	•					
7a	At any time during the tax year, was the foundation	a party	to a prohibite	d tax sh	elter transac	ction?	☐ Yes ☐	No		ŀ
	If "Yes," did the foundation receive any proceed						ransaction?		7b	-
Pari	VIII Information About Officers, Direct	ctors,	rustees. F	ounda	tion Mana	anare	Highly Daid	I Em	plove	es.
	<del></del>					4 <del>9</del> 0.0,	ragany raid			
	and Contractors	•				agoi o,	riigiliy raid			,
1	and Contractors  List all officers, directors, trustees, foundation		•							
1	List all officers, directors, trustees, foundation	n mana	agers and the	eir con	npensation	ı (see i	nstructions).	14		se account,
1		(b) Title	agers and th	eir con	npensatior	(see i	nstructions).	, (e	e) Expen	
	List all officers, directors, trustees, foundation	(b) Title	agers and the e, and average rs per week ed to position	eir con	npensation mpensation paid, enter -0-)	(see i	nstructions). Contributions to byee benefit plans	s (€	e) Expen	se account,
	List all officers, directors, trustees, foundation (a) Name and address	(b) Title hou	agers and the e, and average rs per week ed to position	eir con	npensation mpensation paid, enter	(see i	nstructions). Contributions to byee benefit plans	, (e	e) Expen	se account,
	List all officers, directors, trustees, foundation (a) Name and address	(b) Title hou	agers and the e, and average rs per week ed to position	eir con	npensation mpensation paid, enter -0-)	(see i	nstructions). Contributions to byee benefit plans	s (€	e) Expen	se account,
	List all officers, directors, trustees, foundation (a) Name and address	(b) Title hou	agers and the e, and average rs per week ed to position	eir con	npensation mpensation paid, enter -0-)	(see i	nstructions). Contributions to byee benefit plans	s (€	e) Expen	se account,
	List all officers, directors, trustees, foundation (a) Name and address	(b) Title hou	agers and the e, and average rs per week ed to position	eir con	npensation mpensation paid, enter -0-)	(see i	nstructions). Contributions to byee benefit plans	s (€	e) Expen	se account,
	List all officers, directors, trustees, foundation (a) Name and address	(b) Title hou	agers and the e, and average rs per week ed to position	eir con	npensation mpensation paid, enter -0-)	(see i	nstructions). Contributions to byee benefit plans	s (€	e) Expen	se account,
	List all officers, directors, trustees, foundation (a) Name and address	(b) Title hou	agers and the e, and average rs per week ed to position	eir con	npensation mpensation paid, enter -0-)	(see i	nstructions). Contributions to byee benefit plans	s (€	e) Expen	se account,
	List all officers, directors, trustees, foundatio  (a) Name and address  Dougherty, 6 The Green, Woodstock, VT 05091	(b) Title hou devot Preside	agers and the e, and average rs per week ed to position and	(c) Co (ff not	npensation mpensation paid, enter -0-)	(d) empli and def	nstructions). Contributions to byee benefit plans erred compensate	0 (€	e) Expendence other a	se account, lowances
	List all officers, directors, trustees, foundation (a) Name and address	(b) Title hou devot Preside	agers and the e, and average rs per week ed to position and	(c) Co (ff not	npensation mpensation paid, enter -0-)	(d) empli and def	nstructions). Contributions to byee benefit plans erred compensate	0 (€	e) Expendence other a	se account, lowances
J Aller	List all officers, directors, trustees, foundation (a) Name and address Dougherty, 6 The Green, Woodstock, VT 05091  Compensation of five highest-paid employe	(b) Title hou devot Preside	agers and the e, and average rs per week ed to position ant	(c) Co (ff not	npensation mpensation paid, enter -0-)	(d) empli and def	nstructions). Contributions to byee benefit plans erred compensate see instructions to be instructions.	ons).	e) Expendence other a	se account, lowances  0
J Aller	List all officers, directors, trustees, foundation (a) Name and address Dougherty, 6 The Green, Woodstock, VT 05091  Compensation of five highest-paid employe	(b) Title hou devot Preside	agers and the e, and average rs per week ed to position and	eir con (c) Co (if not	npensation mpensation paid, enter -0-)	(see i (d) (d) emplo and def	nstructions). Contributions to byee benefit plans erred compensate	ons).	a) Expenother a	se account, lowances
J Aller	List all officers, directors, trustees, foundatio  (a) Name and address  Dougherty, 6 The Green, Woodstock, VT 05091  Compensation of five highest-paid employe "NONE."	(b) Title hou devot Preside	agers and the e, and average rs per week ed to position ent	eir con (c) Co (if not	npensation mpensation paid, enter -0-)  0	(see i (d) (d) emplo and def	nstructions). Contributions to byee benefit plans erred compensations to be erred compensations.  (d) Contributions employee benefit plans and deferred compensations and deferred compensations.	ons).	a) Expenother a	se account, lowances  0  ne, enter
J Aller	List all officers, directors, trustees, foundatio  (a) Name and address  Dougherty, 6 The Green, Woodstock, VT 05091  Compensation of five highest-paid employe "NONE."	(b) Title hou devot Preside	agers and the e, and average rs per week ed to position ent	eir con (c) Co (if not	npensation mpensation paid, enter -0-)  0	(see i (d) (d) emplo and def	nstructions). Contributions to byee benefit plans erred compensations to be erred compensations.  (d) Contributions employee benefit plans and deferred compensations and deferred compensations.	ons).	a) Expenother a	se account, lowances  0  ne, enter
J Aller	List all officers, directors, trustees, foundatio  (a) Name and address  Dougherty, 6 The Green, Woodstock, VT 05091  Compensation of five highest-paid employe "NONE."	(b) Title hou devot Preside	agers and the e, and average rs per week ed to position ent	eir con (c) Co (if not	npensation mpensation paid, enter -0-)  0	(see i (d) (d) emplo and def	nstructions). Contributions to byee benefit plans erred compensations to be erred compensations.  (d) Contributions employee benefit plans and deferred compensations and deferred compensations.	ons).	a) Expenother a	se account, lowances  0  ne, enter
J Aller	List all officers, directors, trustees, foundatio  (a) Name and address  Dougherty, 6 The Green, Woodstock, VT 05091  Compensation of five highest-paid employe "NONE."	(b) Title hou devot Preside	agers and the e, and average rs per week ed to position ent	eir con (c) Co (if not	npensation mpensation paid, enter -0-)  0	(see i (d) (d) emplo and def	nstructions). Contributions to byee benefit plans erred compensations to be erred compensations.  (d) Contributions employee benefit plans and deferred compensations and deferred compensations.	ons).	a) Expenother a	se account, lowances  0  ne, enter
J Aller	List all officers, directors, trustees, foundatio  (a) Name and address  Dougherty, 6 The Green, Woodstock, VT 05091  Compensation of five highest-paid employe "NONE."	(b) Title hou devot Preside	agers and the e, and average rs per week ed to position ent	eir con (c) Co (if not	npensation mpensation paid, enter -0-)  0	(see i (d) (d) emplo and def	nstructions). Contributions to byee benefit plans erred compensations to be erred compensations.  (d) Contributions employee benefit plans and deferred compensations and deferred compensations.	ons).	a) Expenother a	se account, lowances  0  ne, enter

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

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Page 7

ı aı	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En and Contractors (continued)	
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None		
		·
Γota	number of others receiving over \$50,000 for professional services	
Par	IX-A Summary of Direct Charitable Activities	
	t the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of janizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1	Sponsor with Pentangle Arts Council (a 501© (3) Organization classical and liturgical music concerts for the	
	benefit of the greater Woodstock, Vermont community	15,000
_		
2		
		ļ
3		{
		}
4		
	IX-B Summary of Program-Related Investments (see instructions)	A
1	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
		nor
		1101
2		
All	other program-related investments. See instructions.	
3		
Tota	Add lines 1 through 3	

Form **990-PF** (2011)

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei	ign found	dations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	-
C	Fair market value of all other assets (see instructions)	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	-   -	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	
6	Minimum investment return. Enter 5% of line 5	6	
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part.)	•	
1	Minimum investment return from Part X, line 6	1	0
2a	Tax on investment income for 2011 from Part VI, line 5	-	
b	Income tax for 2011. (This does not include the tax from Part VI.) 2b	1	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	<del></del>
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		<del></del>
-	line 1	7	0
Part	XII Qualifying Distributions (see instructions)	<u> </u>	
		<del></del>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		45.000
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	15,000.
Ъ	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	<u></u>	
а	Suitability test (prior IRS approval required)	3a	<del></del>
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	15,000
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	\ _ \	
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	15,000
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whethe	r the foundation

Part XIII Undistributed Income (see instructions)							
1	Distributable amount for 2011 from Part XI,	(a) Corpus	(b) Years prior to 2010	<b>(c)</b> 2010	<b>(d)</b> 2011		
	line 7	İ			· · · · · · · · · · · · · · · · · · ·		
2	Undistributed income, if any, as of the end of 2011:						
а	Enter amount for 2010 only						
b	Total for prior years: 20 ,20 ,20						
3	Excess distributions carryover, if any, to 2011:						
a	From 2006	<u> </u>		<u>.</u>	-		
b	From 2007	]					
С	From 2008	]					
d	From 2009						
е	From 2010						
f	Total of lines 3a through e						
4	Qualifying distributions for 2011 from Part XII, line 4: ▶ \$						
а	Applied to 2010, but not more than line 2a .						
b	Applied to undistributed income of prior years				;		
	(Election required—see instructions)		<del> </del>				
С	Treated as distributions out of corpus (Election required—see instructions)						
d	Applied to 2011 distributable amount	ļ					
е	Remaining amount distributed out of corpus		<b> </b>				
5	Excess distributions carryover applied to 2011		<del> </del>				
	(If an amount appears in column (d), the same amount must be shown in column (a).)	]					
6	Enter the net total of each column as indicated below:						
_	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5		-				
a	Prior years' undistributed income. Subtract						
U	line 4b from line 2b		}	,			
С	Enter the amount of prior years' undistributed		<del></del>	· · · · · · · · · · · · · · · · · · ·	<del></del>		
·	income for which a notice of deficiency has						
	been issued, or on which the section 4942(a)						
	tax has been previously assessed						
d	Subtract line 6c from line 6b. Taxable amount—see instructions						
е	Undistributed income for 2010. Subtract line			<del></del>			
_	4a from line 2a. Taxable amount-see						
	instructions	ļ					
f	Undistributed income for 2011. Subtract lines						
	4d and 5 from line 1. This amount must be						
	distributed in 2012						
7	Amounts treated as distributions out of corpus						
	to satisfy requirements imposed by section			ļ			
_	170(b)(1)(F) or 4942(g)(3) (see instructions) .						
8	Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions).						
^	• • • • • • • • • • • • • • • • • • • •		+	<del> </del>	ļ		
9	Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a						
40	Analysis of line 9:		<del> </del>				
10	Excess from 2007			1			
a b	Excess from 2008	1					
C	Excess from 2009	1		1	}		
d	Excess from 2010	1					
e	Excess from 2011	1					

	90-PF (2011)					Page <b>10</b>
	XIV Private Operating Founda	<del></del>				-
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective fo	="	•			(2)
_	Check box to indicate whether the fou		e operating founda		section   4942(j)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	<u> </u>	Prior 3 years	<del></del>	(e) Total
	investment return from Part X for	(a) 2011	<b>(b)</b> 2010	(c) 2009	(d) 2008	
	each year listed					
	85% of line 2a		1			<del>                                     </del>
C	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly		<del></del>		<u> </u>	<del> </del>
ŭ	for active conduct of exempt activities					AP. 4.
e	Qualifying distributions made directly		1			
	for active conduct of exempt activities.					
_	Subtract line 2d from line 2c			<u> </u>	<del></del>	<del> </del>
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test-enter:	İ				
	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)			<b></b>	<b></b>	
b	of minimum investment return shown in				1	
С	Part X, line 6 for each year listed					
	(1) Total support other than gross	-				
	investment income (interest, dividends, rents, payments on				[	
	securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part	XV Supplementary Information	on (Complete t	his part only if t	he foundation	had \$5,000 or m	ore in assets at
	any time during the year-	<del></del>	ns.)	<u> </u>		
1	Information Regarding Foundation					
a	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	only if they have c	ontributed more tr	ian \$5,000). (See	Section 507 (d)(2).)	
lone	List any managers of the foundation	who own 10% o	r more of the ste	ok of a corporati	on for an aqually la	argo portion of the
b	ownership of a partnership or other e					arge portion or the
lone	отположер от а размененир от очног о	,		g. ca.c	,	
2	Information Regarding Contribution	n. Grant. Gift. Lo	en. Scholarship.	etc Programs:		•
	Check here ▶ ☐ if the foundation		• • •	. •	organizations and	d does not accept
	unsolicited requests for funds. If the	foundation makes	gifts, grants, etc.	(see instructions)	) to individuals or o	rganizations under
	other conditions, complete items 2a,	b, c, and d.				
	The name, address, and telephone no n Dougherty, 6 The Green, Woodstock, Ver		on to whom applic	cations should be	addressed:	
	The form in which applications should of charity donee and purpose of grant reque		d information and	materials they sh	nould include:	
	Any submission deadlines:					
lone	Any regrictions or limitations on a	warde auch on h	v googmahical -	race charitable	fiolds kinds of i	titutions or other
	Any restrictions or limitations on av		y geographical a	reas, criamable	neias, kinas ot ins	sulutions, or other
anar	ally none, but favor classical and lituraical m	HIGIC DIOGRAMS				

Part XV Supplementary Information 3 Grants and Contributions Paid Du			od for Eur	huro Dovemont	
	uring u			ture Payment	1
Recipient		If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or busine	ess) 	or substantial contributor	recipient	00.10.0000.1	<u> </u>
a Paid during the year					<u> </u>
Pentangle Arts Council, Town Hall, 31 The Green, Woodstock, VT 05091			501©(3)	Classical and Liturgical	\$15,000
	_				
			]	Music Programs run by the	
				donee and sponsored in	
				part by donee	
					•
			ļ		
	<del></del>				
Total	<u> </u>	<u> </u>		▶ 3a	15,000
<b>b</b> Approved for future payment			l 		
				1	
			ļ		}
					İ
					1
Total	<del></del>	<u> </u>	<u> </u>		

		Analysis of Income-Producing Acs amounts unless otherwise indicated.		isiness income	Excluded by sect	ion 512, 513, or 514	(6)
1	Pro	gram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See Instructions.)
	а						
	b						
	C .				ļ		
	ď					<u> </u>	
	e .				ļ	<del></del>	
	T .						
_	_	Fees and contracts from government agencies					
2		mbership dues and assessments	-				
3		rest on savings and temporary cash investments					
4		dends and interest from securities					
5		rental income or (loss) from real estate:					
		Debt-financed property					
_		Not debt-financed property			<u> </u>		
6		rental income or (loss) from personal property					
7		er investment income					
8		or (loss) from sales of assets other than inventory			1		
9		income or (loss) from special events					
10		ss profit or (loss) from sales of inventory	-		ļ		
11		er revenue: a	<u> </u>		1		<u> </u>
	b.				<del> </del>		
	d .				·		
	e .				<del>                                     </del>		
12		total. Add columns (b), (d), and (e)	ļ <del> </del>		<del> </del>		
13	Total	al. Add line 12, columns (b), (d), and (e)	<u> </u>		<u> </u>	13	l
		ksheet in line 13 instructions to verify calculation			• • • • •		
		<b>Relationship of Activities to the A</b>		ent of Exemp	t Purposes		·
Lin	e No.	Explain below how each activity for which accomplishment of the foundation's exempt pur	income is repo	orted in column	(e) of Part XVI	-A contributed in	nportantly to the
	<u> </u>	accomplishment of the foundation's exempt pur	poses (other tha	n by providing fur	nds for such purp	oses). (See instruc	tions.)
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Part XVII

	<u> </u>									<u> </u>
Part	XVII			sfers To and Trans	actions and I	Relationships	With None	haritab	le	
	D: : :		ganizations		1		las deserte		Yes	No
1	in se			engage in any of the fol section 501(c)(3) organi					res	МО
а	-		porting foundation to	a noncharitable exemp	pt organization	of:		l		
		ash						1a(1)		1
		ther assets .		<i>.</i>				1a(2)		1
_ b		r transactions:								
	(1) S	ales of assets to	a noncharitable exe	mpt organization .				1b(1)		•
	(2) P	urchases of asse	ets from a noncharita	able exempt organization	on			1b(2)		~
	(3) R	ental of facilities,	, equipment, or othe	r assets				1b(3)		1
	(4) R	eimbursement a	rrangements					1b(4)		1
	(5) L	oans or loan gua	rantees					1b(5)		1
	(6) P	erformance of se	ervices or membersh	ip or fundraising solicit	ations			1b(6)		1
C	Shari	ng of facilities, e	quipment, mailing lis	sts, other assets, or pai	d employees			1c		1
đ	If the	answer to any	of the above is "Yes	s," complete the follow	ing schedule.	Column (b) shou	ıld always s	show the	fair m	arke
				ces given by the report						
	value	in any transaction	on or sharing arrang	ement, show in column	(d) the value of	of the goods, oth	er assets, o	r services	recei	ved.
(a) Line	no.	(b) Amount involved	(c) Name of nonch	nantable exempt organization	(d) Desc	ription of transfers, tr	ansactions, and	shanng an	angeme	ents
						<del></del>				
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0-		- formulation disc	and a second	Stated white as seleted	** ***	ra tay ayamat a				
	desc	ribed in section 5		filiated with, or related other than section 501(c			-		<b>2</b>	No
		(a) Name of organ		(b) Type of organ	zation	(c) D	escription of re	lationship		
		<del>`</del>					·····			
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							·			
	Unde	er penalties of perjury, I	declare that I have examine	d this return, including accompa	anying schedules and	d statements, and to th	e best of my kn	owledge and	belief, it	is true
Sign	corre	ect, and complete. Decl	aration of preparer (other tha	an taxpayer) is based on all infor	mation of which prep	parer has any knowledg		the IRS disc	ice this	roturo
Here	1 1	Q 100	Descates	19/4/2002	Paga	77	with	the preparer	shown	below
. IGI C		nature of officer or true	stee	Date	Title	<u> </u>	(See I	nstructions)?	∐Yes	□No
	1 9,	Pnnt/Type preparer		Preparer's signature		Date		PTIN		
Paid		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					Check self-employ	rf		
Prep		Firm's name	· · · · · · · · · · · · · · · · · · ·	.1 .			n's EIN ▶	<u>-</u>		
Use (	Only		<del> </del>							
		Firm's address				Lauc	ne no.			

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

2011

OMB No. 1545-0047

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

	ame of the organization /ermont Liturgical & Music Association, Inc		Employer identification number 03 036457			
Organia	zation type (chec	k one):				
Filers o	ıf:	Section:		<del></del>		
Form 990 or 990-EZ		☐ 501(c)(	) (enter number) organization			
		4947(a)(1) r	nonexempt charitable trust <b>not</b> treated as a	private foundation		
		☐ 527 politica	al organization			
Form 99	90-PF	<b>☑</b> 501(c)(3) e>	xempt private foundation			
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		☐ 501(c)(3) ta	axable private foundation			
			·			
Genera	il <b>Rule</b> For an organizat		990-EZ, or 990-PF that received, during the Complete Parts I and II.	year, \$5,000 or more (in money or		
Special	Rules					
	under sections 5	i09(a)(1) and 170(b)( \$5,000 or <b>(2)</b> 2% o	filing Form 990 or 990-EZ that met the 33½ (1)(A)(vi) and received from any one contribut of the amount on (i) Form 990, Part VIII, line 1	tor, during the year, a contribution of		
	during the year,	total contributions of	ganization filing Form 990 or 990-EZ that rec of more than \$1,000 for use exclusively for reli vention of cruelty to children or animals. Com	igious, charitable, scientific, literary,		
	during the year, not total to more year for an exclu applies to this or	contributions for use than \$1,000. If this sively religious, char ganization because	rganization filing Form 990 or 990-EZ that rece exclusively for religious, charitable, etc., pus box is checked, enter here the total contributitable, etc., purpose. Do not complete any ce it received nonexclusively religious, charital	urposes, but these contributions did utions that were received during the of the parts unless the <b>General Rule</b> ble, etc., contributions of \$5,000 or		

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). Vermont Liturgical & Music Association, Inc.

Employer identification number 03 036457

Part I	Contributors (see instructions). Use duplicate cop	ies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Mr & Mrs Marshall Vogt Heuser		Person  Payroll  Payroll
	301 Mocking Bird Hill Road	\$ 10,000	Noncash 🗹
	Louisville, Ky 40207		(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization

Employer identification number

ncash Property (see instructions). Use duplicate co	opies of Part II if additional space	e is needed.
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Shares of Exxon Mobile Corporation Common Stock	\$ \$	7/20/2011
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	s	
	Description of noncash property given  (b)  Description of noncash property given  (b)  Description of noncash property given  (b)  Description of noncash property given  Description of noncash property given  (b)  Description of noncash property given	Description of noncash property given    FMV (or estimate) (see instructions)

Transferee's name, address, and ZIP + 4

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Relationship of transferor to transferee