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#### Form **990-PF**

Department of the Treasury Internal Revenue Service

### **Return of Private Foundation**

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

Note The foundation may be able to use a copy of this return to satisfy state reporting requirements.

2009

OMB No 1545-0052

Ford	alen	dar year 2009, or tax year beginning		, and ending		
G C	heck	all that apply: Initial return		ormer public charity	Final retur	n
		Amended return	Address chan	ige	Name change	
	the l abel	RS Name of foundation			A Employer identificatio	n number
Oth	erwis	se, MARGLOUS, SAWYER & JI	EAN, FOUNDATI	ON	43-677171	3
	print	Number and street (or P O box number if mail is not o	delivered to street address)	Room/suite	B Telephone number	
	type	TOT D. INDIDIT NO.		1075	314-721-1:	104
	Spec	I GILV DI LUWII. STATE, ATTU ZIF GUUE			C if exemption application is	pending, check here
inst	uctio	ST. LOUIS, MO 63105-	-3406	<u> </u>	D 1 Foreign organization	ns, check here
H C	heck	type of organization X Section 501(c)(3) e	xempt private foundation		2 Foreign organizations m check here and attach of	neeting the 85% test, computation
	] Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private found	ation	E If private foundation st	atus was terminated
1 Fa	ır ma	rket value of all assets at end of year 👃 Account	ting method: X Cash	Accrual	under section 507(b)(	
(fr	om F		Other (specify)		F If the foundation is in a	60-month termination
		862,470. (Part I, coli	umn (d) must be on cash	basis)	under section 507(b)(	1)(B), check here
Pa	ırt I	Analysis of Revenue and Expenses (The total of amounts in columns (b) (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	( <b>b</b> ) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	64,417.		N/A	
	2	Check If the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	25,574.	25,574.		STATEMENT 1
	5a	Gross rents				
EG.	b	Net rental income or (loss)				
(Z)	6a	Net gain or (loss) from sale of assets not on line 10				
	b	Gross sales price for all assets on line 6a				
23	7	Capital gain net income (from Part IV, line 2)		0.		
CHANNEDS:	8	Net short-term capital gain				
_	9	Income modifications Gross sales less returns				
NOV	10a	and allowances				
	l l	Less Cost of goods sold				-
<b>.</b>		Gross profit or (loss)				<del> </del>
<b>A</b>	11	Other income	00 001	05 574	<del></del>	<del></del>
2010	12_	Total Add lines 1 through 11	89,991.	25,574.		<del>                                     </del>
⋽	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
	14	Other employee salaries and wages			<del></del>	<del></del>
S	15	Pension plans, employee benefits	<del></del>	<del></del>	<del> </del>	
enses	Į.	Legal fees Accounting fees STMT 2	900.	900.		0.
Expe	,	Other professional fees			)	<u> </u>
ēП	17	Interest				
aţi	18	Taxes STMT 3	874.	451.	<del></del>	0.
and Administrative	19	Depreciation and depletion	0,4.	401.	<del> </del>	†
Ë	20	Occupancy				
Adr	21	Travel, conferences, and meetings				
5	22	Printing and publications				
g		Other expenses STMT 4	187.	187.		0.
Operating	24	Total operating and administrative				
per		expenses Add lines 13 through 23	1,961.	1,538	,	0.
0	25	Contributions, gifts, grants paid	41,872.			41,872.
	26	Total expenses and disbursements				
	<u>L</u>	Add lines 24 and 25	43,833.	1,538		41,872.
	27	Subtrac 26 from line 12.				
```	à	Expess of thenue pyelexpenses and disbursements	46,158.			
	b	Net investment income (if negative, enter -0-)		24,036		
000		Adjusted net income (if negative, enter -0-)	<u> </u>	<u> </u>	N/A	
02-0	01 2-10	-LHA For Privacy Act and Paperwork Reductio	n Act Notice, see the instru	ctions.		Form <b>990-PF</b> (2009)

P

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
Pa	<u> </u>	Balance Sheets   column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	-2.		
-	2	Savings and temporary cash investments	64,970.	21,409.	21,409.
	3	Accounts receivable ►			
		Less, allowance for doubtful accounts ▶	12,000.		
	4	Pledges receivable ▶			
-		Less, allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			<del></del>
	•	disqualified persons			
	7	Other notes and loans receivable			
	•	Less allowance for doubtful accounts			
S	я	Inventories for sale or use			
ssets	_	Prepaid expenses and deferred charges			<del></del>
As		Investments - U S and state government obligations			
		Investments - corporate stock STMT 5	783,083.	884,800.	841,061.
		Investments - corporate bonds	703,003.	004,000.	041,001.
		Investments - land buildings and equipment basis			
1	11				
ĺ	40	Less accumulated depreciation	<del></del>		<del></del>
- 1		Investments - mortgage loans			
- 1	13	Investments - other			
	14	Land, buildings, and equipment basis	}		
1		Less accumulated depreciation		<del></del>	<del></del>
1	15	Other assets (describe )			
1		<b>-</b>	0.60 0.51	006 000	0.60 470
		Total assets (to be completed by all filers)	860,051.	906,209.	862,470.
1		Accounts payable and accrued expenses			
- 1	18	Grants payable			
es	19	Deferred revenue			
<u> </u>	20	Loans from officers, directors trustees, and other disqualified persons		<del></del>	
· <del></del> 1	21	Mortgages and other notes payable		<del></del>	
_	22	Other liabilities (describe >)			
		T + 11 199 - (add been 47 through 00)		0	
+	<u>23</u>	Total liabilities (add lines 17 through 22)	0.	0.	
İ		Foundations that follow SFAS 117, check here			
ဖွ		and complete lines 24 through 26 and lines 30 and 31			
- 1		Unrestricted	<del></del>		
ala	25	Temporarily restricted			
d B	26	Permanently restricted			
٦		Foundations that do not follow SFAS 117, check here			
2		and complete lines 27 through 31			
ţ	27	Capital stock, trust principal, or current funds	0.	0.	
κi	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
¥	29	Retained earnings, accumulated income, endowment, or other funds	860,051.	906,209.	
ž	30	Total net assets or fund balances	860,051.	906,209.	
			060 051	006 000	
	<u>31</u>	Total liabilities and net assets/fund balances	860,051.	906,209.	<del></del>
Pa	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Fota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		<del>_</del> _
(	mu	st agree with end-of-year figure reported on prior year's return)		1	860,051.
2 (	Ente	r amount from Part I, line 27a		2	46,158.
3	Othe	er increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3	<del></del>	4	906,209.
5	Deci	reases not included in line 2 (itemize)		5	0.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6.	906,209.

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	US, SAWYER & JEAN, E	FOUNDATION on 4940(a), 4940(b), 4940(e), or 4	43-677			Page 4
	·	<del></del>	1 1	III3ti u	Ctioi	13)
•	ped in section 4940(d)(2), check here ►	<b>_</b>	1			
	(attach copy of let		.		2	40.
	ection 4940(e) requirements in Part V, check	nere Arand enter 1%	1			40.
of Part I, line 27b	20/ - 6 l 0.7h					
	2% of line 27b Exempt foreign organizations					^
·	tion 4947(a)(1) trusts and taxable foundation	s only luthers enter -U-)	2			0.
3 Add lines 1 and 2	40.474 (44) 4 - 44 - 44 - 44 - 44 - 44	1.00	3			<u>40.</u>
	tion 4947(a)(1) trusts and taxable foundation	-	4			0.
	ubtract line 4 from line 3. If zero or less, enter	r -O-	5			<u>40.</u>
6 Credits/Payments:	20					
a 2009 estimated tax payments and 200		6a	-			
<b>b</b> Exempt foreign organizations - tax wit		6b				
c Tax paid with application for extension	·	6c				
d Backup withholding erroneously with		6d	- 1			^
7 Total credits and payments Add lines			7			0.
	of estimated tax. Check here if Form 22	20 is attached	8			
	s more than line 7, enter amount owed	<b>&gt;</b>	9		2	<u>40.</u>
10 Overpayment If line 7 is more than the	he total of lines 5 and 8, enter the amount ov	erpaid	10			
11 Enter the amount of line 10 to be. Cre		Refunded ►	11			
Part VII-A Statements Reg	jarding Activities			,		<del></del>
1a During the tax year, did the foundation	n attempt to influence any national, state, or I	ocal legislation or did it participate or intervene	e in		Yes	
any political campaign?				1a		X
<b>b</b> Did it spend more than \$100 during the	ne year (either directly or indirectly) for politic	cal purposes (see instructions for definition)?		1b		X
If the answer is "Yes" to 1a or 1b,	attach a detailed description of the activ	rities and copies of any materials publishe	ed or	1 1		<b> </b>
distributed by the foundation in c	onnection with the activities					ļ
c Did the foundation file Form 1120-PO	L for this year?			1c		X
d Enter the amount (if any) of tax on po	litical expenditures (section 4955) imposed o	during the year				
(1) On the foundation. > \$	O . (2) On foundation r	managers. ► \$ <b>0</b> .	_			
e Enter the reimbursement (if any) paid	by the foundation during the year for political	al expenditure tax imposed on foundation				i
managers > \$	<u> </u>			1 1		}
2 Has the foundation engaged in any ac	ctivities that have not previously been reporte	d to the IRS?		2		X
If "Yes," attach a detailed descrip	tion of the activities					
3 Has the foundation made any change	s, not previously reported to the IRS, in its go	overning instrument, articles of incorporation,	or			
bylaws, or other similar instruments?	If "Yes," attach a conformed copy of the	e changes		3		X
4a Did the foundation have unrelated but	siness gross income of \$1,000 or more durin	ig the year?		4a		X
b If "Yes," has it filed a tax return on For	m 990-T for this year?		N/A	4b		
5 Was there a liquidation, termination, o	dissolution, or substantial contraction during	the year?		5		X
If "Yes," attach the statement req	uired by General Instruction T					
6 Are the requirements of section 508(e	e) (relating to sections 4941 through 4945) s	atisfied either.				
<ul> <li>By language in the governing instru</li> </ul>	iment, or					
<ul> <li>By state legislation that effectively a</li> </ul>	mends the governing instrument so that no	mandatory directions that conflict with the stat	e law			
remain in the governing instrument	12			6	X	Ì
7 Did the foundation have at least \$5,00	00 in assets at any time during the year?			7	Х	
If "Yes," complete Part II, col (c),						
8a Enter the states to which the foundati	on reports or with which it is registered (see	instructions)				
MO		<u> </u>				
	e foundation furnished a copy of Form 990-P	F to the Attorney General (or designate)				ĺ
	Instruction G? If "No," attach explanation	, -		8b	Х	
		ning of section 4942(j)(3) or 4942(j)(5) for cal	endar	"		
	ng in 2009 (see instructions for Part XIV)? If		<b></b>	9		x
-	contributors during the tay year?	•		10		Y

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	art VII-A Statements Regarding Activities (continued)			,
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	1		
	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ► SAWYER MARGLOUS  Telephone no ► 314-72	21-1	104	
	Located at ► 101 S. HANLEY ROAD, ST. LOUIS, MO ZIP+4 ►63			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b>•</b>	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
P	art 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.	T .	Yes	No
1:	a 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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	• • •			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days )  Yes X No			
	b If any answer is "Yes" to 1a(1)-(6), did any 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)?  N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
	c 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?	1c		<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
	a 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?			
	If "Yes," list the years $\blacktriangleright$ ,,,,,,			
	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 all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
	c 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.			
	<b>)</b>			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business 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)	3b		
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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?	4b		Х

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Form 990-PF (2009) MARGLOUS, SAWYER & JEAN, Part VII-B Statements Regarding Activities for Which F		Required (control	43-67717	13 Page 6
<ul> <li>5a During the year did the foundation pay or incur any amount to</li> <li>(1) Carry on propaganda, or otherwise attempt to influence legislation (section 2) Influence the outcome of any specific public election (see section 4955); of any voter registration drive?</li> <li>(3) Provide a grant to an individual for travel, study, or other similar purposes 4.</li> <li>(4) Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)?</li> <li>(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?</li> <li>b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53 4945 or in a current notice regarding disaster assistance (see instru Organizations relying on a current notice regarding disaster assistance check in the answer is "Yes" to question 5a(4), does the foundation claim exemption frexpenditure responsibility for the grant?</li> <li>If "Yes," attach the statement required by Regulations section 53 4945</li> <li>6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?</li> <li>b Did the foundation, during the year, pay premiums, directly or indirectly, on a pif "Yes" to 6b, file Form 8870</li> <li>7a At any time during the tax year, was the foundation a party to a prohibited tax so If yes, did the foundation receive any proceeds or have any net income attribute.</li> </ul>	n 4945(e))?  or to carry on, directly or indirectly or educational purposes, or der the exceptions described octions)?  ere ere from the tax because it maintate.  5-5(d)  pay premiums on  ersonal benefit contract?  chelter transaction?	Ye   Ye   Ye   Ye   Ye   Ye   Ye   Ye	es X No N/A  es No es X No N/A	5b
Paid Employees, and Contractors  1 List all officers, directors, trustees, foundation managers and their				
(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
101 S. HANLEY ROAD ST LOUIS, MO 63105 JEAN MARGLOUS 12800 SHEFFEILD ESTATE CT.	2.00 TRUSTEE	0.	0.	0.
ST LOUIS, MO 63141	1.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc.  (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			- veriponaduon	2.1011211000
Total number of other employees paid over \$50,000			<b>•</b>	0

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "I	NONE."	,
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistica number of organizations and other beneficiaries served, conferences convened, research papers produc	I information such as the ed, etc.	Expenses
1 N/A		
2		
3		
4		
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on line	110	
1 N/A	is I and Z.	Amount
I N/A		
2		
All other program-related investments. See instructions.  3		
Total. Add lines 1 through 3	<b>&gt;</b>	0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	idations,	, see instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
•	Average monthly fair market value of securities	1a	_ 645,911.
	Average of monthly cash balances	1b	66,531.
C	Fair market value of all other assets	1c	<u></u>
d	Total (add lines 1a, b, and c)	1d	712,442.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	712,442.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	10,687.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	701,755.
6_	Minimum investment return Enter 5% of line 5	6	35,088.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here in and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	35,088.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009 (This does not include the tax from Part VI )		
C	Add lines 2a and 2b	2c _	240.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	34,848.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	34,848.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	34,848.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	41,872.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
þ	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	41,872.
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	5	240.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	41,632.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies fo	or the section

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Part XIII Undistributed Income (see instructions)

·	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,	-			2000
line 7				34,848.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			41,103.	
b Total for prior years:		_		
a Evene distributions personal if any to 2000		0.		
3 Excess distributions carryover, if any, to 2009 a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4 ► \$ 41,872.				
a Applied to 2008, but not more than line 2a			41,103.	
<b>b</b> Applied to undistributed income of prior			11,105.	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	•			
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				769.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				34,0 <u>79</u> .
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004	•			
not applied on line 5 or line 7	0.	*		<del>-</del>
9 Excess distributions carryover to 2010	0			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9: a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009			,	
			1	200 27

Part XIV Private Operating F		structions and Dort V	NDATION		771713 Page 10					
<del></del>			IFA, question 9)	<u>N/A</u>	<del></del>					
1 a If the foundation has received a ruling o		-								
foundation, and the ruling is effective fo	•	•	. ▶ └	(0.101.)(0.101.)						
	b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)  2 a Enter the lesser of the adjusted net Tax year Prior 3 years									
2 a Enter the lesser of the adjusted net	Tax year	/h\ 2009	<del></del>	(4) 2000						
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total					
investment return from Part X for										
each year listed										
b 85% of line 2a	<u> </u>	<u> </u>		<u> </u>						
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		· · · · · · · · · · · · · · · · · · ·		-	<u> </u>					
e Qualifying distributions made directly										
for active conduct of exempt activities.		1								
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					-					
alternative test relied upon										
a "Assets" alternative test - enter (1) Value of all assets										
. ,										
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)										
<b>b</b> "Endowment" alternative test - enter										
2/3 of minimum investment 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										
securities 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)										
(3) Largest amount of support from										
an exempt organization										
(4) Gross investment income										
Part XV   Supplementary Info			if the foundation	had \$5,000 or m	ore in assets					
at any time during t	he year-see the	instructions.)								
1 Information Regarding Foundation	-									
a List any managers of the foundation wh	o have contributed more	than 2% of the total con	tributions received by the	foundation before the clo	se of any tax					
year (but only if they have contributed n	10re man \$5,000). (See S	section 507(a)(2) }								
SEE STATEMENT 6										
b List any managers of the foundation wh other entity) of which the foundation ha			(or an equally large portion	on of the ownership of a p	artnership or					
NONE	ou 1070 or grouter interes	<b>.</b>								
		Cabalanahin ata D			<del>-</del>					
2 Information Regarding Contribution Check here ► X if the foundation of				et accept upochoited sec	ranta for friends 16					
the foundation makes gifts, grants, etc.	(see instructions) to indi	viduals or organizations (	under other conditions, co	iot accept unsoliciteu requ implete items 2a. b. c. and	1 d.					
a The name, address, and telephone num										
a the hame, address, and telephone ham	ber of the person to who	m approations should be	audicsscu							
<b>b</b> The form in which applications should be	e submitted and informa	tion and materials they s	hould include:							
c Any submission deadlines:					<del>.</del>					
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields	, kinds of institutions, or o	other factors:						
			,							

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	Purpose of grant or contribution	Amount		
	or substantial contributor	recipient				
a Paid during the year	or substantial contributor	recipiem				
SEE STATEMENT 7				41 070		
b Approved for future payment			<b>▶</b> 3a	41,872.		
NONE				0.		
Total			<b>▶</b> 3b			

#### Part XVI-A Analysis of Income-Producing Activities

1 Program service revenue a b	(a) Business code	(b)	(c) Exclu-	(d)	
a		Amount	sion	Amount	Related or exempt function income
c					
d	_				
e					
f	_		<del>- </del> -		
g Fees and contracts from government agencies		<del></del>			
2 Membership dues and assessments	<del>                                     </del>				<del></del>
3 Interest on savings and temporary cash					
Investments			14	25,574.	
4 Dividends and interest from securities 5 Net rental income or (loss) from real estate			14	45,574.	
a Debt-financed property				<del></del>	
Not debt-financed property     Net rental income or (loss) from personal			~     -		
property 7 Other investment income			<del>  -   -</del>		
8 Gain or (loss) from sales of assets other			<del>                                     </del>		
than inventory					
9 Net income or (loss) from special events		·			
10 Gross profit or (loss) from sales of inventory					
11 Other revenue.					
a					
b	1 1				
C					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)	<u> </u>	0	<u>•                                    </u>	25,574.	0
13 Total Add line 12, columns (b), (d), and (e)				13	25,574
(See worksheet in line 13 instructions to verify calculations		<del></del>		·	
Part XVI-B Relationship of Activitie	s to the Accon	nplishment of E	xempt P	urposes	
Line No Explain below how each activity for which	income is reported in (	column (e) of Part XVI-	-A contributed	importantly to the accomp	olishment of
▼ the foundation's exempt purposes (other t					
				· <del>-</del>	
				<del></del>	
	<u> </u>				
	<u> </u>			<del></del> · ·	
	<del></del>	<del></del>			
		·			<del></del>
		·····			<del></del>
	<del></del>		<del></del> -		
923621 02-02-10				<del></del>	Form <b>990-PF</b> (2009

Form 990-F	 F (2009) MARGI.	OUS, SAWYER	£ JEAN		ON	43-6771	713	Pa	ıge <b>1</b>
Part X\	II Information Re	egarding Transfers							yc i
4 Oud th	Exempt Organ		following with an	, other ergopration	described in costion E			Yes	Nz
	e organization directly or indi ode (other than section 501(c		-	<del>-</del>		סטו(ט) טו		103	140
	fers from the reporting found:	,, , ,			mons.				l
(1) C	· -	ation to a nonchantable exc	sinpi organization	oi.			1a(1)		X
	ther assets						1a(2)		X
1	transactions:						Tale		
-	ales of assets to a noncharita	hle exempt organization					1b(1)		Х
٠,,	urchases of assets from a no	• -	ration				1b(2)		X
٠,	ental of facilities, equipment,						1b(3)		X
	eimbursement arrangements						16(4)		X
٠,	oans or loan guarantees						1b(5)		X
,	erformance of services or me	embership or fundraising so	olicitations				1b(6)		Х
	ng of facilities, equipment, ma	,					1c	1	Х
d If the	answer to any of the above is	"Yes," complete the followi	na schedule Colu	ımn (b) should alwav	s show the fair marke	et value of the goods, of	her ass	ets.	
	vices given by the reporting fo							•	
colun	nn (d) the value of the goods,	other assets, or services re	eceived						
(a) Line no	(b) Amount involved	(c) Name of noncl	haritable exempt o	organization	(d) Description of tra	ansfers transactions and sl	naring ar	rangeme	nts
			1/A						

(a) Line no	(b) Amount myored	(c) Name of Honorial ital	ne exempt organization	(u) Description of transfers transac	tions and sharing arrangements
[		N/A			
			· · ·		
					<del></del>
					<del></del>
				·-	
					·····
			<del></del>		<del></del>
					<del></del>
				<del> </del>	·
-					
				<del> </del>	***************************************
				<del> </del>	
2a le the	foundation directly or indirectly	affiliated with or related to or	ne or more tax-exempt organiza	ations described	
		than section 501(c)(3)) or in se	· •	Mons described	Yes X No
	7 7		SCHOII 527 F		Yes X No
b IT Yes	," complete the following sched (a) Name of orga		(b) Type of organization	(a) December of	
	<del></del>	HIZAUUH	(b) Type of organization	(c) Description of	relationship
	<u>N/A</u>	<del></del>	<del>                                     </del>	<del></del>	
			<del>- </del>		
<del></del>				<del> </del>	
and com	enaities of perjury, I declare that I haviplete Declaration of preparer/tother	than taxpayer or fiductary) is based if	companying schedules and stateme on all information of which preparer h	nts, and to the best of my knowledge and has any knowledge	belief, it is true, correct,
	In m. Ma		) //	, -	
	73 900 1	<del>-</del>	11/15/21/10	- <b>\</b>	<del>-</del>
Sign Sig	gnature of officer or trustee	<u> </u>	Date /	Title	
Sign Here	Preparer's	W1.111	Da Da	te Check if self-	Preparer's identifying number
Sign and Sign	signature ////	u Klill	ulu 1/	·/S·/O employed >	<u></u>
par par	Firm's name (or yours WILHE		LLC	EIN ►	
Sign Paid Preparer's Use Only	if self-employed), 7777	BONHOMME AVE.	, #2001		
	address, and ZIP code ST. I	LOUIS, MO 6310		Phone no.	(314) 727-1155

(314) 727-1155 Form **990-PF** (2009)

#### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

#### Schedule of Contributors

➤ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Employer identification number

43-6771713 MARGLOUS, SAWYER & JEAN, FOUNDATION Organization type (check one) Section: Filers of: ∫ 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

religious, charitable, etc., contributions of \$5,000 or more during the year

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

▶ \$

Name of organization

Employer identification number

## MARGLOUS, SAWYER & JEAN, FOUNDATION

43-6771713

Part I	Contributors	(see instructions)
--------	--------------	--------------------

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4 SAWYER MARGLOUS CHARITABLE TRUST	Aggregate contributions	Type of contribution
1	06/15/2004		Person X Payroll
	101 S. HANLEY RD.	\$ 7,500.	Noncash
	ST LOUIS, MO 63105		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
140.	SAWYER MARGLOUS CHARITABLE TRUST	Aggregate contributions	Type of contribution
2	11/10/1999		Person X
	101 S. HANLEY RD.	\$44,917.	Payroll Noncash
	ST LOUIS, MO 63105		(Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4 SAWYER MARGLOUS CHARITABLE TRUST	Aggregate contributions	Type of contribution
3	12/18/2003		Person X
	101 S. HANLEY RD.	\$12,000.	Payroll Noncash
	ST LOUIS, MO 63105		(Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	, <i>,</i>		1
	, <i>,</i>	Aggregate contributions	Person Payroll Complete Part II if there is a noncash contribution (d)
No.	Name, address, and ZIP + 4  (b)	\$(c)	Person Payroll Complete Part II if there is a noncash contribution
No.	Name, address, and ZIP + 4  (b)	\$	Type of contribution  Person
(a) No.	Name, address, and ZIP + 4  (b)  Name, address, and ZIP + 4  (b)	\$	Type of contribution  Person Payroll Noncash  (Complete Part II if there is a noncash contribution)  (d) Type of contribution  Person Payroll Noncash  (Complete Part II if there is a noncash contribution)

Employer identification number

#### MARGLOUS, SAWYER & JEAN, FOUNDATION

43-6771713

	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(ხ) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom 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
		     \$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)		_	Page_	of	of Pa
Name of organization			Employer identific	cation nur	nber
	<u>IDATION</u>		43-6771		
Part III Exclusively religious, charitable, etc., inc	lividual contributions to section 50	)1(c)(7), (8), or (10) o	rganizations agg	regating	)
more than \$1,000 for the year. Complete		owing line entry. For o	organizations com	pleting	
Part III, enter the total of exclusively religiou	the state of the s	Φ.			
\$1,000 or less for the year (Enter this info	rmation once See instructions )	<del>5</del>			
(a) No. from Part I (b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how g	ıft ıs held	d
		-	<del>-</del>		
		-	•		
	(e) Transfer of gift				
Transferee's name, address, an	d ZIP + 4	Relationship of tra	nsferor to transf	eree	

		(e) Transfer of gift	
	Transferee's name, address, and a		Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and a	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
-			

FORM 990-PF DIVIDENT	OS AND	INTER	EST FROM	SECUE	RITIES	STATEMENT	
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A) AMOUNT	
AMERIPRISE FIDELITY INVESTMENTS UBS FINANCIAL	-		2,452. 17,592. 5,530.		0. 0. 0.	2,452 17,592 5,530	
TOTAL TO FM 990-PF, PART I, I	LN 4 =		25,574.		0.	25,574	
FORM 990-PF	AC	COUNTI	NG FEES	<del></del>		STATEMENT	
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		
ACCOUNTING		900.		900.		0.	
TO FORM 990-PF, PG 1, LN 16B		900.		900.			
FORM 990-PF		TAX	ES			STATEMENT	
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		
FEDERAL EXCISE TAX FOREIGN TAXES PAID		423. 451.		0. 451.		0	
TO FORM 990-PF, PG 1, LN 18		874.		451.		0	
FORM 990-PF	O'.	THER E	XPENSES			STATEMENT	
		. \	(B)		(C)	(D)	
DESCRIPTION		NSES BOOKS	NET INVI		ADJUSTED		
DESCRIPTION OFFICE EXPENSES	EXPE	NSES	NET INVI		ADJUSTED		

FORM 990-PF CORPORATE STOCK		STATEMENT	5
DESCRIPTION	BOOK VALUE	FAIR MARKET	r
CORPORATE STOCK MUTUAL FUNDS	316,449. 568,351.	336,42 504,63	
TOTAL TO FORM 990-PF, PART II, LINE 10B	884,800.	841,06	51.
FORM 990-PF PART XV - LINE 1A LIST OF FOUNDATION MANAGED	RS	STATEMENT	6

NAME OF MANAGER

SAWYER MARGLOUS JEAN MARGLOUS

•	AND CONTRIBUTIONS DURING THE YEAR	STATE	MENT 7
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
ALZHEIMER'S ASSOCIATION 9374 OLIVE BLVD ST LOUIS, MO	ANNUAL GIFT	501 (C) 3	500.
AMERICAN CANCER SOCIETY 4207 LINDELL BLVD ST LOUIS, MO	ANNUAL GIFT	501 (C) 3	500.
AMERICAN HEART ASSOCIATION P.O. BOX 771080 ST LOUIS, MO	ANNUAL GIFT	501 (C) 3	500.
AMERICAN YOUTH FOUNDATION 8706 MANCHESTER ROAD ST LOUIS, MO	ANNUAL GIFT	501 (C) 3	1,000.
BRAIN INJURY ASSOCIATION 10270 PAGE AVENUE ST LOUIS, MO	ANNUAL GIFT	501 (C) 3	750.
DEPAUW UNIVERSITY 300 E. SEMINARY ST GREENCASTLE, IN	ANNUAL GIFT	501 (C) 3	200.
FOREST PARK FOREVER 5595 GRAND DR. ST LOUIS, MO	ANNUAL GIFT	501 (C) 3	1,000.
JEWISH FEDERATION 12 MILLSTONE CAMPUS DR ST LOUIS, MO	ANNUAL GIFT	501 (C) 3	500.

MARGLOUS, SAWYER & JEAN, FOUNDA	 TION		43-6771713
LIFE SKILLS FOUNDATION 17 POINT WEST BLVD ST LOUIS, MO	ANNUAL GIFT	501 (C)	3 300.
MISSOURI BOTANICAL GARDEN 4344 SHAW ST LOUIS, MO	ANNUAL GIFT	501 (C)	3 2,500.
MISSOURI HISTORICAL MUSEUM P. O. BOX 11940 ST LOUIS, MO	ANNUAL GIFT	501 (C)	3 1,000.
OPERATION FOOD SEARCH 6282 OLIVE ST ST LOUIS, MO	ANNUAL GIFT	501 (C)	3 1,000.
SALVATION ARMY P.O. BOX 795195 ST LOUIS, MO	ANNUAL GIFT	501 (C)	3 750.
SHARE EMETH CONGREGATION 11645 LADUE ROAD ST LOUIS, MO	ANNUAL GIFT	501 (C)	3 1,617.
ST LOUIS ART MUSEUM FOUNDATION FOREST PARK ST LOUIS, MO	ANNUAL GIFT	501 (C)	3 2,500.
ST LOUIS CHILDRENS HOSPITAL ONE CHILDRENS PLACE ST LOUIS, MO	ANNUAL GIFT	501 (C)	3 1,750.
ST LOUIS SCIENCE CENTER 5050 OAKLAND AVE. ST LOUIS, MO	ANNUAL GIFT	501 (C)	3 500.
ST LOUIS SOCIETY FOR THE PHYSICALLY DISABLED 1187 CORPORATE LAKE DR ST LOUIS, MO	ANNUAL GIFT	501 (C)	3 500.

 MARGLOUS, SAWYER & JEAN, FOUNDA		,				43-6771713
WASHINGTON UNIVERSITY SCHOOL OF LAW 1 BROOKINGS DR. ST LOUIS, MO	ANNUAL	GIFT	501	(C)	3	1,480.
ANTIOCH COLLEGE 1 MORGAN PLACE YELLOW SPRINGS, OH	ANNUAL	GIFT	501	(C)	3	400.
KETC CHANNEL 9 3655 OLIVE ST ST LOUIS, MO	ANNUAL	GIFT	501	(C)	3	2,000.
HARVEY KORNBLUM JEWISH FOOD PANTRY 10950 SCHUETZ RD ST LOUIS, MO	ANNUAL	GIFT	501	(C)	3	13,000.
JUVENILE DIABETES RESEARCH FDN 50 CRESTWOOD EXEC CENTER ST LOUIS, MO	ANNUAL	GIFT	501	(C)	3	500.
LYDIA'S HOUSE P. O. BOX 2722 ST LOUIS, MO	ANNUAL	GIFT	501	(C)	3	2,000.
NATIONAL M.S. SOCIETY	ANNUAL	GIFT	501	(C)	3	500.
OKLAHOMA CITY UNIVERSITY SCHOOL OF LAW 2501 N. BLACKWELDER OKLAHOMA CITY, OK	ANNUAL	GIFT	501	(C)	3	1,000.
PROVIDENT 2650 OLIVE ST ST LOUIS, MO	ANNUAL	GIFT	501	(C)	3	1,000.
ST LOUIS MEN'S GROUP AGAINST CANCER ST LOUIS, MO	ANNUAL	GIFT	501	(C)	3	1,125.

MARGLOUS, SAWYER &	Ì.	JEAN,	FOUNDATION
--------------------	----	-------	------------

43-6771713

ST LOUIS ZOO
P. O. BOX 798256 ST LOUIS, MO ANNUAL GIFT

501 (C) 3 1,500.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

41,872.

## Form **8868** (Rev April 2009)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return

OMB No 1545-1709

	The a separate application for each return		
If you a	re filing for an Automatic 3-Month Extension, complete only Part I and check this box re filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this mplete Part II unless you have already been granted an automatic 3-month extension on a previously fil		<b>▶</b> X m 8868
Part I	Automatic 3-Month Extension of Time. Only submit original (no copies needed)		
A corporationly	tion required to file Form 990-T and requesting an automatic 6-month extension - check this box and com	plete	▶ □
	orporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an me tax returns.	exten	sion of time
noted belo not auton ou must	c Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic natic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consubmit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic file ov/efile and click on e-file for Chanties & Nonprofits.	cally if nsolida	(1) you want the additional ted Form 990-T Instead,
Type or	Name of Exempt Organization	Empl	oyer identification number
print	MARGLOUS, SAWYER & JEAN, FOUNDATION	4	3-6771713
File by the due date for filing your	Number, street, and room or suite no If a PO box, see instructions 101 S. HANLEY RD., NO. 1075		3 0771112
eturn See nstructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions ${\tt ST.\ LOUIS}$ , MO $63105-3406$		
Check ty	pe of return to be filed (file a separate application for each return)		
Forr	m 990	27 169	
Teleph If the o	SAWYER MARGLOUS  oks are in the care of   101 S. HANLEY ROAD - ST. LOUIS, MO 6310  one No  314-721-1104  FAX No  314-721-5225  organization does not have an office or place of business in the United States, check this box  s for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If it is for part of the group, check this box	ıs ıs foi	the whole group, check this
ıs fo	quest an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt $\overline{AUGUST}$ 15, 2010 , to file the exempt organization return for the organization named a or the organization's return for: $\overline{X}$ calendar year $\underline{2009}$ or $\underline{X}$ tax year beginning, and ending		The extension
►l			
2 If th	is tax year is for less than 12 months, check reason Initial return Final return		Change in accounting period
3a If th	is tax year is for less than 12 months, check reason Initial return Final return is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any arefundable credits. See instructions	3a	
3a If th	us application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		\$ 0.
3a If the non	ris application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any prefundable credits. See instructions application is for Form 990-PF or 990-T, enter any refundable credits and estimated payments made. Include any prior year overpayment allowed as a credit.		\$ 0.
3a If the none but If the tax c Bal	is application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any irefundable credits. See instructions is application is for Form 990-PF or 990-T, enter any refundable credits and estimated payments made. Include any prior year overpayment allowed as a credit ance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	3a	\$ 0.
3a If the non b If the tax c Ball dep	ris application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any prefundable credits. See instructions application is for Form 990-PF or 990-T, enter any refundable credits and estimated payments made. Include any prior year overpayment allowed as a credit.	3a	\$ 0.

NOV 18 2010

--- Form 8868 (Rev. 4-2009)

Form 8	868 (Rev. 4-2009)				Page 2			
• If yo	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this be	ЭX		<b>▶</b> [	X			
	Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed	Form	8868					
	u are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)							
Part	Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed)							
Туре	Name of Exempt Organization	Emp	loyer ideı	ntification nu	ımber			
print File by the extended due date for filing the return See instructions	MARGLOUS, SAWYER & JEAN, FOUNDATION	4	43-6771713					
	Number, street, and room or suite no. If a PO box, see instructions for 101 S. HANLEY RD. NO. 1075	For II	RS use or	ıly				
	City, town or post office, state, and ZIP code For a foreign address, see instructions		······································					
	type of return to be filed (File a separate application for each return)  Form 990 Form 990-EZ Form 990-T (sec 401(a) or 408(a) trust) Form 1041-A  Form 990-BL X Form 990-PF Form 990-T (trust other than above) Form 4720		orm 5227 orm 6069	Form	n 8870			
STOP	Do not complete Part II if you were not already granted an automatic 3-month extension on a previous	ısly file	d Form 8	868.				
	SAWYER MARGLOUS  books are in the care of  101 S. HANLEY ROAD - ST. LOUIS, MO 6310  ephone No  314-721-1104  FAX No  314-721-5225							
<ul> <li>If the organization does not have an office or place of business in the United States, check this box</li> <li>If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)</li> </ul>								
• If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box  If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for								
4	I request an additional 3 month extension of time until NOVEMBER 15, 2010							
5	For calendar year 2009, or other tax year beginning , and ending							
6	this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period							
7	State in detail why you need the extension							
	<u>THE ORGANIZATION IS WAITING ON FINANCIAL INFORMATION 1</u>	<u> N O</u>	RDER	TO				
	COMPLETE AN ACCURATE RETURN							
8a	f this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any							
	nonrefundable credits. See instructions	8a	\$		0.			
b	f this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated							
1	ax payments made Include any prior year overpayment allowed as a credit and any amount paid	<u></u>						
	previously with Form 8868	8b	\$		<u>0.</u>			
C	Balance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit							
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c	\$		<u> </u>			
	Signature and Verification							
Under   it is tru	penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the e, correct, and complete, and that I am authorized to prepare this form.							
Signati	ITE PRECE GOT TITLE CPA	Date	<b>►</b> 8	-14-20	010			