

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

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.

**2009**

For calendar year 2009, or tax year beginning **1-November**, 2009, and ending **31-October**, 20**10**

**G** Check all that apply:  Initial return  Initial return of a former public charity  Final return  
 Amended return  Address change  Name change

<b>Use the IRS label. Otherwise, print or type. See Specific Instructions.</b>	Name of foundation <b>Somerled Charitable Foundation</b>		<b>A Employer identification number</b> <b>20-3771709</b>
	Number and street (or P.O. box number if mail is not delivered to street address) Room/suite <b>233 Marshall Street</b>	<b>B Telephone number (see page 10 of the instructions)</b> <b>781-934-1330</b>	
	City or town, state, and ZIP code <b>Duxbury, MA 02332-5126</b>		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation			
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <b>10,622</b>		<b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis.)</i>	
<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>			
<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>			

<b>Part I Analysis of Revenue and Expenses</b> <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions).)</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received (attach schedule)	<b>476,082</b>			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch. B				
	<b>3</b> Interest on savings and temporary cash investments	<b>0</b>	<b>0</b>	<b>0</b>	
	<b>4</b> Dividends and interest from securities	<b>0</b>	<b>0</b>	<b>0</b>	
	<b>5a</b> Gross rents	<b>0</b>	<b>0</b>	<b>0</b>	
	<b>b</b> Net rental income or (loss)	<b>0</b>			
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	<b>0</b>			
	<b>b</b> Gross sales price for all assets on line 6a	<b>0</b>			
	<b>7</b> Capital gain net income (from Part IV, line 2)		<b>0</b>		
	<b>8</b> Net short-term capital gain			<b>0</b>	
	<b>9</b> Income modifications			<b>0</b>	
	<b>10a</b> Gross sales less returns and allowances	<b>3,785</b>			
<b>b</b> Less: Cost of goods sold	<b>0</b>				
<b>c</b> Gross profit or (loss) (attach schedule)	<b>3,785</b>		<b>3,785</b>		
<b>11</b> Other income (attach schedule)	<b>0</b>	<b>0</b>	<b>0</b>		
<b>12 Total.</b> Add lines 1 through 11	<b>479,867</b>	<b>0</b>	<b>3,785</b>		
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc.	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
	<b>14</b> Other employee salaries and wages	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
	<b>15</b> Pension plans, employee benefits	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
	<b>16a</b> Legal fees (attach schedule)	<b>2,500</b>	<b>0</b>	<b>0</b>	<b>0</b>
	<b>b</b> Accounting fees (attach schedule)	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
	<b>c</b> Other professional fees (attach schedule)	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
	<b>17</b> Interest	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
	<b>18</b> Taxes (attach schedule) (see page 14 of the instructions)	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
	<b>19</b> Depreciation (attach schedule) and depletion	<b>0</b>	<b>0</b>	<b>0</b>	
	<b>20</b> Occupancy	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
	<b>21</b> Travel, conferences, and meetings	<b>50,049</b>	<b>0</b>	<b>3,785</b>	<b>46,264</b>
	<b>22</b> Printing and publications	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
	<b>23</b> Other expenses (attach schedule)	<b>365,636</b>	<b>0</b>	<b>0</b>	<b>365,566</b>
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	<b>418,186</b>	<b>0</b>	<b>3,785</b>	<b>411,831</b>
	<b>25</b> Contributions, gifts, grants paid	<b>53,437</b>			<b>53,437</b>
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	<b>471,623</b>	<b>0</b>	<b>3,785</b>	<b>465,268</b>	
<b>27</b> Subtract line 26 from line 12:					
<b>a Excess of revenue over expenses and disbursements</b>	<b>8,244</b>				
<b>b Net investment income</b> (if negative, enter -0-)		<b>0</b>			
<b>c Adjusted net income</b> (if negative, enter -0-)			<b>0</b>		

<b>Part II Balance Sheets</b>		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b>	Cash—non-interest-bearing . . . . .	374	8,572	8,572
	<b>2</b>	Savings and temporary cash investments . . . . .	0	50	50
	<b>3</b>	Accounts receivable ▶ . . . . .	0		
		Less: allowance for doubtful accounts ▶ . . . . .	0	0	0
	<b>4</b>	Pledges receivable ▶ . . . . .	0		
		Less: allowance for doubtful accounts ▶ . . . . .	0	0	0
	<b>5</b>	Grants receivable . . . . .	0	0	0
	<b>6</b>	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 16 of the instructions) . . . . .	0	0	0
	<b>7</b>	Other notes and loans receivable (attach schedule) ▶ . . . . .	0		
		Less: allowance for doubtful accounts ▶ . . . . .	0	0	0
	<b>8</b>	Inventories for sale or use . . . . .	2,000	2,000	2,000
	<b>9</b>	Prepaid expenses and deferred charges . . . . .	0	0	0
	<b>10a</b>	Investments—U.S. and state government obligations (attach schedule)	0	0	0
	<b>b</b>	Investments—corporate stock (attach schedule) . . . . .	0	0	0
	<b>c</b>	Investments—corporate bonds (attach schedule) . . . . .	0	0	0
	<b>11</b>	Investments—land, buildings, and equipment: basis ▶ . . . . .	0		
	Less: accumulated depreciation (attach schedule) ▶ . . . . .	0	0	0	
<b>12</b>	Investments—mortgage loans . . . . .	0	0	0	
<b>13</b>	Investments—other (attach schedule) . . . . .	0	0	0	
<b>14</b>	Land, buildings, and equipment: basis ▶ . . . . .	0			
	Less: accumulated depreciation (attach schedule) ▶ . . . . .	0	0	0	
<b>15</b>	Other assets (describe ▶ . . . . . )	0	0	0	
<b>16</b>	<b>Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I) . . . . .	2,374	10,622	10,622	
<b>Liabilities</b>	<b>17</b>	Accounts payable and accrued expenses . . . . .	0	4	
	<b>18</b>	Grants payable . . . . .	0	0	
	<b>19</b>	Deferred revenue . . . . .	0	0	
	<b>20</b>	Loans from officers, directors, trustees, and other disqualified persons	0	0	
	<b>21</b>	Mortgages and other notes payable (attach schedule) . . . . .	0	0	
	<b>22</b>	Other liabilities (describe ▶ . . . . . )	0	0	
	<b>23</b>	<b>Total liabilities</b> (add lines 17 through 22) . . . . .	0	4	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> . . . . . <input type="checkbox"/>				
	<b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	<b>24</b>	Unrestricted . . . . .			
	<b>25</b>	Temporarily restricted . . . . .			
	<b>26</b>	Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/>				
	<b>and complete lines 27 through 31.</b>				
<b>27</b>	Capital stock, trust principal, or current funds . . . . .	2,374	10,619		
<b>28</b>	Paid-in or capital surplus, or land, bldg., and equipment fund	0	0		
<b>29</b>	Retained earnings, accumulated income, endowment, or other funds	0	0		
<b>30</b>	<b>Total net assets or fund balances</b> (see page 17 of the instructions) . . . . .	2,374	10,619		
<b>31</b>	<b>Total liabilities and net assets/fund balances</b> (see page 17 of the instructions) . . . . .	2,374	10,622		

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b>	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	2,374
<b>2</b>	Enter amount from Part I, line 27a . . . . .	<b>2</b>	8,244
<b>3</b>	Other increases not included in line 2 (itemize) ▶ . . . . .	<b>3</b>	0
<b>4</b>	Add lines 1, 2, and 3 . . . . .	<b>4</b>	10,619
<b>5</b>	Decreases not included in line 2 (itemize) ▶ . . . . .	<b>5</b>	0
<b>6</b>	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	<b>6</b>	10,619

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a</b>	N/A			
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
<b>a</b>				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
<b>a</b>				
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
<b>2</b>	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		<b>2</b>
<b>3</b>	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8	{ If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions). If (loss), enter -0- in Part I, line 8 }		<b>3</b>

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

<b>1</b> Enter the appropriate amount in each column for each year; see page 18 of the instructions before making any entries.			
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2008	114,508	4,337	26
2007	41,242	5,940	7
2006	122,378	2,685	46
2005	146,395	9,064	16
2004			
<b>2</b>	<b>Total</b> of line 1, column (d)	<b>2</b>	<b>95</b>
<b>3</b>	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	<b>3</b>	<b>24</b>
<b>4</b>	Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	<b>4</b>	<b>10,992</b>
<b>5</b>	Multiply line 4 by line 3	<b>5</b>	<b>261,243</b>
<b>6</b>	Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	<b>0</b>
<b>7</b>	Add lines 5 and 6	<b>7</b>	<b>261,243</b>
<b>8</b>	Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18.	<b>8</b>	<b>465,435</b>

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary—see instructions)			
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/>	<b>1</b>		<b>0</b>
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>		<b>0</b>
<b>3</b>	Add lines 1 and 2	<b>3</b>		<b>0</b>
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>		<b>0</b>
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-	<b>5</b>		<b>0</b>
<b>6</b>	Credits/Payments:			
<b>a</b>	2009 estimated tax payments and 2008 overpayment credited to 2009	<b>6a</b>		<b>0</b>
<b>b</b>	Exempt foreign organizations—tax withheld at source	<b>6b</b>		<b>0</b>
<b>c</b>	Tax paid with application for extension of time to file (Form 8868)	<b>6c</b>		<b>0</b>
<b>d</b>	Backup withholding erroneously withheld	<b>6d</b>		<b>0</b>
<b>7</b>	Total credits and payments. Add lines 6a through 6d	<b>7</b>		<b>0</b>
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>		<b>0</b>
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>	<b>9</b>		<b>0</b>
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>	<b>10</b>		<b>0</b>
<b>11</b>	Enter the amount of line 10 to be: <b>Credited to 2010 estimated tax</b> <b>Refunded</b>	<b>11</b>		<b>0</b>

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		✓
<b>1b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? <i>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.</i>		✓
<b>1c</b> Did the foundation file <b>Form 1120-POL</b> for this year?		✓
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: <b>(1)</b> On the foundation. ▶ \$ <u>0</u> <b>(2)</b> On foundation managers. ▶ \$ <u>0</u>		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ <u>0</u>		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities.</i>		✓
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>		✓
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?		✓
<b>4b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?		
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>		✓
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	✓	
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV</i>	✓	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ▶ <u>Massachusetts</u>		
<b>8b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? <i>If "No," attach explanation</i>	✓	
<b>9</b> 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 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)? <i>If "Yes," complete Part XIV</i>		✓
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	✓	

**Part VII-A Statements Regarding Activities (continued)**

<b>11</b>	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	<b>11</b>		✓
<b>12</b>	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	<b>12</b>		✓
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <a href="http://www.SomerledCharitableFoundation.org">www.SomerledCharitableFoundation.org</a>	<b>13</b>	✓	
<b>14</b>	The books are in care of ► <b>Wendy L Macdonald</b> Telephone no. ► <b>781-934-1330</b> Located at ► <b>233 Marshall St, Duxbury, MA</b> ZIP+4 ► <b>02332-5126</b>			
<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here. . . . . and enter the amount of tax-exempt interest received or accrued during the year . . . . .	<b>15</b>		<input type="checkbox"/>

**Part 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
<b>1a</b>	During the year did the foundation (either directly or indirectly):		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? . . . Organizations relying on a current notice regarding disaster assistance check here . . . . . <input type="checkbox"/>	<b>1b</b>	✓
<b>c</b>	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 2009? . . . . .	<b>1c</b>	✓
<b>2</b>	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)):		
<b>a</b>	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20____, 20____, 20____, 20____		
<b>b</b>	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see page 20 of the instructions.) . . . . .	<b>2b</b>	✓
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ► 20____, 20____, 20____, 20____		
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If "Yes," did it have excess business holdings in 2009 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? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009.</i> ) . . . . .	<b>3b</b>	✓
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>	✓
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	<b>4b</b>	✓

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required** (continued)

**5a** During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions)  Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes  No

**b** If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? **5b**  No  Yes

Organizations relying on a current notice regarding disaster assistance check here

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  Yes  No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? **6b**  No  Yes

If "Yes" to 6b, file Form 8870.

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? **7b**  No  Yes

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Wendy L Macdonald 233 Marshall St; Duxbury, MA 02332-5126	Trustee - 30hr/wk	-0-	-0-	-0-
Robert L Macdonald 233 Marshall St; Duxbury, MA 02332-5126	Trustee - 1hr/wk	-0-	-0-	-0-

**2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

**Total** number of other employees paid over \$50,000 **0**

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)

**3 Five highest-paid independent contractors for professional services** (see page 23 of the instructions). If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<b>Total number of others receiving over \$50,000 for professional services</b>		<b>0</b>

**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 as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
<b>1 BLOODTIES - Development of new musical, table readings, Actors' Equity 29-Hour reading, creation of Piano/Vocal plus orchestrations &amp; copywork, workshop production (6 performances) at New York Musical Theatre Festival (NYMF), demo recording, website creation, logo design. 6 actors, 5 musicians, + directors, designers, etc.</b>	<b>\$209,977</b>
<b>2 RON CARTER'S GREAT BIG BAND - Produced audio CD including commissioning of arrangements, recording, mixing, mastering, graphic design, liner notes. Employed 17 musicians. Recording has been picked up by Toshiba-EMI (Japan.) Engagements in Japan and U.S. being discussed providing additional employment.</b>	<b>\$127,102</b>
<b>3 Educational theatre &amp; new works program in Boston. Advisor &amp; funding for DREAM OUT LOAD PRODUCTIONS "Songs for a New World" including stipends for 16 young artists and other production expenses.</b>	<b>\$16,404</b>
<b>4 FLOYD &amp; THE IRRESISTIBLE COOKIE - Adaptation of illustrated story into 10-min video book. Income to author, composer/musician, voice actor, videographer. This is the first in what is planned to be a collection of similar projects. Proceeds from sales of video (download only until collection complete) go to MSPCA-Angell Memorial.</b>	<b>\$6,927</b>

**Part IX-B Summary of Program-Related Investments** (see page 24 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
<b>1 NONE</b>	
<b>2</b>	
All other program-related investments. See page 24 of the instructions.	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3	<b>0</b>

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities . . . . .	<b>1a</b>	<b>0</b>
<b>b</b>	Average of monthly cash balances . . . . .	<b>1b</b>	<b>11,159</b>
<b>c</b>	Fair market value of all other assets (see page 24 of the instructions) . . . . .	<b>1c</b>	<b>0</b>
<b>d</b>	<b>Total</b> (add lines 1a, b, and c) . . . . .	<b>1d</b>	<b>11,159</b>
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) . . . . .	<b>1e</b>	<b>0</b>
<b>2</b>	Acquisition indebtedness applicable to line 1 assets . . . . .	<b>2</b>	<b>0</b>
<b>3</b>	Subtract line 2 from line 1d . . . . .	<b>3</b>	<b>11,159</b>
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25 of the instructions) . . . . .	<b>4</b>	<b>167</b>
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	<b>10,992</b>
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5 . . . . .	<b>6</b>	<b>550</b>

**Part XI Distributable Amount** (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6 . . . . .	<b>1</b>	<b>550</b>
<b>2a</b>	Tax on investment income for 2009 from Part VI, line 5 . . . . .	<b>2a</b>	<b>0</b>
<b>b</b>	Income tax for 2009. (This does not include the tax from Part VI.) . . . . .	<b>2b</b>	<b>0</b>
<b>c</b>	Add lines 2a and 2b . . . . .	<b>2c</b>	<b>0</b>
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1 . . . . .	<b>3</b>	<b>550</b>
<b>4</b>	Recoveries of amounts treated as qualifying distributions . . . . .	<b>4</b>	<b>0</b>
<b>5</b>	Add lines 3 and 4 . . . . .	<b>5</b>	<b>550</b>
<b>6</b>	Deduction from distributable amount (see page 25 of the instructions) . . . . .	<b>6</b>	<b>0</b>
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 . . . . .	<b>7</b>	<b>550</b>

**Part XII Qualifying Distributions** (see page 25 of the instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26 . . . . .	<b>1a</b>	<b>465,268</b>
<b>b</b>	Program-related investments—total from Part IX-B . . . . .	<b>1b</b>	<b>0</b>
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes . . . . .	<b>2</b>	<b>0</b>
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required) . . . . .	<b>3a</b>	<b>0</b>
<b>b</b>	Cash distribution test (attach the required schedule) . . . . .	<b>3b</b>	<b>167</b>
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	<b>465,435</b>
<b>5</b>	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 page 26 of the instructions) . . . . .	<b>5</b>	<b>0</b>
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 . . . . .	<b>6</b>	<b>465,435</b>

**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.

**Part XIII Undistributed Income** (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
<b>1</b> Distributable amount for 2009 from Part XI, line 7 . . . . .				<b>550</b>
<b>2</b> Undistributed income, if any, as of the end of 2009:				
<b>a</b> Enter amount for 2008 only . . . . .			<b>0</b>	
<b>b</b> Total for prior years: 20 <b>07</b> ,20 <b>06</b> ,20 <b>05</b>		<b>0</b>		
<b>3</b> Excess distributions carryover, if any, to 2009:				
<b>a</b> From 2004 . . . . .				<b>0</b>
<b>b</b> From 2005 . . . . .				<b>145,942</b>
<b>c</b> From 2006 . . . . .				<b>122,244</b>
<b>d</b> From 2007 . . . . .				<b>37,767</b>
<b>e</b> From 2008 . . . . .				<b>114,291</b>
<b>f Total</b> of lines 3a through e . . . . .	<b>420,244</b>			
<b>4</b> Qualifying distributions for 2009 from Part XII, line 4: ► \$ <b>465,435</b>				
<b>a</b> Applied to 2008, but not more than line 2a .			<b>0</b>	
<b>b</b> Applied to undistributed income of prior years (Election required—see page 26 of the instructions)		<b>0</b>		
<b>c</b> Treated as distributions out of corpus (Election required—see page 26 of the instructions) .	<b>0</b>			
<b>d</b> Applied to 2009 distributable amount . . . . .				<b>550</b>
<b>e</b> Remaining amount distributed out of corpus	<b>464,886</b>			
<b>5</b> Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a).)	<b>0</b>			<b>0</b>
<b>6 Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	<b>885,130</b>			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b . . . . .		<b>0</b>		
<b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . .		<b>0</b>		
<b>d</b> Subtract line 6c from line 6b. Taxable amount—see page 27 of the instructions .		<b>0</b>		
<b>e</b> Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount—see page 27 of the instructions . . . . .			<b>0</b>	
<b>f</b> Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010 . . . . .				<b>0</b>
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions) . . . . .	<b>0</b>			
<b>8</b> Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions) . . . . .	<b>0</b>			
<b>9 Excess distributions carryover to 2010.</b> Subtract lines 7 and 8 from line 6a . . . . .	<b>885,130</b>			
<b>10 Analysis of line 9:</b>				
<b>a</b> Excess from 2005 . . . . .				<b>145,942</b>
<b>b</b> Excess from 2006 . . . . .				<b>122,244</b>
<b>c</b> Excess from 2007 . . . . .				<b>37,767</b>
<b>d</b> Excess from 2008 . . . . .				<b>114,291</b>
<b>e</b> Excess from 2009 . . . . .				<b>464,886</b>

**Part XIV Private Operating Foundations** (see page 27 of the instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling . . . . . ▶

**b** Check box to indicate whether the foundation is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year				(e) Total
	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon:					
<b>a</b> "Assets" alternative test—enter:					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .					
<b>b</b> "Endowment" alternative test—enter <sup>2</sup> / <sub>3</sub> of minimum investment return shown in Part X, line 6 for each year listed . . . . .					
<b>c</b> "Support" alternative test—enter:					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) . . . . .					
<b>(3)</b> Largest amount of support from an exempt organization . . . . .					
<b>(4)</b> Gross investment income . . . . .					

**Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see page 28 of the instructions.)**

**1 Information Regarding Foundation Managers:**  
**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

**Robert & Wendy Macdonald**

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

**N/A**

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**  
 Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

**a** The name, address, and telephone number of the person to whom applications should be addressed:

**b** The form in which applications should be submitted and information and materials they should include:

**c** Any submission deadlines:

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

**Part XV** Supplementary Information (continued)

**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>				
Barton Center for Diabetes Education PO Box 356 N. Oxford, MA 01537-0356	N/A		Annual Fund	28,937
Fiasco Theatre Company 80 Madison Ave., #3C; New York, NY 10016	N/A		Annual Fund	10,000
Tri County Music Association PO Box 414; Rochester, MA 02770	N/A		Support HS Study Grant program	5,000
NHDI PO Box 1116; Keene, NH 03431	N/A		Underwrite Live Musicians	2,000
Albuquerque Youth Symphony PO Box 30961; Albuquerque, NM 87190	N/A		Annual Fund	1,000
Trinity Repertory Company 201 Washington Street; Providence, RI 02903	N/A		Annual Fund	1,000
SpeakEasy Stage Company 539 Tremont Street; Boston, MA 02116	N/A		Annual Fund	1,000
Lyric Stage Company of Boston 140 Clarendon St; Boston, MA 02116	N/A		Annual Fund	1,000
Actors' Shakespeare Project 191 Highland Avenue, Suite 2E; Somerville, MA 02143	N/A		Annual Fund	1,000
New Rep Theater 200 Dexter Avenue; Watertown, MA 02472	N/A		Annual Fund	1,000
The Gamm Theatre 172 Exchange Street; Pawtucket, RI 02860	N/A		Annual Fund	1,000
Workshop Theater Company 12 West 36th Street, Fourth Floor East; NY, NY 10018	N/A		Annual Fund	500
<b>Total</b>			▶ <b>3a</b>	<b>53,437</b>
<b>b Approved for future payment</b>				
<b>Total</b>			▶ <b>3b</b>	<b>-0-</b>





8:46 PM

02/27/11

Cash Basis

**SCHEDULE for Part I Line 16a**  
**Legal, Accounting & Other Professional Fees**  
November 2009 through October 2010

Type	Date	Num	Name	Memo	Class	Paid Amount
<b>70000 · Organizational (Corp) Expenses</b>						
<b>72100 · Legal Fees</b>						
Check	10/30/2010	1456	Alan S. Bergman	retainer - Ron Carter CD	RonCarter:Legal	2,500.00
Total 72100 · Legal Fees						<u>2,500.00</u>
Total 70000 · Organizational (Corp) Expenses						<u>2,500.00</u>
<b>TOTAL</b>						<b><u>2,500.00</u></b>

**Other Expenses**  
**SCHEDULE - Part I Line 23**  
**All Classes**

	<u>TOTAL</u>
<b>Expense</b>	
60000 · Grant & Program Exp	
62000 · Program Expenses	
62100 · Artists & Performers	
62110 · Artist Fees	139,949.96
62150 · Per Diem (Travel)	13,733.16
<b>Total 62100 · Artists &amp; Performers</b>	<u>153,683.12</u>
62200 · Other Program Expenses	
62210 · Services	188,040.27
62220 · Advertising expenses	8,901.05
62230 · Postage, shipping, delivery	213.70
62240 · Bank & Merchant Service Fees	83.60
62250 · Supplies	11,308.30
<b>Total 62200 · Other Program Expenses</b>	<u>208,546.92</u>
62400 · Royalties	
62410 · Composer-Publisher	531.26
62420 · Artist	2,805.15
<b>Total 62400 · Royalties</b>	<u>3,336.41</u>
<b>Total 62000 · Program Expenses</b>	<u>365,566.45</u>
<b>Total 60000 · Grant &amp; Program Exp</b>	365,566.45
70000 · Organizational (Corp) Expenses	
71100 · State & Federal Filing Fees	70.00
<b>Total 70000 · Organizational (Corp) Expenses</b>	<u>70.00</u>
<b>Total Expense</b>	<u>365,636.45</u>
<b>Net Income</b>	<u><u>-365,636.45</u></u>

**Somerled Charitable Foundation**  
**Major Donor Contributions**  
**November 2009 through October 2010**

<u>Date</u>	<u>Name</u>	<u>Name Address</u>	<u>Paid Amount</u>
<b>Wendy and Robert Macdonald</b>			
12/27/2009	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	53,000.00
12/29/2009	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	2,000.00
12/31/2009	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	4,378.71
2/8/2010	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	10,000.00
4/1/2010	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	652.80
4/7/2010	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	20,000.00
4/30/2010	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	50,000.00
6/16/2010	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	100,000.00
7/1/2010	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	12,301.35
7/8/2010	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	25,000.00
7/20/2010	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	15,000.00
8/3/2010	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	10,000.00
8/10/2010	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	5,000.00
8/16/2010	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	20,000.00
8/31/2010	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	10,000.00
9/2/2010	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	10,000.00
9/14/2010	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	5,000.00
9/20/2010	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	15,000.00
9/28/2010	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	15,000.00
10/1/2010	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	2,799.02
10/5/2010	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	25,000.00
10/14/2010	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	700.00
10/29/2010	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	15,000.00
10/31/2010	Wendy and Robert Macdonald	233 Marshall Street Duxbury, MA 02332-5126	50,000.00
Total Wendy and Robert Macdonald			475,831.88
<b>TOTAL</b>			<b>475,831.88</b>



Massachusetts Office of the Attorney General  
Division of Public Charities

FORM PC

To be filed annually by all non-profit charitable organizations conducting business in the Commonwealth

Report for the Fiscal Period: Beginning 11 / 1 / 09 Ending 10 / 31 / 10

Check all items attached: Form PC  Schedule A1  Schedule A2  Schedule RO  AG Schedule B   
Probate Account  Copy of IRS Return  Audited Financial Statements/Review  Filing Fee  Amended Articles/Bylaws

Attorney General's Acct. No.: AG #045247

Federal ID Number: 20-3771709

When did the organization first engage in charitable work in Massachusetts? 11 / 01 / 2005

Has the organization applied for or been granted IRS tax exempt status? Yes  No

If yes, Date of Application:      /      /      OR Date of Determination Letter: 12 / 08 / 2005

IRS Exemption under 501(c): 3 Check box if No IRS Exemption [  ]

If exempt under 501(c), are contributions to the organization tax deductible as charitable contributions? Yes  No

ORGANIZATION DATA			
Name:	<u>Somerled Charitable Foundation</u>		
Mailing Address:	<u>233 Marshall St</u>		
City:	<u>Duxbury</u>	State:	<u>MA</u> Zip: <u>02332</u>
Phone: ( <u>781</u> )	<u>934-1330</u>	Fax: ( <u>781</u> )	<u>934-1340</u>
E-Mail:	<u>Wendy@SomerledCharitableFoundation.org</u>		Web Site (URL): <u>http://www.SomerledCharitableFoundation.org</u>

In the section below, please enter the appropriate codes from the corresponding tables found on pages 12 and 13:

Category	Code	Enter <b>up to 2</b> codes from Table 3 for your organization's main purpose(s)	Code
County (Table 1)	<u>12</u>	Organization Purpose Code 1	<u>24</u>
Type of Organization (Table 2)	<u>23</u>	Organization Purpose Code 2	<u>8</u>

Please check box if final return prior to dissolution

Payment Received Office Use Only

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**All questions must be completed in their entirety whether or not similar questions are answered in an attached federal form. See instructions and definition section for guidance.**

<b>1. On what date was the organization created?</b>	<b>2. Where was the organization created?</b>
11/4/2005	Duxbury, Massachusetts

<b>3. What is the form of the organization?</b>	
Corporation	Testamentary trust
Unincorporated association	Inter Vivos trust
Other (please describe): <span style="color: blue;">Private Foundation - section 509 (a)</span>	

**4. Was your organization related to any other organization(s) during the reporting year (see definition of "Related Organization")?**  
 Yes \_\_\_\_\_ No  If yes, please complete the Schedule RO on pages 10 and 11.

5. Summary of Financial Data		Amounts
A	Contributions, gifts, grants, and similar amounts received	\$ 476,081.88
B	Gross Support and Revenue	\$ 479,866.96
C	Program services and similar amounts paid out	\$ 469,052.83
D	Fundraising expenses	\$ 0.00
E	Management and general expenses	\$ 2,570.00
F	Payments to affiliates	\$ 0.00
G	Total Expenses	\$ 471,622.83
H	Net assets or fund balances at the end of the year	\$ 10,618.58

**6. List the total compensation you provided to your five highest paid employees.**

	Name	Title	Hours Per Week	Salary & Other Income	Benefit Plans	Other Compensation
1	Wendy L Macdonald	Trustee	30	0	0	0
2	Robert L Macdonald	Trustee	1	0	0	0
3						
4						
5						

**7. Was any compensation provided to any of the individuals listed in 6 above which was not quantified in your response to 6?**  
 Yes \_\_\_\_\_ No  If yes, please provide explanation \_\_\_\_\_

\_\_\_\_\_

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8. List the name, amount of compensation paid, and the nature of services rendered by each of the organization's FIVE highest paid consultants providing professional services (e.g., attorneys, architects, accountants, management companies, investment advisors, professional solicitors, professional fundraising counsel.)

	Name	Amount of Compensation	Type of Service(s)
1	Alan S. Bergman	\$2,500	legal - contract negotiation
2			
3			
4			
5			

9. Bank(s) in which the organization's funds are deposited (include bank address and phone number):

Bank	Address	Phone Number
Bank of America	185 Summer St; Kingston, MA 02364	781-585-1285
Paypal	www.PayPal.com	

10. What is the organization's accounting method? Cash  Accrual  Other (specify) \_\_\_\_\_

11. If organization's mailing address is a P.O. Box Number, list the organization's full street address:

Street Address	City, State	Zip

12. Name, address and telephone number of Contact Person:

Name	Street Address	City, State, Zip	Telephone Number
Wendy Macdonald	233 Marshall Street	Duxbury, MA 02332-5126	781-934-1330

13. During the fiscal year reported here, did your organization solicit contributions or have funds solicited on its behalf? Yes \_\_\_\_\_ No

14. At any time during the fiscal year following the year reported here, will your organization, or others acting on its behalf, have solicited contributions? Yes \_\_\_\_\_ No

**IF YOU ANSWERED "YES" IN RESPONSE TO QUESTION 13 OR QUESTION 14, YOU MUST COMPLETE SCHEDULES A-1 AND/OR A-2 UNLESS YOU ARE EXEMPT FROM THE SOLICITATION CERTIFICATE REQUIREMENT.**

15. If you are claiming an exemption from the solicitation certificate requirement, please indicate by placing an 'X' in the box to the right to identify which exemption applies to your organization.

a religious organization	
an organization which (a) does not raise more than \$5,000 during a calendar year OR does not receive contributions from more than ten persons during a calendar year; AND (b) carries out all of its activities, including fundraising, through unpaid volunteers. (The conditions at both (a) and (b) must be met for your organization to qualify for this exemption.	

[Empty box]

16. Names, addresses (street & P.O.) and telephone numbers of other offices/chapters/branches/affiliates (attach list). **NONE**

17. List the names, titles and addresses (street & P.O.) of officers, directors, trustees, and the principal salaried executives of organization (attach separate sheet). **Robert & Wendy Macdonald - Trustees; 233 Marshall St; Duxbury, MA 02332**

18. Attach separate sheet listing names and addresses (street & P.O.) for all below:  
Individual(s) responsible for custody of funds  
Individual(s) responsible for distribution of funds  
Individual(s) responsible for fund raising  
Individual(s) responsible for custody of financial records  
Individual(s) authorized to sign checks  
**RESPONSIBILITY FOR ALL 5 OF THESE DUTIES:  
Wendy L Macdonald, Trustee  
233 Marshall Street; Duxbury, MA 02332-5126**

19. Has this organization or any of its officers, directors, employees or fund raisers solicited funds in any other state? Yes \_\_\_\_\_ No

If "yes", attach list of states where solicitation was conducted, including registering agency, dates of registration, registration numbers, any other names under which the organization was/is registered, and the dates and type (mail, telephone, door to door, special events, etc) of the solicitation conducted.

20. Has this organization or any of its officers, directors, employees:  
If yes, please attach an explanation

- (a) Been enjoined or otherwise prohibited by a government agency/court from operating or soliciting contributions? Yes \_\_\_\_\_ No
- (b) Ever been refused registration or had its registration or tax exemption denied, suspended, modified or revoked by a governmental agency? Yes \_\_\_\_\_ No
- (c) Been the subject of a proceeding regarding any solicitation or registration? Yes \_\_\_\_\_ No
- (d) Entered into a voluntary agreement of compliance or consent judgment with any government agency or in a case before a court or administrative agency? Yes \_\_\_\_\_ No

21. Have any restrictions been removed during the year from donor-restricted funds? Yes \_\_\_\_\_ No   
If yes, please attach an explanation

22. Have donor-restricted funds been loaned to unrestricted funds? Yes \_\_\_\_\_ No   
If yes, please attach an explanation

23. This question involves "Termination of Employment or Change of Control Compensatory Arrangements" with certain "Related Parties" (see instructions and definition sections). Report only if payments made or promised to any individual are in excess of four months salary or \$100,000, whichever dollar amount is less.

- (a) Did you make actual payments or otherwise transfer value under such an arrangement to any individual described in Related Party definition, sections (a) or (b), which payments are not reported in Question 6 or 7 above? Yes \_\_\_\_\_ No
- (b) Do you have an agreement with any individual described in Related Party definition, section (a) or (b), containing such an arrangement? Yes \_\_\_\_\_ No

If you answered "yes" for Question 23(a) or 23(b) above, please attach an explanation identifying the individual(s) involved, stating the amount of any payments made or value transferred, and describing the terms of each agreement.



**24. This question applies to related party transactions, which include transactions with officers, directors, trustees, certain employees, relative, and organizations they own or control. Please consult the instructions and definition sections for the definition of a “Related Party” and “Indebtedness” before answering. Note that transactions involving related parties must be reported even when there is no accounting recognition (e.g., in-kind gifts, waiver of interest not otherwise reported).**

If the answer to any part of Question 24 is “Yes”, attach a schedule stating the name and address of the related party, the nature of the transaction, the value or the amounts involved in the transaction, and the procedure followed in authorizing the transaction.

During the year, has your organization:	Yes	No
(a) Sold or transferred assets to or purchased assets from or exchanged assets with a related party?		✓
(b) Leased assets to or leased assets from a related party?		✓
(c) Been indebted to a related party?		✓
(d) Allowed a related party to be indebted to it?		✓
(e) Made or held an investment in a related party?		✓
(f) Furnished goods, services, or facilities to a related party?		✓
(g) Acquired goods, services, or facilities from a related party who received compensation or other value in return?		✓
(h) Paid or became obligated to pay wages, salary or other compensation to a related party?		✓
(i) Transferred income or assets to or for use by a related party?		✓
(j) Was the organization a party to any transaction in which any of its officers, directors or trustees has a material financial interest, or did any officer, director or trustee receive anything of value not reported as compensation?		✓
(k) Has the organization invested in any corporate stock in which any officer, director, or trustee owns more than 10% of the outstanding shares?		✓
(l) Is any property of the organization held in the name of or commingled with the property of any other person or organization?		✓
(m) Did the organization make a grant award or contribution to any organization in which any of its officers, directors or trustees has a relationship?	✓ *	

\*(m) Grants have been made to The Barton Center for Diabetes Education. One of our Trustees (Robert Macdonald) is also a Trustee of that organization.



Under penalty of perjury, I declare that the information furnished in this report, including all attachments, is true and correct to the best of my knowledge.

Wendy L Macdonald                      Trustee                      2/28/2011  
Signature of president or other authorized officer or trustee                      Title                      Date

Wendy L Macdonald  
Name of Preparer

233 Marshall Street; Duxbury, MA 02332  
Address

781-934-1330  
Phone Number