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Form **990-PF**

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

OMB No 1545 0052

2012

Department of the Treasury Internal Revenue Service

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

For ca	lendar year 2012, or tax year beginning	9/01 , 2012,	and ending 8	/31		
FIFT	CHER MEMORIAL LIBRARY, INC.			Α	Employer identification nur	nber
88 M	AIN STREET OW, VT 05149			В	Telephone number (see the (802) 228-892	
2022	0.1, 11 00213			С	If exemption application is	
G Ch	eck all that apply: Initial return	Initial return of a form	ner public charity			
G CIII	Final return	Amended return	ner public criainty	D	1 Foreign organizations, chec	ck here
	Address change	Name change			2 Foreign organizations meet	ing the 85% test, check
H		(c)(3) exempt private f			here and attach computation	on
	Section 4947(a)(1) nonexempt charitable t			E	If private foundation status under section 507(b)(1)(A)	
		ounting method: Counting method: Countin	ash X Accrual	_		
► §		column (d) must be or	cash basis)	F	If the foundation is in a 60 under section 507(b)(1)(B)	-month termination
Part	2/330/307:	(a) Revenue and	(b) Net investmen	.		(d) Disbursements
L	Expenses (The total of amounts in	expenses per books	income	"	(c) Adjusted net income	for charitable
	columns (b), (c), and (d) may not neces- sarily equal the amounts in column (a)					purposes (cash basis only)
	(see instructions))	60.060		_		,
	1 Contributions, gifts, grants, etc, received (att sch) 2 Ck X if the foundn is not req to att Sch B	69,062.		\dashv	 	
	3 Interest on savings and temporary			_		
	cash investments 4 Dividends and interest from securities	1.	46.77	1.	1.	
	Dividends and interest from securities 5 a Gross rents	46,777.	46,77	٠.	46,777.	
	b Net rental income or (loss)					
R	6 a Net gain/(loss) from sale of assets not on line 10	15,786.				
E V E N	b Gross sales price for all assets on line 6a 250, 733.					
E	7 Capital gain net income (from Part IV, line 2) 8 Net short-tein - Capital vain:		15,78	6.	0.	
U	9 Income modifications				<u>U.</u>	
E	10 a Grosssales less returns and					
	allowances b Less Regulor coods soul					
	goods som					
	c Gross proft/(loss) (att sch) 11 Other income (祖母莊安中电仙司)					
	12 Total. Add lines 1 through 11	131,626.	62,56	4.	46,778.	
	13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages	99,685.				99,685.
	15 Pension plans, employee benefits	33,003.				<i>55</i> , 005.
Α	16a Legal fees (attach schedule)					
DM	b Accounting fees (attach sch)			\Box		
N N	c Other prof fees (attach sch) See St 1	11,497.	11,49	7.		
PS	17 Interest 18 Taxes (attach scheduleXsee instrs) See Stm 2	8,751.	16	0	•	8,374.
OPERATI	19 Depreciation (attach		10	٠.		0,314.
7	sch) and depletion	14,026.				
SG E	20 Occupancy 21 Travel, conferences, and meetings	4,594. 1,934.				4,594. 1,934.
NG EXP	22 Printing and publications	1, 554.				1, 554.
	23 Other expenses (attach schedule)	20.051				20.051
9 N	See Statement 3 24 Total operating and administrative	30,251.				30,251.
SES SES	expenses. Add lines 13 through 23	170,738.	11,66	5.		144,838.
5	25 Contributions, gifts, grants paid					
	26 Total expenses and disbursements. Add lines 24 and 25	170,738.	11,66	5	0.	144,838.
	27 Subtract line 26 from line 12:	170,730.	11,00	۲.		144,030.
	a Excess of revenue over expenses and disbursements	-39,112.]		
	b Net investment income (if negative, enter 0-).	-39,112.	50,89	9		
	C Adjusted net income (if negative, enter -0-)		30,03	- 	46,778.	
DAA	or Panerwork Reduction Act Notice see ins	turations.			05041 12/23/12	Form 990-PF (2012)

Form	990-	PF (2012) FLETCHER MEMORIAL LIBRARY, INC.			00120 Page 2
Parl		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		of year
	<u> </u>	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing.	54,937.	15,048	
	2	Savings and temporary cash investments .	1,327.	1,327	1,327.
	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)			
A	7	Other notes and loans receivable (attach sch)			
		Less. allowance for doubtful accounts ▶			
ASSET	8	Inventories for sale or use			
E	9	Prepaid expenses and deferred charges	· · · · · · · · · · · · · · · · · · ·		
S	10 a	a Investments — U.S. and state government obligations (attach schedule)			
	ŀ	b Investments — corporate stock (attach schedule)	660,315.	658,862.	1,165,170.
		c Investments — corporate bonds (attach schedule) .	396,842.	298,193.	
	11	Investments – land, buildings, and equipment: basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans		•	
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment: basis ► 764, 163.			
		Less' accumulated depreciation (attach schedule) See Stmt 4 > 238,805.	424,479.	525,358.	825,000.
		Other assets (describe ►)			
	16	Total assets (to be completed by all filers — see the instructions Also, see page 1, item l)	1,537,900.	1,498,788.	2,330,507.
Ļ	17	Accounts payable and accrued expenses .			_
Å	18	Grants payable			_
A B I	19	Deferred revenue			_
Ļ	20	Loans from officers, directors, trustees, & other disqualified persons			
ļ.	21	Mortgages and other notes payable (attach schedule)			
<u>i</u>	22	Other liabilities (describe			_
É S	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
N F	24	Unrestricted			
N U N	25	Temporarily restricted			
D	26	Permanently restricted			
ASSETS BALAN		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
ĒL	27	Capital stock, trust principal, or current funds .			
SN	28	Paid-in or capital surplus, or land, building, and equipment fund			1
С	29	Retained earnings, accumulated income, endowment, or other funds	1,537,900.	1,498,788.	
O E R	30	Total net assets or fund balances (see instructions)	1,537,900.	1,498,788.	
	31	Total liabilities and net assets/fund balances			_
Dark	1111	(see instructions) Analysis of Changes in Net Assets or Fund Balance	1,537,900.	1,498,788.	
				roo with	
1	otal	l net assets or fund balances at beginning of year – Part II, colur of-year figure reported on prior year's return)	mir (a), iine 30 (must agi	ree with . 1	1,537,900.
2	Ente	r amount from Part I, line 27a .		2	-39,112.
3	Other	increases not included in line 2 (itemize)		3	
		lines 1, 2, and 3		. 4	1,498,788.
_		ases not included in line 2 (itemize)		5	
6	Total	I net assets or fund balances at end of year (line 4 minus line 5)	 Part II. column (b), lin 	ne.30. !6	1 1/198 788

(a) List and describe	e the kind(s) of property sold (e.g , rea se; or common stock, 200 shares MLC	al estate.	P — Purchas D — Donation	(month, day, year)	(d) Date sold (month, day, year)		
1a PUBLICLY TRADED SEC	URITIES		P	Various	Various		
b PUBLICLY TRADED SEC			 P	Various	Various		
С	01.12.2.2.0						
d							
е							
(e) Gross sales price (f) Depreciation allowed (g) Cost of (or allowable) plus expe			5	(h) Gain or (loss) (e) plus (f) minus (g)			
a 29,224.		33	,291.		-4,067.		
b 221,509.			,656.		19,853.		
c							
d							
e							
Complete only for assets show	ring gain in column (h) and owned by	the foundation on 12/31/69		(I) Gains (Col	umn (h)		
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (over column (j), if any		gain minus column (I than -0-) or Losses (fi	(), but not less		
a					-4,067.		
b					19,853.		
С		· · · · · · · · · · · · · · · · · · ·					
d							
e				· · · · · · · · · · · · · · · · · · ·			
2 Capital gain net income or (ne	If (loss), ente	enter in Part I, line 7 er -0- in Part I, line 7		2	15,786.		
,	(loss) as defined in sections 1222(5) a e 8, column (c) (see instructions) If (l			3	-4,067.		
Part V Qualification Unde	r Section 4940(e) for Reduced	Tax on Net Investmen	nt Incom	e			
If 'Yes,' the foundation does not qua	ction 4942 tax on the distributable amount lify under section 4940(e). Do not comin each column for each year; see the	plete this part	•	Yes	X No		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asse	ts (c	(d) Distribution olumn (b) divided			
2011	145,668.	1,468	,145.		0.099219		
2010	142,056.	1,401			0.101352		
2009	154,458.	1,353			0.114097		
2008	140,717.	1,486			0.094658		
2007	144,164.	1,721		•	0.083741		
		·					
2 Total of line 1, column (d)			} ;	2	0.493067		
3 Average distribution ratio for the	ne 5-year base period — divide the tota n has been in existence if less than 5	al on line 2 by 5, or by the years		3	0.098613		
4 Enter the net value of nonchar	itable-use assets for 2012 from Part X	(, line 5		4	1,479,040.		
5 Multiply line 4 by line 3				5	145,853.		
6 Enter 1% of net investment inc	come (1% of Part I, line 27b)			6	509.		
				7			
	om Port VII. line 4				146,362.		
8 Enter qualifying distributions from the second se	om Part XII, line 4 han line 7, check the box in Part VI, li	ne 1b, and complete that pa	<u> </u>	B 1% tax rate See t	144,838. he		
Part VI instructions				Fore	n 990-PF (2012)		
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	00120 Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	structions)
1 a Exempt operating foundations described in section 4940(d)(2), check here	
Date of ruling or determination letter. (attach copy of letter if necessary — see instrs)	
	1,018.
check here and enter 1% of Part I, line 27b	
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable	
	2 0.
	3 1,018. 4 0.
4 0000000 (0000000 000000 000000 00000000	5 1,018.
6 Credits/Payments	1,016.
a 2012 estimated tax pmts and 2011 overpayment credited to 2012 6a	
b Exempt foreign organizations — tax withheld at source 6b	
c Tax paid with application for extension of time to file (Form 8868)	
d Backup withholding erroneously withheld 6d	
'	7 0.
	8 13.
	9 1,076.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	0
11 Enter the amount of line 10 to be. Credited to 2013 estimated tax Refunded	1
Part 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 participate or intervene in any political campaign?	Yes No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes	
(see the instructions for definition)?	1 b X
If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	
c Did the foundation file Form 1120-POL for this year?	1 c X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ►\$ 0. (2) On foundation managers ►\$	0.
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	
foundation managers > \$0.	
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 X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?Was there a liquidation, termination, dissolution, or substantial contraction during the year?	4b N/A 5 X
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 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 X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7 X
8 a Enter the states to which the foundation reports or with which it is registered (see instructions)	
N/A	<u> </u>
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 <i>General Instruction G? If 'No,' attach explanation</i>	8 b X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 49 for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If 'Yes,' complete F	942())(5)
	Part XIV 9 X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10 X
BAA	Form 990-PF (2012)

charitable purposes?

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the tax year beginning in 2012?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its

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

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Form 990-PF (2012)

Form 990-PF (2012) FLETCHER MEMORIAL Part VII-B Statements Regarding Activit		4720 May Re Reg		00120	Page 6
5a During the year did the foundation pay or incu		14720 May be req	dired (continued)		
(1) Carry on propaganda, or otherwise attempt	•	n (section 4945(e))?	∏ Yes X	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section] No	
(3) Provide a grant to an individual for travel,		purposes?	<u></u>	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, oi 4940(d)(2)? (see instri	rganization described uctions).	Yes	No No	
(5) Provide for any purpose other than religio educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes] No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the excep ding disaster assistance	tions	5 b	N/A
Organizations relying on a current notice rega	rding disaster assistant	ce check here	▶ [
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	the foundation claim ex sibility for the grant?	emption from the	.N/A Yes	No	
If 'Yes,' attach the statement required by Reg	ulations section 53.494	5-5(d).			
6a Did the foundation, during the year, receive at on a personal benefit contract?			∐Yes ∑	No Ch	
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	lurns, airectly or inaired	tiy, on a personal bene	nt contract?	6 b	- X
7 a At any time during the tax year, was the found	dation a party to a proh	ibited tax shelter transa	action? Yes	No	
b If 'Yes,' did the foundation receive any procee Part VIII Information About Officers, D				N/A 7b	
and Contractors	irectors, Trustees,	Foundation Manag	gers, migniy Palu	Linployees) ,
1 List all officers, directors, trustees, foundation	· · · · · · · · · · · · · · · · · · ·				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		e account, lowances
See Statement 6			· · · · · · · · · · · · · · · · · · ·		
		0.	0.		0.
				1	
2 Compensation of five highest-paid employees (or	ther than those included	on line 1 – see instruction	ns). If none, enter 'NONE	<u> </u> E.'	
(a) Name and address of each employee	(b) Title, and average	(c) Compensation	(d)Contributions to	(e) Expense	e account
paid more than \$50,000	hours per week devoted to position	(c) compensation	employee benefit plans and deferred compensation		lowances
None					
		-			· —
				ļ	
Total number of other employees paid over \$50,000 BAA	TEEA0306L 1	2/25/12	· · · · · · · · · · · · · · · · · · ·	Form 990-	0 PF (2012)

Form 990-PF (2012) FLETCHER MEMORIAL LIBRARY, INC. Part VIII Information About Officers, Directors, Trustees, Foundation About Officers, Directors, Trustees, Tru	03-600 dation Managers, Highly Paid E	00120 Page 7 mployees,
and Contractors (continued)	esterations) If none onto 'NONE'	
3 Five highest-paid independent contractors for professional services (see in (a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None	(b) Type of Service	(c) compensation
		
Total number of others receiving over \$50,000 for professional services		0
Partix A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ıl ınformation such as the number of	Expenses
1 N/A		
2		
3		
4		
Part Summary of Program-Related Investments (see instruc	l ctions)	
Describe the two largest program-related investments made by the foundation during the		Amount
	tax year off lifes 1 and 2.	Amount
'		
2		
All other program-related investments. See instructions		
3		
·		
Total. Add lines 1 through 3	-	0.
BAA		Form 990-PF (2012)

Forn	990-PF (2012) FLETCHER MEMORIAL LIBRARY, INC.	03-6000	120	Page 8
Par		Foreign t	oundations	5,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes.	1-1-	1 450	0.60
	Average monthly fair market value of securities	1 a	1,456	
	Average of monthly cash balances	1 b	44	,595.
	Fair market value of all other assets (see instructions)	1 d	1,501	E 6 2
	I Total (add lines 1a, b, and c) . Reduction claimed for blockage or other factors reported on lines 1a and 1c	10	1,501	, 505.
•		o.		
2	Acquisition indebtedness applicable to line 1 assets	2		0.
3	Subtract line 2 from line 1d	3	1,501	
3		-	1,301	, 505.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	22	,523.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	1,479	
6	Minimum investment return. Enter 5% of line 5	6		, 952.
Par		1 - 1		, , , , , , , , , , , , , , , , , , , ,
. a.	and certain foreign organizations check here \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		an action o	
1	Minimum investment return from Part X, line 6.	1	73	,952.
2 a	Tax on investment income for 2012 from Part VI, line 5 2a 1, 01	8.		7
ŀ	Income tax for 2012 (This does not include the tax from Part VI)			
	Add lines 2a and 2b	2 c	1	,018.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3		,934.
4	Recoveries of amounts treated as qualifying distributions	4		,
5	Add lines 3 and 4	5	72	,934.
6	Deduction from distributable amount (see instructions) .	6		, , , , ,
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	72	,934.
Par	t XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes.			
`a	Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1 a	144	,838.
t	Program-related investments – total from Part IX-B	1 b		
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2		
3	Amounts set aside for specific charitable projects that satisfy the suitability test (prior IRS approval required)	3 a		
t	Cash distribution test (attach the required schedule).	3 b		
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	144	,838.
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	144	,838.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	foundation		

Form **990-PF** (2012)

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI, line 7				72,934.
2 Undistributed income, if any, as of the end of 2012.			· · · · · · · · · · · · · · · · · · ·	12,934.
a Enter amount for 2011 only		-	0.	
b Total for prior years: 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2012			· · · · · ·	
a From 2007 58,857.				
b From 2008 67, 656.				
c From 2009 87, 595.				
d From 2010 72,572.				
e From 2011 73, 419.	260.000			
f Total of lines 3a through e	360,099.			
4 Qualifying distributions for 2012 from Part XII, line 4. ► \$ 144,838.				
XII, line 4. \(\bar{\sigma} \) \(\bar{\sin} \) \(\bar{\sigma} \) \(\bar{\sigma} \) \(\bar{\sigma} \) \(·-	0.	
· · · · · · · · · · · · · · · · · · ·			<u> </u>	
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			
d Applied to 2012 distributable amount	· · · · · · · · · · · · · · · · · · ·			72,934.
e Remaining amount distributed out of corpus	71,904.			
5 Excess distributions carryover applied to 2012	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:	422 002	:		
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	432,003.			
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 2011. Subtract line 4a from line 2a Taxable amount — see instructions.			0.	
			0.	
f Undistributed income for 2012 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013				0
7 Amounts treated as distributions out of				0.
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
`	0.			
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)	58,857.			
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	373,146.			
10 Analysis of line 9	· - , · ·			
a Excess from 2008 67,656.				
b Excess from 2009 87,595.				
c Excess from 2010 72, 572.				
d Excess from 2011 73, 419.				}
e Excess from 2012 71, 904.				

Form 990-PF (2012) FLETCHER MEMORIA	03-600012) Page 10 N/A							
Part XIV-1 Private Operating Foundations (see instructions and Part VII-A, question 9) 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 2012, enter the date of the ruling									
		erating foundation o		4942(J)(3) or	4942(j)(5)				
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	4 5 0000					
investment return from Part X for each year listed	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total				
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									
3 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 listed									
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	<u> </u>		<u> </u>						
Supplementary Information assets at any time during the	(Complete this e year – see in	part only if the structions.)	foundation had	\$5,000 or more	in				
Information Regarding Foundation Manage a List any managers of the foundation who have close of any tax year (but only if they have None	e contributed more t	han 2% of the total c than \$5,000). (See	ontributions received t section 507(d)(2))	by the foundation befo	ore the				
b List any managers of the foundation who own	10% or more of the	stock of a corporation	on (or an equally large	portion of the owner	ship of				
a partnership or other entity) of which the None	foundation has a 1	0% or greater inter	est.		·				
2 Information Regarding Contribution, Gra	nt Gift Loan Scho	larship etc Progr	ams:						
Check here In the foundation only make requests for funds if the foundation make complete items 2a, b, c, and d.	akes contributions to	preselected charitab	le organizations and d						
a The name, address, and telephone number o	r e-mail of the perso	n to whom applicatio	ns should be addresse						
2									
b The form in which applications should be	submitted and info	rmation and materia	als they should include	de.					
b the form in which applications should be	Submitted Line initial	mation and materia	als they should moral						
c Any submission deadlines:		,							
A normalization and break the control of	and as because of	huad arasa shart-	ship finish lands of	actitutions as attack	factors				
d Any restrictions or limitations on awards,	such as by geograp	onicai areas, charita	ible lielas, kinas of li	isututions, or other	iaciors.				

3 Grants and Contributions Paid During the Year or Approved for Future Payment								
Recipient		Foundation status of recipient		N/A Amount				
Name and address (home or business)	substantial contributor	recipient						
a Paid during the year	substantial contributor	recipient						
Total			► 3a					
	· ·	· · · · · ·	, 34					
b Approved for future payment Total			► 3b					

Part XVI-A. Analysis of Income-Producing Activities

nte	r gross	s amounts unless otherwise indicated	Unrelate	d business income	Excluded	by section 512, 513, or 514	(0)
	•	ram service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (See instructions)
	•		· -		1 33.13		
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•				<u> </u>			
ì	<u>`</u>				+		
	'				+	-	
	<i>:</i>		_	· · · -	+		
ı		and antique to from appearant against			+ -		
	•	and contracts from government agencies		 	 		
		bership dues and assessments	-		+		···
3		et on savings and temporary cash investments			14	1.	
4		ends and interest from securities			14	46,777.	
5		ental income or (loss) from real estate		 			
		financed property					
t		ebt-financed property					
6		ntal income or (loss) from personal property					
7	Other	r investment income					
8	Gain or	r (loss) from sales of assets other than inventory			18	15,786.	
9	Net in	ncome or (loss) from special events					
10	Gross	s profit or (loss) from sales of inventory					
11	Other	revenue	,		1	$i = \frac{\pi}{\epsilon}$ $i_{\pm} = -i - d_{\pm} \epsilon$	•
ā	1						
Ŀ	,						
(;		,	•			
C	1						
•	,			•			
12	Subto	otal Add columns (b), (d), and (e)			7 - 1	62,564.	
12	Cubic						
13	Total.	. Add line 12, columns (b), (d), and (e)	······································			13	62,564.
13	Total.		ns)				62,564.
13 See	Total. works	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation		shment of Eveni	nt Purno	13	62,564.
13 See	Total. works	. Add line 12, columns (b), (d), and (e)		shment of Exemp	ot Purpo	13	62,564.
13 See Par	Total. works	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	Accompli			oses	
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	, ,
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	, ,
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	
13 See Par Lin	Total. works t XVI- e No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. B Relationship of Activities to the	Accompli			oses	

Form 990-PF (2012) FLETCHER MEMORIAL LIBRARY, INC. 03-6000120 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

												Yes	No
1 D	id the	organization direc	tly or indirectly	engage in any	of the follow	ing with a	any ot	her organization	on 507				•
re	escribe elating	ed in section 501(o to political organi	c) of the Code (d zations?	otner than sect	ion 501(c)(3)	organiza	ations) or in section	527,		l		
	_	s from the reporti		a noncharitat	ole exempt o	rnanızatic	on of						1
) Cas	•			cp.	94					1 a (1)		X
•	•	er assets		•	•						1 a (2)		X
•	•	ansactions:									14(2)		_^
		es of assets to a r	oncharitable ove	ampt organizat	hon						1 5 (1)		
•	•									• •	1 b (1)		X
•	•	chases of assets f		•	rganization					•	1 b (2)		X
•	•	tal of facilities, eq		er assets	• •						1 b (3)		Х
•	•	nbursement arran	•							•	1 b (4)		X
\ -	•	ns or loan guarant								•	1 b (5)		X
•	•	ormance of service		•	3						1 b (6)		Х
c S	harıng	of facilities, equip	oment, mailing lis	sts, other asse	ets, or paid e	mployees	3				1 c		X
-# 1 <i>4</i>	41		- (V I		f-11			المالمان معام حاكم		L			
a if	tne an e good	swer to any of the s, other assets, or	e above is Yes, services given by	the reporting for	tollowing scr bundation. If th	nedule Co ne foundat	olumr tion re	n (b) snould all eceived less that	ways snow t n fair market	ne tair n value in	narket val	ue of	
aı	ny tran	saction or sharing	arrangement, s	how in column	n (d) the valu	e of the o	goods	, other assets,	or services	receive	d		
(a) Line	no	(b) Amount involved	(c) Name	of noncharitable e	xempt organizati	on	(d)	Description of trai	nsfers, transact	ions, and	sharing arrar	ngement	.s
N/A													
									-				
			·										
			1										
		 											
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	+			 									
	 				.								
													
2 a ls	the fou	indation directly or	indirectly affiliated	d with, or relate	ed to, one or n	nore tax-e	exempt	t organizations			Пу	[F]	
		d in section 501(d	•	iner than sect	ion 501(c)(3)) or in se	ection	52/?	• • •		Yes	X	No
<u> </u>		complete the follo		· · · · · · · · · · · · · · · ·									
	(a)	Name of organiz	ation	(b) 1y	pe of organi	zation		(0) Descriptio	n of rela	tionship		
N/A		 											
				ļ									
				<u> </u>									
							1						
	Under p	enalties of perjury, I de- and complete Declarat	clare that I have exam	nined this return, including than taxpayer) is b	cluding accompar	nying schedu mation of wh	ules and	d statements, and to	the best of my	knowledge	and belief, if	is true,	
Sign								, and any time.			May the I	RS disci	JSS
Here		\mathcal{V}_{0} . Ω	- Hua-		1 1 /00	114) -	The			this return	1 with th	e i
nere	Signa	ture of officer or trustee	au	· · · · · · · · · · · · · · · · · · ·	Date Date	11-1-	Tit	reasur-	<u>=1</u>		, (see ıpstr	uctions)	2
	эіупа	ture of officer or trustee Print/Type preparer's		Predara	Signature	•		Date / /	- 		PTIN	Yes	No
		• • • • •						6/19/14	/ Check	□"			
Paid		Timothy L.			thy I. F		er	Q11-119	self-emple		P01219	576	
Prepa		Firm's name	Timothy L.		r, CPA,	PC			Firm's EIN	03-03	334408		
Use O	nly	Firm's address	28 Pond St				_		1				
			Ludlow, VI	r 05149					Phone no	(802)	228-59	575	
BAA			-	-							Form 990	-PF (20	012)

2012	Federal Statements	Page 1
Client FLETCH	FLETCHER MEMORIAL LIBRARY, INC.	03-6000120
6/19/14		03:09PM
Statement 1 Form 990-PF, Part I, Line 16c Other Professional Fees		
TRUST MANAGEMENT FEES	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 11,497. \$ 11,497. \$ 11,497. Fotal \$ 11,497. \$ 11,497.	
Statement 2 Form 990-PF, Part I, Line 18 Taxes		
EXCISE TAX FOREIGN TAX PAYROLL TAXES	(a) (b) Net (c) Expenses Investment Adjusted Income Net Income \$ 209. 168. \$ 168. 8,374. Total \$ 8,751. \$ 168.	
Statement 3 Form 990-PF, Part I, Line 23 Other Expenses		
BOOKS & PERIODICALS INSURANCE MISCELLANEOUS EXPENSES OFFICE SUPPLIES SPECIAL PROGRAMS	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 13,555. 5,732. 2,923. 6,980. 1,061. Total \$ 30,251. \$ 0. \$ (
Statement 4 Form 990-PF, Part II, Line 14 Land, Buildings, and Equipment		
Category	Accum. Book <u>Basis Deprec. Value</u>	Fair Market Value
Machinery and Equipment Buildings Land To	\$ 73,698. \$ 70,639. \$ 3,059. 688,465. 168,166. 520,299. 2,000. \$ 764,163. \$ 238,805. \$ 525,358.	. 750,000. . 25,000.

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2012 ·	Federal Statements			
Client FLETCH	CH FLETCHER MEMORIAL LIBRARY, INC.			
6/19/14 Statement 5 Form 990-PF, Part VI, Line 9 Tax Due				03 09PM
Tax Due Late Payment Penalty Late Interest			\$ Total \$	1,031. 31. 14. 1,076.
Statement 6 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Truste			Chui	
Name and Address	Title and Average Hours <u>Per Week Devoted</u>	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
MARY BARTON 31 FOX LANE LUDLOW, VT 05149	Chairperson 5.00	\$ 0.	\$ 0.	\$ 0.
CHARLOTTE SUMNER 19 PROSPECT ST LUDLOW, VT 05149	Secretary 5.00	0.	0.	0.
LESLIE LEVER 39 SEARS FARM ROAD LUDLOW, VT 05149	Treasurer 5.00	0.	0.	0.
DENNIS PEARSON 185 BUTTERMILK FALLS ROAD LUDLOW, VT 05149	Boardmember 5.00	0.	0.	0.
ANNE KIPP 8 1/2 WEST HILL ROAD LUDLOW, VT 05149	Boardmember 5.00	0.	0.	0.
	Total	\$ 0.	<u>\$ 0.</u>	<u>\$ 0.</u>

Form **8868** (Rev January 2013)

Application for Extension of Time To File an Exempt Organization Return

COPY

OMB No 1545-1709

Department of the Treasury Internal Revenue Service

File a separate application for each return.

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

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X

If you ar	e filing for an Additional (Not Automatic) 3-Mont	th Extensio	n, complete only Part II (on page 2 of th	ıs for	m)	ب	
Do not com	plete Part II unless you have already been grante	ed an auton	natic 3-month extention on a previously f	iled F	orm 8868		
corporation request an ex	iling (e-file). You can electronically file Form 8860 required to file Form 990-T), or an additional (no xtension of time to file any of the forms listed in Part With Certain Personal Benefit Contracts, which miling of this form, visit www.irs.gov/efile and click	t automatic I or Part II v ust be sent) 3-month extension of time. You can ele with the exception of Form 8870, Information to the IRS in paper format (see instruct	ectron n Retu	iically file Fo irn for Transfe	rm 8868 to ers	
Partil:	Automatic 3-Month Extension of Time	. Only su	bmit original (no copies needed).				
A corporation	n required to file Form 990-T and requesting an	automatic 6	-month extension - check this box and	comp	lete Part I o	nly 🕨 🗌	
All other con		REMICs, a	nd trusts must use Form 7004 to request Enter filer's identi	fying	пumber, se	e instructions	
~	Name of exempt organization or other filer, see instructions			Empl	oyer identification	n number (EIN) or	
Type or print							
•	FLETCHER MEMORIAL LIBRARY, INC			03-6000120			
File by the due date for	Number, street, and room or suite number. If a P.O. box, see instructions					Social security number (SSN)	
filing your return See	88 MAIN STREET City, town or post office, state, and ZIP code. For a foreign add.	ress see instri	ctions	<u> </u>	····		
instructions		1033, 300 11300	is to 13				
	LUDLOW, VT 05149						
Enter the Re	eturn code for the return that this application is fo	or (file a sep	parate application for each return)			04	
Application Is For		Return Code	Application Is For		·	Return Code	
Form 990 or I	orm 990-EZ	01	Form 990-T (corporation)			07	
Form 990-BL	•	02	Form 1041-A		08		
Form 4720 (ır	ndividual)	03	Form 4720			09	
Form 990-PF		04	Form 5227			10	
Form 990-T	(section 401(a) or 408(a) trust)	05	Form 6069		_	11	
Form 990-T	(trust other than above)	06	Form 8870		12		
Telephone If the org If this is the check the	s are in the care of ► LESILE LEVER E No ► (802) 228-8921 Fanization does not have an office or place of bus for a Group Return, enter the organization's four s box ■ If it is for part of the group, c asion is for	dıgıt Group	e United States, check this box . Exemption Number (GEN) If		s for the who	5 1,	
1 reques	t an automatic 3-month (6 months for a corporation	required to f	ile Form 990-T) extension of time				
The ext	$4/15$, 20 $\underline{14}$, to file the exempt organization is for the organization's return for: calendar year 20 or tax year beginning $\underline{9/01}$, $\underline{20 \cdot 12}$						
	ax year entered in line 1 is for less than 12 monthinge in accounting period	ns, check re	eason Initial return Fina	al retu	urn		
3 a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions			3 a	\$	0.		
paymer	pplication is for Form 990-PF, 990-T, 4720, or 60 its made. Include any prior year overpayment all	owed as a	credit	3 b	\$	0.	
c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions			3 с	\$	0.		
Caution. If you payment insti	are going to make an electronic fund withdrawal wiructions	th this Form	8868, see Form 8453-EO and Form 8879-E	O for			

Page 2

 If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box X Note. Only complete Part II if you have already been granted an automatic 3 month extension on a previously filed Form 8868 • If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1) Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed) Enter filer's identifying number, see instructions Employer identification number (EIN) or Name of exempt organization or other filer, see instructions Type or 03-6000120 FLETCHER MEMORIAL LIBRARY, INC. print Social security number (SSN) Number, street, and room or suite number. If a P.O. box, see instructions File by the Timothy L. Faulkner, CPA, PC due date for 28 Pond St. filing your return See City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions Ludlow, VT 05149 Enter the Return code for the return that this application is for (file a separate application for each return) 04 Return Application Return Application ls For Code Code Form 990 or Form 990-EZ 01 08 02 Form 990-BL Form 1041 A Form 4720 (individual) 03 Form 4720 09 Form 990-PF 04 Form 5227 10 11 Form 990-T (section 401(a) or 408(a) trust) 05 Form 6069 12 Form 990-T (trust other than above) 06 Form 8870 STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868. The books are in care of ► LESILE LEVER Telephone No ► (802) 228-8921 _ _ FAX No ► If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ► If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension is for 4 I request an additional 3-month extension of time until $\underline{7/15}$, 20 $\underline{14}$ 5 For calendar year , or other tax year beginning 9/01
6 If the tax year entered in line 5 is for less than 12 months, check reason , 20 $\underline{12}$, and ending $\underline{8/31}$ Initial return Final return Change in accounting period 7 State in detail why you need the extension Taxpayer respectfully requests additional time to gather information necessary to file a complete and accurate tax return. __ 8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 8 a | \$ nonrefundable credits. See instructions n b If this application is for Form 990 PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously 8b \$ c Balance due. Subtract line 8b from line 8a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions 8 c |\$ 0. Signature and Verification must be completed for Part II only. Under penalties of perjury. I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Date -

Title ▶

Signature >