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Form	9	9	0-	PF
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Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB	No	1545-0052

		evenue Sei		Note: The foundati	on may b	pe able to use a copy of t	his return to sa	tisfy state	report	ing requirements	<u> </u>	
i	For cal	lendar	year 2009,	, or tax year begi				and end			, 20	
ì	G Che	ck all th	nat apply.	Initial retur	n	Initial return	of a former p	ublic cha	rity		Final return	
			<i>•</i>	Amended	return		ss change	Г	<u> </u>	ame change	-	
•			Name of fo						_	A Employer identific	ation number	
	Usa +l	he IRS							1	- ·		
		oel	ALEXANI	TANE TANE	. BOYL	T/A FOUNDATION	ЭN		ı	23-	2251378	
		rwise,				mail is not delivered to stree		Room/su	ute	B Telephone number (see p		
	pr	int					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	or t	уре.	21 E M	ARKET STREET	1					1	\ _	
		pecific		n, state, and ZIP coo				L		C If exemption applicati	on is	Т
∍	Instru	ctions	City of tow	m, state, and zir cot	ie.				l	pending, check here		\dashv
5			VODY 1	DN 17401 100					ı	D 1 Foreign organization		
√				PA 17401-120						2. Foreign organization 85% test, check he		_
•			_			c)(3) exempt private			- 1	computation • •	> L	
				onexempt charitable		Other taxable p				E If private foundation	status was terminated	$\overline{}$
					-	unting method: X C	_	rual		under section 507(b)	(1)(A), check here . 🕨	
				col. (c), line		ther (specify)	,-,		· -	F If the foundation is in		_
₹.		▶ \$		849,943.	<u> </u>	column (d) must be o	n cash basis.)	·	, 1	under section 507(b)		
ا رّ	Part	■ Analy	sis of Rev	enue and Expens	es (The	(a) Revenue and	(b) Net inve	estment	le) Adjusted net	(d) Disbursement for charitable	S
SCHOOL UALE		may n	ot necessari	ily equal the amount	s in	expenses per	incom		" ا	income	purposes	
₫,				ge 11 of the instruc		books			<u> </u>		(cash basis only	
ā	1	Contribut		ts, etc., received (attach sc					ļ			
5	2	Check }		e foundation is not requ ch Sch B					<u></u>			
	3	Interest		nd temporary cash inve					<u> </u>			
	4	Dividen	nds and inter	rest from securities		17,958	. 1	7,888.				
	5a	Gross r	ents							DECEIVE	=0	
	b	Net rent	al income or ((loss)					<u> </u>	ULOFIA	70	
	- ء ا			n sale of assets not on l		-26,697			စြ		10 8	
i	<u> </u>	Gross sa	iles price for a n line 6a		287.				181	MAY 18 4	UIU IO	
3	b 6 7			come (from Part IV, I	ine 2) .				121		E	
٥	Ē 8	•	•	ital gain	-					OCDEN	111	
	9			ons · · · · · · ·						UUU		
		Gross sa	les less return	ns					-			
	Ь		st of goods so									
	1		•	s) (attach schedule)								-
	11			ch schedule)								
	12			through 11		-8,739] 1	7,888.		3		
	13	_		cers, directors, trustees		9,684		9,684.				
	14			laries and wages .				NONE		NONE	•	
,				oloyee benefits				NONE		NONE		
	160			schedule)				1.0111				
9	ا ا ا			ttach schedule)			 					
				fees (attach schedul			 					
Administrative	17						-	·				
•	1/			le) (see page 14 of the inst		2,459		406.				
	18			· -			1	- 400.				
Ī	19	•		h schedule) and dep			 				***	
~	20						 	NONE	 	NONE		
	21			, and meetings			 	NONE	-	†		
				ations			 	NOME	-	NONE		
	23		-	tach schedule)								
,	24			d administrative ex		10 1/0	_	0 000		31037		
0.000	5			gh 23		12,143	1	0,090.	ļ	NONE		200
•	25	Contrib	utions, gifts	, grants paid		38,200	 -				38,	
	26			oursements Add lines 24	1 and 25	50,343	$+$ $\frac{1}{2}$	0,090.		NONE	38,	<u> 200</u>
	27		t line 26 fro			_			}	1		
				expenses and disburseme		-59,082	<u> </u>		ļ			
	b	Net inv	estment ind	come (if negative, er	nter -0-)			7,798.	ļ			
	c	Adjuste	ed net incor	ne (if negative, ente	r -0-)							

Ð	art II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
_			amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1		ng			
	2	Savings and temporary	cash investments	53,116.	26,991.	<u>26,991</u> .
	3	Accounts receivable -				
		Less allowance for doub	otful accounts			
	4	Pledges receivable -				
		Less allowance for doub	otful accounts			
	5		· · · · · · · · · · · · · · · · · · ·			
	6		ficers, directors, trustees, and other			
		disqualified persons (atta	ich schedule) (see page 16 of the instructions)			
	7	• •	eceivable (attach schedule)			
	`		otful accounts NONE			
	8	Inventories for sale or us				
Assets	9		eferred charges			
SS	10 a		government obligations (attach schedule)			
•	•		stock (attach schedule)			
	l		bonds (attach schedule)			
	11	Investments - Land, building and equipment basis Less accumulated deprecia (attach schedule)	is, >			
	12		loans			
!	13 14	Investments - other (atta Land, buildings, and	ch schedule) STMT 2	961,990.	929,034.	822,952.
		equipment: basis Less accumulated deprecia (attach schedule)				
	15		<u></u>)			·
	16		pleted by all filers - see the	1 015 106	056 005	040 040
_			age 1, item l)	1,015,106.	956,025.	849,943.
	17	Accounts payable and a	ccrued expenses			
	18					
es	19	Deferred revenue				
Ħ	20	Loans from officers, directo	rs, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other no	tes payable (attach schedule)			
_	22	Other liabilities (describe	· -)			
_	23	Total liabilities (add line	s 17 through 22)			
			ow SFAS 117, check here ▶			
Ses	24	Unrestricted	<u>.</u> .			
au	25	Temporarily restricted			- <u> </u>	
Bal	26	Permanently restricted .				
pu	24 25 26 27 28 29 30	Foundations that do	not follow SFAS 117,	İ		
Ful		check here and comp	olete lines 27 through 31. ▶ X			
or	27	Capital stock, trust princ	ipal, or current funds	1,015,106.	956,025.	
ts	28	Paid-in or capital surplus, or	land, bldg , and equipment fund			
SSe	29	Retained earnings, accumul	ated income, endowment, or other funds			
t A	30	Total net assets or fund	balances (see page 17 of the			
Ne				1,015,106.	956,025.	
	31		assets/fund balances (see page 17			
		of the instructions)		1,015,106.	956,025.	
P	art II	Analysis of Cha	anges in Net Assets or Fund I	Balances		
			lances at beginning of year - Part II, co		agree with	
-			on prior year's return)		- 1	1,015,106.
2						-59,082.
3	Othe	r increases not include	ne 27a ed in line 2 (itemize) ► SEE STAT	EMENT 3	3	1
Δ	Δdd					956,025.
_	Door		line 2 (itemize)			730,023.
6	Total	net assets or fund hal	lances at end of year (line 4 minus lin	o 5) - Part II column /h	line 30 6	956,025.
<u>~</u>	. 5(0)	ussets of fully bal	and at the or year time 4 milles in	ic o, - i art ii, column (b),	inio 30 0	Form 990-PF (2009)

Part IV Capital Gains	and Losses for Tax on Inve	estment Income			
(a) List and 2-story bri	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1a SEE PART IV DETAI	ГL				
_b					
С					
<u>d</u>					
_e	(6) Daniel allamed	(g) Cost or other basis		(h) Coin or (le	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus expense of sale		(h) Gain or (lo (e) plus (f) min	
a				-	
_b					
<u>c</u>					
<u>d</u>	-				
Complete only for assets show	ving gain in column (h) and owned	d by the foundation on 12/21/69			
Complete only for assets show	(i) Adjusted basis	(k) Excess of col (i)		Gains (Col (h) gi (k), but not less	
(i) F M V as of 12/31/69	as of 12/31/69	over col (j), if any	00	Losses (from co	
a					
b					
С					
					
е		-si- also aster is Dont I loss 7			
2 Capital gain net income or (gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		-26,697.
	or (loss) as defined in sections 122				
_	ne 8, column (c) (see pages 13 an	•			
Part V Qualification Und	ne 8	ed Tax on Net Investment Inc	3		
	he section 4942 tax on the distrib	utable amount of any year in the b	ase perio	d ⁷	Yes X No
	ot qualify under section 4940(e). I	see page 18 of the instructions bef	fore maki	ng any entries	
(a)	(b)	(c)		(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col (b) divided by	col (c))
2008	37,200.	1,049,871.			543292462
2007	47,950.	1,207,998.			9 <u>69377433</u> 576429999
2006	37,950. 32,950.	829,249. 673,207.			894482678
2003	30,200.	642,498.			700403737
2004	30,200.	042,430.		0.04	700403737
2 Total of line 1, column (d)			2	0.21	683986309
•	or the 5-year base period - divide t	• • •			226828666
number of years the found	ation has been in existence if less	than 5 years	3	0.04	336797262
4 Enter the net value of nonc	charitable-use assets for 2009 from	n Part X, line 5	4		796,292.
5 Multiply line 4 by line 3			5		34,534.
6 Enter 1% of net investment	income (1% of Part I, line 27b)		6		78.
			7		34,612.
			Q		
If line 8 is equal to or gree Part VI instructions on page	ater than line 7, check the box is	n Part VI, line 1b, and complete t	hat part	using a 1% ta	x rate. See the

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	page	18 of tl	ne ins	tructio	ns)
1a	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 ruling letter if necessary - see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1				<u>78.</u>
	here X and enter 1% of Part I, line 27b					
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%					
	of Part I, line 12, col (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2				
3	Add lines 1 and 2	3				78.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4				IONE
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	5				<u>78.</u>
6	Credits/Payments					
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1,316.					
	Exempt foreign organizations-tax withheld at source					
	Tax paid with application for extension of time to file (Form 8868) 6c NONE					
d	Backup withholding erroneously withheld	,				
7	Total credits and payments. Add lines 6a through 6d	7			1,3	16.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			_ .	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					38.
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ 80 . Refunded ▶	11			1,1	<u>.58.</u>
	t VII-A Statements Regarding Activities		1			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did i				Yes	No
	participate or intervene in any political campaign?			1a	-	<u> X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19					37
	of the instructions for definition)?			<u>1b</u>		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any material	s				
	published or distributed by the foundation in connection with the activities			_		v
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:					ĺ
	(1) On the foundation ▶\$(2) On foundation managers. ▶\$					
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impo	sed				
_	on foundation managers \$			•		Х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			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, article			_		Х
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		$\frac{X}{X}$
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			<u>4a</u> 4b		
b	If "Yes," has it filed a tax return on Form 990-T for this year?			5	Х	
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				:	ĺ
O	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions:	that			'	
	conflict with the state law remain in the governing instrument?			6	Х	
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			7	Х	
, 8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of					
	instructions) > STMT 4					
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorner	 / Gene	ral			
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 494					
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV					
	27)7 If "Yes," complete Part XIV		_	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule lis					
	names and addresses	•		10		X
						

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here

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 charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?

3a Did the foundation hold more than a 2% direct or indirect interest in any business

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Х

NONE NONE NONE NONE

hours per week devoted to position

(a) Name and address of each employee paid more than \$50,000

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(e) Expense account,

other allowances

employee benefit

plans and deferred compensation

(c) Compensation

_	
Dago	

and Contractors (continued)	yees,
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	NONE
Total number of others receiving over \$50,000 for professional services	▶ NONE
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
1 NONE	
2	
3	
4	
Deat IV D. Currency of Program Polated Investments (see 22 of the instructions)	
Part IX-B Summary of Program-Related Investments (see page 23 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments See page 24 of the instructions	
3 NONE	
<u> </u>	
Total. Add lines 1 through 3 · · · · · · · · · · · · · · · · · ·	
Total Total Inics : through o	

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Par	winimum investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	in foundation	S,
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	753,298.
b	Average of monthly cash balances	1b	55,120.
C	Fair market value of all other assets (see page 24 of the instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	808,418.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see page 25	3	808,418.
4			
	of the instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	4	12,126.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	796,292.
6	Minimum investment return. Enter 5% of line 5	6	39,815.
Pai	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privat foundations and certain foreign organizations check here ▶ and do not complete this p		
1	Minimum investment return from Part X, line 6	1	39,815.
2a	Tax on investment income for 2009 from Part VI, line 5		•
Ь	Income tax for 2009. (This does not include the tax from Part VI.) 2b		
C	Add lines 2a and 2b	2c	78.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	39,737.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	39,737.
6	Deduction from distributable amount (see page 25 of the instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	39,737.
Pai	t XII Qualifying Distributions (see page 25 of the instructions)		•
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	38,200.
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	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	38,200.
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 page 26 of the instructions)	5	78.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	38,122.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wh qualifies for the section 4940(e) reduction of tax in those years	ether the foun	dation

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Undistributed Income (see page 26 of the instructions) (b) (d) (a) (c) Corpus Years prior to 2008 2008 2009 Distributable amount for 2009 from Part XI, 39,737. Undistributed income, if any, as of the end of 2009-Enter amount for 2008 only 14,080 NONE Total for prior years 20_07, 20___20_ Excess distributions carryover, if any, to 2009: From 2004 NONE **b** From 2005 NONE From 2006 NONE NONE From 2007 NONE From 2008 NONE Total of lines 3a through e Qualifying distributions for 2009 from Part XII, 38,200. line 4. ► \$ 14,080 a Applied to 2008, but not more than line 2a . . . Applied to undistributed income of prior years (Election NONE required - see page 26 of the instructions) c Treated as distributions out of corpus (Election NONE required - see page 26 of the instructions) 24,120. d Applied to 2009 distributable amount NONE Remaining amount distributed out of corpus . . . NONE NONE Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: NONE Corpus Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income. Subtract NONE line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has NONE been previously assessed d Subtract line 6c from line 6b Taxable amount - see page 27 of the instructions NONE Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page f Undistributed income for 2009. Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010 15,617. 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 NONE instructions) Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the NONE Excess distributions carryover to 2010. NONE Subtract lines 7 and 8 from line 6a Analysis of line 9 NONE a Excess from 2005 . . . Excess from 2006 . . . NONE c Excess from 2007 . . . NONE d Excess from 2008 . . . NONE e Excess from 2009 . . . NONE

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at any time during the year - see page 28 of the instructions.)

l	Information	Regarding	Foundation	Managers:
---	-------------	-----------	------------	-----------

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).)

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

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

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.

The name, address, and telephone number of the person to whom applications should be addressed SEE STATEMENT 7

The form in which applications should be submitted and information and materials they should include: SEE ATTACHED STATEMENT FOR LINE 2

c Any submission deadlines:

SEE ATTACHED STATEMENT FOR LINE 2

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

SEE ATTACHED STATEMENT FOR LINE 2

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Part XV Supplementary Information	n (continued)			
3 Grants and Contributions Paid D	uring the Year or Appr	oved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	recipient	contribution	
a Paid during the year				
SEE STATEMENT 16				
		1		
		ļ		
		:		
Total			▶ 3a	38,200.
b Approved for future payment				
,,				
				1
Total			▶ 3b	
	<u> </u>			

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	(a)	(b)	(c)	section 512, 513, or 514 (d)	Related or exempt function income (See page 28 of
1 Program service revenue	Business code	Amount	Exclusion code	Amount	(See page 28 of the instructions)
a		<u> </u>		<u> </u>	
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	17,958.	
5 Net rental income or (loss) from real estate					
a Debt-financed property			1	·	
b Not debt-financed property					
6 Net rental income or (loss) from personal property .					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	-26,697.	-
9 Net income or (loss) from special events			1		
10 Gross profit or (loss) from sales of inventory			-		
11 Other revenue a					
		"			
				-	
d					
		· · · · · · · · · · · · · · · · · · ·		-8,739.	
12 Subtotal Add columns (b), (d), and (e)					
13 Total. Add line 12, columns (b), (d), and (e)				13	-0,133.
(See worksheet in line 13 instructions on page 28 t Part XVI-B Relationship of Activities			omnt Burn	0000	
Line No. Explain below how each active the accomplishment of the formage 29 of the instructions.)					
			-		
		NOT APPLICABL	E		
·					
		_			
	••				
				 	•
			•		
-				·	
				· ·	
					
				_	

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations**

	organi Transf (1) Ca (2) Ot Other	he organization directly ction 501(c) of the Codizations? fers from the reporting foundathther assets transactions:	de (other than	section 501(c)(3) ncharitable exempt or	organizations) or in	section 527,	relating to	political	1a(1) 1a(2) 1b(1)	Yes	X X X
	(3) Re (4) Re (5) Lo	urchases of assets from a neental of facilities, equipment eimbursement arrangement oans or loan guarantees	it, or other asse	ets		<i>.</i> . 				1b(4) 1b(5)		X X X X
	Sharin If the value	erformance of services or m ng of facilities, equipment, r e answer to any of the of the goods, other as in any transaction or	mailing lists, otl e above is " ssets, or serv	her assets, or paid em Yes," complete the rices given by the	ployees following s reporting fo	 chedule. undation	Column (b)	should alv	ways show eived less	than	faır ı	X market market
(a) L	ine no	(b) Amount involved	(c) Name of r	noncharitable exempt or	ganization	(d) Des	scription of transf	ers, transacti	ons, and shar	ing arra	ngeme	ents
			-									
		foundation dispaths and	adia adh. affilia									
	section	 foundation directly or in n 501(c) of the Code (other s," complete the following s 	r than section 5	501(c)(3)) or in section	n 527 ⁷				Г	Ye	es Z	X No
		(a) Name of organization		(b) Type of	organization			(c) Description	on of relations	hip		
							-					
		penalties of perjury, I declare it is true, correct land comple	KVV	hus		05/	edules and stater based on all infor	Vice F			nowled	lge and wledge
Sign Here	aid arer's Only	Preparer's signature	M AND	T TRUST COME	Date 95/07	Date 7/2010			Preparer's number (Se page 30 of the	e Signa	iture o	
	Prep Use	Firm's name (or yours if self-employed), address, and ZIP code	THOMSO 9711 E RICHMO	FARRAR COURT,			NG) 3236	Phone no	804 - 7			(2009)

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

				VLOII	ĮP,	Date	Date sold
						acquired	Date Sold
Depreciation	Cost or	FMV as of	Adj. basis	Excess of FMV over	Γ	Gain	
allowable	basis	as or 12/31/69	12/31/69	adj basis	Ļ	(loss)_	-
	TOTAL LONG-	TERM CAPITA	AL GAIN DIV	IDENDS		25.	
				W		12/27/2006	12/07/2009
	89,588.00					3,748.00	
				-FD #134		12/22/2003	02/09/2009
	98,396.00	PE: SECURII	.165			-30,470.00	
oss)				• • • • • • • •		 -26,697.	
	Property Depreciation allowed/	Property Depreciation allowed/ other basis TOTAL LONG- 2500. IMPER PROPERTY TY 89,588.00 9460.412 MT PROPERTY TY 98,396.00	Depreciation allowed/ other basis 12/31/69 TOTAL LONG-TERM CAPITA 2500. IMPERIAL OIL LTI PROPERTY TYPE: SECURIT 89,588.00 9460.412 MTB EQUITY IN PROPERTY TYPE: SECURIT 98,396.00	Depreciation allowed/ allowable Cost or other as of 12/31/69 12/31/69 TOTAL LONG-TERM CAPITAL GAIN DIVIDED TOTAL LONG-TERM CAPITAL GAIN DIVIDED TOTAL SECURITIES 89,588.00 9460.412 MTB EQUITY INDEX-INST INPROPERTY TYPE: SECURITIES 98,396.00	Depreciation allowed/ other as of as of percent and other as of as of percent and other as of as of percent and pe	Depreciation allowed/ other basis 12/31/69 12/31/69 adj. basis Excess of FMV over adj basis 12/31/69 12/31/69 adj basis TOTAL LONG-TERM CAPITAL GAIN DIVIDENDS 2500. IMPERIAL OIL LTD COMMON NEW PROPERTY TYPE: SECURITIES 89,588.00 9460.412 MTB EQUITY INDEX-INST I-FD #134 PROPERTY TYPE: SECURITIES 98,396.00	Depreciation allowed/ as of as of FMV over adj basis ffwv over adj basis from closs) TOTAL LONG-TERM CAPITAL GAIN DIVIDENDS 25. 2500. IMPERIAL OIL LTD COMMON NEW PROPERTY TYPE: SECURITIES 89,588.00 9460.412 MTB EQUITY INDEX-INST I-FD #134 PROPERTY TYPE: SECURITIES 98,396.00 -30,470.00

FORM 990PF, PART I - TAXES

NET INVESTMENT INCOME	255.	151.	406.
REVENUE AND EXPENSES PER BOOKS	255. 737. 1,316.	151.	2,459.
DESCRIPTION	FOREIGN TAXES FEDERAL TAXES PRIOR YEAR BALAN FEDERAL ESTIMATED TAX DEPOSITS	FOREIGN TAXES ON QUALIFIED FOR	TOTALS

FORM 990PF, PART II - OTHER INVESTMENTS

	- 11		
DESCRIPTION	COST/ FMV C OR F	ENDING BOOK VALUE	ENDING FMV
	טטט	2,698. 12,365.	2,519. 12,389.
MIB EQUIII INDEA #134 HARBOR INTERNATIONAL FUND #11 MIDCAR GER 1 400 INDEV ER	J O C	90	
SKE SEK I 400 INDEX S RUSSELL 2000 INDEX	ນ ບ	6 , d 0 , d	ე ო
VANGUARD VALUE INDEX FUND #6	Ü	3,00	3,03
VANGUARD S/T CORP FUND #39	O	2,50	2,48
CRM MID CAP VALUE #32	Ü	1,97	8,94
NORTHERN SM CAP INDEX FUND	Ü	4,15	6,38
VANGUARD SM CAP VALUE #860	Ü	8,20	6,07
ALLIED IRISH BANKS PLC	ט	7,01	, 14
IMPERIAL OIL LIMITED	D	9,58	6,65
INT'L GAME TECH COM	U	9,29	6,31
MURPHY OIL CORP	U	0,85	1,30
VANGUARD FIXED INC SECS #28	ט	0,0	40,045.
VANGUARD TOT BD MKT INDEX #84	ט	00'0	1,03
CALIF INV TRUST S&P MIDCAP	ט	2,0	17,660.
VANGUARD INSTL INDEX FD #94	U	0′0	6,7
TOTALS	Si	929,034.	822,952.

FORM	990PF,	PART	III	-	OTHER	INCREASES	IN	NET	WORTH	OR	FUND	BALANCES
=====	======	=====	====	==	=====	========	===	====	=====	====	=====	=======
DESCR	RIPTION									AMO	DUNT	

ADJ TO TAX VALUE DUE TO ROUNDING

TOTAL

STATE(S) WHERE THE FOUNDATION IS REGISTERED

PA

STATEMENT 4

FORM 990PF, PART VII-A, LINE 14 - BOOKS ARE IN THE CARE OF

NAME: M AND T TRUST CO

MICHAEL L MYERS

ADDRESS: 21 E MARKET STREET

YORK, PA 17401

TELEPHONE NUMBER: (717)852-3011

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

M & T BANK

ADDRESS:

21 E MARKET STREET

YORK, PA 17401

TITLE:

CO-TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 20

COMPENSATION

9,684.

TOTAL COMPENSATION:

9,684.

==========

RECIPIENT NAME:

M AND T TRUST CO

ADDRESS:

PO BOX 2961

HARRISBURG, PA 17105

RECIPIENT'S PHONE NUMBER: 717-255-2174

FORM, INFORMATION AND MATERIALS:

IN WRITING

SUBMISSION DEADLINES:

NONE

RESTRICTIONS OR LIMITATIONS ON AWARDS:

NONE

RECIPIENT NAME: BIG BROTHERS BIG SISTERS OF AMERICA ADDRESS: 230 NORTH 13TH STREET PHILADELPHIA, PA 19107 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: N/A AMOUNT OF GRANT PAID 500. RECIPIENT NAME: BRETHREN HOUSING ASSOCIATION ADDRESS: 219 HUMMEL STREET HARRISBURG, PA 17104 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: N/AAMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: BETHESDA MISSION ADDRESS: P. O. BOX 3041 HARRISBURG, PA 17105 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

8

1,500.

RECIPIENT NAME: HARRISBURG ACADEMY ADDRESS: 10 ERFORD ROAD WORMLEYSBURG, PA 17043 RELATIONSHIP: NONE PURPOSE OF GRANT: **EDUCATIONAL** FOUNDATION STATUS OF RECIPIENT: N/A AMOUNT OF GRANT PAID 4,000. RECIPIENT NAME: THE ART ASSOCIATION OF HARRISBURG ADDRESS: 21 NORTH FRONT STREET HARRISBURG, PA 17101 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: N/AAMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: HARRISBURG SYMPHONY ADDRESS: 800 CORPORATE CIRCLE, SUITE 101 HARRISBURG, PA 17110 **RELATIONSHIP:** NONE PURPOSE OF GRANT: CHARITABLE

AMOUNT OF GRANT PAID

FOUNDATION STATUS OF RECIPIENT:

2,500.

ALEXANDER AND JANE BOYD T/A FOUNDATION 23-2251378 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME: HELP MINISTRIES INCORPORATED ADDRESS: 1148 W. BASLINE ROAD MESA, AZ 85210 **RELATIONSHIP:** NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: N/A AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: THE CATHEDRAL SCHOOL ADDRESS: 1616 SPRING STREET LITTLE ROCK, AZ 72206 RELATIONSHIP: NONE PURPOSE OF GRANT: EDUCATIONAL FOUNDATION STATUS OF RECIPIENT: N/AAMOUNT OF GRANT PAID 3,500. RECIPIENT NAME: CHANNELS FOOD RESCUE ADDRESS: 3305 NORTH 6TH STREET HARRISBURG, PA 17110 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE

AMOUNT OF GRANT PAID

FOUNDATION STATUS OF RECIPIENT:

1,000.

RECIPIENT NAME:
GAUDENZIA, INC.
ADDRESS:
106 WEST MAIN STREET
NORRISTOWN, PA 19401
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

N/A

RECIPIENT NAME:
DOWNTOWN DAILY BREAD
ADDRESS:
310 NORTH THIRD STREET
HARRISBURG, PA 17101
RELATIONSHIP:

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

N/A

NONE

RECIPIENT NAME:
HOSPICE OF CENTRAL PENNSYLVANIA

ADDRESS:

P. O. BOX 266 ENOLA, PA 17025

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

MEDICAL

FOUNDATION STATUS OF RECIPIENT:

N/A

 RECIPIENT NAME: NATIONAL MULTIPLE SCLEROSIS SOCIETY CENTRAL PA CHAPTER ADDRESS: 2040 LINGLESTOWN ROAD, SUITE 104 HARRISBURG, PA 17110 **RELATIONSHIP:** NONE PURPOSE OF GRANT: MEDICAL FOUNDATION STATUS OF RECIPIENT: N/A AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: THE NATIVITY SCHOOL OF HARRISBURG ADDRESS: 2135 NORTH 6TH STREET, 2ND FLOOR HARRISBURG, PA 17110 RELATIONSHIP: NONE PURPOSE OF GRANT: EDUCATIONAL FOUNDATION STATUS OF RECIPIENT: N/A3,500. AMOUNT OF GRANT PAID RECIPIENT NAME: THE SALVATION ARMY ADDRESS: 615 SLATERS LANE ALEXANDRIA, VA 22314 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE

AMOUNT OF GRANT PAID

N/A

FOUNDATION STATUS OF RECIPIENT:

1,000.

RECIPIENT NAME:
CENTRAL PENNSYLVANIA FOOD BANK
ADDRESS:
3908 COREY ROAD
HARRISBURG, PA 17109
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
N/A
AMOUNT OF GRANT PAID

RECIPIENT NAME:

ST. FRANCIS OF ASSISI KITCHEN

ADDRESS:

500 PENN AVENUE

SCRANTON, PA 18509-3116

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

N/A

RECIPIENT NAME:

SAINT MARGARET MARY SCHOOL

ADDRESS:

2826 HERR STREET

HARRISBURG, PA 17103

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EDUCATIONAL

FOUNDATION STATUS OF RECIPIENT:

N/A

13

1,500.

RECIPIENT NAME: ST. STEPHEN'S SCHOOL ADDRESS: 3900 MECHANICSVILLE ROAD WHITEHALL, PA 18052 RELATIONSHIP: NONE PURPOSE OF GRANT: **EDUCATIONAL** FOUNDATION STATUS OF RECIPIENT: N/A AMOUNT OF GRANT PAID 3,500. RECIPIENT NAME: VOLUNTEERS OF AMERICA ADDRESS: 1660 DUKE STREET ALEXANDRIA, VA 22314 RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: N/A AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: WICKENBURG HUMANE SOCIETY ADDRESS: 4000 INDUSTRIAL ROAD WICKENBURG, AZ 85390 RELATIONSHIP: NONE PURPOSE OF GRANT:

AMOUNT OF GRANT PAID

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

1,000.

RECIPIENT NAME: WOODBERRY FOREST SCHOOL ADDRESS: 402 WOODBERRY STATION WOODBERRY FOREST, VA 22989 RELATIONSHIP: NONE PURPOSE OF GRANT: **EDUCATIONAL** FOUNDATION STATUS OF RECIPIENT: N/A AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: THE HILL SCHOOL ADDRESS: 717 EAST HIGH STREET POTTSTOWN, PA 19464 RELATIONSHIP: NONE PURPOSE OF GRANT: **EDUCATIONAL** FOUNDATION STATUS OF RECIPIENT: N/A 1,000. AMOUNT OF GRANT PAID RECIPIENT NAME: JAKE GITTLEN MEM GOLF TOURNAMENT FOR CANCER RESEARCH ADDRESS: 500 UNIVERSITY DRIVE HERSHEY, PA 17033 **RELATIONSHIP:** NONE PURPOSE OF GRANT: MEDICAL

AMOUNT OF GRANT PAID

N/A

FOUNDATION STATUS OF RECIPIENT:

1,500.

ALEXANDER AND JANE BOYD T/A FOUNDATION 23-2251378 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: HERSHEY MEDICAL CENTER FOR CANCER RESEARCH ADDRESS: P. O. BOX 852 HERSHEY, PA 17033-0852 **RELATIONSHIP:** NONE PURPOSE OF GRANT: MEDICAL FOUNDATION STATUS OF RECIPIENT: N/A -1,000. AMOUNT OF GRANT PAID

RECIPIENT NAME:
BATES COLLEGE
ADDRESS:
2 ANDREWS ROAD
LEWISTON, ME 04240-6028
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
EDUCATIONAL
FOUNDATION STATUS OF RECIPIENT:
N/A

AMOUNT OF GRANT PAID 500.

TOTAL GRANTS PAID:

38,200.

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service Name of estate or trust

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No 1545-0092

Employer identification number

2009

ALEXANDER AND JANE BOYD T/A FOUNDATION 23-2251378 Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less (f) Gain or (loss) for (e) Cost or other basis (b) Date acquired (c) Date sold (a) Description of property (d) Sales price (see page 4 of the the entire year (Example 100 shares 7% preferred of "Z" Co) (mo , day, yr) (mo , day, yr) Subtract (e) from (d) instructions) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 3 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2008 Capital Loss 4 Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, Long-Term Capital Gains and Losses - Assets Held More Than One Year (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold (d) Sales price (see page 4 of the instructions) the entire year Subtract (e) from (d) (Example 100 shares 7% preferred of "Z" Co) (mo, day, yr) (mo, day, yr) 6a LONG-TERM CAPITAL GAIN DIVIDENDS STMT 1 25. b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b............... -26,722 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 9 9 10 10 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2008 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f). Enter here and on line 14a, <u>-26,697</u> For Paperwork Reduction Act Notice, see the Instructions for Form 1041. Schedule D (Form 1041) 2009

Schedule D (Form 1041) 2009 Part III Summary of Parts I and II		(1) Beneficiaries	2 (2) 5-4-1-1	Page 2
Caution: Read the instructions before completing this	nart	(see page 5)	s' (2) Estate' or trust's	1 (3) (0)
13 Net short-term gain or (loss)	13	(see page 3)	01 (103)	
14 Net long-term gain or (loss):	'			
a Total for year	14a		i	-26,697.
b Unrecaptured section 1250 gain (see line 18 of the wrksht.)				20,057.
c 28% rate gain				
15 Total net gain or (loss). Combine lines 13 and 14a	15			-26,697.
Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or For		T. Part I. line 4a). If	\ lines 14a and 15_c	
to Part V, and do not complete Part IV If line 15, column (3), is a net loss, complete F				
Part IV Capital Loss Limitation				
16 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, P	art I, Iır	e 4c, if a trust), the	smaller of:	
a The loss on line 15, column (3) or b \$3,000			16	3,000)
a The loss on line 15, column (3) or b \$3,000 Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, pag	e 1, lin	e 22 (or Form 990-	T, line 34), is a loss	, complete the Capital Loss
Carryover Worksheet on page 7 of the instructions to figure your capital loss carryove Part V Tax Computation Using Maximum Capital Gains Rate		-		
		٠:		ad in Daniel on Daniel and
Form 1041 filers. Complete this part only if both lines 14a and 15 in colu there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mo			amount is entere	ed in Part I or Part II and
Caution: Skip this part and complete the worksheet on page 8 of the instru				
Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or		•		
Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.				
Form 990-T trusts. Complete this part only if both lines 14a and 15 ar				
of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this pa	rt and	complete the wo	orksheet on page	8 of the instructions if
either line 14b, col (2) or line 14c, col. (2) is more than zero.				
17 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	4)	. 17		
18 Enter the smaller of line 14a or 15 in column (2)			i i	
but not less than zero		_		
19 Enter the estate's or trust's qualified dividends				
from Form 1041, line 2b(2) (or enter the qualified				
dividends included in income in Part I of Form 990-T) 19		⊣		
20 Add lines 18 and 19		_		
21 If the estate or trust is filing Form 4952, enter the				
amount from line 4g; otherwise, enter -0 ▶ 21		_		
Subtract line 21 from line 20. If zero or less, enter -0		- 		
Subtract line 22 from line 17. If zero or less, enter -0		. 23		
24 Enter the smaller of the amount on line 17 or \$2,300		. 24		
25 Is the amount on line 23 equal to or more than the amount on line 24				
Yes. Skip lines 25 and 26; go to line 27 and check the "No" box				
No. Enter the amount from line 23				
Subtract line 25 from line 24		. 26		
27 Are the amounts on lines 22 and 26 the same?		07	İ	
Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin	ne 22	27		
28 Enter the amount from line 26 (If line 26 is blank, enter -0-)		20		
26 Enter the amount from line 26 (if line 26 is blank, enter -0-)	• • • •	. 28		
29 Subtract line 28 from line 27		29		
***************************************		· <u> </u>	30	
30 Multiply line 29 by 15% (.15)				'
(see the Schedule G instructions in the instructions for Form 1041)				1
1999 the deficación de matractions in the matractions for Form 1041/.	• • • •			<u> </u>
32 Add lines 30 and 31				,
33 Figure the tax on the amount on line 17. Use the 2009 Tax Rate				
(see the Schedule G instructions in the instructions for Form 1041).				3
Tax on all taxable income. Enter the smaller of line 32 or line 33 l				
G, line 1a (or Form 990-T, line 36)			-	ı

Part Long-Term Capital Gains a		neid iviore i na			
(a) Description of property (Example 100 sh. 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
6a 2500. IMPERIAL OIL LTD COMMON NEW	12/27/2006	12/07/2009	93,336.00	89,588.00	3,748.00
9460.412 MTB EQUITY INDEX-INST I-FD #134	12/22/2003	02/09/2009	67,926.00	98,396.00	-30,470.00
		·			
<u> </u>					
					
-					
·					
6b Total. Combine the amounts in column	mn (f) Enter here an	d on Schedule D, Iı	ne 6b		-26,722.0

FEDERAL	${\tt CAPITAL}$	GAIN	DIVIDENDS

LONG-TERM CAPITAL GAIN DIVIDENDS

15% RATE CAPITAL GAIN DIVIDENDS

CALIFORNIA S&P MIDCAP INDEX FUND

TOTAL 15% RATE CAPITAL GAIN DIVIDENDS

TOTAL LONG-TERM CAPITAL GAIN DIVIDENDS

25.00

25.00

25.00

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STATEMENT 1