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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

Open to Public Inspection

го	cale	endar year 2012 or tax year beginning	, ar	ia enaing			
Na	me of f	foundation	•		A E	mployer identification nu	mber
MA	RION	L HAGAR MEMORIAL SCHOLARSHIP FUND				22-28161	135
Nu	mber a	and street (or P O box number if mail is not delivered to street ad	ldress)	Room/suite	ВТ	elephone number (see insti	ructions)
		X 303				802-525-3	766
Cıt	or tov	wn, state, and ZIP code			C If	exemption application is pe	nding, check here 🕨 🗌
BA	RTO	N	VT	05822-0303			
G	Chec	ck all that apply 🔲 Initial return 🔀 Initia	al return of a former p	ublic charity	D 1	Foreign organizations, che	ck here ▶
		Final return Ame	ended return		2.	Foreign organizations mee	ting the 85% test.
		Address change Nam	ne change			check here and attach con	
Н	Chec	ck type of organization Section 501(c)(3) exer	mpt private foundatio	n] (private foundation status w	as terminated
			Other taxable private t		1	private foundation status wander section 507(b)(1)(A), c	
一		market value of all assets at end J Accounting r	<u> </u>		{	the foundation is in a 60-mo	
•		ar (from Part II, col (c),	ecify)			nder section 507(b)(1)(B), c	
		16) ► \$ 11,684 (Part I, column (c		s)			
Pa	rt I	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net investm income	ent	(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see instructions))	books	income		income.	(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)					
	2	Check ▶☐ If the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments	22		22		
	4	Dividends and interest from securities					
	5 a	Gross rents		DEOF			
ø	b	Net rental income or (loss)		MEULIN	E[
Revenue		Net gain or (loss) from sale of assets not on line 10	3				
Š	b	Gross sales price for all assets on line 6a	<u> </u>	APR 152	n vo	[8]	
æ	7	Capital gain net income (from Part IV, line 2)	W		U13		
	8	Net short-term capital gain		THE BI]&	
	9	Income modifications		MAINEN!	UT		
		Gross sales less returns and allowances					
		Less Cost of goods sold					
	11	Gross profit or (loss) (attach schedule) Other income (attach schedule)					
	12	Total. Add lines 1 through 11	22		22	0	
	13	Compensation of officers, directors, trustees, etc	22 570	·	22		570
benses	14	Other employee salaries and wages	370				370
ŝuŝ	15	Pension plans, employee benefits					
		Legal fees (attach schedule)					
Ж		Accounting fees (attach schedule)		- 			
<u>×</u>		Other professional fees (attach schedule)					
rat	17	Interest					
Administrative	18	Taxes (attach schedule) (see instructions)					
ij	19	Depreciation (attach schedule) and depletion					
p	20	Occupancy		BOND			50
۶ ک	21	Travel, conferences, and meetings	32	PROBATE FE	E		32
and	22	Printing and publications					
^න ු වි	23	Other expenses (attach schedule)			_		
াশ। ⊅perating	24	Total operating and administrative expenses.					
ı era		Add lines 13 through 23	652		0	0	652
Oper	25	Contributions, gifts, grants paid	500			ļ	500
≝ ≤<	26	Total expenses and disbursements Add lines 24 and 25	1,152		0	0	1,152
	27	Subtract line 26 from line 12					•
茎	а	Excess of revenue over expenses and disbursements	-1,130				\() -
3	b	Subtract line 26 from line 12 Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-) erwork Reduction Act Notice, see instructions.			22		
<u>3</u>	C	Adjusted net income (if negative, enter -0-)				0	<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>
(4P)	Pape	rwork Reduction Act Notice, see instructions.					Form 990-RF (2) 12

P۶	irt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year_
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	12,814	11,684	11,684
	3	Accounts receivable			
		Less allowance for doubtful accounts	l I		
	4	Pledges receivable			
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			····
Ą	10 a	Investments—U.S. and state government obligations (attach schedule)			
	t	Investments—corporate stock (attach schedule)			
	0	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers—see the			
	<u> </u>	instructions Also, see page 1, item I)	12,814	11,684	11,684
	17	Accounts payable and accrued expenses			
ý	18	Grants payable			
Ë	19	Deferred revenue			•
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>a</u>	21	Mortgages and other notes payable (attach schedule)			* *
_	22	Other liabilities (describe ▶)			
	23	Total liabilities (add lines 17 through 22)	0	0	
'n		Foundations that follow SFAS 117, check here			
alances		and complete lines 24 through 26 and lines 30 and 31.			
an	24	Unrestricted	12,814	11,684	
3al	25	Temporarily restricted			
d B	26	Permanently restricted			
Assets or Fund		Foundations that do not follow SFAS 117, check here		"	
ij.		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds			
Ā	30	Total net assets or fund balances (see instructions)	12,814	11,684	
Net	31	Total liabilities and net assets/fund balances (see			
	<u> </u>	instructions)	12,814	11,684	
	rt 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		
		f-year figure reported on prior year's return)		1	12,814
2	Enter	amount from Part I, line 27a		2	-1,130
3	Other	increases not included in line 2 (itemize)		3	<u></u>
4		nes 1, 2, and 3		4	11,684
5		ases 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, c	olumn (b), line 30	6	11,684

(a) List and describe th	e kind(s) of property sold (e.g., real es ise, or common stock, 200 shs MLC C	state,	nt incor	(b) How acquired PPurchase DDonation	1 1	Date acquired no , day, yr)	(d) Date sold (mo , day, yr)
1a							
b							
С							
d							
<u>e</u>							
(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis ense of sale		• •	n or (loss) (f) minus (g)
_a							
b		ļ					
<u>C</u>							
<u>d</u>							
e Considerate of the considerate of the		<u> </u>	f. 1.1	40/04/00			
Complete only for assets snow	ving gain in column (h) and owne	a by th		•			I (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		, ,	ss of col (ı) (լ), ıf any			t less than -0-) or rom col. (h))
	23 01 12/3 1/03			U), II ally			
_ a b				•			•
C							
d							
e						•	
2 Capital gain net income or	(net capital loss) { If gain, a		nter in Pai		2		0
3 Net short-term capital gain	or (loss) as defined in section						
	line 8, column (c) (see instruc		• •				
in Part I, line 8	0, 00.0 (0, (000	,,	(),	}	3		0
Part V Qualification Un	der Section 4940(e) for Re	educe	d Tax o	n Net Investme	ent In	come	.
(For optional use by domestic							· · · · · · · · · · · · · · · · · · ·
•	ŗ	110 00	2011011 101	o(a) tax on not ii	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ioni inoonio ,	•
If section 4940(d)(2) applies, le	eave this part blank						
Was the foundation liable for the	ne section 4942 tax on the dis	tributa	ble amou	nt of any year in	the ba	ase period?	Yes No
If "Yes," the foundation does n	ot qualify under section 4940((e). Do	not com	olete this part.			
1 Enter the appropriate am	ount in each column for each	year, s	see the in	structions before	makıı	ng any entrie	S
(a)	(b)			(c)	Ĭ		(d)
Base period years Calendar year (or tax year beginning	Adjusted qualifying distribution	ons	Net value	of noncharitable-use a	assets		tribution ratio divided by col. (c))
2011		701			0	(50. (5)	0 000000
2010		500			0		0 000000
2009		0			0		0 000000
2008		1,104			0		0 000000
2007							, 0 000000
2 Total of line 1, column (d)					ļ	2	0 000000
	or the 5-year base period—div				<i>'</i>		
the number of years the fo	undation has been in existend	e if les	ss than 5	years		3	0 000000
4 Enter the net value of none	charitable-use assets for 2012	from	Part X, Iır	e 5		4	
						_	
5 Multiply line 4 by line 3	•		•	•	}	5	
						ا م	0
6 Enter 1% of net investmen	t income (1% of Part I, line 27	(D)	•		-	6	0
7 Add lines F and G						7	0
7 Add lines 5 and 6 .		•					
8 Enter qualifying distribution	ns from Part XII line 4					8	0
If line 8 is equal to or great	er than line 7, check the box i	ın Part	VI, line 1	b, and complete	that p		
the Part VI instructions							

Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instructi	ons	;)	
1 a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1 ☐				
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check				
	here and enter 1% of Part I, line 27b				
(CAll other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%				
2	of Part I, line 12, col (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				
3	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) Add lines 1 and 2			0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			0	
6	Credits/Payments				
á	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 6				
	Exempt foreign organizations—tax withheld at source 6b				
	Tax paid with application for extension of time to file (Form 8868)				
C	Backup withholding erroneously withheld 6d 6d				
7	Total credits and payments Add lines 6a through 6d			0	
8	Enter any penalty for underpayment of estimated tax. Check here				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			0	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			0	
	Enter the amount of line 10 to be Credited to 2013 estimated tax ► Refunded ► 11			0	
Pa	rt VII-A Statements Regarding Activities			1	
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	L		Yes	No
	participate or intervene in any political campaign?	1	la		X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				
	Instructions for the definition)?	_1	lb		_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	١,			V
	Did the foundation file Form 1120-POL for this year?		lc		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
•	on foundation managers > \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		Х
	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			i	
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	L	3		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4	1a		Х
k	o If "Yes," has it filed a tax return on Form 990-T for this year?		lb	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	L	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 either				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that applies with the state law appears in the government?	i	_	V	
7	that conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in goods at any time during the year? If "Yea " complete Red II, set (a), and Red	_	6 7	X	
	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part Enter the states to which the foundation reports or with which it is registered (see instructions)	'^' -	•		
0.	VT				
H	o If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney				
•	General (or designate) of each state as required by General Instruction G? If "No," attach explanation	ع	зь	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)				
	or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)?/// "Yes,"				
	complete 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

If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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 2012?

if the foundation had excess business holdings in 2012)

N/A

3b

4a

4b

Forr	990-PF (2012) MARION L HAGAR MEMOR	RIAL SCHOLARSHIF	FUND		22-2816135	Page 6	
Pa	rt VII-B Statements Regarding Activit	ies for Which Forn	n 4720 May Be R	equired (continued)			
5a	During the year did the foundation pay or incur an	y amount to					
	(1) Carry on propaganda, or otherwise attempt	to influence legislation	(section 4945(e))?	Yes	X No	1 1	
	(2) Influence the outcome of any specific public	election (see section 4	955), or to carry				
on, directly or indirectly, any voter registration drive?							
	(3) Provide a grant to an individual for travel, st	udy or other similar ou	rnoses?	X Yes	□No	1 1	
	(4) Provide a grant to an organization other tha					1 1	
	in section 509(a)(1), (2), or (3), or section 49			Yes	X No		
	(5) Provide for any purpose other than religious						
	educational purposes, or for the prevention		•	Yes	X No		
h	If any answer is "Yes" to 5a(1)–(5), did any of the						
~	Regulations section 53 4945 or in a current notice				5b	x	
	Organizations relying on a current notice regarding	=		>			
_	If the answer is "Yes" to question 5a(4), does the						
·	tax because it maintained expenditure responsibilities	· ·	puon nom me	Yes	□ No │		
	If "Yes," attach the statement required by Regulat		5(d)		□""	1 1	
62	Did the foundation, during the year, receive any fi				Ì		
va	premiums on a personal benefit contract?	arias, affectly of fridirect	ily, to pay	Yes	X No		
h	Did the foundation, during the year, pay premium	s directly or indirectly (on a nersonal henefit		6b	x	
D	If "Yes" to 6b. file Form 8870	s, directly or manectly, t	on a personal benefit	Contract	55	 	
72	At any time during the tax year, was the foundation	on a party to a prohibite	d tay chalter transacts	on? Yes	X No		
	If "Yes," did the foundation receive any proceeds				7b	N/A	
_							
	Information About Officers and Contractors	, Directors, Trusti	ses, roundation	managers, riiginiy r	aid Lilipio	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
1	List all officers, directors, trustees, found	lation managers and	d their compensat	ion (see instructions)	<u>. </u>		
·	List all officers, unceters, trustees, rounc	(b) Title, and average	(c) Compensation	(d) Contributions to		nse account,	
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other	allowances	
WI	LIAM BOYD DAVIES, ESQ	TRUSTEE					
	BOX 303 BARTON, VT 05822	LESS THAN 1	570			_	
					i		
		<u> </u>				· · · · · · · · · · · · · · · · · · ·	
2	Compensation of five highest-paid emplo	yees (other than th	ose included on li	ne 1—see instruction	s). If none,		
	enter "NONE."		<u> </u>				
		(b) Title, and aver	age	(d) Contributions to employee benefit	1	nse account,	
(a	Name and address of each employee paid more than \$5			plans and deferred	1 ''	allowances	
		devoted to positi	on	compensation			
ЙČ	NE						
					İ		
							
_					-		
To	al number of other employees paid over \$50	.000			•		
	at the state of other office para over woo	,					

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Form **990-PF** (2012)

Form 990-PF (2012)

Form 990-PF (2012) MARION L HAGAR MEMORIAL SCHOLARSHIP FUND	22-2816135 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Pair and Contractors (continued)	d Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	(e) compensation
Total number of others receiving over \$50,000 for professional services . ▶	
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such a the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 SCHOLARSHIPS AWARDED	
	500
2	
3	
4	
•••••••••••••••••••••••••••••••••••••••	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
<u> </u>	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	0

Form **990-PF** (2012)

Form	990-PF (2012) MARION L HAGAR MEMORIAL SCHOLARSHIP FUND	22-28161	35 Page 8
Pai	Minimum Investment Return (All domestic foundations must complete this part. Fore		
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	0
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities Enter 1 ½ % of line 3 (for greater amount, see		
	instructions)	4	
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here 🕒 🔲 and do not complete this part	t)	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0
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	0
Par	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	1,152
b	Program-related investments—total from Part IX-B	1b	
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	Suitability test (prior IRS approval required)	3a	
. p	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,152
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		

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

6

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

Adjusted qualifying distributions. Subtract line 5 from line 4

1,152

c Excess from 2010

d Excess from 2011

e Excess from 2012

500

701

1,152

	n 990-PF (2012) MARION L HAGAR MEMO				22-281	
Pa	t XIV Private Operating Foundations (see instructions	and Part VII-A,	question 9)		N/A
1 a	If the foundation has received a ruling or determine foundation, and the ruling is effective for 2012, en		, ,	>		
	Check box to indicate whether the foundation is a	private operating for	oundation described	in section	4942(J)(3) or	4942(J)(5)
2 a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
	investment return from Part X for each	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
	year listed					0
b	85% of line 2a					0
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					0
	Amounts included in line 2c not used directly for active conduct of exempt activities					0
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					0
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					0
	(1) Value of all assets			-		0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					0
С	"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					0
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from an exempt organization					0
	(4) Gross investment income					0
Pa	rt XV Supplementary Information (Co	mplete this par	t only if the fou	indation had \$5	,000 or more in	
	assets at any time during the ye	ar—see instru	ctions.)			
1	Information Regarding Foundation Manag		00/ /// // /			
	List any managers of the foundation who have co before the close of any tax year (but only if they h					
NO		/	al. af a anna antion (/	and an af the	
	List any managers of the foundation who own 10% ownership of a partnership or other entity) of which				ortion of the	
<u>NO</u>	INE Information Regarding Contribution, Gra	nt Gift Loan Sc	holarshin etc. F	Programs:		
_	Check here ▶ ☐ If the foundation only makes unsolicited requests for funds. If the foundation mother conditions, complete items 2a, b, c, and d	s contributions to pr	eselected charitable	organizations and o		
— а	The name, address, and telephone number or e-r	nail of the person to	whom applications	should be addresse	d	
WII	LIAM BOYD DAVIES, ESQ PO BOX 303 B	ARTON, VT 0582	22 802-525-3766			
	The form in which applications should be submitted			hould include		
SE	E ATTACHED APPLICATION FORM					
С	Any submission deadlines					
	Y 30 OF EACH YEAR					
	Any restrictions or limitations on awards, such as factors	by geographical are	eas, charitable fields	s, kinds of institutions	s, or other	
LIN	IITED TO HIGH SCHOOL SENIORS GRADU	ATING FROM LA	KE REGION UNI	ON HIGH SCHOO	L, VERMONT	

Total

22-2816135 Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year MATTHEW LYON NONE SCHOLARSHIP 500 163 OLD CEMETERY LANE BROWNINGTON, VT 05860 500 3a Total Approved for future payment

0

3b

d е

12 Subtotal Add columns (b), (d), and (e)

Part XVI-A Analysis of Income-Producing Acti	1				
Enter gross amounts unless otherwise indicated	Unrelated busin	ness income	Excluded by section	n 512, 513, or 514	(e)
4.0-	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1 Program service revenue	ļ ————			· -· · · · ·	,
a b	 				
c					-
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments		22			
4 Dividends and interest from securities					-
5 Net rental income or (loss) from real estate					
a Debt-financed property	 				
b Not debt-financed property6 Net rental income or (loss) from personal property					
7 Other investment income	-	 			
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events				·	
10 Gross profit or (loss) from sales of inventory					-
11 Other revenue a					
h	·			· · · · · · · · · · · · · · · · · · ·	

13 Total. Add line 12, columns (b), (d), and (e) 13 (See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions) ▼ 3 USED FOR SCHOLARSHIP

0

Form !	990 - P	F (2012) MARION L	HAGAR MEM	ORIAL SCHOLARSHIP FUND		22-2816135	Pag	_{je} 13
Part	XV	Information Reg	arding Tran	sfers To and Transactions	and Relationships With N	oncharitable		
		Exempt Organiza	ations					
				ngage in any of the following wit			Yes	No
			e (other than s	ection 501(c)(3) organizations)	or in section 527, relating to po	olitical		
C	orgai	nizations?						
a 7	Trans	sfers from the reporting	foundation to	a noncharitable exempt organiz	ation of			
		Cash				. 1a(1)		×
į (2) (Other assets				1a(2)		Х
b (Othe	r transactions						
(1) 5	Sales of assets to a non-	charitable exe	mpt organization .		1b(1)		X
(2) F	Purchases of assets fror	n a noncharita	able exempt organization		1b(2)		Х
((3) F	Rental of facilities, equip	ment, or other	r assets	•	1b(3)		Х
((4) F	Reimbursement arrange	ments			1b(4)		X_
		oans or loan guarantee.			•	1b(5)	<u> </u>	X
				ip or fundraising solicitations		1b(6)		X
c S	Shar	ing of facilities, equipme	ent, mailing list	ts, other assets, or paid employe	ees	. <u>1c</u>		X
\	/alue	of the goods, other ass	sets, or service	complete the following schedule es given by the reporting founda ement, show in column (d) the version (d)	ation. If the foundation received	d less than fair ma	irket	
(a) Lı	ne no	(b) Amount involved	(c) Name	of noncharitable exempt organization	(d) Description of transfers, transa	actions, and sharing ar	rangem	ients
			_				_	
		· · · · · · · · · · · · · · · · · · ·						
		<u> </u>	-					
—–								_
			 					
				····			-	
								
			 					
			-					
							•	
								•
C	desc		of the Code (o	ated with, or related to, one or m ther than section 501(c)(3)) or in		Yes X] No	
~		(a) Name of organization	. ~ 	(b) Type of organization	(c) Descri	ption of relationship		
		(a) Name of organization	<u>'</u>	(b) Type of organization	(0) 20301	phon of relationship	-	
				-				
	Т	Under penalties of penury. I declare	that I have examined	this return, including accompanying schedules an	d statements, and to the best of my knowledge	and belief, it is true,		
Sig	n			taxpayer) is based on all information of which pre	parer has any knowledge	May the IRS discuss to		
Her	re	/// /h/	/ \	3/25/2013 TRUS		instructions)? Y		No
	'	Signature of officer or truste	ee	Date Title				

Preparer's signature

SELF-PREPARED RETURN

Print/Type preparer's name

Firm's name

Fırm's address ▶

•

Paid

Preparer

Use Only

PTIN

Check ____ if

self-employed

Firm's EIN

Phone no

Date

LAKE REGION UNION HIGH SCHOOL LOCAL SCHOLARSHIPS

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

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

oilege voy syn El	d for?					
Pell grants College Grants	Yes Yes	No	Work Stu VSAC Inc	entive Grant	Yes Yes	No
Others						
Unusual circumst	ances (Tr		edical Problems,	elc)		
use back side of t	his sheel	ıf necessary				
The following fir for some of the s				you if you wi	ish to be	considered
Combined paren	tal adjust	ed incomc				····
Market value of	home		Mortgage b	alance		
Student's saving	s and ass	els				
Estimated paren	ts contab	oution to firs	year expenses_			
A copy of your scholarships A	academic copy of	transcript is your transcri	desirable for co	mplete.evalua ed.	uion for	
		Studen	l's Signature			
		Parent	s Signature			



REGISTRATION FOR 2013-2014 ST. PAUL'S CATHOLIC SCHOOL

Study Pray Play Work

ilies with a common vision, a curriculum that demands academic standards, a faculty rated "exemplary" by New England Association of Schools and Colleges ASC), and a safe and spiritually enriching learning munity equal success in your child's future.

ergarten through 8th grades for the 2013-2014 school Busing, financial payment options and scholarships available. Call 525-6578 to inquire and schedule an are currently accepting applications for our pre-

State of Vermont and NEASC Accredited St. Paul's Catholic School —

St. Paul's Catholic School 54 Eastern Avenue Barton, VT 05822

BID REQUEST — ROADSIDE MOWING

The town of Greensboro is requesting bids for side mowing in-the town of Greensboro. The ifications are as follows:

- 3 passes on 11-1/4 miles of Class II highway.
 2 passes on 45 miles of Class III highway.
 - Passes to be for ground vegetation which
- Mowing to be performed at the end of June or early consists of grass and up to 1-1/2" minus brush.

Please specify size of mower used.

rance. Bids must be submitted by May 1, 2013. Please Successful bidder shall provide Certificate of

Town of Greenshorn

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

PUBLIC NOTI

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

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

ST. PAUL'S PRE-KINDERGARTEN REGISTRATION

54 Eastern Avenue, Barton, VT 05822

child must be four years of age by September 1, 2013 to be St. Paul's Catholic School is accepting applications for foundation of Christian values The program also accesses the Pre-kindergarten Program for the school year 2013the school's physical education, music, art, computer and atmosphere to prepare your child for kindergarten. Your 2014. This is a full-day academic program built on a environment that establishes an optimum learning after-school programs. We offer a safe and caring

St. Paul's pre-kindergarten is state approved and

ADVERTISEMENT FOR BIDS

Town of Brownington is accepting bids to crush 10,000 yds. of material at the Town-leased pit. Bids must be received by April 22, 2013. Mail to: Town of Brownington,

P.O. Box 66

Orleans, VT 05860

Town Selectboard reserves the right to accept or reject any and all bids.

For questions, please call 802-754-8401.

BID REQUEST – GRAVEL CRUSHING

The town of Greensboro is requesting bids for gravel crushing at the gravel pit in the town of Glover.

Total amount to be crushed: 10,000 yards. Seeking bids on 1-1/4" and 1" gravel.

Successful bidder shall provide Certificate of Insurance. Bids must be submitted by May 1, 2013. Please submit bids to: Town of Greensboro, P.O. Box 119, Greensboro, VT 05841.

The select board reserves the right to accept or reject any and Please indicate on sealed envelope "Gravel Crushing Bid." all bids.

KINDERGARTEN REGISTRATION ALBANY COMMUNITY SCHOOL

Friday, May 3, 2013 • 8 a.m.-3 p.m.

If your child is 5 years old, or will be on or before September 1, 2013, please attend this registration session

PLEASE BRING THE FOLLOWING:

Security number, your child's immunization records, and any other Your child, your child's birth certificate, your child's Social important health information regarding your child.

You and your child will be meeting with the kindergarten teacher, the school nurse, and the speech pathologist

Please call the Albany Community School at 755-6168 to set up an appointment GLOVER COMMUNITY SCHOOL