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Form 99€-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

2011

0

Form 990-PF (20

	For	For calendar year 2011 or tax year beginning , and ending							
	Nai	me of foundation	A Employer identification number						
	МА	RION L HAGAR MEMORIAL SCHOLARSHIP FUND	22-2816135						
		mber and street (or P O box number if mail is not delivered to street add	ВΤ	elephone number (see inst					
	РC) BOX 303			802-525-3766				
		y or town, state, and ZIP code			C If	ending, check here			
	BAI	RTON	/T (05822-0303		F F-	g,		
	G	Check all that apply.	return of a former p		D 1	Foreign organizations, che	eck here		
			nded return	•					
:		Address change Name	e change		-	Foreign organizations mee check here and attach con	· —		
5	Н	Check type of organization Section 501(c)(3) exem		n	.		· <u>-</u>		
		Section 4947(a)(1) nonexempt charitable trust Ot				private foundation status w ider section 507(b)(1)(A), c			
		Fair market value of all assets at end of year (from Part II, col (c), Inne 16) ►\$ J Accounting m ☐ Other (spe	nethod X Cash ecify)	Accrual	FIF	the foundation is in a 60-minder section 507(b)(1)(B), c	onth termination		
	Pa	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements		
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net investm income	ent	(c) Adjusted net income	for charitable purposes		
		the amounts in column (a) (see instructions))	books	moome		moonic	(cash basis only)		
		Contributions, gifts, grants, etc , received (attach schedule)							
	Ì	2 Check ► if the foundation is not required to attach Sch. B							
7107 C		3 Interest on savings and temporary cash investments	48	 	48				
		4 Dividends and interest from securities	0	<u> </u>	0				
		5 a Gross rents			0				
N	e	b Net rental income or (loss) 0	0						
×	eu	6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a		·			_		
AFK 70	Revenue	7 Capital gain net income (from Part IV, line 2)			0				
	;	8 Net short-term capital gain			<u>~</u>	RECEIVED.			
ũ		9 Income modifications			\ _		78		
SCANNED		10 a Gross sales less returns and allowances 0			أما	APR 1 6 2012	191		
4		b Less Cost of goods sold0			15	APR 1 6 2015	RS		
$\ddot{\mathbf{c}}$. !	c Gross profit or (loss) (attach schedule)	0			117			
(C))	11 Other income (attach schedule)	0		10	OGDEN, U			
		12 Total. Add lines 1 through 11	48		148	0			
	eS	13 Compensation of officers, directors, trustees, etc	600				600		
	enses	14 Other employee salaries and wages		<u> </u>					
	pe	Pension plans, employee benefits							
	Expe	16 a Legal fees (attach schedule)	0		<u>0</u> 0		0		
	۸e	b Accounting fees (attach schedule) c Other professional fees (attach schedule)	0		0	+	0		
	ati	17 Interest							
	str	18 Taxes (attach schedule) (see instructions)	3		0	0	3		
	ini	19 Depreciation (attach schedule) and depletion	0		0				
	dm	20 Occupancy	50	BOND			50		
	A	21 Travel, conferences, and meetings	32	PROBATE FE	Ē				
	and	22 Printing and publications	16	_ 			16		
	D)	23 Other expenses (attach schedule)	0		0	0	0		
	Operating and Administrative	24 Total operating and administrative expenses.							
	era	Add lines 13 through 23	701		0	0	701		
	ď	25 Contributions, gifts, grants paid	0				0		
	_	Total expenses and disbursements Add lines 24 and 25	701		0	0	701		
		27 Subtract line 26 from line 12	650						
		a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-)	-653		48				
		A DITES HITCOMMONS HICCOMMON (II HICCOMMON C. CHICK TOT)	1			1			

c Adjusted net income (if negative, enter -0-)

22	28	161	35
ZZ-	20	IOI	Jυ

Part II		Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year	
Га		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	13,467	12,814	12,814	
	3	Accounts receivable 0				
		Less allowance for doubtful accounts	0	0	0	
	4	Pledges receivable ▶ 0				
		Less allowance for doubtful accounts	0	0	0	
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
	l _	disqualified persons (attach schedule) (see instructions)	0	0	0	
	7	Other notes and loans receivable (attach schedule)			_	
		Less allowance for doubtful accounts	0	0	0	
ets	8	Inventories for sale or use			 .	
ssets	9	Prepaid expenses and deferred charges				
V	1	Investments—US and state government obligations (attach schedule)	0	0	0	
	1	nvestments—corporate stock (attach schedule)	0	0	0	
		: Investments—corporate bonds (attach schedule)	0	0	0	
	11	Investments—land, buildings, and equipment basis			0	
	12	Less accumulated depreciation (attach schedule)	0	0	0	
	12 13	Investments—mortgage loans	0	0		
	14	Investments—other (attach schedule) Land, buildings, and equipment basis ▶ 0	0		0	
	'~		0	0	0	
	15	Less accumulated depreciation (attach schedule) ▶ 0 Other assets (describe ▶)		0	0	
	16	Total assets (to be completed by all filers—see the	0		<u> </u>	
	'`	instructions Also, see page 1, item I)	13,467	12,814	12,814	
	17	Accounts payable and accrued expenses		, , o	, ,,,,,,	
	18	Grants payable				
ije	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	0	0		
jak	21	Mortgages and other notes payable (attach schedule)	0	0		
_	22	Other liabilities (describe ▶)	0	0		
	23	Total liabilities (add lines 17 through 22)	0	0		
(C)		Foundations that follow SFAS 117, check here				
lances		and complete lines 24 through 26 and lines 30 and 31.				
lan	24	Unrestricted	13,467	12,814		
Ba	25	Temporarily restricted				
Þ	26	Permanently restricted				
Net Assets or Fund Ba		Foundations that do not follow SFAS 117, check here				
7	27	and complete lines 27 through 31. Capital stock, trust principal, or current funds	o	0		
S	28	Paid-in or capital surplus, or land, bldg, and equipment fund	U			
set	29	Retained earnings, accumulated income, endowment, or other funds	<u>-</u>			
As	30	Total net assets or fund balances (see instructions)	13,467	12,814		
et	31	Total liabilities and net assets/fund balances (see		,2,0,1		
Z		instructions)	13,467	12,814		
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances				
		net assets or fund balances at beginning of year—Part II, column (a), line	30 (must agree with			
	end-o	f-year figure reported on prior year's return)	•	1	13,467	
2	Enter	amount from Part I, line 27a		2	-653	
3 Other increases not included in line 2 (itemize)					0	
4 Add lines 1, 2, and 3						
		ases not included in line 2 (itemize)		5	0	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6 12						

Capital Gains an	IU LOSSES IOI TAX OII IIIVE	- Strile	iit iiicoii	(b) How acquired	T -		
	e kınd(s) of property sold (e g , real e se, or common slock, 200 shs MLC (P—Purchase D—Donation		Date acquired no , day, yr)	(d) Date sold (mo , day, yr)
1a							
b							
С					ļ		
d					ļ		. — —
е					<u> </u>		
(e) Gross sales price	(f) Depreciation allowed (or allowable)			r other basis ense of sale			or (loss)) minus (g)
a 0	0			0			0
b 0	0			0	ļ		0
<u>c</u> 0	0	<u> </u>		0	+-		0
<u>d</u> 0	0		-	0	 		0
e 0	0	<u> </u>		0	<u> </u>		0
Complete only for assets show	ving gain in column (h) and owner	ed by th	e foundation	on on 12/31/69			(h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis			ss of col (ı)			less than -0-) or
	as of 12/31/69		over col	(j), if any	1	Losses (II	om col (h))
<u>a</u> 0		+		0	+		0
<u>b</u> . 0		+		0	+		0
<u>c</u> 0	0	+	 	0			0
<u>d</u> 0	0	' -		C			0
<u>e</u> 0	C If any		ator in Boi		1		<u> </u>
2 Capital gain net income or			nter in Pai -0- in Pai		2		0
3 Net short-term capital gain	- , ,	•					
	line 8, column (c) (see instru						
in Part I, line 8	inic o, column (o) (see mond	0110110)	(1000),		3		0
Part V Qualification Und	der Section 4940(e) for R	educe	od Tay o	n Net Investm	ent Ir	come	
							· <u> </u>
(For optional use by domestic	private fourtdations subject to	ine se	CHOIT 494	o(a) tax on het h	11462111	iem income)	
If section 4940(d)(2) applies, le	eave this part blank						
Was the foundation liable for the	ne section 4942 tax on the dis	stributa	ıble amou	nt of any year in	the ba	ase period?	Yes No
If "Yes," the foundation does n						·	
	ount in each column for each				makı	ng any entries	
(a)	(b)	,		(c)			(d)
Base period years	Adjusted qualifying distribut	ions	Net value	of noncharitable-use	assets		ribution ratio
Calendar year (or tax year beginning	in)	500			0	(coi (b) (divided by col (c)) 0 000000
<u>2010</u> 2009		0			0		0 000000
2008	···	1,104			 0		0 000000
2007	-	1,104	_				0 000000
2006							0 000000
					_		0 00000
2 Total of line 1, column (d)						2	0 000000
3 Average distribution ratio f	or the 5-year base period—di	vide th	e total on	line 2 by 5. or b	v		
	undation has been in existen				,	3	0 000000
and marrison or yours are to				,			
4 Enter the net value of none	charitable-use assets for 201	1 from	Part X. Iır	ne 5		4	C
4 Enter the New Value of New		•					
5 Multiply line 4 by line 3 .				-		5	0
,							
6 Enter 1% of net investmen	t income (1% of Part I, line 2	7b)				6	C
	,	•					
7 Add lines 5 and 6						7	<u></u>
							
8 Enter qualifying distribution						8	
If line 8 is equal to or great the Part VI instructions	ter than line 7, check the box	ın Pari	t VI, line 1	b, and complete	that p	art using a 1%	6 tax rate See

Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instruc	tions)	
1 a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1		1	
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)		1	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1	
	here and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
2	of Part I, line 12, col (b)		ار	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Add lines 1 and 2 3		- 0	
3 4	Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4		'	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	-	1	
6	Credits/Payments			
	a 2011 estimated tax payments and 2010 overpayment credited to 2011 6a 0		l	
	Exempt foreign organizations—tax withheld at source 6b			
	Tax paid with application for extension of time to file (Form 8868) 6c 0			
c	Backup withholding erroneously withheld 6d 6d			
7	Total credits and payments Add lines 6a through 6d		0	
8	Enter any penalty for underpayment of estimated tax. Check here. If Form 2220 is attached.		0	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		0	
11			0]	
Pa	rt VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	
	participate or intervene in any political campaign?	1a		_ <u>X</u> _
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the			.,
	instructions for definition)?	1b		<u> X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
_	published or distributed by the foundation in connection with the activities	1c		Х
	c Did the foundation file Form 1120-POL for this year? If Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	10		
•	(1) On the foundation \blacktriangleright \$(2) On foundation managers \blacktriangleright \$			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
•	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
_	o If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N/A	
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	Х	
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	Х	
	a Enter the states to which the foundation reports or with which it is registered (see instructions)			
	VT	}		
ı	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney			ĺ
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 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,"			
	complete Part XIV	9	-	X
10		4.		
	their names and addresses	10	<u> </u>	_ X_

art	t VII-A Statements Regarding Activities (continued)			
1	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
2	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had		ľ	
	advisory privileges? If "Yes," attach statement (see instructions)	12		_X_
3	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► NONE		- -	
4	The books are in care of ► WILLIAM BOYD DAVIES, ESQ Telephone no ► 802-525-370	56		
_	Located at ► P.O BOX 303 BARTON VT ZIP+4 ► 05822			
5	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		•	• ∟
6			Yes	No
6	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of	 	İ	
	the foreign country			
Pa	rt 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
a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(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 any of the acts fail to qualify under the exceptions described in Regulations	46	NI/A	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here	1b	N/A	
_	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
С	that were not corrected before the first day of the tax year beginning in 2011?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section $4942(j)(3)$ or $4942(j)(5)$)			
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? Yes X No			
	If "Yes," list the years 20 , 20 , 20 , 20 , 20			
b				
	(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	N/A	
_	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	20	11//	
С	► 20 , 20 , 20 , 20 , 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	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable	4b		_
	purpose in a nacino non neen removen irom lengarily neinte inte illst nav of the lax year neolinillo in zoo (z	L	1	

Forr	n 990-PF (20	(11) MARION L HAGAR MEMOR	RIAL	SCHOLARSHIP	· FU	ND			22-28	16135	Pa	ige 6
Pa	rt VII-B	Statements Regarding Activit					equired (continued)				
- 5а	During the	year did the foundation pay or incur an										
	-	ry on propaganda, or otherwise attempt			(sec	tion 4945(e))?		Yes	X No			
		ence the outcome of any specific public							_			
	on, o	directly or indirectly, any voter registration	n driv								ĺ	
	/3) Prov	vide a grant to an individual for travel, st	udv r	or other similar nui	rnns	es?		X Yes	∏ No			
	` '	vide a grant to an individual for travel, so	-	-	•						}	
		ection 509(a)(1), (2), or (3), or section 49						Yes	X No			
		vide for any purpose other than religious	-						<u> </u>			
		cational purposes, or for the prevention						Yes	X No			
h		wer is "Yes" to 5a(1)–(5), did any of the					ne describe		<u></u>	1 1		
		ns section 53 4945 or in a current notice						, u		5b		Χ
	_	ions relying on a current notice regardin	_	-			,,,,,,	•		0.5		
С	•	wer is "Yes" to question 5a(4), does the	_					_	ш]]		
C		se it maintained expenditure responsibil			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	nom are		Yes	No			
		ttach the statement required by Regulat	-	_	(d)							
6a		undation, during the year, receive any fu				n nav					ľ	
va		on a personal benefit contract?	1103,	directly of indirect	, ic	, pay		Yes	X No	1 1	ľ	
h	•	undation, during the year, pay premiums	dire	ectly or indirectly o	n a	nersonal henefit (contract?			6b		Χ
		6b, file Form 8870	, unc	cay or maneouy, c	, u	personal bonem	JOI III GOL			55		
7 <i>a</i>		e during the tax year, was the foundatio	n a n	arty to a prohibited	t tax	shelter transaction	n?	Yes	X No			
	-	id the foundation receive any proceeds		•					۰.۰۰ س	7b		X
_	art VIII	Information About Officers						s Highly I	Paid Fr		205	
	are viii	and Contractors	,	cotors, rrusto	,,,,,	, i dandadon	managoi	o,gy .	u.u	p.oyc	,00,	
1	List all o	officers, directors, trustees, found	ation	managers and	d the	eir compensati	on (see ii	structions	<u></u>			
·	2.01 0			Title, and average		Compensation		ntributions to	•	e) Expens		nt
		(a) Name and address		hours per week	(1	f not paid, enter -0-)		e benefit plans ed compensati	S '	other all		
\////	LIAM BO	YD DAVIES, ESQ	_	JSTEE			and delen	eu compensan				
		3 BARTON VT 05822		SS THAN 1		600			o			0
	<i>,</i>	0 5/4/10/11 17 00022		<u> </u>	_				-			
	·			00		o			o			0
				00		o			o			0
			1									-
				00		0			0			0
2	Compen	sation of five highest-paid emplo	yees	(other than the	ose	included on lin	ne 1—see	instruction	ns). If no	one,		
	enter "N	ONE."	•									
				(b) Title, and avera	age			Contributions t				
(a) Name and a	address of each employee paid more than \$50	0,000	hours per week	-	(c) Compensation		nployee benefit ns and deferre		e) Expens other all		
				devoted to position	on			compensation		- Curior dis	omanice:	,
NO	NE											
			_									
		· · · · · · · · · · · · · · · · · · ·	_									
	· • • • • • • • • • • • • • • • • • • •											
				ļ								
·												
									,			

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

Form 990-PF (2011) MARION L. HAGAR MEMORIAL SCHOLARSHIP FUND	22-2816135 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly F and Contractors (continued)	Paid Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."	····
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	0
	0
	0
	0
	0
Total number of others receiving over \$50,000 for professional services .	>
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such a the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 SCHOLARSHIPS AWARDED	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	· · · · · · · · · · · · · · · · · · ·
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions	

Total. Add lines 1 through 3

Form **990-PF** (2011)

Income Enter 1% of Part I, line 27b (see instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

5

6

701

Par	Undistributed income (see instructions)				
1	Distributable amount for 2011 from Part XI,	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011 -1
2	Undistributed income, if any, as of the end of 2011			- · · ·	
			į	0	
a	Total for prior years 20, 20, 20		0		
3	Excess distributions carryover, if any, to 2011				
a	From 2007 748				
	From 2008 1,104				
	From 2009 0				
	500				
e f	Total of lines 3a through e	3,427			
4	Qualifying distributions for 2011 from Part	5,421			
4	XII, line 4 > \$ 701				
9	Applied to 2010, but not more than line 2a			0	
	Applied to undistributed income of prior years				
•	(Election required—see instructions)		. 0		
	Treated as distributions out of corpus (Election				
•	required—see instructions)	0			
,	Applied to 2011 distributable amount			-	0
	Remaining amount distributed out of corpus	701			
5	Excess distributions carryover applied to 2011	0			0
	(If an amount appears in column (d), the				
_	same amount must be shown in column (a))				
6	Enter the net total of each column as indicated below.				
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5	4,128			
t	Prior years' undistributed income Subtract				
	line 4b from line 2b		0		
(Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
(Subtract line 6c from line 6b Taxable				
	amount—see instructions		0		
•	Undistributed income for 2010 Subtract line				
	4a from line 2a Taxable amount—see			_	
	instructions			0	
1					
	lines 4d and 5 from line 1. This amount must				
	be distributed in 2012				0
7	Amounts treated as distributions out of				
	corpus to satisfy requirements imposed by				
_	section 170(b)(1)(F) or 4942(g)(3) (see instructions)		<u> </u>		
8	Excess distributions carryover from 2006	4.070			
_	not applied on line 5 or line 7 (see instructions)	1,076			
9	Excess distributions carryover to 2012.	2.050			
40	Subtract lines 7 and 8 from line 6a	3,052			
10	Analysis of line 9				1
	1 Excess from 2007 748 2 Excess from 2008 1,104				
(Excess from 2009 0 Excess from 2010 500				
(
	Excess from 2011 701	<u> </u>		L	- 000 DE

_	m 990-PF (2011) MARION L HAGAR MEMOF				22-2816	
Pa	rt XIV Private Operating Foundations (s	ee instructions ai	nd Part VII-A, qu	estion 9)		V/A
1 a	If the foundation has received a ruling or determination, and the ruling is effective for 2011, entitle			•		
k	Check box to indicate whether the foundation is a	private operating four	ndation described in	section	4942(J)(3) or	4942(J)(5)
2 a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	Income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
	investment return from Part X for each year listed	0	0	0	0	0
ŀ	85% of line 2a	0	0	0	0	0
	Qualifying distributions from Part XII, line 4 for each year listed					
C	Amounts included in line 2c not used directly for active conduct of exempt activities	0	0	0	0	0
•	Qualifying distributions made directly					0
	for active conduct of exempt activities Subtract line 2d from line 2c	0	o	0	0	0
3	Complete 3a, b, or c for the alternative test relied upon			0		
	(1) Value of all assets					0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
ł	"Endowment" alternative test—enter 2/3					0
•	of minimum investment return shown in					
	Part X, line 6 for each year listed	0	0	0	0	0
C	: "Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0
	(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					0
	(4) Gross investment income					0
Đ:	art XV Supplementary Information (Con	nnlete this part	only if the found	dation had \$5.0	00 or more in	
-	assets at any time during the year			uation naa 45,0	oo or more m	
1	Information Regarding Foundation Manag					
	List any managers of the foundation who have con		% of the total contrib	utions received by t	he foundation	
	before the close of any tax year (but only if they ha					
NC	DNE					
	List any managers of the foundation who own 10%				rtion of the	
	ownership of a partnership or other entity) of which	the foundation has a	a 10% or greater inte	erest		
_	DNE					
2	Information Regarding Contribution, Gran			_		
	Check here if the foundation only makes unsolicited requests for funds. If the foundation ma other conditions, complete items 2a, b, c, and d	•		•	•	
_	The name, address, and telephone number of the	person to whom app	ications should be a	ddressed		
10/	LLIAM BOYD DAVIES ESO DO BOY 202 BA	A DTON VT 05022	902 525 2766			
	LLIAM BOYD DAVIES, ESQ PO BOX 303 BA The form in which applications should be submitted			uld include		
SE	E ATTACHED APPLICATION FORM					
	: Any submission deadlines					
	AY 30 OF EACH YEAR					
	Any restrictions or limitations on awards, such as b factors	by geographical areas	s, charitable fields, k	inds of institutions, o	or other	
LIN	AITED TO HIGH SCHOOL SENIORS GRADUA	ATING FROM ORI	EANS COUNTY.	VERMONT HIGH	SCHOOLS	

Total

	990-PF (2011) MARION L HAGAR MEMORIALt XV Supplementary Information (continue))	22-28	316135 Page 11
3 3	Grants and Contributions Paid During th		for Future	Pavment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	Continuotion	
a	Paid during the year .				
	Total	· · · · · · · · · · · · · · · · · · ·	1	. ▶ 3a	0
263	Approved for future payment NVILLE POWERS POND LANE ROAD DWNINGTON VT 05860	NONE		SCHOLARSHIP	500
		<u> </u>	<u> </u>	N 04	500
	Total .			. ▶ 3b	500

Part XVI-A Analysis of Income-Producing Acti		JND		22-281	6135 Page 12
Enter gross amounts unless otherwise indicated		siness income	Excluded by sector	on 512, 513, or 514	(0)
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exemple function income (See instructions)
a		0		0	С
b		0		0	C
с		0		0	C
d		0		0	C
e		0	·	0	c
f		0		0	c
g Fees and contracts from government agencies		0		0	c
2 Membership dues and assessments		0		0	C
3 Interest on savings and temporary cash investments		48		0	48
4 Dividends and interest from securities		0		0	<u>c</u>
5 Net rental income or (loss) from real estate					
a Debt-financed property		0		0	
b Not debt-financed property		0		0	
6 Net rental income or (loss) from personal property		0		9	
7 Other investment income		0		0	
8 Gain or (loss) from sales of assets other than inventory		0		0	
9 Net income or (loss) from special events		0		0	
10 Gross profit or (loss) from sales of inventory	 	0		0	
11 Other revenue a	-	0		0	
b	1 1	0		Ö	
d		0		0	
e		0		0	C
12 Subtotal Add columns (b), (d), and (e)		48		0	48
13 Total Add line 12, columns (b), (d), and (e)				13	96
(See worksheet in line 13 instructions to verify calculations)					
Part XVI-B Relationship of Activities to the Ac					
Line No. Explain below how each activity for which income the accomplishment of the foundation's exempt					uctions)
3 USED FOR SCHOLARSHIP					
					
					
	 				

Form 990)-PF ((2011) MARION L H	AGAR MEN	IORIAL SCHOLARS	HIP FUND			22-2816135	Р	age 1 3
Part X	VII	Information Regar				Rela	tionships With N			
		Exempt Organizat	ions				·			
1 Did	I the	organization directly or	ındırectly ei	ngage in any of the f	ollowing with any	othe	er organization desc	ribed	Ye	s No
ın s	secti	on 501(c) of the Code (other than s	ection 501(c)(3) orga	anizations) or in s	sectio	on 527, relating to p	olitical		
org	anız	ations?								
a Tra	nsfe	ers from the reporting fo	oundation to	a noncharitable exei	mpt organization	of			į	
	Ca	• •			. 0			1a	(1)	X
(2)	Oth	ner assets .	•					. 1a	2)	Х
b Oth	ner t	ransactions								
		les of assets to a nonch						1b	(1)	X
		rchases of assets from		_	ition			1b		X
		ntal of facilities, equipm		r assets		•	•	1b		X
		imbursement arrangem	ents					1b		X
		ans or loan guarantees			- 1 - 1	٠	•	. <u>1b</u>		X
		formance of services o				•	•	1b		X
	•	g of facilities, equipment	•	•	• •					1.4
val	ue o	nswer to any of the abo If the goods, other asse In any transaction or sha	ts, or service	es given by the repoi	ting foundation 1	If the	foundation receive	d less than fair	market	: d
(a) Line	no	(b) Amount involved	(c) Name	of noncharitable exempt or	ganization (d	I) Des	cription of transfers, trans	actions, and sharin	arrange	ements
		0								
		0								
		0								
		0								
		0					-	· · · · · · · · · · · · · · · · · · ·		
	\dashv	0								
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	$\neg \dagger$	0						•		
		0								
		0								
		0								
		0								
		oundation directly or inc								
		ed in section 501(c) of		ther than section 50°	(c)(3)) or in secti	ion 5	217	☐ Yes	X) NO)
D II	res,	" complete the following	g schedule	(1) T ((-) P			-
		(a) Name of organization		(b) Type of	organization	+	(c) Desc	ription of relationshi		
		·		_	· · ·					
						$\neg \uparrow$				
	Un	der penalties of perjury, I declare tha	at I have examined	this return, including accompany	ring schedules and stateme	ents, ar	nd to the best of my knowledge	and belief, it is true,	•	
Sian	co	rrect, and complete Degraration of pr	reparer (other than	taxpayer) is based on all inform	ation of which preparer has	s any kr	nowledge	May the IDC discour	e this se	turn
Sign Here	Ι.							with the preparer s		
	1 -	Signature of officer of this to		- Doto	Title			, _	٠ ـ ـ	

Preparer's signature

SELF-PREPARED RETURN

Print/Type preparer's name

Firm's name

Firm's address ▶

Paid

Preparer

Use Only

Date

PTIN

Check ____ if

self-employed

Firm's EIN ▶

Phone no

LAKE REGION UNION HIGH SCHOOL LOCAL SCHOLARSHIPS

Name	Social Security #
	Telephone #
Father's Name	
Hugh School Father graduated from	n
Mother's Name	
Hugh School Mother graduated fro	m
Number of brothers and sisters	
College(s) or schools planning to a	attend. (first three choices)
1	Total Expenses:
2	Total Expenses
3	Total Expenses
What is your intended career field	d? (i.e. Law, Medicine, Engineering, Teaclung)
Describe your Future Career Pla	ans - Use thé back side of this sheet if necessary -
List Out of School activities and necessary	work experiences - use back side of this sheet if

List School Activities and Leadership Positions - use back side of sheet if necessary

Bave you applied for?

 Poll grants
 Yes
 No
 Work Study or Loans
 Yes
 No

 College Grants
 Yes
 No
 VSAC Incentive Grant
 Yes
 No

 Others____ Unusual circumstances (Trust Fund, Medical Problems, etc.)_____ use back side of this sheet if necessary The following financial information may be required of you if you wish to be considered for some of the scholarships listed on the front page. Combined parental adjusted income Market value of home Mortgage balance_____ Student's savings and assets_____ Estimated parents contribution to first year expenses A copy of your academic transcript is desirable for complete evaluation for scholarships A copy of your transcript will be attached. Student's Signature

Parent's Signature

Chess championships for state April 14

The twenty-fifth annual Vermont Scholastic Chess Championships will be held on Saturday, April 14, at Berlin Elementary School in Berlin.

All Vermont students from kindergarten through Grade 12 are eligible to compete for State Championships in each grade kindergarten through grade six, middle school (grades seven and eight) and high school (grades nine through 12). All abilities are welcome and encouraged to participate.

The tournament will be U.S. Chess Federation (USCF) rated and will follow USCF rules Registration is from 8:30 until 9:30 a m. Games will start at 10 a.m. Complete rules and registration information can be found at http://vtchess.info or by contacting Mike Stridsberg, tournament director, at mike@vtchess.info or (802) 223-1948. — submitted by Mike Stridsberg.

PUBLIC NOTICE

The annual report of the Martin & Emma Butters
Memorial Scholarship Fund is available for
inspection during normal business hours by any citizen
who so requests within 180 days after publication of
this notice of its availability at the office of the fund's
trustee, William Boyd Davies, Esq., at the office of
May & Davies, Main Street, Barton, Vermont 05822.

PUBLIC NOTICE

The annual report of the John Malcom Colton Trust for the benefit of Lake Region Union High School (scholarship fund) is available for inspection during normal business hours by any citizen who so requests within 180 days after publication of this notice of its availability at the office of the fund's trustee, William Boyd Davies, Esq., at the office of May & Davies, Main Street, Barton, Vermont 05822.

PUBLIC NOTICE

The annual report of the Marion L. Hagar Memorial Scholarship Fund is available for inspection during normal business hours by any citizen who so requests within 180 days after publication of this notice of its availability at the office of the fund's trustee, William Boyd Davies, Esq., at the office of May & Davies, Main Street, Barton, Vermont 05822.