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Form 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

FOLC	aien	dar year 2011 or tax year beginning		, and ending		
Nan	ne of	foundation			A Employer identificatio	n number
\mathbf{T}	ΗE	ROBERTA AND RUSSELL HO	USMAN			
_ <u>C</u>	HA]	RITABLE FOUNDATION, INC	• •		27-136434	7
Num	ber ar	nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
_3	<u>8 1</u>	MCKEE ROAD			(802) 375	-6643
City	or to	wn, state, and ZIP code	• •		C If exemption application is	pending, check here
_A	RL:	INGTON, VT 05250				
G C	heck	all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	ns, check here
		Final return	Amended return		l <u>.</u> .	
		Address change	Name change		Foreign organizations m 2. check here and attach of	computation
H C	heck	type of organization: X Section 501(c)(3) ex			E If private foundation st	atus was terminated
	Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	itio <u>n</u>	under section 507(b)(1)(A), check here 🕨 🗔
I Fa	ır ma	rket value of all assets at end of year J Account	ing method: X Cash	Accrual	F If the foundation is in a	60-month termination
(fr	om F		ther (specify)		under section 507(b)(
	_	103,124. (Part I, colu	ımn (d) must be on cash t	basis)		
Pa	<u>rt 1</u>	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
		necessarily equal the amounts in column (a))	expenses per books	income	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received	49,459.		N/A	
	2	Check fthe foundation is not required to attach Sch. 8				
	3	Interest on savings and temporary cash investments	179.	<u> </u>		STATEMENT 1
	4	Dividends and interest from securities	2,208.	2,208.		STATEMENT 2
	5a	Gross rents	_,_			<u> </u>
	b	Net rental income or (loss)				
ø	6a	Net gain or (loss) from sale of assets not on line 10	330.			
Revenue	ь	Gross sales price for all assets on line 6a 3.3.0.				
eve	7	Capital gain net income (from Rart IV) line 2)		<u>3</u> 30.		<u> </u>
Œ	8	Net short-term capital gain				
	9	Income modifications	SC			
	10a	Gross sales less returns and allowances 406 17 2012	Ö			_
	I .	Less Cost of goods sold	<u> </u>			
	C	Gross profit or (loss) OGDEN III				
	11	Other income				
	12	Total. Add lines 1 through 11	52,176.	2,717.		
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				<u> </u>
ses	16a	Legal fees				
Jen Jen	b	Accounting fees STMT 3	69.	0.		0.
Ä	C	Other professional fees STMT 4	95.	95.		0.
and Administrative Expens	17	Interest				
rat	18	Taxes				
nist	19	Depreciation and depletion				
<u>=</u>	20	Occupancy				
Ą	21	Travel, conferences, and meetings				
n d	22	Printing and publications				
	23	Other expenses STMT 5	200.	0.		0,
Operating	24	Total operating and administrative				
per		expenses. Add lines 13 through 23	364.	95.		0.
ō	25	Contributions, gifts, grants paid	6,600.			6,600.
	ı	Total expenses and disbursements				
		Add lines 24 and 25	6,964.	95.		6,600.
_	27	Subtract line 26 from line 12:				
	1	Excess of revenue over expenses and disbursements	45,212.			
		Net investment income (if negative, enter -0-)		2,622.		
		Adjusted net income (if negative, enter -0-)			N/A	

THE ROBERTA AND RUSSELL HOUSMAN

CHARITABLE FOUNDATION.

Beginning of year Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only End of year (a) Book Value (b) Book Value (c) Fair Market Value 3,110. 11,241. Cash - non-interest-bearing 11,241. 17,899. 19,627. 2 Savings and temporary cash investments 19,627. 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 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock STMT 6 36,903. 72,256. 72,256. c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment: basis Less accumulated depreciation 15 Other assets (describe ▶ 57,912. 103,124. 16 Total assets (to be completed by all filers) 103,124. 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue $20\,$ Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 23 Total liabilities (add lines 17 through 22) $\triangleright X$ Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31 Net Assets or Fund Balances 24 Unrestricted 57,912. 103,124. 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 57,912. 103,124. 30 Total net assets or fund balances 31 Total liabilities and net assets/fund balances 57,912. 103.124 Part III | Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 57,912. 2 Enter amount from Part I, line 27a 45,212. Other increases not included in line 2 (itemize) 4 Add lines 1, 2, and 3 4 5 Decreases not included in line 2 (itemize) 6_Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 103,1

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6

7

8

26.

6,302.

6,600.

Add lines 5 and 6

See the Part VI instructions.

Enter 1% of net investment income (1% of Part I, line 27b)

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

Enter qualifying distributions from Part XII, line 4

•	THE ROBERTA AND RUSSELL HOUSMA	7N		27	12641	. 4 77		D 4
	nt VI Excise Tax Based on Investment Income (Section 4940)	0(a) 4040(b)	4040(a) ar		13643			Page 4
			4940(e), or 4	1940	- see in	stru	Ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup \) and er							
	Date of ruling or determination letter: (attach copy of letter if nec							
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► LX_ and enter 19	% }	1	<u> </u>			<u> 26.</u>
	of Part I, line 27b				ļ			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%		ol. (b). ノ					•
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	thers enter -0-)		2				0.
3	Add lines 1 and 2			3				<u> 26.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Of	thers enter -0-)		4	<u> </u>			0.
_	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5	<u> </u>			<u> 26.</u>
6	Credits/Payments:	1 1						
	2011 estimated tax payments and 2010 overpayment credited to 2011	6a		4	İ			
	Exempt foreign organizations - tax withheld at source	6b		4				
	Tax paid with application for extension of time to file (Form 8868)	_6c		4				
	Backup withholding erroneously withheld	6d		4				
	Total credits and payments. Add lines 6a through 6d			7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attack.	ched		8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		>	9				26.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		, ▶	10				
	Enter the amount of line 10 to be: Credited to 2012 estimated tax		Refunded -	11				
	rt VII-A Statements Regarding Activities							T
1a	During the tax year, did the foundation attempt to influence any national, state, or local legisl	lation or did it partic	ipate or interveni	e in			Yes	No
	any political campaign?				L	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	ses (see instructions	for definition)?		Ĺ	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	d copies of any m	aterials publish	ed or				
	distributed by the foundation in connection with the activities				İ			
C	Did the foundation file Form 1120-POL for this year?				L	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the							
	(1) On the foundation. \blacktriangleright \$ (2) On foundation managers.		0.	_				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expendit	ture tax imposed on	foundation					
	managers. ▶ \$0 .							
2	Has the foundation engaged in any activities that have not previously been reported to the IR	RS?				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 in	nstrument, articles d	of incorporation,	or	į			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	es				3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	r?				4a		_X_
	If "Yes," has it filed a tax return on Form 990-T for this year?			N	/A _	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•				5		X
	If "Yes," attach the statement required by General Instruction T							
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eit	ther:						
	By language in the governing instrument, or							
	• By state legislation that effectively amends the governing instrument so that no mandatory	y directions that con	iflict with the stat	e law				
	remain in the governing instrument?				L	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?					7	X	
	If "Yes," complete Part II, col (c), and Part XV			,				
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ns) >		· .				
	VT							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	ttorney General (or o	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 sec	ction 4942(j)(3) or 4	1942(j)(5) for cal	endar				
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes." co					9		х

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

10

•	THE ROBERTA AND RUSSELL HOUSMAN			
	1990-PF (2011) CHARITABLE FOUNDATION, INC. 27-136	<u>4347</u>	_	<u> Page 5</u>
Pa	art 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		x
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_		_X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► ROBERTA HOUSMAN Telephone no. ►80237	5664	3_	
	Located at ► 38 MCKEE ROAD, ARLINGTON, VT ZIP+4 ►0	5250	-88	75_
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		/A	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,	. 1	Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign	}		}
	country			L
Pa	art 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):	1]
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1 1		
	(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 X No	1 1		ļ
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	1 }		1
	for the benefit or use of a disqualified person)?	1 }		
	(6) Agree to pay money or property to a government official? (Exception Check "No"	1 1		
	if the foundation agreed to make a grant to or to employ the official for a period after	1 1		
	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	1 1		İ
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		<u> </u>
	Organizations relying on a current notice regarding disaster assistance check here	1 1		ļ
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		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(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	1 1		1
	If "Yes," list the years \blacktriangleright ,,,,,] }]
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	1 1		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	1 1	İ	İ
	statement - see instructions.) N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>	1		
3 <i>a</i>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	1 1		
	during the year?			}
b	olf "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	1 1		į
	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,			l
	Form 4720, to determine if the foundation had excess business holdings in 2011) N/A	3b		<u></u>
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 purpose that

had not been removed from jeopardy before the first day of the tax year beginning in 2011?

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. THE ROBERTA AND RUSSELL	HOUSMAN				
Form 990-PF (2011) CHARITABLE FOUNDATION, I	INC.		27-13643	47	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					İ
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	es X No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir			ļ	
any voter registration drive?			es 🗶 No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y6	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or t				- 1
the prevention of cruelty to children or animals?			es 🗶 No		ļ
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	· ·	ın Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h				İ	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f					
expenditure responsibility for the grant?		I/A	es L No		
If "Yes," attach the statement required by Regulations section 53 494					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	<u> </u>			
a personal benefit contract?		Ye	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		-	6b	<u> </u>
If "Yes" to 6b, file Form 8870	sh altan tanana ataa a 0		[[]]		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y6	es X No	7.	
b If "Yes," did the foundation receive any proceeds or have any net income attributed in the foundation About Officers, Directors, Trust		nagere Highly		7b	
Part VIII Paid Employees, and Contractors	ees, i oundation ma	mayers, riigini	,		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E	xpense nt, other
(a) Name and address	nours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	accou	nt, other vances
RUSSELL F. HOUSMAN	PRESIDENT / D	IRECTOR	·		
38 MCKEE ROAD	1				
ARLINGTON, VT 05250	0.00	0.	0.		0.
ROBERTA Y. HOUSMAN	VICE PRESIDEN	T / DIREC	TOR		
38 MCKEE ROAD					
ARLINGTON, VT 05250	0.00	0.	0.		0.
JUNE WEISS	SECRETARY / D	IRECTOR			
258 STEAMBOAT ROAD					
GREAT NECK, NY 11024	0.00	0.	0.		0.
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	4) 5	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E accou	xpense nt, other
270277	devoted to position		compensation	allov	vances
NONE]			
			-		
	1]			
	1				
					
	1				
The state of the s					
	1				
Total number of other employees paid over \$50,000			>		0

THE ROBERTA AND RUSSELL HOUSMAN

Form 990-PF (2011) CHARITABLE FOUNDATION, INC.	27-13	64347 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "New York Professional Services and	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE '		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced	nformation such as the	Expenses
1 N/A	1, 0.00.	
2		
3		
4		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines	tond 0	A
1 N/A	Tallo Z.	Amount
2		
2		
All other program-related investments. See instructions. 3		

Total. Add lines 1 through 3

Page 8

P	Part X Minimum Investment Return (All domestic foundations must complete this part. For	reign foundations, see	instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	· · · · · · · · · · · · · · · · · · ·	1a	48,163.
b	Average of monthly cash balances	1b	16,772.
	Fair market value of all other assets	10	
đ		1d	64,935.
е	Reduction claimed for blockage or other factors reported on lines 1a and	13 1	<u> </u>
	1c (attach detailed explanation)	0.	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	64,935.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	974.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	63,961.
6	Minimum investment return Enter 5% of line 5	6	3,198.
Р	part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four foreign organizations check here and do not complete this part.)	idations and certain	
1	Minimum investment return from Part X, line 6	1	3,198.
2a	Tax on investment income for 2011 from Part VI, line 5	26.	7,=333
b			
C		2c	26.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,172.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	3,172.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	3,172.
P	art XII Qualifying Distributions (see instructions)		•
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	(-), (-),	1a	6,600.
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:		
а	, (h	3a	
b	(,	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	6,600.
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	5	<u> 26.</u>
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	6,574.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the for 4940(e) reduction of tax in those years.	undation qualifies for the	section

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,				
line 7				3,172.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0.	
b Total for prior years:		_		
		0.		
3 Excess distributions carryover, if any, to 2011:				
a From 2006				
b From 2007				
c From 2008				
d From 2009				
e From 2010 3, 467.	2 467			
f Total of lines 3a through e	3,467.			
4 Qualifying distributions for 2011 from				
Part XII, line 4: ►\$ 6,600.			0	
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior		0		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	U •			3,172.
d Applied to 2011 distributable amount e Remaining amount distributed out of corpus	3,428.			3,112.
· · ·	0.			0.
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	6,895.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2010. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract				
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)	0.			
8 Excess distributions carryover from 2006				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012.		İ		
Subtract lines 7 and 8 from line 6a	6,895.			
10 Analysis of line 9:				
a Excess from 2007				
b Excess from 2008				
c Excess from 2009				
d Excess from 2010 3, 467. e Excess from 2011 3, 428.				
e Excess from 2011 3 , 428 .				<u> </u>

THE ROBERTA AND RUSSELL HOUSMAN Form 990-PF (2011) CHARITABLE FOUNDATION, 27-1364347 Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(1)(5) 2 a Enter the lesser of the adjusted net Tax year Prior 3 years (a) 2011 (b) 2010 (c) 2009income from Part I or the minimum (d) 2008(e) Total investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter. (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV | Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: \Box if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If Check here ► L the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number of the person to whom applications should be addressed: RUSSELL OR ROBERTA HOUSMAN, 800-375-6643 38 MCKEE ROAD, ARLINGTON, VT 05250 b The form in which applications should be submitted and information and materials they should include: ALL APPLICATIONS FOR FUNDS ARE TO BE SUBMITTED IN WRITING. c Any submission deadlines: NONE

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

GEOGRAPHIC AREA OF SOUTHWESTERN VERMONT AND SECONDARILY GEOGRAPHIC AREA OF NORTHWESTERN MASSACHUSETTS

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager or substantial contributor Name and address (home or business) recipient a Paid during the year NORTHWINDS SYMPHONIC 501(C)(3) FREE MUSIC PROGRAMS P.O. BOX 281 FOR THE COMMUNITY. SEA CLIFF, NY 11579 250. SAGE CITY SYMPHONY 501(C)(3) FREE MUSIC PROGRAMS BOX 547 FOR THE COMMUNITY. SHAFTSBURY VT 05262 200. SOUTHWESTERN VERMONT HEALTHCARE 501(C)(3) UNCOMMITTED FUNDS TO 100 HOSPITAL DRIVE HOSPITAL APPLIED TO BENNINGTON, VT 05201 NEEDS 200. MERCK FOREST 501(C)(3) EDUCATIONAL PROGRAMS. 3270 ROUTE 315, P.O. BOX 86 RUPERT VT 05768 200. VERMONT HUMANITIES COUNCIL 501(C)(3) ANNUAL FUND. 11 LOOMIS STREET MONTPELIER VT 05602 200 SEE CONTINUATION SHEET(S) Total ➤ 3a 6,600. **b** Approved for future payment NONE Total **▶** 3b

CHARITABLE FOUNDATION, II

Analysis of Income-Producing Activities

Enter gros	s amounts unless otherwise indicated.	Un	related business incom	e Exclu	uded by section 512,	513, or 514	(e)
		(a) Busine	ess Amount	(C) Exclu- sion	(d) Amou		Related or exempt function income
_	ım service revenue:	code	3	code	741100		Tanotton intonic
					 -		
	 -						
d		ſ					
e		}					
f					-		
n Fee	s and contracts from government agen	cies				_	
-	ership dues and assessments	Cics					
	st on savings and temporary cash						
investr	•						179
	nds and interest from securities						179 2,208
• • • • •	ntal income or (loss) from real estate:				<u> </u>		2,200
	ot-financed property						
	debt-financed property				\ <u></u>		
	ntal income or (loss) from personal					-	
proper							
	nvestment income						
	r (loss) from sales of assets other		-				
	ventory						330
	ome or (loss) from special events						
	profit or (loss) from sales of inventory						· ····································
11 Other r							
a							
_		l l					
d			•				
е —	· · · · · · · · · · · · · · · · · · ·		~~.				
12 Subtot	al. Add columns (b), (d), and (e)			0.		0.	2,717
	Add line 12, columns (b), (d), and (e)				•	13	0 545
	sheet in line 13 instructions to verify ca	Iculations.)					
Part X	· · · · · · · · · · · · · · · · · · ·		ccomplishment	t of Evemn	t Purnoses	·	
Tartx	Tretationship of A		.ccompnammem	. Or Exemp	rui poses		
Line No. ▼	Explain below how each activity for the foundation's exempt purpose				buted importantly	to the accom	plishment of
3	INVESTMENT INCOME	PRODUCES	& SUSTAINS	RESOUR	CES FOR	CHARI	TABLE PURPOS
4	INVESTMENT INCOME						
8	INVESTMENT INCOME	PRODUCES	& SUSTAINS	RESOUR	CES FOR	CHARI	PABLE PURPOS
							
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Page 13_

Part)	(VII	Information Re Exempt Organ		nsfers To	and Transaction	s and l	Relations	hips With No	oncharitabl	е	
1 Did	the or	ganization directly or indi		v of the following	ng with any other organi	zation des	cribed in sect	on 501(c) of	·	Yes	No
		other than section 501(c						011 30 1(0) 01			
		from the reporting found				gamaano					
	Cash	, ,		, , , , , , , , , , , , , , , , , , ,	9				1a(1)		X
(2)	Other	assets							1a(2)	_	X
b Oth	er trans	sactions:									
(1)	Sales	of assets to a noncharita	ıble exempt organız	ation					16(1)		X
(2)	Purch	ases of assets from a no	ncharitable exempt	organization					1b(2)		X
(3)	Renta	l of facilities, equipment,	or other assets						1b(3)		X
(4)	Reımt	oursement arrangements	i						1b(4)		Х
		or loan guarantees							1b(5)		X
		mance of services or me							1b(6)		X
		facilities, equipment, ma							1c		X
		ver to any of the above is given by the reporting fo								sets,	
colu	ımn (d) the value of the goods,	other assets, or ser	rvices received.	·						
(a) Line no	<u> </u>	(b) Amount involved	(c) Name		e exempt organization		(d) Description	of transfers, transact	ions, and sharing a	rangeme	ents
	 			N/A							
	+		 				·		41.1		
	+										
	+										
				<u> </u>							
											
	+-			·							
		- <u>-</u> -			·						
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					, -, . <u></u>						
ın se	ection .	dation directly or indirection of the Code (other	r than section 501(ganization	s described		Yes	X	□No
<u>D 11 Y</u>	es, co	mplete the following sch (a) Name of org		··	(b) Type of organization	20	<u>'</u>	(c) Description of i	relationehin		
		N/A	<u>Jamea do 11</u>		(b) Type of organization	311		(c) Description of	Ciationship		
		N/A									
									 		
				*							
Sign Here	and be	penalties of perjury, I declare lief, it is true, correct, and cor	mplete Declaration of p	his return, includir preparer (other tha May	ng accompanying schedules in taxpayer) is based on all in	and statem	ents, and to the f which preparer	best of my knowledg has any knowledge	May the iRS return with the shown below	e prepar (see ins	er
	Sign	ature of officer or trustee			Date /	T	itle				
		Print/Type preparer's na	ame	Preparer's s	ignature	Date		Check X If self- employed	PTIN		
Paid		JOSEPH A.	WAGNER	JOSEPH	A. WAGNER	08/	13/12		P01075	206	
Prepa Use C		Firm's name ► JOS						Firm's EIN ► 2			
OSE C	ıııy	Firm's address N Q 4	A DACO M	AMOUTECE	IED DOAD						
Firm's address > 844 EAST MANCHESTER ROAD MANCHESTER CENTER, VT 05255 Phone no. 802-362-9086									6		

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient VERMONT PUBLIC TV 501(C)(3) ANNUAL FUND. 204 ETHAN ALLEN AVENUE COLCHESTER VT 05446-3129 300. VERMONT PUBLIC RADIO 501(C)(3) ANNUAL FUND. 365 TROY AVENUE COLCHESTER VT 05446-3129 300. NEW HAMPSHIRE PUBLIC RADIO 501(C)(3) ANNUAL FUND. 2 PILLSBURY STREET, 6TH FLOOR CONCORD, NH 03301 200. SECOND CHANCE ANIMAL SHELTER 501(C)(3) ANIMAL CARE AND P.O. BOX 620 EDUCATIONAL CAMP. SHAFTSBURY, VT 05262 800. CHAFFEE ART CENTER 501(C)(3) COMMUNITY ARTS P.O. BOX 1447 PROGRAMS; ESPECIALLY RUTLAND, VT 05701 IN THE SCHOOLS, 300. WMHT 501(C)(3) ALBANY AREA PUBLIC TV 4 GLOBAL VIEW ANNUAL FUND. TROY, NY 12180-8368 300. NORTHSHORE INN 501(C)(3) FOOD AND SUPPORT FOR P.O. BOX 168 THE DISADVANTAGED. GLEN COVE, NY 11542 500. VERMONT FOODBANKS 501(C)(3) FOOD FOR THE NEEDY. 33 PARKER ROAD BARRE, VT 05641 300. ARLINGTON MEMORIAL HIGH SCHOOL 501(C)(3) SCHOLARSHIP PROGRAM. SCHOLARSHIP FUND EAST ARLINGTON ROAD ARLINGTON VT 05250 500, BENNINGTON MEALS ON WHEELS 501(C)(3) MEALS FOR COMMUNITY 124 PLEASANT AVENUE NEEDY. BENNINGTON, VT 05201 100. Total from continuation sheets 5,550.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient SOUTHWESTERN VERMONT HEALTHCARE 501(C)(3) AUXILARY FOR NURSE'S 100 HOSPITAL DRIVE EDUCATION. BENNINGTON, VT 05201 200. NEIGHBOR TO NEIGHBOR 501(C)(3) SUPPORT PROGRAM FOR P.O. BOX 226 HOME BOUND, ETC. MANCHESTER CENTER, VT 05255 200, NORTHWINDS SYMPHONIC 501(C)(3) FREE MUSIC PROGRAMS P.O. BOX 281 FOR THE COMMUNITY. SEA CLIFF NY 11579 300, MARTHA CANFIELD MEMORIAL FREE LIBRARY 501(C)(3) SUPPORT FOR FREE P.O. BOX 267 LIBRARY/COMMUNITY ARLINGTON, VT 05250 PROGRAMS. 200. SOUTHWESTERN VERMONT REGIONAL CANCER 501(C)(3) TREATMENT OF CANCER. CENTER 100 HOSPITAL DRIVE BENNINGTON, VT 05201 200. COMMUNITY FOOD CUPBOARD 501(C)(3) FOOD FOR THE NEEDY. P.O. BOX 864 MANCHESTER CENTER, VT 05255 100. SAGE CITY SYMPHONY 501(C)(3) FREE MUSIC PROGRAMS BOX 547 FOR THE COMMUNITY. SHAFTSBURY VT 05262 250, NATURE CONSERVANCY 501(C)(3) SUPPORT ENVIRONMENTAL 4245 N. FAIRFAX DRIVE, SUITE 100 ISSUES/PROGRAMS. ARLINGTON VA 22203 100, BUFFALO BENNETT HIGH SCHOOL COMMUNITY 501(C)(3) BOOKS/MISC FOR CENTER FOUNDATION STUDENTS. 2885 MAIN STREET BUFFALO, NY 14214 100, GUIDING EYES FOR THE BLIND 501(C)(3) ANNUAL DONATION. 611 GRANITE SPRINGS ROAD YORKTOWN HEIGHTS NY 10598 300. Total from continuation sheets

Schedule B (Form 990, 990-EZ

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

THE ROBERTA AND RUSSELL HOUSMAN 27-1364347 CHARITABLE FOUNDATION, INC. Organization type (check one) Filers of: Section: Form 990 or 990-EZ ____ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, ine 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ 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).

Name of organization THE ROBERTA AND RUSSELL HOUSMAN CHARITABLE FOUNDATION, INC.

Employer identification number

27-1364347

Part I	Contributors	(see instructions).	Use duplicate	copies of	Part I if addition	al space is needed
--------	--------------	---------------------	---------------	-----------	--------------------	--------------------

(a) No.	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution
1	ROBERTA Y. HOUSMAN 38 MCKEE ROAD ARLINGTON, VT 05250	\$6,000.	Person X 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
2	RUSSELL F & ROBERTA Y. HOUSMAN 38 MCKEE ROAD ARLINGTON, VT 05250	\$32,441.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	RUSSELL F. HOUSMAN 38 MCKEE ROAD ARLINGTON, VT 05250	\$9,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
		•	1
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
No.	Name, address, and ZIP + 4 RUSSELL F & ROBERTA Y. HOUSMAN 38 MCKEE ROAD	Total contributions	Person X Payroll
No. 4	Name, address, and ZIP + 4 RUSSELL F & ROBERTA Y. HOUSMAN 38 MCKEE ROAD ARLINGTON, VT 05250 (b)	\$ 2,018.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
No. 4	Name, address, and ZIP + 4 RUSSELL F & ROBERTA Y. HOUSMAN 38 MCKEE ROAD ARLINGTON, VT 05250 (b)	\$ 2,018.	Type of contribution Person X Payroll
(a) No.	Name, address, and ZIP + 4 RUSSELL F & ROBERTA Y . HOUSMAN 38 MCKEE ROAD ARLINGTON , VT 05250 (b) Name, address, and ZIP + 4 (b)	\$ 2,018. (c) Total contributions (c) Total contributions	Type of contribution Person X Payroll

Name of organization THE ROBERTA AND RUSSELL HOUSMAN CHARITABLE FOUNDATION, INC.

Employer identification number

27-1364347

Part II	Noncash Property	(see instructions)	Use duplicate copies	of Part II if additiona	I space is needed
---------	------------------	--------------------	----------------------	-------------------------	-------------------

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	RKETABLE		
	CCURITIES		
	CONTILED		
		32,441.	09/08/11
(a)		4.	
No.	(b)	(c) FMV (or estimate)	(d)
rom	Description of noncash property given	(see instructions)	Date received
art I		(000 110110)	
		—— <u> </u>	
		\$	
(a)			
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate)	Date received
Part I		(see instructions)	
(a)		(c)	
No. from	(b)	FMV (or estimate)	(d)
Part I	Description of noncash property given	(see instructions)	Date received
			
		\$	
(a)		(-)	
No.	(b)	(c) FMV (or estimate)	(d)
from	Description of noncash property given	(see instructions)	Date received
Part I		(555 11152 55 1151)	
	· · · · · · · · · · · · · · · · · · ·		
—		_c	
		\$	
(a)			
No.	(b)	(c)	(d)
rom	Description of noncash property given	FMV (or estimate)	Date received
art I		(see instructions)	

Employer identification number

ABLE FOUNDATION, INC.		
year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc.	ne following line entry. For organizations c., contributions of \$1,000 or less for the	27-1364347 (8), or (10) organizations that total more than \$1,000 for the completing Part III, enter year. (Enter this information once) \$ \(\)
(b) Purpose of gift (c) Use of gift		(d) Description of how gift is held
	(e) Transfer of gift	
Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	the total of exclusively religious, charitable, etc Use duplicate copies of Part III if addition (b) Purpose of gift Transferee's name, address, and (b) Purpose of gift Transferee's name, address, and	(e) Transfer of gift Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4

(e) Transfer of gift

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

Transferee's name, address, and ZIP + 4

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee				
<u></u>					

Relationship of transferor to transferee

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CA	ASH IN	VESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
BERHSHIRE BANK MORGANSTANLEY SMITHBARNEY					1'	79. 0.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A			1	79.
FORM 990-PF DIVIDEND	S AND INTER	EST FROM	SECUE	RITIES	STATEMENT	2
SOURCE	GROSS	AMOUNT		TAL GAINS	COLUMN (A AMOUNT)
MORGANSTANLEY SMITHBARNEY		2,538.		330.	2,2	08.
TOTAL TO FM 990-PF, PART I, L	N 4	2,538.		330.	2,2	08.
FORM 990-PF	ACCOUNTI	NG FEES			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
ACCOUNTING	69.		0.			0.
TO FORM 990-PF, PG 1, LN 16B	69.		0.			0.
FORM 990-PF C	THER PROFES	SIONAL FE	EES	•	STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE		(C) ADJUSTED NET INCOM		
PLANNING	95.		95.			0.
TO FORM 990-PF, PG 1, LN 16C	95.		95.			0.

FORM 990-PF	OTHER E	XPENSES		STATEMENT 5			
· , DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM				
MISCELLANEOUS	200.	0.	•	0.			
TO FORM 990-PF, PG 1, LN 23	200.	0.	•	0.			
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6			
DESCRIPTION		Ъ	OOK VALUE	FAIR MARKET VALUE			
MORGANSTANLEY SMITHBARNEY - I	STOCKS PREF STOCK MUTUAL FUNDS		18,731. 6,900. 46,625.	18,731. 6,900. 46,625.			
TOTAL TO FORM 990-PF, PART I	ר נדאום 10ס		72,256.	72,256.			

Form **8868**

(Rev January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

* If you are filling for an Additional (Not Automatic) 3-Month Extension, complete only Part II (no page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filling (e-file), You can electronically file Form 8868 4 you need a 3-month automatic extension of time to (if (if months) for fill and in the property of the forms steed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the III Sign paper formatic (e-months) for more details on the electronic filling of this form, year wave year goverfile) and cicks on e-file for Charletes & Neoprostis. Part I only Attornatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990 T and requiseting an automatic 6-month extension -check this box and complete. Part I only All other economic at a returns. All other economic at a returns. Type or Interest and returns. The ROBERTA AND RUSSELL HOUSNAN THE ROBERTA AND RUSSELL HOUSNAN THE ROBERTA AND RUSSELL HOUSNAN THE ROBERTA AND RUSSELL HOUSNAN THE ROBERTA AND RUSSELL HOUSNAN THE ROBERTA AND RUSSELL HOUSNAN THE ROBERTA AND RUSSELL HOUSNAN THE ROBERTA AND RUSSELL HOUSNAN THE ROBERTA AND RUSSELL HOUSNAN THE ROBERTA AND RUSSELL HOUSNAN THE ROBERTA AND RUSSELL HOUSNAN THE ROBERTA AND RUSSELL HOUSNAN THE ROBERTA AND RUSSELL HOUSNAN THE ROBERTA AND RUSSELL HOUSNAN THE ROBERTA AND RUSSELL HOUSNAN THE ROBERTA HOUSNAN Peturn to defect the return that this application is for (file a separate application for each return) Application Ferturn Soot		ou are filing for an Automatic 3-Month Extension, comple					•	- X
Electronic filing (e-fie), You can electronically file Form 8868 4 you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 9907), or an additional (file automatic) 3-month extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefic Contracts, which must be sent to the IISR in paper format (see instructions). For more details on the electronic filing of this form, wast www virigovide and click on e-file for Chentes & Nonprofits. Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).								
required to file Form 1990-1), or an additional (not automatic) 3-month extension of time to file any of the forms sited in Part to Part it with the exception of Form 8970, information Return for Transfers Application. Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, west rewriters goviferlie and click on e-rife for Chandes & Norporties. Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-1 and requesting an automatic 6-month extension - check this box and complete Part I only. All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or Interest the ROBERTA AND RUSSELL HOUSAN CHARTTABLE FOUNDATION, INC. Interest in the ROBERTA AND RUSSELL HOUSAN CHARTTABLE FOUNDATION, INC. Interest in the ROBERTA AND RUSSELL HOUSAN CHARTTABLE FOUNDATION, INC. Application Return Application (reach return) O	Do no	t complete Part II unless you have already been granted	an automa	atic 3-month extension on a previous	sly filed	Form 8	8868	
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