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**Return of Private Foundation** 

Section 4947(a)(1) Nonexempt Charitable	rust
Treated as a Private Foundation	

OMB No 1545-0052 2000

Internal Revenue S			able to use a c	opy of th			orting requirements	<u> </u>
	year 2009, or tax year begi					and endin	<del></del>	, 20
G Check all t	that apply Initial retu	ırn	Initial		of a former pu	iblic charity	<u>/</u>	Fınal return
	Amended	d return		Addres	ss change		Name change	
	Name of foundation						A Employer iden	tification number
Use the IRS	CRIMSON LION FOUN	DATION					,	
label.	C/O JACQUELINE R.	MCCOY,	TRUSTEE				26	6-1388142
Otherwise,	Number and street (or P O bo	x number if ma	ail is not delivered	to street	address)	Room/suit	e B Telephone number (s	see page 10 of the instructions)
print						1		
or type. See Specific	56 CHESTNUT STREE	T					(	) –
Instructions.	City or town, state, and ZIP c	ode				t ·	C If exemption appli	
mon de nomo.							pending check hi D 1. Foreign organi	<b>►</b>
	WESTON, MA 02493							zations meeting the
H Check typ	e of organization X Sec	ction 501(c)	(3) exempt p	rivate for	undation			k here and attach
	4947(a)(1) nonexempt charitable	1			vate foundati	on		
	et value of all assets at end	<del></del>	nting method			rual	l '	on status was terminated
	om Part II, col (c), line		ner (specify)	۰		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1	7(b)(1)(A), check here
16) ▶ \$	948,297.		column (d) mi	ıst be or	n cash basis )			s in a 60-month termination 7(b)(1)(B), check here
	ysis of Revenue and Exper	<del>- 1</del>	(2)				under seeden een	(d) Disbursements
total	of amounts in columns (b), (c), a	and (d)	(a) Revenue expenses		(b) Net inve		(c) Adjusted net	for charitable
	not necessanly equal the amou nn (a) (see page 11 of the instru		books	pei	incom	ne	ıncome	purposes (cash basis only)
	<del></del>		741	,748.		- +		(casii basis biliy)
	rtions, gifts, grants, etc received (attach s	equired to	, 1.2	,			· · · · · · · · · · · · · · · · · · ·	
2 Check	attach con b		<del></del>	12.		12.		ATCH 1
	t on savings and temporary cash inv		1.9	3,247.	-	8,247.		ATCH 2
1	nds and interest from secunties		10	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		10,247.		AICH Z
1	rents					+		
	ital income or (loss)		-526	5,044.		+		
ນ 6 a Netga ⊇ b Gross:	n or (loss) from sale of assets not or sales pnce for all 1 1 2	6,832.	-32(	,044.				
assets	on line 6a	<del></del>			1 10	0,713.		
7 Capita	Il gain net income (from Part IV,	΄ Γ			1,10	10,713.		
1	ort-term capital gain							
	e modifications · · · · · · · · · · · · · · · · · · ·							
and alle	owances · · · ·							
1	Cost of goods sold .				<del></del>			
	profit or (loss) (attach schedule							
1	income (attach schedule)	<b>I</b>	22	3,963.	1 11	0 072		
1	Add lines 1 through 11			, 903.	1,11	8,972.		
<b>I</b>	ensation of officers, directors, trustee		<del></del>		<u> </u>			
<b>I</b>	employee salaries and wages	<u>.</u>	<del>,</del>		<u> </u>			
າ 15 Pense	on plans, employee benefits.	<b>ገ</b> ⊦						
16 a Legal	fees (\$1 adv tido) (\$1.00)	<u>.</u> ∤ ∤						
j b Actou	nting fees (attach schedule)	<u> </u>	<del></del>	·				
c Other	professional fees (attach) sched	))  <b>e</b> )						
17 Inter	\$\	2 istructions)* *		770				
18 Taxes			3.	3 <b>,</b> 772.				
19 Depre	cialion (attach schedule) and de	eptetion .						
20 Occup	pancy							
21 Travel	, conferences, and meetings .	1			<u> </u>			
22 Printir	ig and publications				<u></u>			
23 Other	expenses (attach schedule) .			10.				
24 Total	operating and administrative e	xpenses.						
Add III	nes 13 through 23	L		3,782.				
25 Contri	butions, gifts, grants paid			0,000.				1,970,00
26 Total ex	penses and disbursements. Add lines	24 and 25	2,003	3,782.				1,970,00
27 Subtra	act line 26 from line 12							
15 Pensar 16 a Legal b Accou- c Other 17 Interes 18 Taxes 19 Depre 20 Occur 21 Travel 22 Printir 23 Other 24 Total Add Interes 26 Total ex 27 Subtra a Excess b Net in	of revenue over expenses and disburs	ements	-1,769	9,819.				
b Net in	vestment income (if negative,	enter -0-)			1,11	8,972.		
c Adjus	ted net income (if negative, en	ter -0-)					-0	-

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. 9514102000 95078S 0468 11/2/2010 3:03:59 PM V 09-8.4

ATCH 3

Form 990-PF (2009)

Part II Bala		Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year		End of year			
		<u> </u>	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1		ıng	1,716,945.	948,296.	948,296.		
	2	Savings and temporary of	cash investments					
	3	Accounts receivable						
		Less allowance for doub	otful accounts	43.	1.	1.		
	4	Pledges receivable ▶_						
		Less allowance for doub	otful accounts					
	5		<del></del>					
	6		ficers, directors, trustees, and other					
			ich schedule) (see page 16 of the instructions)					
	7		ceivable (attach schedule)					
	•		otful accounts					
	8	Inventones for sale or us						
ets	_					<del></del>		
Assets	9		eferred charges					
⋖	10 a	Investments - U.S. and state	government obligations (attach schedule)	071 100				
			stock (attach schedule) ATCH 4		0.	<u> </u>		
	11 C	Investments - land, buildings						
		Less accumulated deprecia (attach schedule)	tion					
	12	Investments - mortgage I	loans					
	13	Investments - other (attach	ch schedule)					
	14	Land, buildings, and						
		Less accumulated deprecial	tion					
	15	Other assets (describe	<b>&gt;</b> )			-11		
	16		pleted by all filers - see the					
		, ,	age 1, item l)	2,688,116.	948,297.	948,297.		
_	17		ccrued expenses					
	18							
s	19							
Ë	20	belefied revenue						
Ē			s, trustees, and other disqualified persons					
Liabilities	21		es payable (attach schedule)					
	22	Other liabilities (describe	▶)					
	23	Total liabilities (odd luss	a 17 through 22)					
_	23		s 17 through 22)					
			ow SFAS 117, check here ► L 4 through 26 and lines 30 and 31.					
S	24	•						
2	25		1					
ā	26							
or Fund Balance	20	Foundations that do						
힡			not follow SFAS 117, blete lines 27 through 31.					
Ē	27	-	· · · · · · · · · · · · · · · · · · ·					
		Capital stock, trust princip	· · · · · · · · · · · · · · · · · · ·					
Net Assets	28		land, bldg, and equipment fund	2,688,116.	040 007			
ASS	29		ated income, endowment, or other funds	2,088,116.	948,297.			
et/	30		balances (see page 17 of the					
Ž		instructions)		2,688,116.	948,297.			
	31		assets/fund balances (see page 17					
_		of the instructions)		2,688,116.	948,297.			
_			anges in Net Assets or Fund					
1			ances at beginning of year - Part II, co	lumn (a), line 30 (must ag	ree with			
	end-	of-year figure reported	on prior year's return)			2,688,116.		
2	Ente	r amount from Part I, Iir	07-		· · · · · · · <del>   </del>	-1,769,819.		
3	Othe	r increases not include	ne 27a d in line 2 (itemize)   ▶	MENT 5	3	30,000.		
			, , , , , , , , , , , , , , , , , , , ,		<del></del>	948,297.		
		eases not included in li		• • • • • • • • • • • • • • • • • • • •	5			
			ances at end of year (line 4 minus line	5) - Part II. column (h) lin		948,297.		
<u> </u>								

Part IV Capital Gains	and Losses for Tax on Inv	restment Income		_	, age <b>v</b>
(a) List and	(b) How acquired	(c) Date acquired	(d) Date sold		
2-story br	P-Purchase D-Donation	(mo , day, yr )	(mo , day, yr )		
1a SEE PART IV SCHEE	DULE	*** · · · · · · · · · · · · · · · · · ·			
<u>b</u>					
<u>C</u>					
<u>d</u>			ļ		
<u>e</u>	(f) Depreciation allowed	(g) Cost or other basis	<b></b>		L
(e) Gross sales price	(h) Gain or (loss) (e) plus (f) minus (g)				
a				<del></del>	
<u>b</u>					
C					
d			<del> </del>	-	
e Complete only for constants	/b) and a	but the foundation on 12/21/60			
Complete only for assets show		Gains (Col (h) g (k), but not less t			
(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	COI	Losses (from co	
a			<u> </u>	· · · · · · · · · · · · · · · · · · ·	
b			ļ		
С			ļ	<del></del>	<del></del>
d	<del> </del>				
<u>e</u>					
2 Capital gain net income or (		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2	1,	100,713.
· · · · · · · · · · · · · · · · · · ·	or (loss) as defined in sections 1222				
<u> </u>	ine 8, column (c) (see pages 13 and				
If (loss), enter -0- in Part I, li	ne 8	<u></u> ,	3		
Part V Qualification Un	der Section 4940(e) for Reduc	ed Tax on Net Investment Inc	ome		
		able amount of any year in the base	period?	[	Yes X No
		ee page 18 of the instructions before	a makına :	any entries	
(a)	· · · · · · · · · · · · · · · · · · ·	T	Inaking	(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra (col (b) divided by	col (c))
2008	1,476,468.	1,812,176.	ļ		0.814749
2007	0.	671,514.	<del> </del>		0.000000
2006			<del> </del>		
2005					
2004					
2 Tatal of line 1 column (d)					0.814749
<ul><li>2 Total of line 1, column (d)</li><li>3 Average distribution ratio for</li></ul>	or the 5-year base period - divide th	to total on line 2 by 5 or by the	2		0.814749
<u> </u>	ation has been in existence if less the	•	3		0.407375
number of years the found	ation has been in existence in less ti	han 5 years			0.407373
4 Enter the net value of nonc	charitable-use assets for 2009 from	Part X, line 5	4	1,	932,034.
5 Multiply line 4 by line 3			5		787,062.
6 Enter 1% of net investment	t income (1% of Part I, line 27b)		6		11,190.
7 Add lines 5 and 6			7		798,252.
8 Enter qualifying distribution If line 8 is equal to or gre Part VI instructions on pag	eater than line 7, check the box	in Part VI, line 1b, and complete	8 that part	1, using a 1% ta	970,000. x rate See the

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the Ins	tructio	nsj	
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)			
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check		11,1	<u>90.</u>
	here ► X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% $\mathcal J$ 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		11,1	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		11,1	<u>90.</u>
6	Credits/Payments			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 9,500.			
b	Exempt foreign organizations-tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c 9,500.			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		19,0	
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached			28.
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		7,7	82.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 7,782. Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No X
	participate or intervene in any political campaign?	1a		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	ا ا		Х
	of the instructions for definition)?	1b		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			ĺ
	published or distributed by the foundation in connection with the activities			X
С	Did the foundation file Form 1120-POL for this year?	1c		<del>  ^</del> -
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation  \$ (2) On foundation managers  \$			ĺ
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			ĺ
	on foundation managers > \$			x
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u> </u>
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	3		x
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	4a		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4b		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	5		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			
_	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			
	<ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that</li> </ul>			1
		6	Х	
-	conflict with the state law remain in the governing instrument?		Х	
7	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	_ <del></del>		
8a	instructions) $\blacktriangleright$ MA,			
b	• • • • • • • • • • • • • • • • • • • •	۱	x	
	(or designate) of each state as required by General Instruction G2If "No," attach explanation	8b	<del>-^-</del>	<del> </del>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			1
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			x
	27)? If "Yes," complete Part XIV	9		<del>  ^</del>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		х

. 4b X

Х

enterprise at any time during the year?

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? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)

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?

. . . . ▶ | Form **990-PF** (2009)

NONE

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

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Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emplo and Contractors (continued)	oyees,
3 Five hig	hest-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		
Total numi	per of others receiving over \$50,000 for professional services	▶ NONE
		NOINI
Part IX-A	Summary of Direct Charitable Activities	
	idation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number	Expenses
	ions and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 N/A		
		,
2		
3		
J		
4		
Part IX-E	<u> </u>	
Describe th	e two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE		
2		
All other pro	gram-related investments. See page 24 of the instructions	
3 NONE		
3 _1213		
		ı

Form **990-PF** (2009)

Form 990-PF (2009). 26-1388142

1 01111	20-1300142		Page o
Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	n foundatio	ns,
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	328,022.
b	Average of monthly cash balances	1b	1,633,434.
C		1c	0.
d	Total (add lines 1a, b, and c)	1d	1,961,456.
е			
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,961,456.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	29,422.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,932,034.
6	Minimum investment return. Enter 5% of line 5	6	96,602.
Pa	rt XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private		
	foundations and certain foreign organizations check here ▶ and do not complete this pa	irt )	
1	Minimum investment return from Part X, line 6	1	96,602.
2 a	Tax on investment income for 2009 from Part VI, line 5 2a 11,190.		
b	Income tax for 2009 (This does not include the tax from Part VI) 2b		
C	Add lines 2a and 2b	2c	11,190.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	85,412.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	85,412.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	85,412.
Pa	urt 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	1,970,000.
b		1b	0.
2	Program-related investments - total from Part IX-B  Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,970,000.
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	11,190.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,958,810.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth	ner the found	lation
	qualifies for the section 4940(e) reduction of tax in those years		

Form **990-PF** (2009)

Pa	rt XIII Undistributed Income (see page	26 of the instruction	ns)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years pnor to 2008	2008	2009
	line 7				85,412.
2	Undistributed income, if any, as of the end of 2009				
а	Enter amount for 2008 only				
b	Total for prior years 20 07, 20 06, 20 05			<del></del>	
3	Excess distributions carryover, if any, to 2009				}
а	From 2004				
b	From 2005				
C	From 2006				
d	From 2007				
е	From 2008				
f	Total of lines 3a through e	1,411,611.			
4	Qualifying distributions for 2009 from Part XII,				
	line 4 ▶ \$1,970,000.				
а	Applied to 2008, but not more than line 2a				
b	Applied to undistributed income of prior years (Election				
	required - see page 26 of the instructions)				<del>                                     </del>
С	Treated as distributions out of corpus (Election				
	required - see page 26 of the instructions)				85,412.
	Applied to 2009 distributable amount	1,884,588.			65,412.
е 5	Remaining amount distributed out of corpus  Excess distributions carryover applied to 2009	1,004,000.			
•	(If an amount appears in column (d), the same				
_	amount must be shown in column (a) )				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,296,199.			
	Prior years' undistributed income Subtract				
	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	:			
	been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
	amount - see page 27 of the instructions				
е	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page	,			
	27 of the instructions				
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1 This amount must be				
7	distributed in 2010				
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
8	instructions)				<u> </u>
-	applied on line 5 or line 7 (see page 27 of the				
9	instructions)				
7	Subtract lines 7 and 8 from line 6a	3,296,199.			
10	Analysis of line 9	· · · · · · · · · · · · · · · · · · ·			
	Excess from 2005				
	Excess from 2006				
С					
d	Excess from 2008 1,411,611.				
	Excess from 2009 1,884,588.				

Pa	rt XIV Private Oper	ating Foundations (	see page 27 of the	instructions and Par	t VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has	_		at it is a private opera	iting	
_	foundation, and the ruling				, <b>&gt;</b>	10.40()(5)
b	Check box to indicate whe	Tax year	ivate operating foundation	on described in section  Prior 3 years	4942()	(3) or 4942(j)(5)
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	for the minimum investment return from Part X for each	(2) 2505	(5) 2000	(0) 2007	(4) 2000	
	year listed					ļ
þ	85% of line 2a					
C	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 a	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test - enter					
	<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under section</li></ul>					
b	4942(j)(3)(B)(i) "Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed					
c	"Support" alternative test - enter					
	(1) Total support other than gross investment income (interest, dividends, rents,					
	payments on secunities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as	,				
	provided in section 4942 (j)(3)(B)(iii)					
	port from an exempt organization					
	(4) Gross investment income	1 ( ) ( )		1 '6 '1 6 1	#: I I ## 000	•
Pa	Int XV Supplement at any time (	ary information (C during the year - se	omplete this part e page 28 of the ii	only if the foundant	ation nad \$5,000	or more in assets
1	Information Regarding			· · · · · · · · · · · · · · · · · · ·		
а	List any managers of before the close of any	the foundation who h	nave contributed money have contributed	re than 2% of the tota more than \$5,000) (S	l contributions receiv ee section 507(d)(2))	ed by the foundation
	JONATHAN LA		•	, ,	, ,	
<u>_</u>	List any managers of		own 10% or more of	of the stock of a corpo	oration (or an equally	large portion of the
Ü				n has a 10% or greater		large portion of the
_	N/A	<del></del>		<del>,</del>		
2	Information Regarding			-		
		for funds. If the found	dation makes gifts,	to preselected charit grants, etc (see page d d		
а	The name, address, ar	nd telephone number of	the person to whom	applications should be a	iddressed	
b	The form in which appl	ications should be subr	nitted and information	and materials they sho	uld include	
	N/A					
С	Any submission deadlii	nes				
_	N/A					
d	Any restrictions or li factors	imitations on awards,	, such as by geogr	apnicai areas, charita	DIE TIEIDS, KINDS OF	institutions, or other
	N/A					

Part XV Supplementary Information (c	ontinued)			
3 Grants and Contributions Paid Dur	ing the Year or App		uture Payment	<del></del>
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year				
ATTACHMENT 7				
			1	
			1	
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		1		
			1	
			İ	
	1			
Total			▶ 3a	1,970,000
Total b Approved for future payment	<u> </u>	T		1/3/0/000
b Approved for fature payment				
	1			
	1			
				1
			<u> </u>	
Total	<u> </u>		▶ 3b	

Part XVI-	A Analysis of Income-Produ	ucing Act	ivities			
	amounts unless otherwise indicated.		ated business income	Excluded by	section 512, 513, or 514	(e)
-	service revenue	(a) Business code	(b)	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
	i service revenue			<del></del>		trie instructions )
a b				<del>                                     </del>		
	<del> </del>					
d				<del> </del>		
e				<del></del>		
f						****
g Fees	and contracts from government agencies					
_	ship dues and assessments					
	n savings and temporary cash investments			14	12.	·
4 Dividend	is and interest from securities			14	18,247.	
5 Net renta	al income or (loss) from real estate					<del></del>
a Deb	t-financed property					
<b>b</b> Not	debt-financed property					
	Income or (loss) from personal property .					
	vestment income					
	oss) from sales of assets other than inventory	ļ		18	-526,044.	
	me or (loss) from special events	ļ				
	rofit or (loss) from sales of inventory					
	venue a					
ь				ļ		
° —						
d				<del> </del>		
e	Add salvens (b) (d) and (s)	-		<u> </u>	-507,785.	
	Add columns (b), (d), and (e)				<del></del>	-507,785.
	dd line 12, columns (b), (d), and (e) neet in line 13 instructions on page 28 to			• • • • • •		30,7,100.
Part XVI				cempt Puri	ooses	
Line No.  ▼	Explain below how each activithe accomplishment of the for page 29 of the instructions )					
_						
					<del></del>	
		-				
			<del></del>			
			NOT APPLICABLE	 E		
			***************************************			
		<del></del>				
		<del></del>	<u> </u>			
					· · · · · · · · · · · · · · · · · · ·	

Par	t XVII	Information Exempt Orga	•	ransfers To a	and Transa	ctions a	nd Relation	ships V	Vith N	lonc	hari	table
1		he organization directly									Yes	No
		ction 501(c) of the Contractions?	ode (other than	section 501(c)(3)	) organizations	or in se	ection 527, relat	ng to p	olitical			
а	Trans	fers from the reporting fou	ndation to a nonc	haritable exempt or	ganızatıon of							
	(1) C	ash				<i>.</i>				1a(1)		X
	<b>(2)</b> O	ther assets								1a(2)		X
þ		transactions										١.,
		ales of assets to a noncha								1b(1)		X X
		urchases of assets from a								1b(2)		X
		ental of facilities, equipme							,	1b(3)		X
		eimbursement arrangeme								1b(4)		X
		oans or loan guarantees								1b(5)		X
		erformance of services or					• • • • • • • •			1b(6)		X
		ng of facilities, equipment,	-							1c_		1
d		e answer to any of t										
		of the goods, other										
	value	in any transaction or	snanng arrang	gement, snow in	column (a) (i	ie value o	or the goods, o	ther assi	ets, or	service	es re	ceivea
(a) I	ine no	(b) Amount involved	(c) Name of r	oncharitable exempt o	rganization	(d) Descr	iption of transfers, tra	nsactions	and sharin	o arran	aemei	nts
10) 1		N/A	(e) riame or i		- gameaaan	N/A	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			9	90	
		11,711					<del></del>	·				
							····					
										•		
					•							
				<del></del>							•	
							,		•			
	sectio	e foundation directly or on 501(c) of the Code (oth s," complete the following	ner than section	•		nore tax-ex	empt organizatio	ns descri	bed in [	Y	es 🗌	X No
		(a) Name of organization	1	(b) Type	of organization		(c) D	escription of	f relations	nip		
					<del>.</del> .							
	Under belief <sub>c</sub>	penalties of penury I decl	are that I have ex plete Declaration	amined this return, in of preparer (other tha	ncluding accompa an taxpayer or fide	nying schedi iciary) is bas	ules and statements sed on all informatio /	, and to the finding of which	he best o preparer	fmyk hasa	nowled ny kno	dge and owledge
	<b>)</b> –			·		11/4/	<u>/0</u>	1111111	re e			
a e	S	ignature of officer of trustee	$- \bigcirc$			Date	Title					
Ĭ		$ $ $\cap$	24 0		Date		Check if		eparer's i imber (Se			on
Sign Here	Paid Preparer's Use Only	Preparer's signature	Hude	<u> </u>	11/03	2010	self-employed	pa P(	ge 30 of th	e instru 572		
	Prep. Use	Firm's name (or yours if		WATERHOUSECO	OPERS LLP		EIN	<b>I</b> ▶ 13·	-40083	324		
1	_	I SHIT-EMPIONED SANTAGE		11-8 STDFFF								

02110

Form **990-PF** (2009)

Phone no 617-530-5384

125 HIGH STREET

ΜA

BOSTON,

self-employed), address,

and ZIP code

### Schedule B

**Schedule of Contributors** ► Attach to Form 990, 990-EZ, or 990-PF. OMB No 1545-0047

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number CRIMSON LION FOUNDATION

C/O JACQUELINE R. MO	CCOY, TRUSTEE		26-1388142
Organization type (check one	9)		
Filers of:	Section:		
Form 990 or 990-EZ	501(c)( ) (enter number) organizat	ion	
	4947(a)(1) nonexempt charitable trust	not treated as a private found	dation
	527 political organization		
Form 990-PF	m 990-PF X 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust t	reated as a private foundation	
	501(c)(3) taxable private foundation		
	overed by the <b>General Rule</b> or a <b>Special Rule</b> . ), (8), or (10) organization can check boxes for both	th the General Rule and a Spe	cial Rule See
General Rule			
<del>-</del>	filing Form 990, 990-EZ, or 990-PF that received, one contributor. Complete Parts I and II	during the year, \$5,000 or mo	re (in money or
Special Rules			
sections 509(a)(1) a	o)(3) organization filing Form 990 or 990-EZ that me and 170(b)(1)(A)(vi), and received from any one co of the amount on (i) Form 990, Part VIII, line	ontributor, during the year, a co	ontribution of the greater
the year, aggregate	o(7), (8), or (10) organization filing Form 990 or 99 contributions of more than \$1,000 for use excluses, or the prevention of cruelty to children or animal	usively for religious, charitable,	, scientific, literary, or
the year, contribution aggregate to more to year for an exclusive applies to this organ	p(7), (8), or (10) organization filing Form 990 or 99 or so for use <i>exclusively</i> for religious, charitable, etc. han \$1,000. If this box is checked, enter here the <i>ely</i> religious, charitable, etc., purpose. Do not comparation because it received nonexclusively religions.	c, purposes, but these contribitotal contributions that were re nplete any of the parts unless the us, charitable, etc, contribution	utions did not ceived during the he <b>General Rule</b> ns of \$5,000 or more
990-EZ, or 990-PF), but it mu	is not covered by the General Rule and/or the Spost answer "No" on Part IV, line 2 of its Form 990, f, to certify that it does not meet the filing requirem	or check the box on line H of it	ts Form 990-EZ,
For Privacy Act and Paperwork Red for Form 990, 990-EZ, or 990-PF.	uction Act Notice, see the Instructions	Schedule B	(Form 990, 990-EZ, or 990-PF) (2009)

•	of	of Part I

Name of o	C/O JACQUELINE R. MCCOY, TRUS	TEE	26-1388142
Part I	Contributors (see instructions)		·
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	JONATHAN S. LAVINE		Person X Payroll
	56 CHESTNUT STREET	<b>\$\$741,748.</b>	Noncash X
	WESTON, MA 02493		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	· (b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

of Part II

CRIMSON LION FOUNDATION Name of organization C/O JACQUELINE R. MCCOY, TRUSTEE Page\_\_\_\_ of \_\_\_\_ o
Employer identification number

26-1388142

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1_	23,134 SHS INNOPHOS 13,284 SHS WARNER CHILCOTT	\$	VARIOUS
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

# FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

NET INVESTMENT INCOME	12.	12.
REVENUE AND EXPENSES PER BOOKS	12.	12.
		TOTAL
DESCRIPTION	JP MORGAN #Q 12973-00-6	

r FROM SECURITIES	
INTEREST FR	
DIVIDENDS AND INTEREST	
, PART I -	
FORM 990PF,	

NET INVESTMENT INCOME	710.	18,247.
REVENUE AND EXPENSES PER BOOKS	710.	18,247.
		TOTAL
DESCRIPTION	JP MORGAN #Q 12973-00-6 CREDIT SUISSE #2G2-026188	

### FORM 990PF, PART I - TAXES

DESCRIPTION	AND EXPENSES PER BOOKS
MA FORM PC PAYMENT 2007 US TREASURY PAYMENT US TREASURY ESTIMATED TAX MA FORM PC PAYMENT 2008	250. 23,772. 9,500. 250.
TOTALS	33,772.

REVENUE

- CORPORATE STOCK PART II FORM 990PF,

DESCRIPTION

CREDITSUISSE - #2G2-026188

TOTALS

BOOK VALUE ENDING

ATTACHMENT

ENDING <u>FMV</u>

.

0

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

TRUOMA

CHECKES CLEARED IN 2010

30,000.

TOTAL

30,000.

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

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

56 CHESTNUT STREET WESTON, MA 02493 JONATHAN S. LAVINE

TRUSTEE

JEANNE B. LAVINE 56 CHESTNUT STREET

TRUSTEE

WESTON, MA 02493

JACQUELINE R. MCCOY 31 ST. JAMES AVE #740 BOSTON, MA 02116

TRUSTEE

GRAND TOTALS

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	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
DANA FARBER	NONE	TO PROMOTE ITS CHARITABLE PURPOSE	1,000,000
HUC-JIR	NONE	TO PROMOTE ITS CHARITABLE PURPOSE	15,000
CITY YEAR	NONE	TO PROMOTE ITS CHARITABLE PURPOSE	300,000
CHILDREN'S HOSPITAL	NONE	TO PROMOTE ITS CHARITABLE PURPOSE	125,000
CENTER FOR AMERICAN PROGRESS	NONE	TO PROMOTE ITS CHARITABLE PURPOSE	100,000
CHILDREN'S HOSPITAL TRUST	NONE	TO PROMOTE ITS CHARITABLE PURPOSE	400,000

ATTACHMENT 7 (CONT'D)

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RANTS AND CONTRIBILLIONS PAID DIRING THE YEAR	1
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	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
MEDIA MATTERS FOR AMERICA	NONE	TO PROMOTE ITS CHARITABLE PURPOSE	25,000
RESEARCH INSTITUTE OF LEARNING AND DEVELOPMENT	NONE	TO PROMOTE ITS CHARITABLE PURPOSE	5,000

TOTAL CONTRIBUTIONS PAID 1,970,000

FORM 990-PF - PART IV

AABITAL AAINIA	ANDIOCCE	CAR TAV ALIM	N/COTACCIT	INIOONE
L'VDIIVI CIVING		FUD IVEURIN	1V – S I M – N I	
<b>CAPITAL GAINS</b>	MIND LUGGLG I			

· CA	APITAL GA	INS AND LC	JOSES FU	RIAXUN	INVE21	IV TD	<u>IENT INCON</u>		
Kind of Property		Description					Date acquired	Date sold	
Gross sale	Depreciation	Cost or	FMV	Adj basis	Excess of	D	Gain		
price less expenses of sale	allowed/ allowable	other	as of	as of 12/31/69	FMV over adj basis		or (loss)		
expenses or sale	allowable	basis	12/31/69	1 12/31/09		Ħ	(1099)		
		49,806 SHS -	- INNOPHOS E	HLDGS INC			VARIOUS	VARIOUS	
902,346.		72,835.	2	.2500 2000			829,511.		
302,340.		72,055.					023,311.		
		13,284 SHS -	- МУБИЕБ СП.	I I COTT			VARIOUS	11/25/2009	
284,486.		13,284.	WARNER CIT.	ILCOII			271,202.	11,23,2003	
204,400.		13,204.					2/1/202.		
OMAL CATALIZA	2001						1,100,713.		
TAL GAIN (LO	oss)			• • • • • • • • • • • • • • • • • • • •	• • • • •		1,100,713.		
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### 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).

CRIMSON LION FOUNDATION

OMB No 1545-0092

Employer identification number

2009

(	C/O JACQUELINE R. MCCOY, TRUST	ΓEE			26-13881	42	
Note	: Form 5227 filers need to complete onlyP	arts I and II		****			
Par			s Held One Yo	ear or Less			
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other to (see page 4 of to (instructions)		(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a							Gastaet (c) Halli (c)
							••
							,-u,-
	Enter the short-term gain or (loss), if any, fr	om Schadula D. 1	L line 1h			1b	
b						- 1.4	
2	Short-term capital gain or (loss) from Forms	s 4684, 6252, 678	31, and 8824			2	
3 4	Net short-term gain or (loss) from partnersh Short-term capital loss carryover Enter the	•		•		3	
5	Carryover Worksheet	es 1a through 4			13,	4	(
	column (3) on the back				1	5	
Par		s - Assets Held I	More Than One	Year			
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(a) Description of property ole 100 shares 7% preferred of "Z" Co )  (b) Date acquired (mo , day, yr )  (c) Date sold (mo , day, yr )  (d) Sales price  (e) Cost or other (see page 4 of instructions)					(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a							
	· · · · · · · · · · · · · · · · · · ·						
							· · · · · · · · · · · · · · · · · · ·
	Enter the long-term gain or (loss), if any, fro	om Schedule D-1	line 6h		_1	6b	1,100,713.
			1,100,713.				
7	Long-term capital gain or (loss) from Forms	7					
8	Net long-term gain or (loss) from partnershi	8_	· · · · · · · · · · · · · · · · · · ·				
9	Capital gain distributions		9	******			
10 11	Gain from Form 4797, Part I Long-term capital loss carryover Enter the					10	
12	Carryover Worksheet					11	(
	column (3) on the back	<u> </u>	· · · · · · · · · · · · · · · · · · ·		<u> ▶</u>	12	1,100,713.
For I	Paperwork Reduction Act Notice, see the Instruc	tions for Form 104	1.		Sch	nedule	D (Form 1041) 2009

Sched	dule D (Form 1041) 2009				Page 2
Par	Summary of Parts I and II		(1) Beneficiaries	(2) Estate's	(3) Total
	Caution: Read the instructions before completing this p	1	(see page 5)	or trust's	ļ
13	Net short-term gain or (loss)	13			
14		14a			1,100,713.
a h	Total for year	14b			1,100,713.
	28% rate gain	14c			
15		15			1,100,713.
	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form	$\overline{}$	T. Part I. line 4a) If lines	14a and 15. column (	
to Pa	art V, and do not complete Part IV If line 15, column (3), is a net loss, complete Part	art IV a	and the Capital Loss Ca	arryover Worksheets	necessary
Pai	t IV Capital Loss Limitation				
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, P	art I, lu	ne 4c, if a trust) , the <b>s</b> r	naller of	
a	The loss on line 15, column (3) or b \$3,000 :: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, pag	. : :		<u> [ 16 ](</u>	)
Note Carr	e: If the loss on line 15, column (3), is more than \$3,000, <b>or</b> if Form 1041,  pag y <b>ove:Worksheet</b> on page 7 of the instructions to figure your capital loss carryove	ie 1, lir er	ne 22 (or Form 990-T, II	ne 34), is a loss, com	plete the CapitalLoss
	Tax Computation Using Maximum Capital Gains Rate				
	n 1041 filers. Complete this part only if both lines 14a and 15 in colu		2) are gains, or an an	nount is entered in	Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more				
	tion: Skip this part and complete the worksheet on page 8 of the instruct	ions if			
	ther line 14b, col (2) or line 14c, col (2) is more than zero, or				
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero n 990-T trusts. Complete this part only if both lines 14a and 15 ar		as or qualified divide	ande are included	in income in Part I
of F	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this pa	e gan	is, or quainted divide	sheet on page 8 o	of the instructions if
eithe	er line 14b, col (2) or line 14c, col (2) is more than zero.		. complete the trem	onoot on page e	
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)		17		
18	Enter the smaller of line 14a or 15 in column (2)	•			
10	but not less than zero				
19	Enter the estate's or trust's qualified dividends				
15	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 20				
21	If the estate or trust is filing Form 4952, enter the				
	amount from line 4g, otherwise, enter -0- ▶ 21			1	
22	Subtract line 21 from line 20 If zero or less, enter -0-		22		
23	Subtract line 22 from line 17 If zero or less, enter -0-		23		
24	Enter the <b>smaller</b> 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				
26	Subtract line 25 from line 24		26		
27	Are the amounts on lines 22 and 26 the same?				
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin	ie 22	27	i	
20	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)				
29	Subtract line 28 from line 27		29	<u> </u>	
30	Multiply line 29 by 15% ( 15)			30	
31	Figure the tax on the amount on line 23 Use the 2009 Tax Rai			nd Trusts	
	(see the Schedule Ginstructions in the instructions for Form 1041) .			31	
32	Add lines 30 and 31				
33	Figure the tax on the amount on line 17. Use the 2009 Tax Ra				
	(see the Schedule Ginstructions in the instructions for Form 1041)				
34	Tax on all taxable income. Enter the smaller of line 32 or line 33	nere	and on Form 1041.	Schedule I	

G, line 1a (or Form 990-T, line 36) . . . . . . .

Name of estate or trust as shown on Form 1041 Do no CRIMSON LION FOUNDATION	t enter name and employer	identification number if s	hown on the other side	Employer identific 26-138814	
Part II Long-Term Capital Gains a		ts Held More Tha			
(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 49,806 SHS - INNOPHOS HLDGS INC	VARIOUS	VARIOUS	902,346.	72,835.	829,511
13,284 SHS - WARNER CHILCOTT	VARIOUS	11/25/2009	284,486.	13,284.	271,202
			<del> </del>		
			<del></del>		
			<del></del>		<del></del>
					- · · · · · · · · · · · · · · · · · · ·
					<u> </u>
6b Total. Combine the amounts in colum	nn (f). Enter here and	on Schedule D, lin	e 6b		1,100,713