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Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

Department of the Treasury

Do not enter social security numbers on this form as it may be made public. Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

<u> </u>	r cale	ndar year 2014 or tax year be	ginning		, and	enaing		
		undation				A Employe	r identification numbe	•
		L. HAGAR MEMORIAL SCHOOL				}	00 004040	
		d street (or P O box number if mail is no	t delivered to street address)	Ro	om/suite	D. Telephen	22-2816135 e number (see instruction	
_	O. BOX y or town		State	ZIP code		1 B Telephon	e number (see instruction	ons)
	-		VT		202	Ì	000 505 276	e
_	RTON			05822-0 Foreign po			802-525-376	
го	reign cot	andy harne Foleig	gn province/state/county	Poteigh po	siai wue	l r exemp	tion application is pendi	ng, check here
G	Chec	k all that apply: Initial retur	n Unitial return	of a former publi	c charity	D 1 Foreig	n organizations, check!	nere 🕨
Ü	Onco	Final return			CCHAIR	i	-	
		Address cl	=				n organizations meeting here and attach compu	
\overline{H}	Chool	k type of organization: Sec				4	foundation status was to	
ä		on 4947(a)(1) nonexempt charit					07(b)(1)(A), check here	▶ 🗆
무						ł		
ı		narket value of all assets at	J Accounting method	: IXI Cash L	Accruai		ndation is in a 60-month	
		f year (from Part II, col. (c),	Other (specify)	on onch boois \		under sed	ction 507(b)(1)(B), checl	chere ►
		6) ▶ \$ 9,357		Un Cash Dasis.)		<u> </u>	Γ	(d) Disbursements
ř	art i	Analysis of Revenue and Ex		(a) Revenue and	(b) Ne	t investment	(c) Adjusted net	for chantable
		amounts in columns (b), (c), and (equal the amounts in column (a) (expenses per books		ncome	income	purposes
_								(cash basis only)
	1	Contributions, gifts, grants, etc., rece	•	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		A A . S	- 1, -7	
	2	Check ▶☐ if the foundation is no		* ×			 	<u> </u>
	3	Interest on savings and tempo	•	<u> </u>	6	16	 	· · · · · · · · · · · · · · · · · · ·
	4	Dividends and interest from se	ecurities					
	5a	Gross rents		, , , , , , , , , , , , , , , , , , ,	 	· .		<u> </u>
	b	Net rental income or (loss)	coasts not on line 10	* .		*		
ne	6a b	Net gain or (loss) from sale of					<u> </u>	,
eu	7	Gross sales price for all assets of	OCIVED -		, -	······································	<u> </u>	
Revenue	8	Capital gain net income (from Net short-term capital gain	Part IV, line 2)	~	+		 	,
œ	9	Income modifications.	R 2 0 2015	· · · · · · · · · · · · · · · · · · ·	, 	* * **,**,	 	
	10a	Gross sales less returns and allowar	nces	· · · · · · · · · · · · · · · · · · ·	. ,	/ ×		
	ь	Less: Cost of goods sold		* \ ,	· ,	,		1
	c	Gross profit or (loss) (attach s	chedule			27 38		
	11	Other income (attach schedul			1			
	12	Total. Add lines 1 through 11			6	16	0	, .
	13	Compensation of officers, dire		59		10	1	595
enses	14	Other employee salaries and		ļ				333
us	15	Pension plans, employee ben		 	+			
	16a	Legal fees (attach schedule)						
Щ	Ь	Accounting fees (attach sched			 			
Š	c	Other professional fees (attac		} 	<u> </u>		 	
ati	17	Interest			 			
str	18	Taxes (attach schedule) (see			1			
Ë	19	Depreciation (attach schedule						
Έ	20	Occupancy		5	0 BOND			50
Ad	21	Travel, conferences, and mee	tings	3	2 PROB	ATE FEE	l	32
ō	22	Printing and publications .			7			17
Operating and Administrative Exp	23	Other expenses (attach sched	lule)					
Вū	24	Total operating and adminis	trative expenses.					
ati	1	Add lines 13 through 23		69	4	0	0	694
ě	25	Contributions, gifts, grants pai	d	50	0 🔻	. , .		500
g	26	Total expenses and disbursement		1,19	4	0	0	
	27	Subtract line 26 from line 12:		٠, .				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	a	Excess of revenue over expenses	and disbursements .	-1,17			}	
	b	Net investment income (if ne			1	16		·
	С	Adjusted net income (if nega			1	,	C	,
				<u> </u>			<u></u>	

D	art II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions)	Beginning of year	End o	f year
	avr II	one and the first one of the control	(a) Book Value	(b) Book Value	(c) Fair Market Value
] 1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	10,535	9,357	9,357
	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)			
	7	Other notes and loans receivable (attach schedule)			
	1	Less: allowance for doubtful accounts	ACCORDANCE ON THE PERSON NO.	* * * * * * * * * * * * * * * * * * *	Harmonia Consistent No. 11. 12. 12. 12. 12. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments—U.S. and state government obligations (attach schedule)			
_	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis	* .		
	١	Less: accumulated depreciation (attach schedule)		المستقيد ومدن وسند يستقسيوا بر موالسد	til. dillitaria
	12	Investments—mortgage loans			
	13	Investments - other (attach schodule)			
	14	Investments—other (attach schedule)	*	and a mortune of the state of t	
	'-	Less: accumulated depreciation (attach schedule)	waren is a control of the state	· · · · · · · · · · · · · · · · · · ·	
	15	Other assets (describe			
	16	Total assets (to be completed by all filers—see the			
	10	instructions. Also, see page 1, item I)	40 505	0.057	0.057
	17	Accounts payable and accrued expenses	10,535	9,357	9,357
	18	Grants payable			
Liabilities	19				*
Ħ		Deferred revenue			*
ä	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable (attach schedule)			
	22 23	Other liabilities (describe >)			
	23	Total liabilities (add lines 17 through 22)	0	0	ť
S	ļ	Foundations that follow SFAS 117, check here			*
ဘ္က	ا ما	and complete lines 24 through 26 and lines 30 and 31.			,
alances	24	Unrestricted	10,535	9,357	•
Ba	25	Temporarily restricted			
ğ	26	Permanently restricted			· .
Net Assets or Fund B		Foundations that do not follow SFAS 117, check here ▶ □			× × ,
ř	ĺ	and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds			*
et	28	Paid-in or capital surplus, or land, bldg., and equipment fund			*
SSI	29	Retained earnings, accumulated income, endowment, or other funds			*
t A	30	Total net assets or fund balances (see instructions)	10,535	9,357	
Ne	31	Total liabilities and net assets/fund balances (see		ļ	
		instructions)	10,535	9,357	
	irt III	Analysis of Changes in Net Assets or Fund Balances			
1		net assets or fund balances at beginning of year—Part II, column (
	end-o	of-year figure reported on prior year's return)			10,535
2	Enter	amount from Part I, line 27a		2	-1,178
3	Other	increases not included in line 2 (itemize)		3	
4	Add li	ines 1, 2, and 3		4	9,357
5	Decre	eases not included in line 2 (itemize)		5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5)-Pa	art II, column (b), line	e 30 6	9,357

Part	(a) List and describe th	d Losses for Tax on Investment Losses for Losses for Tax on Investment Los	÷,	(b) How acquired P—Purchase D—Donation		Date acquired	(d) Date sold (mo , day, yr)
1a							
b							
<u> </u>	- 			<u> </u>			
<u> </u>							
е							L
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis ense of sale		• •	n or (loss) f) minus (g)
<u>a</u>	·						
<u>b</u> _							
<u>c</u>							
<u>u</u>							
	Complete only for assets sh	nowing gain in column (h) and owned	by the foundation	on on 12/31/69		(I) Onine (Cal	(h)
	(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exce	ess of col (1) ol (j), if any	(I) Gains (Col. (h) gain minus col. (k), but not less than -0-) (Losses (from col. (h)))		less than -0-) or
		as 01 12/3 1109	over &	(I), if ally			
<u>a</u> b	- 		 -				
<u>c</u>							
_ _d							
е							
2	Capital gain net income or	r (not canital loce) 1	also enter in Pa		2		0
3		n or (loss) as defined in sections	1222(5) and (6	3):			
		, line 8, column (c) (see instructi		r i			_
Part		er Section 4940(e) for Redu			3	<u> </u>	0
Was		ve this part blank. section 4942 tax on the distribu qualify under section 4940(e). D			ase p	eriod?	Yes No
1		ount in each column for each yea			king a	any entries.	
0-4	(a) Base period years	(b) Adjusted qualifying distributions		(c) of noncharitable-use a		Dis	(d) tribution ratio
Çai	endar year (or tax year beginning in) 2013		1.169		0	(coi (b)	divided by col (c)) 0.000000
	2012		1,152		0		0.000000
	2011		701		0		0.000000
	2010		500		0		0.000000
	2009		0		0		0.000000
2	Total of line 1, column (d)	·				2	0.000000
3	_	for the 5-year base period—divid dation has been in existence if le				3	0.000000
4	Enter the net value of non	charitable-use assets for 2014 f	rom Part X, line	5		4	
5	Multiply line 4 by line 3 .					5	
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b))			6	0
7	Add lines 5 and 6					7	0
8	Enter qualifying distribution	ns from Part XII, line 4			.	8	0
	If line 8 is equal to or great VI instructions	ter than line 7, check the box in	Part VI, line 1b	o, and complete th	at par	t using a 1%	tax rate. See the

22-2816135

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instruction	ons)			
	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)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	Mayer & Alamond			
_	here ▶ ☐ and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2		o		
3	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		이		
6	Credits/Payments:	ř	j		
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 6a				
b	Exempt foreign organizations—tax withheld at source 6b	. `			
C.	Tax paid with application for extension of time to file (Form 8868) 6c	•		,	
_d	Backup withholding erroneously withheld	emendilike reene w	ō	********	
7	Total credits and payments. Add lines 6a through 6d		쒸		
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0		
9 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 2015 estimated tax				
	VII-A Statements Regarding Activities				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Y	es	No	
	participate or intervene in any political campaign?	1a		X	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	1 1			
	Instructions for the definition)?	1b	_	<u>X</u> _	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities.	atrainad - c	*** *		
C	Did the foundation file Form 1120-POL for this year?	1c	-	X	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. > \$ (2) On foundation managers. > \$	-			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		-		
2	on foundation managers. > \$	2		X	
2	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		(II *****	4 manusasas.	
_	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	-	<u>X</u>	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a 4b N	I/A	_X_	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	5	"		
5	If "Yes," attach the statement required by General Instruction T.				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	1 1			
	By language in the governing instrument, or	1 1	.		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	6	$\overline{\mathbf{x}}$	# K#h*4 &	
-	conflict with the state law remain in the governing instrument?				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV Enter the states to which the foundation reports or with which it is registered (see instructions)	7	×		
8a	VT	.			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	OL	~~·		
0	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	×		
9	or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If		*		
	"Yes," complete Part XIV	9	- {	X	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	1-1-		<u> </u>	
. •	names and addresses	. 10	1	Χ	

Form 9	90-PF,(2014) MARION L. HAGAR MEMORIAL SCHOLARSHIP FUND 22-28	6135	F	age 5
Par	VII-A Statements Regarding Activities (continued)			
11`	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			١
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	١		
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u> </u>
	Website address ► NONE	2700		
14	The books are in care of ► WILLIAM BOYD DAVIES, ESQ. Telephone no. ► 802-525 Located at ► P.O. BOX 303 BARTON VT ZIP+4 ► 05822	-3/00		
	Locator at . 1 101 Dollar and the second and the second and the second at . 1 101 Dollar and the second at . 1			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year		•	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority		Yes	No
10	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If	 		
	"Yes," enter the name of the foreign country			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			٠.
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		· '	
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			}
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?		Ì	1,
			,	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after	_		1
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in		[
D	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance check here			1
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		·	
_	were not corrected before the first day of the tax year beginning in 2014?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			~
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	.		
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2014?			
	If "Yes," list the years 20 , 20 , 20 , 20	. ,	* ,	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	1 :]	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	######	AI/A	. x
	all years listed, answer "No" and attach statement—see instructions.)	2b	N/A	1
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			1
20	▶ 20, 20, 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		,	
3a	at any time during the year?			1
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or	1		
~	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the	1 .		1
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse	1	j	
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	1 '	1	1

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?

4a 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

3b

4a

4b

Part	VII-B Statements Regarding Activities	for Wh	ich Form 47	720 Ma	y Be Requ	uired (continue	ed)			
5à	During the year did the foundation pay or incur a (1) Carry on propaganda, or otherwise attempt to	any amo	unt to:				☐ Yes	⊠ No			
	(2) Influence the outcome of any specific public directly or indirectly, any voter registration dr	ive? .					☐ Yes	⊠ No	ı		
	(3) Provide a grant to an individual for travel, stu	ıdy, or o	ther similar p	urpose	s?		X Yes	∐ No			
	(4) Provide a grant to an organization other than section 4945(d)(4)(A)? (see instructions)	a chari	table, etc., or	ganizat 	ion describ	ed in 	☐ Yes	⊠ No		:	
	(5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to o	charital	ble, scientific or animals?	literary	, or educat	ional 	☐ Yes	⊠ No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the								ساست استمسا	***************************************	and almost 198
	Regulations section 53.4945 or in a current noti-	_	-					· ·	5b		X
С	Organizations relying on a current notice regard If the answer is "Yes" to question 5a(4), does the because it maintained expenditure responsibility	e founda	ation claim ex	emptio	n from the t	ax	· · ·	► □ □ No	 	,	
	If "Yes," attach the statement required by Regul	ations s	ection 53.494	15–5(d).							2
6a	Did the foundation, during the year, receive any on a personal benefit contract?						Yes		, , ,	4 (4.1	**************************************
b	Did the foundation, during the year, pay premiur If "Yes" to 6b, file Form 8870.	ns, direc	ctly or indirec	tiy, on a	ı personal t	enefit (contract?	• •	6b		<u> </u>
7a	At any time during the tax year, was the foundation a	party to a	prohibited tax	shelter t	ransaction?	. ·.	Yes	∑ ∏ No	F		au
	If "Yes," did the foundation receive any proceed VIII Information About Officers, Direc	s or hav	e any net inc	ome att	ributable to	the tra	insaction	? oid Ex	7b		
Paru	Information About Officers, Direct and Contractors	tors, ir	usiees, ro	unuau	OII Maliag	jeis, n	iigiiiy Pa	aiu Eii	ibiose	65,	
1	List all officers, directors, trustees, foundation	n mana	gers and the	eir com	pensation	(see ii	nstructio	ns).	<u> </u>		
•		(b) Titl	le, and average	(c) Co	mpensation	(d)	Contribution	is to	(e) Expe	nse ac	count.
	(a) Name and address		irs per week ted to position		not paid, iter -0-)		oyee benefit erred compe			allowan	
WILLI.	AM BOYD DAVIES, ESQ.	TRUS	TEE								
P.O. E	BOX 303 BARTON, VT 05822	LESS	THAN 1		595						
								<u>.</u>			
					_						
2	Compensation of five highest-paid employee "NONE."	s (other	r than those	include	ed on line	1—see				ente	r
	(a) Name and address of each employee paid more than \$50,0	00	(b) Title, and a hours per v devoted to p	veek	(c) Comper	nsation	(d) Contrib employee plans and compen	benefit deferred	(e) Expe	ense aco allowan	
NONE											
Total	number of other employees paid over \$50,000							. ▶	NONE		

Pa	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	ployees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "I	NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NO		
Tot	al number of others receiving over \$50,000 for professional services	
P	art IX-A Summary of Direct Charitable Activities	
	st the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	SCHOLARSHIPS AWARDED	

		500
2		
3		
J		
4		

	art IX-B Summary of Program-Related Investments (see instructions)	A
1	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
•		

2		
		· · · · · · · · · · · · · · · · · · ·
	other program-related investments. See instructions	
3		
Tota	al. Add lines 1 through 3	0
-		om 990-DE (2014)

Part		n foundatio	ns,
	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	
C	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	1	
	1c (attach detailed explanation)	- 2 3000 7	
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
Part	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.)		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014. (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
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	. v mpromesor,	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	1,194
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	
b	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	1,194
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	1, <u>194</u>
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating we qualifies for the section 4940(e) reduction of tax in those years.	hether the	foundation

Part	XIII Undistributed Income (see instructions)	. 			
1	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
-	line 7). 57		
	Undistributed income, if any, as of the end of 2014:			× ,	
				0	
а	Enter amount for 2013 only				
b	Total for prior years: 20, 20, 20	,			
3	Excess distributions carryover, if any, to 2014:	` *	* ^ _ *		
а	From 2009	* .			
b	From 2010				
С	From 2011		` ` _{**}		
d	From 2012	4		~ *	1
e	From 2013		,,,		
f	Total of lines 3a through e	3,522			*
4	Qualifying distributions for 2014 from Part XII,			' \$	
-	line 4: ► \$ 1,194	. *	, , ,		
_	Applied to 2013, but not more than line 2a	* ******	1	Land do de servicio de la constante de la cons	* •
	Applied to undistributed income of prior years				
D				, ,	*
	(Election required—see instructions)		<u> </u>		- ,
С	Treated as distributions out of corpus (Election			· Ĉ	*
	required—see instructions)	,	*** ;		*
d	Applied to 2014 distributable amount	3			
е	Remaining amount distributed out of corpus .	1,194	*		
5	Excess distributions carryover applied to 2014.			* *> / .	
	(If an amount appears in column (d), the same	-* { _k			
	amount must be shown in column (a).)	V 11 1		*	, '
6	Enter the net total of each column as	~*************************************	a va		
•	indicated below:			~ ,	
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	4,716	, , `		-
b	Prior years' undistributed income. Subtract	*		1,4	*
	line 4b from line 2b		l o		*
_	Enter the amount of prior years' undistributed				,
С	income for which a notice of deficiency has	`	<u> </u>	*	ĺ
			-	, ,	
	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	**			<u> </u>
е	Undistributed income for 2013. Subtract line		, j., .		1
	4a from line 2a. Taxable amount—see	* * · · · · · · · · · · · · · · · · · ·	**************************************		
	instructions	`*	**	<u> </u>	1
f	Undistributed income for 2014. Subtract lines	* ' .	1. S. 1	,	
	4d and 5 from line 1. This amount must be	×**	,,	, ,	
	distributed in 2015	,,,	<u> </u>	<u> </u>	0
7	Amounts treated as distributions out of corpus		, ', ", "		
	to satisfy requirements imposed by section			` , ,	,
	170(b)(1)(F) or 4942(g)(3) (Election may be		* "	**	
	required—see instructions)				
8	Excess distributions carryover from 2009 not		.7%	1 10	
·	applied on line 5 or line 7 (see instructions)		17. 4	ž.	`
0	Excess distributions carryover to 2015.		44	, ,	, ,
9		4,716		,	
40			** ,	3	
10	Analysis of line 9:) '	***		1
a	Excess from 2010	*		,	
b	Excess from 2011	1		l' ·	
С	Excess from 2012				
d	Excess from 2013		, ,	1	
е	Excess from 2014	<u> </u>	<u> </u>	<u> </u>	- 000 PF
					Form 990-PF (2014)

Part [*]	XIV Private Operating Foundation	ons (see instruc	tions and Part VI	I-A, question 9)		N/A
1a	If the foundation has received a ruling	or determination l	etter that it is a pri	vate operating		
	foundation, and the ruling is effective f	or 2014, enter the	date of the ruling	•		
b	Check box to indicate whether the foundation				4942(j)(3) or 4942(J)(5)
2a		Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	investment return from Part X for each year listed					0
b	85% of line 2a					0
С	Qualifying distributions from Part XII,					
_	line 4 for each year listed					0
d	Amounts included in line 2c not used directly					· - · · · · · · · · · · · · · · · · · ·
_	for active conduct of exempt activities					0
е	Qualifying distributions made directly					<u></u> _
_	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:					
	(1) Value of all assets					0
	(2) Value of assets qualifying under					<u> </u>
	section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test-enter 2/3					
	of minimum investment return shown in					0
С	Part X, line 6 for each year listed "Support" alternative test—enter:					
C	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)					0
	(2) Support from general public				··	
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)					0
	(3) Largest amount of support from					0
	an exempt organization					^
	(4) Gross investment income					0
Part		(Complete this	nort only if the	foundation has	1 CE 000 00 mon	0
ган	any time during the year—s			; iounuation nat	ı əə,uuu or more	e in assets at
1	Information Regarding Foundation	-	>. <i>)</i>			
	List any managers of the foundation wi		ad more than 2% o	f the total contribut	ions received by t	ha foundation
u	before the close of any tax year (but or					ne ioundation
NONE		ny nave oo	minuted more than	11 40,000). (000 30	Cilon 507 (d)(2).)	
	List any managers of the foundation w	20 OWD 10% or me	are of the stock of	a corporation (or a	n ogually large no	tion of the
	ownership of a partnership or other ent					tion of the
NONE		ity) of which the it	Junualion nas a 10	770 Or greater intere	75 1.	
		Grant Gift Las	n Cobolombin et	D		
	Information Regarding Contribution,				!==#!=== ===	
	Check here ▶ ☐ if the foundation or unsolicited requests for funds. If the for	indation makes d	itions to preselecte	ed charitable organ	izations and does	not accept
	under other conditions, complete items	.2a h c and d	iito, giaitto, etc. (st	se manuchons) to i	ndividuals of Orga	IIIZations
				- A B		
а	The name, address, and telephone nur	nber or e-mail ad	aress of the persor	n to whom applicat	ions should be add	dressed:
	ANA DOMO DANGEO EGO DO DOMO					
	AM BOYD DAVIES, ESQ. P.O BOX 30					
D	The form in which applications should l	oe submitted and	information and m	aterials they should	d include:	
·	TT4 OUED ADDI 10 17 10 1					
	TTACHED APPLICATION FORM		-		<u></u>	
	Any submission deadlines:					
	0 OF EACH YEAR		-			
	Any restrictions or limitations on award	s, such as by geo	graphical areas, cl	haritable fields, kın	ds of institutions, o	or other
	factors:					
LIMITE	ED TO HIGH SCHOOL SENIORS GRAI	DUATING FROM	LAKE REGION UN	NON HIGH SCHO	OI VERMONT	

Part XV Supplementary Information (conti	nued)			
3' Grants and Contributions Paid During	the Year or Approve	i e	i	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant of	Amount
	or substantial contributor	recipient	CONTRIBUTION	
Name and address (home or business) a Paid dunng the year ZEBULON McCOY 190 KATHY LANE BROWNINGTON, VT 05860	any foundation manager or substantial contributor NONE	recipient	SCHOLARSHIP	500
Total				3a 500
Total				3b 0

Pa	$\mathbf{r}(\mathbf{A})$	VI-A Analysis of Income-Producing Act	LIVILIES				
Enté	èr gro	oss amounts unless otherwise indicated.	Unrelated bus	siness income	Excluded by secti	on 512, 513, or 514	(e)
			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
1	Pro	gram service revenue:					(CCC Incadadio)
	а						
	b					<u>-</u>	
	С					<u> </u>	·
	d						
	e						
	f						
_	_	Fees and contracts from government agencies					
2		mbership dues and assessments		16			
3		rest on savings and temporary cash investments .		10			<u> </u>
4		idends and interest from securities		,			
5		rental income or (loss) from real estate:					
		Debt-financed property				-	
6		rental income or (loss) from personal property			-		
6 7		er investment income	-				
8		n or (loss) from sales of assets other than inventory					
9		income or (loss) from special events	·				
10		ess profit or (loss) from sales of inventory					
11		er revenue: a					
••					-		
	C						
	d						
	_						
12	Sut	ototal. Add columns (b), (d), and (e)	· ×	16	**	0	0
13	Tot	al. Add line 12, columns (b), (d), and (e)					16
		ksheet in line 13 instructions to verify calculation					
_		VI-B Relationship of Activities to the A		nt of Exempt	Purposes		
Lin	e No ▼		e is reported in co	olumn (e) of Part	XVI-A contributed	I importantly to the ses). (See instruct	e ions)
	3	USED FOR SCHOLARSHIP					
							_
	-						
	-						
	_						

Pan:	XVII	Exempt Org	i Regarding Trans	ters to and trans	actions and R	elationshij	os Wi	th Nonchari	itable	
1	Did t		directly or indirectly e	ngage in any of the fo	ollowing with any	other organ	ization	described	F	Yes No
			ne Code (other than s							100 110
		nizations?	`	()()		,		5 F		
а	Tran	sfers from the re	porting foundation to	a noncharitable exen	npt organization	of:				
	(1) C	ash							1a(1)	X
									1a(2)	Х
b	Othe	r transactions:								المستحدد الماء والمادد
			a noncharitable exer						1b(1)	X
			ets from a noncharital						1b(2)	X
			, equipment, or other						1b(3)	X
			rrangements						1b(4)	X
	(5) L	oans or loan gua	rantees						1b(5)	X
			ervices or membershi	=					1b(6)	X
			equipment, mailing list						1c	X
			he above is "Yes," com er assets, or services gi							
			or sharing arrangemen							
(a) Line		(b) Amount involved	,	antable exempt organization				sactions, and sha		nnements
1-7		(-),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(e) Hame of Honor.	anabio exempt organization	(2) 200	onpoor or dans.	C10, trui	Succession, and sma	ing and	ngements
										
	_									
								-		
			4 : 1 (1 551							
			ctly or indirectly affilia 501(c) of the Code (ot						Yes [VI No
			following schedule.	ner man section 50 h	(C)(S)) OF IT SECT	1011 327 ! .		⊔	162	A NO
	11 16	(a) Name of organ		(b) Type of orga	inization		(c) De	scription of relation	nehin	
		(a) Name of organ	124(011	(b) Type of orga	Inzation	· · · · · · · · · · · · · · · · · · ·	(C) De	scription of relation	nanip	
										
				•						
	-									
		·. ·								
	Under	penalties of perjury, I deci	are that I have examined this retui	m, including accompanying sched	fules and statements, and	to the best of my kr	nowledge	and belief, it is true,		
Sign	correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge May the IRS						6 discuss t	his return		
Here				4/13/2015 TRUSTEE				with the pre	wn below	
	Sigr	ature of officer or trus	stee	Date	Title			(see instruc	tions)?	_ YesNo
Paid		Print/Type preparer	s name	Preparer's signature		Date		Check I if F	PTIN	
Preparer				SELF-PREPARED RETURN				self-employed		
		Firm's name ▶					Firm's	EIN ►		
Jse C	riily	Firm's address					Phone	no		

LAKE REGION UNION HIGH SCHOOL LOCAL SCHOLARSHIPS

Name:	Social Security #	
Address;		
Date of Birth :	Telephone #	
Fainer's Namo		
सिंधुत School Father graduated from:		
Mother's Name::		
Figh School Mother graduated from:	4	-
Number of brothers and sisters:	•	
Callege(s) or schools planning to attend: (fi	rst three choices)	•
1	Total Expenses:	
	Total Expenses:	· —
3	•	
What is your intended career field? (i.e. L	•	
Describe your Future Career Plans - Usi	e thé back side of this sheet if necessary.	/
List Out of School activities and work ex	penences - use back side of this sheet if	

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

					:2; <u></u> .
			•		
					1
Have you applied for?	•			•	
Poll grants Yes_ College Grants Yes_		Work Study or VSAC Incentive		No No	: :
Others		· ·			1
			·	·	
Unusual circumstances (Trust Fund, Med	ical Problems, etc.)			! !
0.0000000000000000000000000000000000000		, ,			
			,		,
use back side of this she	et if necessary.				 .
The following financial for some of the scholar	ships listed on th	be required of you i e front page.	f you wish to b	e conside	e de de
ics some of the scholar	ships listed on th	be required of you i e Tront page.	Fyou wish to b	e conside	ifed
for some of the scholar Combined parental adj	usted income	be required of you is front page. Mortgage balance		e conside	red
for some of the scholar Combined parental adj Market value of home	ships listed on th	e front page.		e conside	red
for some of the scholar Combined parental adj Market value of home Student's savings and	ships listed on thusted income	e mont pageMortgage balanc		e conside	ered
Combined parental adj Market value of home Student's savings and Estimated parents con	eships listed on the usted income	e front page. Mortgage balanc year expenses desirable for comple	e		ered /
for some of the scholar Combined parental adj Market value of home Student's savings and	eships listed on the usted income	e front page. Mortgage balanc year expenses desirable for comple	e		red
Combined parental adj Market value of home Student's savings and Estimated parents con	eships listed on the usted income	e front page. Mortgage balanc year expenses desirable for comple	e		ered /
Combined parental adj Market value of home Student's savings and Estimated parents con	eships listed on the usted income	Mortgage balance year expenses desirable for complete will be attached.	e		ered /
Combined parental adj Market value of home Student's savings and Estimated parents con	eships listed on the usted income	e front page. Mortgage balanc year expenses desirable for comple	e		ired /
Combined parental adj Market value of home Student's savings and Estimated parents con	eships listed on the usted income	Mortgage balance year expenses desirable for complete will be attached.	e		ered /
Combined parental adj Market value of home Student's savings and Estimated parents con	eships listed on the usted income	Mortgage balance Mortgage balance year expenses desirable for complete will be attached.	e		ired /

day Another 35 tons of supplies were also ready for shipment, she said. "If these medical supplies do not reach Yemen, then unfortunately we an

PUBLIC NOTICE

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