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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

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

ror ca	endar year 2012, or tax year beginning	9/01 ,2012	, and ending 8	<u>/31</u>		2013	
FLEC	THER FARM FOUNDATION, INC.			A	Employer ld	lentification nur 07183	nber
	AIN STREET OW, VT 05149			В		number (see the 228-883	
	•			С	If exemption	n application is	pending, check here
G Che	eck all that apply: Initial return	Initial return of a form	ner public charity	D 1	Foreign org	anizations, ched	k here
	Final return X Address change	Amended return Name change		2			ing the 85% test, check
H Ç	theck type of organization. X Section 50	(c)(3) exempt private f			here and at	tach computation	n`
1 F2	Section 4947(a)(1) nonexempt charitable to air market value of all assets at end of year J Acc		orivate foundation	E			was terminated , check here
(t	from Part II, column (c), line 16)	Other (specify)	ب	F	If the found	lation is in a 60	-month termination
► \$	4,302,007.	column (d) must be or	cash basis)	<u> </u>	****	on 507(b)(1)(B)	, check here.
rart	Expenses (The total of amounts in columns (b), (c), and (d) may not neces-	(a) Revenue and expenses per books	(b) Net investmer income	nt		isted net come	(d) Disbursements for charitable
	sarily equal the amounts in column (a) (see instructions))						purposes (cash basis only)
	1 Contributions, gifts, grants, etc, received (att sch) 2 Ck X if the foundn is not req to att Sch B			_		ı	
	3 Interest on savings and temporary cash investments		*	-		•	
	4 Dividends and interest from securities.	69,789.	69,78	39.		69,789.	
	5 a Gross rents b Net rental income		3.0 ¿		1		OF WES
R	or (loss) 6 a Net gain/(loss) from sale of assets not on line 10	146,385.	•	'		FYE	CEIVED
R E V E N	b Gross sales price for all assets on line 6a. 1,488,967.				4	10 ·	N. St. Transition
E N	7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain		146,38	35.	· · ·	S JAI	2-7-2014
U E	9 Income modifications	,				280.50° G-240	
_	10 a Gross sales less returns and allowances				ν, .	UG	ロドス・ロー
	b Less Cost of goods sold .				, ,	,	
	c Gross profit/(loss) (att sch) 11 Other income (attach schedule)		, ,				
	See Statement 1	43,116.					
	12 Total. Add lines 1 through 11 .	259,290.	216,17	74.		69,789.	
	13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages	10,000.		-			
CD	15 Pension plans, employee benefits			\dashv			
SA	16a Legal fees (attach schedule)						
A M	b Accounting fees (attach sch) See St 2 c Other prof fees (attach sch) See St 3	5,551. 21,133.	2,72 21,13			 -	
O I	17 Interest	21,133.	21,1	,,,			
N=STRAT	18 Taxes (attach schedule)(see instrs) See Stm 4 19 Depreciation (attach	4,625.	1	4.			765.
	sch) and depletion .	41,068.					
N (V) G (E)	20 Occupancy 21 Travel, conferences, and meetings			-	- ·		
A I'E'	22 Printing and publications						
A LE N X D (P)	23 Other expenses (attach schedule) See Statement 5	61,790.				2,600.	19,239.
' S' E	24 Total operating and administrative		22.00				
S	expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid Part XV.	144,167. 44,128.	23,86	' 		2,600.	20,004. 44,128.
	26 Total expenses and disbursements. Add lines 24 and 25		22.00	.,	•	2 600	
	27 Subtract line 26 from line 12:	188,295.	23,86	'' ·	٦	2,600.	64,132.
	a Excess of revenue over expenses and disbursements	70,995.		, ,	, ,,	_	•
	b Net investment income (if negative, enter -0-).	70,333.	192,30				
DAAF	C Adjusted net income (if negative, enter -0-) or Paperwork Reduction Act Notice, see ins	turations.		' '	05041 12/23	67,189.	Form 990-PF (2012)
				1 to be 0.6	12/27		

Form	990-	PF (2012) FLECTHER FARM FOUNDATION, INC.		03-600	
Par	+ 11	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.	Beginning of year	End o	_*
1 41		(See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Čash – non-interest-bearing	12,283.	360.	363.
	2	Savings and temporary cash investments	65,906.	65,649.	65,649.
	`3	Accounts receivable • 96,000.		5	
		Less allowance for doubtful accounts ▶	120,000.	96,000.	96,000.
	4	Pledges receivable ▶		1.34	
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)		5 14	·
A S E T		Less: allowance for doubtful accounts			
Š	8	Inventories for sale or use			
E	9	Prepaid expenses and deferred charges			·
Ś	10 a	Investments – U.S. and state government obligations (attach schedule)	517,630.	461,532.	465,692.
	b	Investments — corporate stock (attach schedule)	1,401,749.	1,381,427.	1,736,558.
	0	: Investments — corporate bonds (attach schedule)	378,451.	497,281.	498,425.
	11	Investments — land, buildings, and equipment: basis	, , ,		
		Less: accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
		Investments – other (attach schedule)			
	14	Land, buildings, and equipment: basis ► 1,684,213.	and the state of t	<u> </u>	
		Less. accumulated depreciation (attach schedule) . See .Stmt 6 ► 401,455.	1,215,786.	1,282,758.	1,500,000.
		Other assets (describe >)			
	16	Total assets (to be completed by all filers — see the instructions. Also, see page 1, item i)	3,711,805.	3,785,007.	4,362,687.
匸	17	Accounts payable and accrued expenses	1,200.	3,407.	1/002/00/.
1	18	Grants payable		5, 2011	,
B	19	Deferred revenue			
- !	20	Loans from officers, directors, trustees, & other disqualified persons			
ī	21	Mortgages and other notes payable (attach schedule)			
Ţ	22	Other liabilities (describe ►)			, , , , , , , , , , , , , , , , , , ,
Ė					, ,
<u>S</u>	23	Total liabilities (add lines 17 through 22)	1,200.	3,407.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			A second second
N F E U T N	24	Unrestricted			* * * * *
TN	25	Temporarily restricted			, 4 1
_ D	26	Permanently restricted			
A B S A E L A		Foundations that do not follow SFAS 117, check here. X and complete lines 27 through 31.			
EL	27	Capital stock, trust principal, or current funds.			
SN	28	Paid-in or capital surplus, or land, building, and equipment fund			· j
C	29	Retained earnings, accumulated income, endowment, or other funds	3,710,605.	3,781,600.	'
O E R S	30	Total net assets or fund balances (see instructions).	3,710,605.	3,781,600.	,
	31	Total liabilities and net assets/fund balances			,
_		(see instructions)	3,711,805.	3,785,007.	۶۰,
Par		Analysis of Changes in Net Assets or Fund Balance	es	Ψ	
1	Total end-c	net assets or fund balances at beginning of year — Part II, colu of-year figure reported on prior year's return)		gree with	3,710,605.
2	Enter	amount from Part I, line 27a		2	70,995.
3	Other i	ncreases not included in line 2 (itemize)		3	
4	Add I	ines 1, 2, and 3		4	3,781,600.
5	Decrea	ses not included in line 2 (itemize)		5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5)	 Part II, column (b), 	line 30 . 6	3,781,600.
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THE COLUMN	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)					(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
16	TD BANK			P		Various	Various
	PEOPLES BANK			P		Various	Various
	TD BANK CAPITAL GAI	N DISTRIBUTIONS		P		Various	Various
	PEOPLES BANK CAPITA			P		Various	Various
	•			-			
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal	e e		(h) Gain or (e) plus (f) m	
	499,750.		46	7,765.			31,985.
	980,783.		87	4,817.			105,966.
	3,055.						3,055.
	5,379.						5,379.
	9						
		ng gain in column (h) and owned b				(I) Gains (Colu	ımn (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 a			ain minús column (k in -0-) or Losses (fr	
	3						31,985.
)						105,966.
	2						3,055.
	1						5,379.
2	, ,	If (loss), en	enter in Part I, line 7 ter -0- in Part I, line 7		2		146,385.
3		loss) as defined in sections 1222(5) 8, column (c) (see instructions) If	· · · · · · · · · · · · · · · · · · ·				
	ın Part I, line 8		` ''		3		0.
		Section 4940(e) for Reduce foundations subject to the section					
	es,' the foundation does not quali	tion 4942 tax on the distributable and fy under section 4940(e). Do not content to the column for each year; see the (b) Adjusted qualifying distributions	mplete this part.		es.	Yes (d) Distribution	□ No
	Calendar year (or tax year beginning in)	Adjusted qualifying distributions	noncharitable-use ass	ets	(colu	imn (b) divided l	
	2011						
	2010						
	2009						
	2008						
	2007						
2	Total of line 1, column (d)				2		
3	Average distribution ratio for the number of years the foundation	e 5-year base period – divide the to has been in existence if less than !	otal on line 2 by 5, or by the 5 years		3		
4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5					4		
5	5 Multiply line 4 by line 3						
6	Enter 1% of net investment inco	ome (1% of Part I, line 27b)			6		
7	Add lines 5 and 6				7		
8	Enter qualifying distributions fro	om Part XII, line 4			8		
	If line 8 is equal to or greater the Part VI instructions.	an line 7, check the box in Part VI,	line 1b, and complete that	oart using	a 1%	tax rate. See th	ne
		 					n 990-PF (2012)

10 BAA

and addresses

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X

9

10

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If 'Yes,' complete Part XIV

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

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charitable purposes?

the tax year beginning in 2012?

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X

4 a

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

Part VII-B	Statements Regarding Activit	ies for Which Form	1 4/20 May Be Req	uirea (continuea)	
	the year did the foundation pay or incu	-	4045(-)\2		lar-
	rry on propaganda, or otherwise attemp	_		Yes X	No
on	luence the outcome of any specific pub, directly or indirectly, any voter registrations of a great to an individual for travel	ation drive?		<u> </u>	No No
* *	ovide a grant to an individual for travel,	_	•	. Yes X	No ,
i in	ovide a grant to an organization other to section 509(a)(1), (2), or (3), or section	4940(d)(2)? (see instri	uctions)	···· Yes X	No - A
(5) Pro ed	ovide for any purpose other than religion ucational purposes, or for the prevention	us, charitable, scientific on of cruelty to children	c, literary, or or animals?.	Yes X	No
b If any a describ (see in	answer is 'Yes' to 5a(1)-(5), did any of led in Regulations section 53.4945 or in structions)?		qualify under the excep ding disaster assistance	tions :	5b N/A
•	zations relying on a current notice rega	irding disaster assistan	ce check here	- [
c If the a	inswer is 'Yes' to question 5a(4), does cause it maintained expenditure respon	the foundation claim ex sibility for the grant?	emption from the	. N/A Yes	No Sala
If 'Yes	' attach the statement required by Reg	ulations section 53.494	5-5(d).		
on a p	foundation, during the year, receive a ersonal benefit contract?	•		∐Yes [X	No
	e foundation, during the year, pay prem ' to 6b, file Form 8870	iums, directly or indirec	tly, on a personal bene	fit contract?	6 b X
_	time during the tax year, was the found				No .
	did the foundation receive any proceed				N/A 7b
Part VIII	│Information About Officers, D ─and Contractors	irectors, irustees,	Foundation Manag	gers, Hignly Pald	Employees,
1 List all	officers, directors, trustees, foundation	on managers and their	compensation (see inst	tructions).	
•	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances
		devoted to position	enter -0-)	compensation	
See Stat	ement 7				
			10,000.	0.	0.
Comm	westion of first highest maid ample year (a	thau thau thana inalisalad		ne) If none onton NONE	
	ensation of five highest-paid employees (or me and address of each employee	(b) Title, and average	(c) Compensation	(d)Contributions to	(e) Expense account,
(4) (4)	paid more than \$50,000	hours per week devoted to position	(c) compensation	employee benefit plans and deferred compensation	other allowances
None					
	r of other employees paid over \$50,000)	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
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Form 990-PF (2012) FLECTHER FARM FOUNDATION, INC. 03-600	
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None'	
Total number of others receiving over \$50,000 for professional services	0
Ratuxay Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	_
organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 FLETCHER FARM HAS FOR MANY YEARS MADE DONATIONS TO FLETCHER MEMORIAL	
LIBRARY LOCATED IN LUDLOW, VERMONT. THE LIBRARY SERVES SEVERAL	
THOUSAND LOCAL RESIDENTS RESIDING IN THE LUDLOW AREA.	39,996.
2 FLETCHER FARM PROVIDES FACILITIES FOR THE USE OF THE ASSOCIATION OF VERMONT CRAFTSMEN WHICH CONSISTS OF SEVERAL HUNDRED CRAFTSPEOPLE FROM	
ALL OVER NEW ENGLAND.	50,000.
3 FLETCHER FARM MADE A DONATION TO THE CAVENDISH FLETCHER COMMUNITY	30,000.
LIBRARY, PROCTORSVILLE, VERMONT. THE LIBRARY SERVES SEVERAL THOUSAND	
RESIDENTS RESIDING IN THE LUDLOW/PROCTORSVILLE, VERMONT AREA.	
4	
	<u> </u>
PartiX By Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
<u>N/A</u>	
2	
*	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0.
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1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	64,132.
ı	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	
	Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required)	3 a	
ı	b 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	64,132.
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	64,132.

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

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- art XIII Orlaistributed income (see mail		N/A		
	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI, line 7		·		
2 Undistributed income, if any, as of the end of 2012:		* ,		
a Enter amount for 2011 only	'	<u>'</u>		,
b Total for prior years. 20, 20, 20				
3 Excess distributions carryover, if any, to 2012:		•		
a From 2007				in .
b From 2008 .		,		
c From 2009	, "	1		
d From 2010	1		1	
e From 2011				
f Total of lines 3a through e.		 		
4 Qualifying distributions for 2012 from Part XII, line 4: ► \$,	,	-
a Applied to 2011, but not more than line 2a		*		
b Applied to undistributed income of prior years (Election required – see instructions)				
 Treated as distributions out of corpus (Election required — see instructions) 				
d Applied to 2012 distributable amount			<u> </u>	
e Remaining amount distributed out of corpus				,
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the				
same amount must be shown in column (a).)				
6 Enter the net total of each column as	•	⇒ ,		
indicated below: a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	·	_	<u>.</u>	
b Prior years' undistributed income. Subtract line 4b from line 2b				
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	,			
d Subtract line 6c from line 6b. Taxable amount — see instructions				
e Undistributed income for 2011. Subtract line 4a from line 2a Taxable amount — see instructions.				
f Undistributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013.				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)		·		
8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)			٠,	
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9.		,		
a Excess from 2008 .				
b Excess from 2009 .				
c Excess from 2010			·	
d Excess from 2011		1		٠
e Excess from 2012	1	1	I	

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Part XV | Supplementary Information (continued)

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3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation status of recipient Recipient Purpose of grant or contribution show any relationship to any Amount foundation manager or substantial contributor Name and address (home or business) a Paid during the year FLETCHER MEMORIAL LIBRARY NONE EXEMPT GRANT 39,996. 88 MAIN STREET LUDLOW, VT 05149 VARIOUS RECIPIENTS N/A TUITION 4,132. MAIN STREET LUDLOW, VT 05149 Total. 44,128. **b** Approved for future payment 3 b Total

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Part XVI-A Analysis of Income-Producing Activities

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-nte	er gross amounts unless otherwise indicated.	Unrelated business income Excluded by section 512, 5			l by section 512, 513, or 514	514 (e)		
1	Program service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions)		
1				code				
_	a b			-				
	с	-	<u> </u>					
	d							
	e	 						
f	f							
	g Fees and contracts from government agencies							
-	Membership dues and assessments							
3								
4	Dividends and interest from securities			14		69,789.		
5		The state of the s	140 15 图 15 周 1		"上"言"数数"。"无规数"。	基础2000年,2015年,2016年,		
á	a Debt-financed property .	7 7 3				· · · · · · · · · · · · · · · · · · ·		
	b Not debt-financed property			16	4,252.			
6	• • •							
7						· · · · · · · · · · · · · · · · · · ·		
8	Gain or (loss) from sales of assets other than inventory			1		146,385.		
9	Net income or (loss) from special events .			_				
10	Gross profit or (loss) from sales of inventory							
11	Other revenue:	2000	\$ 15 mm 0 to	1963 ·	2 1 1 - 1 2 E - 1 1 2 E	34.30		
ā	a		<u> </u>					
	b					· · · · · · · · · · · · · · · · · · ·		
(c							
c	d							
•	e			· · · · · · · · · · · · · · · · · · ·				
12	Subtotal. Add columns (b), (d), and (e)	भी कार्यक्रिकेट		13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4,252.	216,174.		
13	Total. Add line 12, columns (b), (d), and (e)			-	13	220,426.		
. •	rotal. Add line 12, coldining (b), (d), and (c)				• •	220,420.		
	e worksheet in line 13 instructions to verify calculate	ions.)				220,420.		
See	e worksheet in line 13 instructions to verify calculate		ishment of Evemn	t Purn		220,420.		
See	e worksheet in line 13 instructions to verify calculated the rt XVI-B Relationship of Activities to the	e Accompl		···	oses			
See Par Lin	e worksheet in line 13 instructions to verify calculated the rt XVI-B Relationship of Activities to the	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			
Par Lin	e worksheet in line 13 instructions to verify calculated the rt XVI-B Relationship of Activities to the	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			
Par Lin	rt XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exempt	e Accompl		···	oses			

TEEA0502L 12/23/12

Part)	(VII Information Exempt Or	n Regarding Tra ganizations	nsfers To and Tr	ansaction	s and	Relationship	s With Nonch	aritable		
re	lating to political org	janizations?	engage in any of the total				n 27,	* }	Yes	No
	ransfers from the rep) Cash .	oorting foundation to	a noncharitable exer	mpt organiza	ition of:			1 a (1)		
•) Other assets	•	•					1 a (2)		Х
	ther transactions:							1 5 (1)		-
-			empt organization . able exempt organiza				• •	1 b (1)		X
-	•		able exempt organiza er assets.		• •	•	• • • • • • • • • • • • • • • • • • • •	1 b (2) 1 b (3)		X
•	Reimbursement ar		ci assets				,	1 b (4)		X
•) Loans or loan qua	•		••				1 b (5)	 	X
•	,		nip or fundraising soli	citations				1 b (6)		X
c S	, haring of facilities, e	quipment, mailing li	sts, other assets, or p	oaid employe	es			1 c		X
d If th ai (a) Line	ny transaction or sha	ring arrangement,	complete the following the reporting foundations of column (d) the of noncharitable exempt or	e value of th	e goods	other assets,	ays show the fair fair market value i or services receiv	ed.		to
N/A	THO. (B) AIRIOGHE HIVO	orveu (C) Name	or noncharitable exempt on	yanızanını	(a)	Description of trans	siers, transactions, and	i Sharing arra	ngemen	72
N/A						·				
						 	······································			
						<u> </u>	·.			
							·			
										
			·							
de	escribed in section 5 'Yes,' complete the	01(c) of the Code (of following schedule.	ed with, or related to, or other than section 501	(c)(3)) or in	x-exemp section	527?		Ye	s X	No
	(a) Name of orga	anization	(b) Type of o	organization		(c)	Description of re	lationship		
N/A										
			-				····			
			<u></u>							
								· · · · · · · · · · · · · · · · · · ·		
	Under penalties of perjury,	Legare that I have exar	nined this return, including a	ccompanying sch	edules an	d statements, and to	the hest of my knowled	ge and belief.	it is true	
Sign Here	Signature of officer or tri	ustee	r than taxpayer) is based on	all information of $\frac{1}{23}$	which pre	parer has any knowl reasurer	edge	May the this return preparer (see inst	IRS disc n with the	uss he below
	Print/Type prepa	rer's name	Preparer's/signal	dre /		Date	Check	PTIN		
Paid	Timothy	L. Faulkner	Timothy	LFaulk	ner	1116/14	self-employed	P0121	9576	
Prepa	rer Firm's name			PA, PC		,	Firm's EIN ► 03-(334408		
Use C		28 Pond S	t.							

Рһопе по

(802) 228-5575

Form **990-PF** (2012)

Ludlow, VT 05149

BAA

2012	Federal Statements	Page 1
Client FFARM F	LECTHER FARM FOUNDATION, INC.	03-6007183
1/16/14 Statement 1 Form 990-PF, Part I, Line 11 Other Income		03:10PM
Rental Income - Noninvestmen	(a) (b) Net Revenue Investment per Books Income at Property \$ 43,116. Total \$ 43,116.\$ 0.\$	(c) Adjusted Net Income 0.
Statement 2 Form 990-PF, Part I, Line 16b Accounting Fees		
ACCOUNTING FEES	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 5,551. \$ 2,720. \$ 0. Total \$ 5,551. \$ 2,720.	(d) Charitable Purposes \$ 0.
Statement 3 Form 990-PF, Part I, Line 16c Other Professional Fees		
INVESTMENT MANAGEMENT FEES	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 21,133. \$ 21,133. \$ 21,133. Total \$ 21,133. \$ 21,133. \$ 0.	(d) Charitable Purposes \$ 0.
Statement 4 Form 990-PF, Part I, Line 18 Taxes		
EXCISE TAX FOREIGN TAX PAYROLL TAXES	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 3,846.	(d) Charitable Purposes \$ 765. \$ 765.

2012	Federal Statements	Page 2
Client FFARM	FLECTHER FARM FOUNDATION, INC.	03-6007183
1/16/14		03:10PM
Statement 5 Form 990-PF, Part I, Line 23 Other Expenses		
APPLICATION FEE INSURANCE OFFICE. Rental Expenses	(a) (b) Net (c) Expenses Investment Adjusted Net Income Net Income 125. \$ 2,600. 1,087. \$ 2,600. 38,864. \$ 0. \$ 2,600.	(d) Charitable Purposes \$ 125. 19,114. \$ 19,239.
Statement 6 Form 990-PF, Part II, Line 14 Land, Buildings, and Equipme	ent	
Category	Accum. Book Basis Deprec. Value	Fair Market Value
Furniture and Fixtures Machinery and Equipment Buildings Improvements Land	\$ 24,279. \$ 23,180. \$ 1,099. \$ 21,282. 19,522. 1,760. 1,587,365. 350,762. 1,236,603. 31,729. 7,991. 23,738. 19,558. Total \$ 1,684,213. \$ 401,455. \$ 1,282,758. \$	0. 0. 1,500,000. 0. 0.
Statement 7 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Tru	stees, and Key Employees Title and Contri- Average Hours Compen- bution t	
<pre>Name and Addres</pre>	s Per Week Devoted sation EBP & D	C Other
STEPHEN BIRGE P.O. BOX 117 PROCTORSVILLE, VT 05153	President \$ 0.\$ 1.00	0. \$ 0.
MARTIN NITKA 92 MAIN STREET LUDLOW, VT 05149	Treasurer 0.3.00	0. 0.
SHARON BIXBY P.O. BOX 195 LUDLOW, VT 05149	Secretary 0. 2.00	0. 0.
THORNTON BURNETT, JR 3223 FIRST AVENUE NORTH ARLINGTON, VA 22201	Trustee 0.	0. 0.

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1/16/14

Federal Statements

Page 3

Client FFARM

FLECTHER FARM FOUNDATION, INC.

03-6007183 03.10PM

Statement 7 (continued)
Form 990-PF, Part VIII, Line 1
List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours <u>Per Week Devoted</u>	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
BARBARA LEMIRE P.O. BOX 256 LUDLOW, VT 05149	Trustee 1.00		\$ 0.	
GEORGE O. THOMSON 131 THOMSON DRIVE LUDLOW, VT 05149	Trustee 1.00	0.	0.	0.
ROBERT EVENS 662 MORIGLIONI ROAD CAVENDISH, VT 05142	Trustee 1.00	0.	0.	0.
SANDY GREGG P.O. BOX 218 PROCTORSVILLE, VT 05153	Trustee 1.00	0.	0.	0.
ANNE KIPP 8 WEST HILL ROAD LUDLOW, VT 05149	Trustee 1.00	0.	0.	0.
JAMES PARRISH 2423 TWENTY MILE STREAM ROAD PROCTORSVILLE, VT 05153	Trustee 1.00	0.	0.	0.
DOUGLAS LEMIRE P.O. BOX 967 CHESTER, VT 05143	Executive Dir. 10.00	10,000.	0.	0.
JEAN MORRILL 57 PLEASANT STREET EXT LUDLOW, VT 05149	Trustee 1.00	0.	0.	0.
MARY BARTON 25 WEST HILL ROAD LUDLOW, VT 05149	Trustee 1.00	0.	0.	0.
CHARLOTTE SUMNER 19 PROSPECT STREET LUDLOW, VT 05149	Trustee 1.00	0.	0.	0.
MILTON MOORE III 106 OLDE PINE LANE WALLINGFORD, VT 05773	Trustee 1.00	0.	0.	0.
CAROLYN GAUTHIER 47 ELLISON LOOP LUDLOW, VT 05149	Trustee 1.00	0.	0.	0.

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Federal Statements

Page 4

Client FFARM

FLECTHER FARM FOUNDATION, INC.

03-6007183

1/16/14

03.10PM

Statement 7 (continued) Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees, and Key Employees

Name and Address	Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other
JONATHAN BOUTON P.O. BOX 4712 WHITE RIVER JCT., VT 05001	Trustee 1.00	\$ 0.	\$ 0.	\$ 0.
DAVID HARLOW 867 ROUTE 100 NORTH LUDLOW, VT 05149	Trustee 1.00	0.	0.	0.
ROBERT FLETCHER 7 COLCHESTER COMMONS COLCHESTER, CT 06415	Trustee 1.00	0.	0.	0.
MARCIA DOCKUM ROD & GUN CLUB ROAD LUDLOW, VT 05149	Trustee 1.00	0.	0.	0.
	Total	\$ 10,000.	\$ 0.	<u>\$ 0.</u>

Statement 8 Form 990-PF, Part XV, Line 2a-d **Application Submission Information**

Name of Grant Program:

Name:

FLETCHER FARM FOUNDATION

Care Of:

DOUGLAS LEMIRE, EXECUTIVE DIRECTOR

Street Address:

City, State, Zip Code:

92 MAIN STREET LUDLOW, VT 05149

Telephone:

(802) 228-8838

E-Mail Address:

Form and Content:

IN LETTER FORM PROVIDING AS MUCH INFORMATION REGARDING THE

USE OF THE GRANT.

Submission Deadlines:

NONE

Restrictions on Awards:

NONE

Form **8868**

(Rev January 2013)

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Department of the Treasury Internal Revenue Service

•	re filing for an Automatic 3-Month Extension,				- X
	re filing for an Additional (Not Automatic) 3-Mo				
	plete Part II unless you have already been gran		•		£
corporation request an ex Associated	iling (e-file). You can electronically file Form 88 required to file Form 990·T), or an additional (tension of time to file any of the forms listed in Pa With Certain Personal Benefit Contracts, which ling of this form, visit www irs gov/efile and clid	not automatic art I or Part II v must be sen) 3-month extension of time You can ele with the exception of Form 8870, Information t to the IRS in paper format (see instruct	ectronically file Fori n Return for Transfer	m 8868 to 's
Part I	Automatic 3-Month Extension of Tin	1e. Only su	bmıt orıgınal (no copies needed)		
A corporation	n required to file Form 990-T and requesting a	n automatic 6	5-month extension — check this box and	complete Part I on	ly ► ∏
All other coi income tax	porations (including 1120-C filers), partnership returns	os, REMICs, a	•		
	Name of exempt organization or other filer, see instructions.		Enter filer's identi	ifying number, see	
Type or print					Tidinoci (Elity of
_	FLECTHER FARM FOUNDATION, IN Number, street, and room or suite number If a P O box, se			03-6007183 Social security number (SSN)	
File by the due date for filing your	92 MAIN STREET			Social Security Hui	
return See instructions	City, town or post office, state, and ZIP code For a foreign a	address, see instru	uctions		
	LUDLOW, VT 05149				
	eturn code for the return that this application is	- <u> </u>			04
Application Is For		Return Code	Application Is For		Return Code
Form 990 or F		01	Form 990-T (corporation)		07
Form 990-BL		02	Form 1041-A		08
Form 4720 (ır		03	Form 4720		09
Form 990-PF		04	Form 5227		10
	(section 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-1 ((trust other than above)	06	Form 8870		12
Telephone If the org If this is the exten I reques until The ext X If the ta	Anization does not have an office or place of be anization does not have an office or place of be for a Group Return, enter the organization's for a box. If it is for part of the group, sion is for. It an automatic 3-month (6 months for a corporation of the organization of the exempt or ension is for the organization's return for. Calendar year 20 or tax year beginning 9/01, 20 12 x year entered in line 1 is for less than 12 months or accounting period.	or digit Group check this be on required to f ganization ret _, and endin	E United States, check this box. Exemption Number (GEN) If ox If and attach a list with the natural life Form 990-T) extension of time turn for the organization named above. If the organization named above.	this is for the whole mes and EINs of all	
3 a If this a	pplication is for Form 990-BL, 990-PF, 990-T, 4	4720, or 6069	, enter the tentative tax, less any	3a\$	3.805

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

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.

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

4,908.

0.

3 b \$

3 c |\$