

## See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public

AF	or the 20	009 calendar year, or tax year beginning and ending		
	k if	Please Use IRS VIRGINIA KIMBROUGH CLARK REESE AND	D Employer identifi	cation number
ي	Address change	label or THOMAS MATT REESE TRUST		
	Name Change	type Doing Business As	58-6	352347
	Initial Peturn Eermin- Lated	See Number and street (or P 0 box if mail is not delivered to street address) Room/su Instruction SYNOVUS TRUST; P.O. BOX 23024		r )644-3496
	Amended	City or town, state or country, and ZIP + 4	G Gross receipts \$	4,622,266
444	applica-	COLUMBUS, GA 31902	H(a) Is this a group re	
	Applica- nonding	F Name and address of principal officer: SYNOVUS TRUST COMPANY, 1148 BROADWAY, COLUMBUS, GA 31901	N for affiliates? <b>H(b)</b> Are all affiliates inc	Yes X No
圖	exem	ot status: X 501(c) (3 ) ◀ (insert no ) 4947(a)(1) or 527	If "No," attach a	list. (see instructions)
		► N/A	H(c) Group exemptio	n number
K F	orm of org	panization Corporation X Trust Association Other ► L Y	ear of formation 1997	A State of legal domicile G
Pa		ummary		
Governance	1 Bri	efly describe the organization's mission or most significant activities: ${\hbox{\tt TO}}\ {\hbox{\tt PROVI}}$ IGHTHOUSE FOUNDATION, INC. AND CHILDREN'S HE	DE SUPPORT TO ALTHCARE OF A	GA LIONS TLANTA.
rua		eck this box   if the organization discontinued its operations or disposed of m		
Š		mber of voting members of the governing body (Part VI, line 1a)	3	,
		mber of independent voting members of the governing body (Part VI, line 1b)	4	
യ		tal number of employees (Part V, line 2a)	5	-
iţi		tal number of volunteers (estimate if necessary)	6	
Activities &		tal gross unrelated business revenue from Part VIII, column (C), line 12	7a	0
Ă		t unrelated business taxable income from Form 990-T, line 34	7b	0
	D NO	t differenced business taxable income north of the 350 1, line 54	Prior Year	Current Year
4	8 Co	ntributions and grants (Part VIII, line 1h)		
Revenue		ogram service revenue (Part VIII, line 2g)		
Š		estment income (Part VIII, column (A), lines 3, 4, and 7d)	221,241.	301,842
œ		ner revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
		tal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	221,241.	301,842
-		ants and similar amounts paid (Part IX, column (A), lines 1-3)	465,710.	435,542
		nefits paid to or for members (Part IX, column (A), line 4)	100//100	100,012
.		laries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	143,170.	137,455
Expenses		ofessional fundraising fees (Part IX, column (A), line 11e)		20,7000
e l		tal fundraising expenses (Part IX, column (D), line 25)		
<u> </u>		ner expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	35,086.	15,996
		All the state of t	643,966.	588,993
]	18 To	yenue less expenses. Subtract line 18 from line 12	<422,725.	
-8	19 Re	venue less expenses. Subtract line 18 from line 12		
Assets or Balances	<b>26</b> 19	10 x 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Beginning of Current Year 17,007,464.	End of Year 16,720,313
Sse	500 100	la l	17,007,404.	10,720,313
in d	21 [0	tal liabilities (Part X, line 26)	17,007,464.	16,720,313
	22 No	tracepts of fund balances, Subtract line 21 from line 20	17,007,404.	10,720,313
Pa		der penalties of perjury, I declare that I have examined this return, including accompanying schedules and statemer d complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowled	its, and to the best of my knowled	ge and belief, it is true, correct,
	"	111/1/1/1/12		
Sign	·   <b> </b>	XIN. Max Much Z, S. V. P.	5/4	10
Here	e   <b>F</b>	(SigNature of Officer)	Date	
		SYNOVUS TRUST COMPANY, NA, TRUSTEE		
		Type or print name and title		
Paid	Pı			er's identifying number structions)
_	aror's	gnature ROBERT L. GRIFFIN	employed >	
Use		m's name (or ROBERT L. GRIFFIN, CPA, LLC	EIN ►	
USE (	se	if-employed), 122 ENTERPRISE COURT, SUITE D		
		COLUMBUS, GA. 31904	Phone no 🕨 (	706)324-3681
May	the IRS	discuss this return with the preparer shown above? (see instructions)		X Yes No

		V	TIGITI	KILIDKOO	311 (11)	11/11	KDDDD 11	110			
	990 (20			ATT REES					58	<u>3-6352347</u>	7 Page <b>2</b>
Par	t III S	Statement of Pro	gram Servi	ice Accompl	ishmen	ts					
1	Briefly	describe the organiza	ition's mission:								
	THE	ORGANIZATI	ON'S SO	LE MISSI	ON IS	TO	SUPPORT	THE	GEORGIA	LIONS	
					_						

1	Briefly describe the organia		ION IS TO SUPPORT T	UE CEODOTA ITON	······································
		ION'S SOLE MISS	AND CHILDRENS HEALT		
		PUBLICLY SUPPOR		HOIME OF HILLIAM	11, 20111
	OI WIII OII III(II .	TODDICHT DOTTOR		. <del></del> -	
2	Did the organization under	take any significant program s	services during the year which were not	t listed on	
_	the prior Form 990 or 990-l		,		Yes X No
	If "Yes," describe these ne				
3			int changes in how it conducts, any pro	ogram services?	Yes X No
	If "Yes," describe these ch	anges on Schedule O			
4	Describe the exempt purpo	ose achievements for each of	the organization's three largest prograr	m services by expenses.	
	Section 501(c)(3) and 501(	c)(4) organizations and section	n 4947(a)(1) trusts are required to repoi	rt the amount of grants and	
	allocations to others, the to	otal expenses, and revenue, if	any, for each program service reported	d.	
		·	<u> </u>		
4a			42 - including grants of \$	) (Revenue \$	)
			E GEORGIA LIONS LIG		
			ATLANTA BY PAYING	100% OF ITS NET	INCOME
	TO THOSE TWO	PUBLIC CHARITIE	s.		
			,		
				· · · · · · · · · · · · · · · · · · ·	
		· 1 _ 4 004000			
4b	(Code )	(Expenses \$	including grants of \$	) (Revenue \$	)
				<del></del>	
	<del></del>				
		<del> </del>			
			·		<del></del>
			·		
		<u> </u>			
4c	(Code:	(Expenses \$	including grants of \$	) (Revenue \$	)
		<u> </u>			
					<del></del>
		<del></del>	<del></del>		<del></del>
		<del> </del>			
		<u> </u>			
					<del></del>
4d	Other program services. (D				
	(Expenses \$	including grants of	\$ ) (Revenue \$ 5,542.	)	
<u>4e</u>	Total program service ex	penses ► \$ 4.3	J, J + 2 •		Form <b>990</b> (2009)

Pa	t IV Checklist of Required Schedules			-
			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	1		
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4_	L	X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and			
	reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	ļ	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X, or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments?			
	If "Yes," complete Schedule D, Part V	10	ļ	Х
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable	11	X	ļ
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI			
•	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments · program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX.			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	10		х
	Schedule D, Parts XI, XII, and XIII	12		_^ <u>`</u>
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes. No  12A X  12A X	1		
40	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	·····	X
13		14a		X
14a	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	170		
b	and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	1		
	or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Part III	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
• •	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			1
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
. •	complete Schedule G, Part III	19		X

20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

Part IV Checklist of Required Schedules (continued)

		1	165	IND
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the		v	
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	<u>X</u>	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,	00		v
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			v
	Schedule J	_23_		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete		1	v
	Schedule K. If "No", go to line 25	24a		X
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	· · · · · · · · · · · · · · · · · · ·			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		ļ <u>.</u>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			.,
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			v
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete			v
	Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			v
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
þ	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was			v
	an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v
	contributions? If "Yes," complete Schedule M	30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations?			v
	If "Yes," complete Schedule N, Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
	Schedule N, Part II	32		_X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u> X</u>
34	Was the organization related to any tax-exempt or taxable entity?			v
	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		<u> </u>
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?			v
	If "Yes," complete Schedule R, Part V, line 2	35		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	_		v
	If "Yes," complete Schedule R, Part V, line 2	36		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			٠,
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		<sub>U</sub>	
	Note. All Form 990 filers are required to complete Schedule O.	38	X	
		rorm'	990 (2	2009)

Statements Regarding Other IRS Filings and Tax Compliance

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of		"		
	U.S. Information Returns. Enter -0- if not applicable	1a 0	]		
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	<b>1b</b> 0	]		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and re	eportable gaming			
	(gambling) winnings to prize winners?		1c	Х	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 0			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	2ь		_
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covere	d by this return?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3ь		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶				
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign	Bank and			
	Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Rega	rding Prohibited			
	Tax Shelter Transaction?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne organization solicit			
	any contributions that were not tax deductible?		6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions or gifts			
	were not tax deductible?		6ь		
7	Organizations that may receive deductible contributions under section 170(c).		•		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods and services			.,
	provided to the payor?		7a		Х
	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as required			Х
	to file Form 8282?	7d	7c		<u></u>
	If "Yes," indicate the number of Forms 8282 filed during the year				
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a page transfer approach.	ersonal	7e		Х
	benefit contract?  Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract.	not?	7f		X
t	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		
9	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0		79 7h		
ρ"	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations	•			
Ü	supporting organization, or a donor advised fund maintained by a sponsoring organization, have exceeding organization.				
	at any time during the year?	cos business notalings	8	i	Х
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the organization make any taxable distributions under section 4966?		9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?		9ь		
10	Section 501(c)(7) organizations. Enter:				
	Initiation fees and capital contributions included on Part VIII, line 12	10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
	Gross income from members or shareholders	11a			
	Gross income from other sources (Do not net amounts due or paid to other sources against				
-	amounts due or received from them)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	if "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
_				000	

THOMAS MATT REESE TRUST

58-6352347

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions

Sec	tion A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body		킠		
b	Enter the number of voting members that are independent	<u> </u>	0		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	h any other			
	officer, director, trustee, or key employee?		2		Х
3	Did the organization delegate control over management duties customarily performed by or under the dir	ect supervision		1	
	of officers, directors or trustees, or key employees to a management company or other person?		3		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 9	90 was filed?	4		<u>X</u>
5	Did the organization become aware during the year of a material diversion of the organization's assets?		5		Х
6	Does the organization have members or stockholders?		6		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	ers of the			
	governing body?		_7a		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons		7b		<u>X</u>
8	Did the organization contemporaneously document the meetings held or written actions undertaken duri	ng the year			
	by the following.			17	
а	The governing body?		8a	X	
þ	Each committee with authority to act on behalf of the governing body?		8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached	d at the			Х
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rever	ue Code)		<u>,                                     </u>	<b>.</b>
			10-	Yes	No X
	Does the organization have local chapters, branches, or affiliates?		10a		
b	If "Yes," does the organization have written policies and procedures governing the activities of such cha	oters, aniliates,	10b		
	and branches to ensure their operations are consistent with those of the organization?	the form?	11	Х	
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing	ine ionii:			
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		12a	х	
	Does the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> Are officers, directors or trustees, and key employees required to disclose annually interests that could g	Ivo rico	120		
D	to conflicts?	ive rise	12b	Х	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes	," descnbe			
	in Schedule O how this is done		12c	Х	
13	Does the organization have a written whistleblower policy?		13	Х	
14	Does the organization have a written document retention and destruction policy?		14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by	ındependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official		15a		X
b	Other officers or key employees of the organization		15b	ļ	Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	with a			v
	taxable entity during the year?		16a		X
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate				
	in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization of the control o	ation's	465		
	exempt status with respect to such arrangements?	<del>-</del>	16b		
	tion C. Disclosure	<del></del>			
17	List the states with which a copy of this Form 990 is required to be filed GA	1(a)(3)e antil availah	le for		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (50	r (C)(C)S Only) availab	101		
	public inspection. Indicate how you make these available. Check all that apply.  Own website				
10	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, confi	ct of interest policy	and fina	ncial	
19	statements available to the public.	or or interest policy,	IIIIa		
20	State the name, physical address, and telephone number of the person who possesses the books and re	ecords of the organia	ation:	•	
20	WILLIAM FRAY MCCORMICK - (706) 644-3496	Journal of the organia			
	1148 BROADWAY, COLUMBUS, GA 31901				
	and and the same of the same o		Form	990 (	20091

932006 02-04-10

## THOMAS MATT REESE TRUST

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors** 

### Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees Section A.

Check this box if the organization did not compensate any current officer, director, or trustee.

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending within the organization's tax year Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors, institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	<b>(B)</b> Average hours	(cl		Pos		app	lv)	( <b>D</b> )  Reportable  compensation	(E) Reportable compensation	(F) Estimated amount of
	per week	Individual trustee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
SYNOVUS TRUST COMPANY, NA TRUSTEE	3.00		х					137,455.	0.	0
INOUTH	3.00		71					137,433.	<u> </u>	
						-				
	4.4.4					-				
	-					ļ				<del>4</del>
					_			****		<del></del>
						ļ	_			
										-

Form 990 (2009)

THOMAS MATT REESE TRUST

Pa	rt VII Section A. Officers, Directors, Tr	ustees, Key E	mplo	oyee	es, a	nd l	High	est	Compensated Employ	ees (continued)				
	(A)	(B)	(C)						(D)	(E)			(F)	
	Name and title	Average			Pos				Reportable	Reportable		E:	stimat	ed
		hours	(c	heck	k all	that	арр	ly)	compensation	compensation		ar	nount	
		per week	ector		1			l	from the	from related organization		COM	other pensa	
		Week	Individual trustee or director	R			Safed		organization	(W-2/1099-MI		ι.	rom th	
			ustee	trust		8	Suadu		(W-2/1099-MISC)	,	•	l	janizat	
			that d	ticnat		oldr	St con					l	d relat	
			ludiv	Institutional trustee	Officer	Key employee	Highest compens employee	Former				org	anızatı	ons
	<del></del>	•	-					H						
								ĺ						
		<del>                                     </del>	<del> </del>			$\vdash$								
		<del>                                     </del>	H			$\vdash$								
		ļ												
			_											
											İ			
							İ							
			Г											
			l											
								L						
<u>1b</u>	Total						<u> </u>		137,455.		0.			0.
2	Total number of individuals (including but n	ot limited to th	ose	liste	ed at	oove	e) wh	no re	eceived more than \$100	,000 in reportabl	е			_
	compensation from the organization													0
											ſ		Yes	No
3	Did the organization list any former officer,		stee	, ke	y em	ploy	/ee,	or h	nighest compensated en	nployee on		_		v
	line 1a? If "Yes," complete Schedule J for s								_	_		3		Х
4	For any individual listed on line 1a, is the su				_					the organization				v
_	and related organizations greater than \$150											4	:	X
5	Did any person listed on line 1a receive or a				rom	any	unre	elate	ed organization for servi	ces rendered to	-	_		Х
Sec	the organization? If "Yes," complete Schedetion B. Independent Contractors	uie J tor such j	pers	on								5		
1	Complete this table for your five highest co	managed in	dono	ndo	nt o	ontr	ooto	ro #	hat recovered more than	\$100,000 of com		otion f		
•	the organization. NONE	mpensated inc	repe	illue	iii C	Onti	acio	/ 5 เ	nat received more than	\$100,000 OI COII	hens	alloni	10111	
	(A)								(B)			(C	2)	—-
	Name and business	address							Description of s	ervices	С	ompe		n
									W-				~	
								ı						
								T						
								_						
2	Total number of independent contractors (ii		ot lır	nite	d to	_		sted	above) who received m	ore than				
	\$100,000 in compensation from the organiz	zation 🕨				C	)							
												Form !	990 (2	2009)

THOMAS MATT REESE TRUST

Pa	rt VII	Statement of Reve	nue					
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
its its	1 a	Federated campaigns	1a					
gran	b	Membership dues	1b					
s, g	С	Fundraising events	1c					
gift	d	Related organizations	1d					
S. imi	е	Government grants (contribu	tions) 1e					
rio er s	f	All other contributions, gifts, gran	nts, and					
햦		similar amounts not included abo	ove 1f					
Contributions, gifts, grants and other similar amounts	9	Noncash contributions included in lines	s 1a-1f \$					
a C	<u>h</u>	Total. Add lines 1a-1f		<u> </u>				
				Business Code				
ice	2 a							
ue L	b			<u> </u>				
m ven	C							
gra	d							
Program Service Revenue	e •	All other program service reve						
		Total. Add lines 2a-2f	enue	<u> </u>				
	3	Investment income (including	dividends, intere					
	_	other similar amounts)	,,	<b>&gt;</b>	537,480.			537,480.
	4	Income from investment of ta	x-exempt bond p	oroceeds >				
	5	Royalties		<b>&gt;</b>				
		•	(ı) Real	(II) Personal			•	
	6 a	Gross Rents						
	b	Less: rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (loss)		<b>&gt;</b> _		·····		
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory	4084786.					
	ь	Less: cost or other basis						
		and sales expenses	4320424.					
		Gain or (loss)	<235638.	·	1005 600			-225 620
		Net gain or (loss)		<u> </u>	<235,638.	>		<235,638.
ne	8 a	Gross income from fundraising	_					
Ven		including \$	of					
Re		contributions reported on line						
Other Revenue		Part IV, line 18	а					
ŏ		Less: direct expenses  Net income or (loss) from fund	b drauaina ayanta	L				
		Gross income from gaming a	_					
	9 a	Part IV, line 19						
	h	Less: direct expenses	a b					
		Net income or (loss) from gan	_	<b></b>			,	
		Gross sales of inventory, less						
		and allowances	а					
	ь	Less: cost of goods sold	b					
		Net income or (loss) from sale	es of inventory	<b>•</b>				
		Miscellaneous Revent	ıe	Business Code				
	11 a							
	b							
	С							
	đ			L				ļ
		Total. Add lines 11a-11d			201 042			201 042
9320	12 9	Total revenue. See instructions			301,842.	0.	0.	
9320	-10							Form <b>990</b> (2009)

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

_	All other organizations must comp				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and				
•	organizations in the U.S. See Part IV, line 21	435,542.	435,542.		
2	Grants and other assistance to individuals in		<u> </u>		······································
_	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				······································
•	organizations, and individuals outside the U.S.				
	See Part IV, lines 15 and 16			1	
4	Benefits paid to or for members			1 11111111111	
5	Compensation of current officers, directors,				******
_	trustees, and key employees	137,455.		137,455.	
6	Compensation not included above, to disqualified	,			
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal	909.		909.	
c	Accounting	1,700.		1,700.	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	. "			
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	· · · · · · · · · · · · · · · · · · ·			,, <del> </del>
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below )				
а	AD VALOREM TAXES	12,937.		12,937.	
b	INSURANCE	450.	_	450.	
c					
d					
e					
f	All other expenses				
25	Total functional expenses Add lines 1 through 24f	588,993.	435,542.	153,451.	0.
26	Joint costs. Check here ▶ ☐ If following		·	· · · · · · · · · · · · · · · · · · ·	
	SOP 98-2 Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation	_			

58-6352347 Page **11** Form 990 (2009) THOMAS MATT REESE TRUST Part X Balance Sheet (A) Beginning of year End of year 1 Cash · non-interest-bearing 1,609,335. 1,427,515. 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net Accounts receivable, net 4 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete 6 Part II of Schedule L 7 Notes and loans receivable, net R Inventories for sale or use 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment: cost or other 1,627,503. basis. Complete Part VI of Schedule D 10a 1,627,503. 10c 1,627,503. 10b b Less: accumulated depreciation 13,760,713. 10,818,140. 11 11 Investments - publicly traded securities 2,835,970. 12 Investments - other securities. See Part IV, line 11 12 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets 9,913. 11,185. 15 Other assets. See Part IV, line 11 15 17,007,464. 16,720,313. 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 17 17 Accounts payable and accrued expenses 18 18 Grants payable 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22

> 16,720,313. Form **990** (2009)

> 16,720,313.

16,720,313.

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17,007,464.

17,007,464.

17,007,464.

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Net Assets or Fund Balances

Secured mortgages and notes payable to unrelated third parties

Organizations that do not follow SFAS 117, check here 

X and

Unsecured notes and loans payable to unrelated third parties

Paid-in or capital surplus, or land, building, or equipment fund

Retained earnings, endowment, accumulated income, or other funds

Organizations that follow SFAS 117, check here

Other liabilities. Complete Part X of Schedule D

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total liabilities. Add lines 17 through 25

lines 27 through 29, and lines 33 and 34.

Unrestricted net assets

Temporarily restricted net assets

Permanently restricted net assets

complete lines 30 through 34.

Total net assets or fund balances

and complete

# VIRGINIA KIMBROUGH CLARK REESE AND

Form 990 (2009)

58-6352347 Page **12** THOMAS MATT REESE TRUST

			Yes	No
1	Accounting method used to prepare the Form 990: X Cash			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		х
ь	Were the organization's financial statements audited by an independent accountant?	2b		Х
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
đ	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both.  Separate basis  Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	3ь		

## **SCHEDULE A**

(Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2009 Open to Public

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

VIRGINIA KIMBROUGH CLARK REESE AND

Employer identification number 58-6352347

	THOMAS MATT REESE TRUST 58-6352347  I Reason for Public Charity Status (All organizations must complete this part.) See instructions.												
Part I	Reason	for Public Char	ity Status (All organiz	zations mu	st complet	te this par	t.) See ins	tructions.					
The organ	ization is not a	private foundation	because it is: (For lines:	1 through	11. check	only one b	ox.)						
1 🔲	A church, cor	nvention of churches	s, or association of chur	ches desc	ribed in <b>se</b>	ction 170	(b)(1)(A)(i)	).					
2	A school des	cribed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E)									
з 🔲	A hospital or	a cooperative hospi	tal service organization o	described	ın section	170(b)(1)	(A)(iii).						
4 🔲	A medical res	search organization of	operated in conjunction	with a hos	pital desci	ribed in <b>se</b>	ction 170	(b)(1)(A)(ii	i). Enter 1	the hospita	l's nan	ne,	
	city, and stat												
5 🗀	An organizati	on operated for the	benefit of a college or ur	niversity o	wned or op	perated by	a govern	mental uni	t describ	ed in			
	section 170	(b)(1)(A)(iv). (Comple	ete Part II.)										
6 🔲	A federal, sta	te, or local governm	ent or governmental uni	t describe	d ın sectio	n 170(b)(1	I)(A)(v).						
7 🔲	An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ental unit c	or from the	general	public desc	ribed	ın	
	section 170(	b)(1)(A)(vi). (Comple	te Part II.)										
8 🔲	A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II.)								
9 🔲	An organizati	on that normally rec	eives: (1) more than 33 1	1/3% of its	support f	rom contri	butions, n	nembershi	p fees, a	nd gross re	celpts	from	
	activities rela	ted to its exempt fur	nctions - subject to certa	aın exceptı	ons, and (2	2) no more	than 33 1	1/3% of its	support	from gross	invest	ment	
	income and u	inrelated business ta	axable income (less sect	tion 511 ta	x) from bu	sinesses a	acquired b	y the orga	nization	after June 3	30, 197	75	
	See section	<b>509(a)(2).</b> (Complete	Part III)										
10 🔲	An organizati	on organized and op	perated exclusively to te	st for publ	ıc safety. S	See <b>sectio</b>	n 509(a)(4	4).					
11 X	An organizati	on organized and op	perated exclusively for th	he benefit (	of, to perfo	orm the fur	nctions of,	, or to carr	y out the	purposes	of one	or	
	more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that												
	describes the type of supporting organization and complete lines 11e through 11h												
	a Type I b Type II c Type III · Functionally integrated d X Type III · Other												
e X	By checking	this box, I certify tha	t the organization is not	controlled	directly o	r indirectly	by one o	r more disc	qualified	persons ot	ner tha	ın	
	foundation m	anagers and other t	han one or more publicly	y supporte	d organiza	ations desc	cribed in s	ection 509	(a)(1) or	section 509	(a)(2).		
f	If the organization	ation received a writ	ten determination from t	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III					
	supporting or	rganization, check th	is box									X	
9	Since August	17, 2006, has the o	rganization accepted ar	ny gift or c	ontribution	from any	of the folk	owing pers	sons?			1	
	(i) A persor	n who directly or ind	rectly controls, either al	lone or tog	ether with	persons c	lescribed	ın (II) and (I	п) below,	,	Yes	No	
	the gove	erning body of the su	pported organization?							11g(i)		X	
		•	described in (i) above?							11g(ii)	ļ	Х	
	(iii) A 35% c	controlled entity of a	person described in (i) o	or (ii) above	e?					11g(iii)		X	
h	Provide the fo	ollowing information	about the supported org	ganization	(s).								
(ı) Name	of supported	(iı) EIN	(iii) Type of		rganization			(vi) Is organizatio		(VII) Ar	nount o	f	
	inization		organization (described on lines 1-9		sted in your			(i) organize	ed in the l		port		
			above or IRC section	governing	document?	(i) of your	suppoπ?	US	2				
			(see instructions))	Yes	No	Yes	No	Yes	No				
GEORG													
		58-0548732	LINE 7	X		Х		X	_	21	7,7	<u>71.</u>	
CHILD			_										
HEALT:	HCARE O	58-1710601	LINE 3	X		X		X		21	7,7	<u>71.</u>	
								-					
								-					

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

Schedule A (Form 990 or 990-EZ) 2009

435,542.

932021 02-08-10

<u>Total</u>

Schedule A (Form 990 or 990-EZ) 2009

meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization.

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.

b 10% -facts-and-circumstances test - 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the

Sch Pa	edule A (Form 990 or 990-EZ) 2009 Int III   Support Schedule for (	Organizations	Described in	Section 509(a	)(2) (Complete onl	v if you checked the bi	Page 3
	ction A. Public Support						
	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Gifts, grants, contributions, and	(4) 2000	(0) 2000	(0) = 00.	10,200	(0) = 000	
•	membership fees received (Do not						
	include any "unusual grants")						
2	Gross receipts from admissions,	<del></del>					
	merchandise sold or services per- formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that	<u> </u>					
3	are not an unrelated trade or bus-						
	iness under section 513						
			•	<del></del>		-	
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
_	or expended on its behalf		,		-		<u> </u>
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge			-			
	Total. Add lines 1 through 5						<u> </u>
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
C	Add lines 7a and 7b				<u> </u>	1	
	Public support (Subtract line 7c from line 6)				<u> </u>		
Sec	ction B. Total Support		r	,	T	·- <del></del>	г
Cale	endar year (or fiscal year beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
_	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975					]	
c	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part IV)					<del> </del>	-
	Total support (Add lines 9, 10c, 11, and 12)	<u> </u>				5044340	
14	First five years. If the Form 990 is for	the organization's	s first, second, thii	rd, fourth, or fifth to	ax year as a secti	on 501(c)(3) organiz	ation,
	check this box and stop here						
	ction C. Computation of Publ					<del></del>	<del></del>
	Public support percentage for 2009 (		•	column (f))		15	%
	Public support percentage from 2008					16	%
Sec	ction D. Computation of Inves					<del></del>	
17	Investment income percentage for 20	109 (line 10c, colur	nn (f) divided by lii	ne 13, column (f))		17	<u>%</u>
18	Investment income percentage from					18	%
19a	33 1/3% support tests - 2009. If the	organization did n	ot check the box	on line 14, and line	e 15 is more than	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box a	nd <b>stop here</b> . The	organization quali	fies as a publicly s	supported organiz	zation	
t	33 1/3% support tests - 2008. If the	organization did n	ot check a box or	line 14 or line 19a	a, and line 16 is m	nore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che						▶∟
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	his box and see ii	nstructions	<u>▶</u>
					So	hedule A (Form 99	0 or 990-EZ) 2009

## Schedule D

Department of the Treasury

Internal Revenue Service

(Form 990)

**Supplemental Financial Statements** 

Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

2009 Open to Public Inspection

Name of the organization

VIRGINIA KIMBROUGH CLARK REESE AND THOMAS MATT REESE TRUST

Employer identification number 58-6352347

Pa	†   Organizations Maintaining Donor Advise	d Funds or Other Similar Fund	s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	e conferring
,	impermissible private benefit?		Yes No
Pa	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or p	oleasure) Preservation of an hi	storically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		F-11111111
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	· ·	2c
d	Number of conservation easements included in (c) acquired		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ear		
5	Does the organization have a written policy regarding the per	- '	_, _, _,
_	violations, and enforcement of the conservation easements i		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	re satisfy the requirements of section 170	((n)(4)(B)(l)
0	and section 170(h)(4)(B)(ii)?	on accompate in the revenue and evenue	
9	In Part XIV, describe how the organization reports conservation include, if applicable, the text of the footnote to the organization	·	
	conservation easements.	tion's illiancial statements that describes	the organization's accounting for
Par	t III Organizations Maintaining Collections o	f Art. Historical Treasures, or C	ther Similar Assets.
	Complete if the organization answered "Yes" to Form		
1a	If the organization elected, as permitted under SFAS 116, no	t to report in its revenue statement and b	palance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	·	
	the footnote to its financial statements that describes these	·	
b	If the organization elected, as permitted under SFAS 116, to	report in its revenue statement and balar	nce sheet works of art, historical treasures,
	or other similar assets held for public exhibition, education, o	r research in furtherance of public service	e, provide the following amounts relating to
	these items:	•	•
	(i) Revenues included in Form 990, Part VIII, line 1		<b>▶</b> \$
	(ii) Assets included in Form 990, Part X		► \$ ► \$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financia	
	the following amounts required to be reported under SFAS 1		
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
b	Assets included in Form 990, Part X		<b>▶</b> \$

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Schedule D (Form 990) 2009

	dule D (Form 990) 2009 THOMAS								<u>58-63</u>		
Pa	rt III   Organizations Maintaining C	Collecti	<u>ons of Ar</u>	t, His	torical Tr	easures, o	or Othe	r Simil	ar Asse	<b>ts</b> (conti	nued)
3	Using the organization's acquisition, accessi	on, and o	other records	s, chec	k any of the	following that	at are a si	gnificant	use of its	collection	ı items
	(check all that apply):										
а	Public exhibition		d		Loan or exc	hange progra	ams				
b	Scholarly research		е		Other						
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections	and explain	how th	ney further t	he organizati	on's exer	npt purpo	se in Par	XIV	
5	During the year, did the organization solicit of										
	to be sold to raise funds rather than to be m	aintained	as part of th	ne orga	nization's co	ollection?				Yes	☐ No
Pai	t IV Escrow and Custodial Arran	gemen	ts. Comple	te if org	ganization ar	nswered "Ye	s" to Forn	n 990, Pa	rt IV, line	9, or	
-	reported an amount on Form 990, Pa	rt X, line 2	21								
1a	Is the organization an agent, trustee, custod	ian or oth	er intermedi	ary for	contribution	s or other as	sets not	ıncluded			
	on Form 990, Part X?									Yes	☐ No
ь	If "Yes," explain the arrangement in Part XIV	and com	plete the fol	lowing	table:						
	,		•	_						Amount	
С	Beginning balance							1c			
	Additions during the year							1d			
	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on F	orm 990.	Part X. line 2	212				•		Yes	□ No
	If "Yes," explain the arrangement in Part XIV		,								
	TY Endowment Funds. Complete		anization ans	swered	"Yes" to Fo	rm 990, Part	IV, line 10	0.			
		(a) Cur	rent year	(b) P	rior year	(c) Two yea	rs back (	(d) Three y	ears back	(e) Four	years back
1a	Beginning of year balance				•						
ь	Contributions										
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
	Other expenditures for facilities				,						
	and programs										
f	Administrative expenses								***************************************		••••
g	End of year balance				•					•	
2	Provide the estimated percentage of the year	r end bal	ance held as	s:		*********					
а	Board designated or quasi-endowment			%							
	Permanent endowment ▶	%		-							
		<u></u>									
	Are there endowment funds not in the posse	ession of	the organiza	tion tha	at are held a	nd administe	ered for th	e organiz	ation		
	by:		. 3.					J			Yes No
	(i) unrelated organizations									3a(i)	
	(ii) related organizations									3a(ii)	
b	If "Yes" to 3a(ii), are the related organizations	s listed as	s required or	Sched	dule R?					3b	
4	Describe in Part XIV the intended uses of the		-								L
Par	t VI Investments - Land, Building					. Part X. line	10				
نتستنا	Description of investment		a) Cost or ot			or other		cumulate	ed l	(d) Book	value
	bescription of investment	,	asıs (ınvestm			(other)		reciation	~	(4, 500.	
12	Land		1,627,5			` '	•			1,627	7,503.
	Buildings									,	
	Leasehold improvements										
	Equipment						-				
	Other				_						
	. Add lines 1a through 1e. (Column (d) must e	gual Forr	n 990. Part )	K, colur	nn (B), line 1	O(c) )			<b>•</b>	1,627	7,503.

Schedule D (Form 990) 2009

$\Lambda$ TKG TM $\gamma$	TW KIL	IBKOOGU	CLARK	REES
THOMAS	MATT	REESE	TRUST	

Part VII Investments - Other Securities. Sec	e Form 990, Part X, line 12.			
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valua Cost or end-of-year mar	
Financial derivatives				
Closely-held equity interests				
Other				
171,888.913 SHARES FED. TOTAL				
RET. BD. FD.	1,821,222.	COST		<u> </u>
94,277.393 SHARES PIMCO TOTAL	<u></u>			
RET. FD.	1,014,748.	COST		
			<del></del>	·
		<u> </u>		
			****	
				······································
Total (Col (b) must equal Form 990, Part X, col (B) line 12 ) ▶	2,835,970.	······································	· · · · · · · · · · · · · · · · · · ·	
Part VIII Investments - Program Related. Se		<del></del>	•••••	
	·	<u></u>	(c) Method of valua	tion:
(a) Description of investment type	(b) Book value	(	Cost or end-of-year mar	
			<del></del>	
		<del></del>		
			···	
		<del></del>		
			<del>- ,, ,</del>	
			<del></del>	<del></del>
Total (Cal (b) must savel Form COO, Bart V, sal (B) line 12.)			· · · · · · · · · · · · · · · · · · ·	
Total. (Col (b) must equal Form 990, Part X, col (B) line 13) Part X Other Assets. See Form 990, Part X, line	i.			
	Description	-		(b) Book value
(2)				(3) 5000 12.00
				<del></del>
				<del></del>
	<del></del>			
	4 m 3			-
Total. (Column (b) must equal Form 990, Part X, col (B) line Part X Other Liabilities. See Form 990, Part X,				
(a) Decorption of liability		(b) Amount		
······································		(b) Amount	$\dashv$	
Federal Income taxes			_	
			$\dashv$	
	<del> </del>	····	$\dashv$	
		·		
			$\dashv$	
			$\dashv$	
			_	
		_		
Total. (Column (b) must equal Form 990, Part X, col (B) line	25.)			

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	dule D (Form 990) 2009 THOPIAS PIATT REEDE TROOT	. A	: 101-4	<del></del>	332347 Tage 4
Pa	t XI Reconciliation of Change in Net Assets from Form 990	to Audited Fi		ements	201 042
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1 -		301,842. 588,993.
2	Total expenses (Form 990, Part IX, column (A), line 25)		2		<287,151.
3	Excess or (deficit) for the year. Subtract line 2 from line 1		3		<u> </u>
4	Net unrealized gains (losses) on investments		4		
5	Donated services and use of facilities		5		<del></del>
6	Investment expenses		6		
7	Prior period adjustments		7		
8	Other (Describe in Part XIV.)		8		
9	Total adjustments (net). Add lines 4 through 8	0	9		<287,151.
10 Do:	Excess or (deficit) for the year per audited financial statements. Combine lines 3  † XII Reconciliation of Revenue per Audited Financial States	ments With R		Return	1201,131.
		IIICIICS WICITIV	evenue per i	1	
1	Total revenue, gains, and other support per audited financial statements  Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
2	Net unrealized gains on investments	2a			
a	Donated services and use of facilities	2b	•	┥	
b	Recoveries of prior year grants	2c	*	7	
C	Other (Describe in Part XIV.)	2d		<b>∃</b>	
d	Add lines 2a through 2d	20		2e	
е 3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
a b	Other (Describe in Part XIV.)	4b	-	7	
	Add lines <b>4a</b> and <b>4b</b>			4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	
	t XIII Reconciliation of Expenses per Audited Financial State	ements With E	xpenses pe	r Returi	<u> </u>
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				··· ·
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b		]	
С	Other losses	2c		]	
d	Other (Describe in Part XIV)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	·
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		_	
b	Other (Describe in Part XIV.)	4b		_	
C	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	
Pa	rt XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Pa e 2, Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also co				

**2** Employer identification number 58-6352347 OMB No 1545-0047 Open to Public AID TO VISION IMPAIRED Inspection CHILDRENS HEALTHCARE (h) Purpose of grant or assistance X Yes recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any INDIVIDUALS Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection non-cash assistance (g) Description of (f) Method of valuation (book, FMV, appraisal, other) Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ö ö (e) Amount of non-cash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ► Attach to Form 990. (d) Amount of cash grant 217 ,771. 217,771 REESE AND (c) IRC section if applicable VIRGINIA KIMBROUGH CLARK 501(C)(3) 501(C)(3) Enter total number of section 501(c)(3) and government organizations TRUST THOMAS MATT REESE 58-0548732 58-1710601 General Information on Grants and Assistance (p) EIN criteria used to award the grants or assistance? Enter total number of other organizations 1 (a) Name and address of organization CHILDRENS' HEALTHCARE OF ATLANTA GEORGIA LIONS LIGHTHOUSE FDN., INC. - 1775 CLAIRMONT ROAD or government Name of the organization 1687 TULLIE CIRCLE DECATUR, GA 30033 ATLANTA, GA 30329 Department of the Treasury Internal Revenue Service SCHEDULE (Form 990) Part

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Schedule I (Form 990) 2009

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Page 2

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THOMAS MATT REESE TRUST

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed Schedule I (Form 990) 2009 Par ≡

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) ASSETS, AND THE RECIPIENT OF THE ASSISTANCE IS NAMED IN THE GOVERNING TRUST Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information 2: THE ORGANIZATION MAINTAINS RECORDS OF AMOUNTS SUCH AMOUNTS BEING THE ENTIRE NET INCOME OF THE TRUST (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance LINE ı, PART OF ASSISTANCE, SCHEDULE DOCUMENT

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Schedule I (Form 990) 2009

## SCHEDULE O

## **Supplemental Information to Form 990**

(Form 990)

Department of the Treasury

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009 Open to Public Inspection

Name of the organization

VIRGINIA KIMBROUGH CLARK REESE AND THOMAS MATT REESE TRUST

Employer identification number 58-6352347

FORM 990, PART VI, SECTION B, LINE 11: THE SENIOR VICE PRESIDENT-DIRECTOR
OF FOUNDATION AND ENDOWMENT SERVICES REVIEWS AND SIGNS THE ORGANIZATION'S
TAX RETURN BEFORE IT IS FILED.
FORM 990, PART VI, SECTION B, LINE 12C: THE POLICY IS ENFORCED BY
REQUIRING QUARTERLY REPORTS TO BE FILED WITH THE COMPLIANCE DEPARTMENT OF
SYNOVUS TRUST COMPANY.
FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS
GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS
AVAILABLE TO THE GENERAL PUBLIC UPON REQUEST.



딘 FL  $\mathbf{F}\mathbf{I}$ 딘 FEDERAL LONG TERM STATE LONG TERM FEDERAL 5 YR GAIN STATE 5 YR GAIN 000 FEDERAL LOSS CARRYOVER 1,356 59 1,356.59 37 73.72 70.33 01/11/10 PAGE 147 146 FEDERAL SHORT TERM FEDERAL LOI STATE SHORT TERM STATE LONG ST 4,876 89 SCHEDULE OF CAPITAL GAINS AND LOSSES FOR TAX PURPOSES DEC 31 TAX YEAR 55,378 01-55,378 01-8.14-8.14-8.14-NET PROCEEDS FEDERAL TAX COST STATE TAX COST 70 33 146.37 1,356.59 4,876.89 73.72 VIRGINIA & MATT REESE TRUST
TAX IDENT NO 58-6352347
ADM OFFICER WFM
INV OFFICER MTU DATE SOLD DATE ACQ 00/00/00 00/00/00 00/00/00 00/00/00 00/00/00 00/00/00 10/29/09 00/00/00 5A SYNOVUS TRUST CO N.A TO REVERSE ENTRY OF 10/29/09
RECORD ENTRY NO. 0910290004402
TO ADJ COST BASIS DUE TO CORP ACTION
SOLD .470 SHS 10/29/09
TO MISC BROKER
© 17.323 LONG TERM CAPITAL GAINS DIST OF \$ .024 PER SH ON 56,127 SH PIMCO TOTAL RETURN FD INST #35 \*\*RECORD DATE 12/08/2009 SHORT TERM CAPITAL GAINS DIST OF \$ .086 PER SH ON 56,127 SH PIMCO TOTAL RETURN FD INST #35 \*\*RECORD DATE 12/08/2009 TO REVERSE ENTRY OF 10/16/09 RECORD ENTRY NO. 0910280002142 TRANSACTION DESCRIPTION RECD PROCEEDS ON CLASS ACTION AMERICAN INTL GROUP INC COM RECD PROCEEDS ON CLASS ACTION HCA INC COM RECD PROCEEDS ON CLASS ACTION HCA INC COM INVESTED PRINCIPAL ASSETS ACCOUNT 31-A150-01-5 PFIZER INC COM REPORT PTR140



FEDERAL LOSS CARRYOVER 01/11/10 PAGE 148 DEC 31 TAX YEAR SA SYNOVUS TRUST CO N.A. ACCOUNT 31-A150-01-5 REPORT PTR140

F. IS SL SL  $\Gamma$ 42,488.80-42,488.80-000 FEDERAL LONG TERM STATE LONG TERM FEDERAL 5 YR GAIN STATE 5 YR GAIN 45,888.65-1,764.47 1,764.47 ----- GAIN/LOSS FEDERAL SHORT TERM FEDE STATE SHORT TERM STAI 7,467.27-7,467.27-8,792.958,792.95 5,775.05-SCHEDULE OF CAPITAL GAINS AND LOSSES FOR TAX PURPOSES 6,722.86 56,678.93 56,678.93 250,000.00 250,000.00 250,000.00 NET PROCEEDS FEDERAL TAX COST STATE TAX COST 55,378.01-5,258.88 56,922.58 8,792.95 VIRGINIA & MATT REESE TRUST TAX IDENT NO 58-6352347 ADM OFFICER WFM INV OFFICER MTU DATE SOLD DATE ACQ 00/00/00 00/00/00 01/15/09 01/16/01 02/23/09 11/13/08 02/23/09 11/13/08 TO ADJUST CARRYING VALUE PROCESSING
TO REMOVE 1,102 SHS FOR
PFIZER INC COM AND CASH
STOCK RATE . 985 PER SH HELD
CASH RATE 33 PER SH HELD
FULLY TAXABLE EXCHANGE
WYETH COM LONG TERM CAPITAL GAINS DIST OF \$ .039 PER SH ON 45,207 SH SENTINEL GOVERNMENT SECURITIES FUND CLASS I #490 \*\*RECORD DATE 12/22/2009 SHORT TERM CAPITAL GAINS DIST OF \$ .194 PER SH ON 45,207 SH SENTINEL GOVERNMENT SECURITIES FUND CLASS I #490 \*\*RECORD DATE 12/22/2009 RECD PROCEEDS ON MATURITY OF 250,000 PAR VALUE MORGAN J P & CO INC MEDIUM TERM SUB NTS BOOK ENTRY TRANCHE # SB 00022 6.00% DTD 01/25/1999 DUE 01/15/2009 SOLD 1619 SHS 02/23/09 TO CAPITAL INSTITUTIONAL SERVICES @ 4.17 SOLD 2284 SHS 02/23/09 TO CAPITAL INSTITUTIONAL SERVICES TRANSACTION DESCRIPTION BANK OF AMERICA CORP COM



FL SL 4,077 04- FL 4,077 04- SL SL3,522.20- FL 3,522.20- SL 1,667.07- FL 1,667.07- SL 3,856 64- FL 3,856.64- SL FEDERAL LONG TERM
STATE LONG TERM
FEDERAL 5 YR GAIN
STATE 5 YR GAIN
45,888.65-S 805.66- 1 805.66- 3 000 FEDERAL LOSS CARRYOVER 01/11/10 PAGE 149 FEDERAL SHORT TERM FEDERAL STATE SHORT TERM STATE ST 974 98-974 98-5,775.05-SCHEDULE OF CAPITAL GAINS AND LOSSES FOR TAX PURPOSES TAX YEAR DEC 31 2,942.77 3,917.75 3,917.75 5,772.60 9,294.80 9,294.80 1,171.33 2,838.40 2,838 40 612.88 1,418.54 1,418.54 1,942.58 5,799.22 5,799.22 22,383.48 26,460.52 26,460.52 NET PROCEEDS FEDERAL TAX COST STATE TAX COST 56,922.58 VIRGINIA & MATT REESE TRUST TAX IDENT NO 58-6352347 ADM OFFICER WFM INV OFFICER MTU DATE SOLD DATE ACQ 02/27/09 11/13/08 02/27/09 02/20/08 02/27/09 04/11/06 02/27/09 09/10/07 02/27/09 06/05/07 02/27/09 02/20/08 5A SYNOVUS TRUST CO N A. TRANSACTION DESCRIPTION SOLD 244 SHS 02/27/09 TO BONY ESI @ 91.7536 GOLDMAN SACHS GROUP INC COM ACCOUNT 31-A150-01-5 SOLD 148 SHS 02/27/09 TO BONY ESI @ 39.0218 ALLERGAN INC COM SOLD 83 SHS 02/27/09 TO BONY ESI @ 14.13 COACH INC COM SOLD 57 SHS 02/27/09 TO BONY ESI @ 10.77 CORNING INC COM SOLD 181 SHS 02/27/09 TO BONY ESI @ 10.7501 EBAY INC COM SOLD 174 SHS 02/27/09 TO BONY ESI @ 16.9301 ADOBE SYS INC COM @ 2.32 CITIGROUP INC COM REPORT PTR140



REPORT PTR140 5A SYNOVUS TRUST CO N.A	٠	TAX YEAR	DEC 31	01/11/10 PAGE 150
ACCOUNT 31-A150-01-5 VIRGINIA & MATT REESE TRUST TAX IDENT NO 58-6352347 ADM OFFICER WFM INV OFFICER MTU	ATT REESE TF 58-6352347 WFM MTU	UST	FB1	FEDERAL LOSS CARRYOVER ST LT .00
SCHEDULE OF	CAPITAL GAIN	CAPITAL GAINS AND LOSSES FOR T	TAX PURPOSES	
TRANSACTION DESCRIPTION	DATE SOLD DATE ACQ	NET PROCEEDS FEDERAL TAX COST STATE TAX COST	FEDERAL SHORT TERM STATE SHORT TERM	GAIN/LOSS TERM FEDERAL LONG TERM THEDERAL SYR GAIN
SOLD 538 SHS 02/27/09 TO BONY ESI @ 68.6572 L-3 COMMUNICATIONS CORP COM	02/27/09 11/13/08	36,927 94 44,627.81 44,627.81	2,233.65- 2,233.65-	
SOLD 301 SHS 02/27/09 TO BONY ESI @ 41.8718 NEWMONT MINING CORP HLDG CO COM	02/27/09 11/06/07	12,598 06 16,298.40 16,298.40		3,700.34- FL 3,700.34- SL
SOLD 1745 SHS 02/27/09 TO BONY ESI @ 13.5618 NORDSTROM INC COM	02/27/09 11/13/08	23,634.66 32,470.33 32,470.33	600.04	9,435.71- FL 9,435.71- SL
SOLD 45 SHS 02/27/09 TO BONY ESI @ 20.03 VALERO ENERGY COM	02/27/09 11/06/07	900.55 3,126.08 3,126.08		2,225 53- FL 2,225.53- SL
RECD PROCEEDS ON MATURITY OF 250,000 PAR VALUE INTERNATIONAL LEASE FIN CORP BDS 6.375% DTD 03/08/2002 DUE 03/15/2009	03/15/09 05/17/02	250,000.00 250,000.00 250,000.00		
TENDERED 421 SHS @ 95.00 FOR EACH SH HELD GENENTECH INC COM NEW	03/26/09 02/27/09	39,995.00 34,221.49 34,221.49	1,471.62	4,301.89 FL 4,301.89 SL
RECD PROCEEDS ON MATURITY OF 250,000 PAR VALUE FEDERAL NATL MTG ASSN NT	05/15/09 08/09/05	250,000 00 250,000 00 250,000.00		



FL 21,598 57- FL 21,598.57- SL 4,169.93- FL 4,169.93- SL FEDERAL LOSS CARRYOVER ST .00 LT .00 19,181 26 19,181.26 STATE LONG TERM FEDERAL 5 YR GAIN STATE 5 YR GAIN FEDERAL LONG TERM 01/11/10 PAGE 151 5,048 FEDERAL SHORT TERM FEDERAL STATE SHORT TERM STATE 7 2,005.01-2,005.01-2,723.09 2,723.09 SCHEDULE OF CAPITAL GAINS AND LOSSES FOR TAX PURPOSES TAX YEAR DEC 31 NET PROCEEDS
FEDERAL TAX COST
STATE TAX COST 35,610.95 16,429.69 16,429.69 450,000.00 450,000.00 450,000.00 15,503.26 19,673.19 19,673.19 10,502.99 7,779 90 7,779.90 32,305.94 53,904 51 53,904 51 8,649.59 15,703.18 15,703.18 12,433.46 9,839.41 VIRGINIA & MATT REESE TRUST TAX IDENT NO S8-6352347 ADM OFFICER WFM INV OFFICER MTU DATE SOLD DATE ACQ 05/22/09 12/22/93 06/15/09 06/06/05 06/16/09 01/09/03 06/16/09 02/27/09 06/16/09 06/16/09 08/13/08 06/16/09 11/13/08 5A SYNOVUS TRUST CO N.A 4.25% DTD 05/21/2004 DUE 05/15/2009 RECD PROCEEDS ON MATURITY OF 450,000 PAR VALUE US TREASURY NOTE 4.000% DTD 06/15/04 DUE 06/15/2009 SOLD 799.549 SHS 06/16/09 @ 19.39 ICM SMALL COMPANY PORTFOLIO #1229 TRANSACTION DESCRIPTION SOLD 2297.720 SHS 06/16/09 @ 14.06 LAZARD EMERGING MARKETS PORTFOLIO - IN SOLD 244.882 SHS 06/16/09 @ 42.89 HARBOR INTERNATIONAL FUND SOLD 273 SHS 06/16/09 TO BONY ESI @ 31.7018 AFLAC INC COM ACCOUNT 31-A150-01-5 SOLD 437 SHS 06/16/09 TO BONY ESI SOLD 750 SHS 05/22/09 TO BONY ESI @ 47.5 COCA COLA CO COM REPORT PTR140

2,594.05



582.21- FL 582.21- SL FL FL SL 25,857.33- FL 25,857.33- SL 3,511.50- FL 3,511.50- SL 1,781 87- FL 1,781.87- SL 2,163 05- 1 2,163.05- 8 6,069.76- 1 6,069.76- 9 FEDERAL LONG TERM STATE LONG TERM FEDERAL 5 YR GAIN STATE 5 YR GAIN FEDERAL LOSS CARRYOVER 01/11/10 PAGE 152 FEDERAL SHORT TERM FEDERAL LONG TERN STATE SHORT TERM 2,594 05 SCHEDULE OF CAPITAL GAINS AND LOSSES FOR TAX PURPOSES TAX YEAR DEC 31 NET PROCEEDS FEDERAL TAX COST STATE TAX COST 16,736.67 42,594.00 42,594.00 3,283 29 5,446.34 5,446.34 5,316.82 11,386.58 11,386.58 1,129.38 1,711.59 1,711.59 11,873.73 15,385.23 15,385.23 3,665 01 5,446.88 5,446.88 9,839.41 VIRGINIA & MATT REESE TRUST
TAX IDENT NO 58-6352347
ADM OFFICER WFM
INV OFFICER MTU DATE SOLD DATE ACQ 06/16/09 09/10/07 06/16/09 06/03/08 06/16/09 04/11/06 06/16/09 06/16/09 11/06/07 06/16/09 06/05/07 5A SYNOVUS TRUST CO N.A. SOLD 674 SHS 06/16/09
TO CAPITAL INSTITUTIONAL SERVICES
@ 24.85
AMERICAN EXPRESS CO COM TRANSACTION DESCRIPTION ACCOUNT 31-A150-01-5 SOLD 149 SHS 06/16/09 TO BONY ESI @ 35.7018 CATERPILLAR INC COM SOLD 452 SHS 06/16/09 TO BONY ESI @ 26 2875 COACH INC COM SOLD 156 SHS 06/16/09 TO BONY ESI @ 23 5118 DISNEY WALT CO COM SOLD 59 SHS 06/16/09 TO BONY ESI @ 19.1601 CISCO SYS INC COM SOLD 41 SHS 06/16/09 TO BONY ESI @ 80.1 @ 28.4701 ADOBE SYS INC COM APACHE CORP COM REPORT PTR140



01/11/10 PAGE 153	FEDERAL LOSS CARRYOVER ST 00 LT .00		GAIN/LOSS ERM FEDERAL LONG TERM M STATE LONG TERM FEDERAL 5 YR GAIN	SIAIE S IK GAIN 1,871.51- FL 1,871.51- SL	3,202 43- FL 3,202.43- SL	11,650 03- FL 11,650.03- SL	2,579.88 FL 2,579.88 SL	09- 9,876.90- FL 09- 9,876.90- SL	542.94- FL 542.94- SL	1,616.15- FL
R DEC 31		TAX PURPOSES	FEDERAL SHORT TERM STATE SHORT TERM					564.09- 564.09		
TAX YEAR	UST	CAPITAL GAINS AND LOSSES FOR T	NET PROCEEDS FEDERAL TAX COST STATE TAX COST	1,785 25 3,656.76 3,656.76	3,750.23 6,952 66 6,952.66	5,735.37 17,385.40 17,385.40	7,347 36 4,767 48 4,767.48	11,702.61 22,143.60 22,143.60	6,769.35 7,312.29 7,312.29	9,457.09 11,073.24
N.A.	& MATT REESE TRUST I NO 58-6352347 JER WFM		DATE SOLD DATE ACQ	06/16/09 06/05/07	06/16/09 06/05/07	06/16/09 09/10/07	06/16/09 07/01/04	06/16/09 08/13/08	06/16/09 05/19/05	06/16/09 06/03/08
REPORT PTR140 5A SYNOVUS TRUST CO N	ACCOUNT 31-A150-01-5 VIRGINIA & M. TAX IDENT NO ADM OFFICER INV OFFICER	SCHEDOLE OF	TRANSACTION DESCRIPTION	SOLD 70 SHS 06/16/09 TO BONY ESI @ 25.5218 DU PONT E I DE NEMOURS & CO COM	SOLD 217 SHS 06/16/09 TO BONY ESI @ 17.3001 EBAY INC COM	SOLD 448 SHS 06/16/09 TO BONY ESI @ 12.82 GENERAL ELEC CO COM	SOLD 51 SHS 06/16/09 TO BONY ESI @ 144.0872 GOLDMAN SACHS GROUP INC COM	SOLD 518 SHS 06/16/09 TO CAPITAL INSTITUTIONAL SERVICES @ 22.61 HALLIBURTON CO COM	SOLD 202 SHS 06/16/09 TO BONY ESI @ 33.53 J P MORGAN CHASE & CO COM	SOLD 399 SHS 06/16/09 TO BONY ESI



01/11/10 PAGE 154	FEDERAL LOSS CARRYOVER ST .00 LT .00			STATE 5 YR GAIN 1,616 15- SL	8,679.79- FL 8,679.79- SL	416.29- FL 416.29- SL	.18 FL	146.34- FL 146.34- SL	175.22- FL 175.22- SL	1,829.25- FL 1,829 25- SL
AR DEC 31	FI	TAX PURPOSES	FEDERAL SHORT TERM STATE SHORT TERM							
TAX YEAR	ust	CAPITAL GAINS AND LOSSES FOR TAX PURPOSES	NET PROCEEDS FEDERAL TAX COST STATE TAX COST	11,073 24	6,768.91 15,448.70 15,448.70	2,047.45 2,463.74 2,463.74	43.73 43.55 43.55	1,984.52 2,130.86 2,130.86	570 42 745.64 745.64	6,077.92 7,907.17 7,907.17
А.	& MATT REESE TRUST . NO 58-6352347 ER WFM ER MTU		DATE SOLD DATE ACQ		06/16/09 11/06/07	06/16/09 06/03/08	06/16/09 12/28/04	06/16/09 09/10/07	06/16/09 01/11/07	06/16/09 02/20/08
REPORT PTR140 5A SYNOVUS TRUST CO N.A	ACCOUNT 31-A150-01-5 VIRGINIA & M. TAX IDENT NO ADM OFFICER INV OFFICER	SCHEDULE OF	TRANSACTION DESCRIPTION	@ 23.7201 MICROSOFT CORP COM	SOLD 723 SHS 06/16/09 TO CAPITAL INSTITUTIONAL SERVICES @ 9.38 NEWS CORP CL A	SOLD 37 SHS 06/16/09 TO BONY ESI @ 55.3554 NIKE INC CLASS B	SOLD 1 SHS 06/16/09 TO BONY ESI @ 43.75 QUALCOMM INC COM	SOLD 113 SHS 06/16/09 TO BONY ESI @ 17.5801 SCHWAB CHARLES CORP NEW COM	SOLD 28 SHS 06/16/09 TO BONY ESI @ 20.3901 STAPLES INC COM	SOLD 435 SHS 06/16/09 TO BONY ESI @ 13.9901 STARBUCKS CORP COM

01/11/10 PAGE 155 TAX YEAR DEC 31 REPORT PTR140 5A SYNOVUS TRUST CO N.A.

FEDERAL LOSS CARRYOVER ST 00 LT 00

SCHEDULE OF CAPITAL GAINS AND LOSSES FOR TAX PURPOSES

ACCOUNT 31-A150-01-5 VIRGINIA & MATT REESE TRUST
TAX IDENT NO 58-6352347
ADM OFFICER WFM
INV OFFICER MTU

	FL	SL	SL	FL	SL	FL	
LOSS FEDERAL LONG TERM STATE LONG TERM FEDERAL S YR GAIN STATE 5 YR GAIN	237 07- 237.07-	25,702 19- 25,702 19-	7,018.73 7,018.73	1,323.57	24,143.33 24,143.33	21,888.87 21,888 87	
FEDERAL SHORT TERM FEDI STATE SHORT TERM STA' STATE SHORT TERM STA'		6,196.87- 6,196.87-					
NET PROCEEDS FEDERAL TAX COST STATE TAX COST	874.89 1,111.96 1,111.96	26,216.87 58,115.93 58,115.93	12,495 29 5,476.56 5,476.56	335,997.62 334,674.05 334,674.05	427,697.46 403,554.13 403,554.13	266, 443.63 244,554.76 244,554.76	55,378.01 55,378.01
DATE SOLD DATE ACQ	06/16/09 06/03/08	06/16/09 11/13/08	07/15/09 12/22/93	08/14/09 12/27/07	08/14/09 12/27/07	08/25/09 10/10/06	10/15/09 06/16/09
TRANSACTION DESCRIPTION	SOLD 16 SHS 06/16/09 TO BONY ESI @ 54.7 UNITED TECHNOLOGIES CORP COM	SOLD 1517 SHS 06/16/09 TO CAPITAL INSTITUTIONAL SERVICES @ 17.3 VALERO ENERGY COM	SOLD 250 SHS 07/15/09 TO BONY ESI @ 50 COCA COLA CO COM	SOLD 33300.061 SHS 08/14/09 @ 10.09 PIMCO FUNDS LOW DURATION INST #36	SOLD 39274.331 SHS 08/14/09 @ 10.89 SENTINEL GOVERNMENT SECURITIES FUND CLASS I #490	SOLD 250000 08/25/09 TO UBS PAINE WEBBER @ 107.439 FEDERAL HOME LN MTG CORP NT 4.50% DTD 01/16/2004 DUE 01/15/2014	REVERSED ON 12/17/2009 TO ADJUST CARRYING VALUE PROCESSING



SL 834 23- FL FEDERAL LOSS CARRYOVER 602.20 602.20 STATE LONG TERM FEDERAL 5 YR GAIN STATE 5 YR GAIN FEDERAL LONG TERM 01/11/10 PAGE 156 FEDERAL SHORT TERM FEDERAL LOI STATE SHORT TERM STATE LONG ST 65-3,317 87 3,317.87 SCHEDULE OF CAPITAL GAINS AND LOSSES FOR TAX PURPOSES TAX YEAR DEC 31 250,000.00 250,000.00 250,000.00 NET PROCEEDS FEDERAL TAX COST STATE TAX COST 55,535.40 51,615 33 51,615.33 28,264.58 29,098 81 8 14 8.79 8.79 8.14 8.14 8.14 55,378.01 VIRGINIA & MATT REESE TRUST TAX IDENT NO S8-6352347 ADM OFFICER WFM INV OFFICER MTU DATE SOLD DATE ACQ 10/15/09 06/16/09 10/29/09 12/02/09 12/01/09 12/14/00 12/02/09 02/03/03 REVERSED ON 12/17/2009

TO ADJ COST BASIS DUE TO CORP ACTION 10/15/09
SOLD .470 SHS 10/29/09

TO MISC BROKER

© 17.323

PFIZER INC COM 5A SYNOVUS TRUST CO N.A. RECD PROCEEDS ON MATURITY OF 250,000 PAR VALUE ALLSTATE CORP 2009 SR NT 7.20% DTD 11/17/1999 DUE 12/01/2009 CALLABLE TRANSACTION DESCRIPTION TO REMOVE 1,102 SHS FOR PFIZER INC COM AND CASH STOCK RATE 985 PER SH HELD CASH RATE 33 PER SH HELD FULLY TAXABLE EXCHANGE WYETH COM TO REMOVE 1,102 SHS FOR PFIZER INC COM AND CASH STOCK RATE .985 PER SH HELD CASH RATE 33 PER SH HELD FULLY TAXABLE EXCHANGE WYETH COM SOLD 1203.260 SHS 12/02/09 @ 23.49 ACCOUNT 31-A150-01-5 SOLD .470 SHS 10/29/09 TO MISC BROKER @ 17.32 PFIZER INC COM REPORT PTR140

/LOSS ------FEDERAL LONG TERM
STATE LONG TERM
FEDERAL 5 YR GAIN
STATE 5 YR GAIN
834.23- S! FL  $_{
m SL}$ FL FL SL SLFL 1,114.47- FL 1,114 47- SL 2,154.28- E 2,154.28- S 92.92- E 220.53- 1 220.53- 8 3.94-FEDERAL LOSS CARRYOVER ST .00 LT .00 644 52 644 52 01/11/10 PAGE 157 FEDERAL SHORT TERM FEDE. STATE SHORT TERM STATE 180.50 SCHEDULE OF CAPITAL GAINS AND LOSSES FOR TAX PURPOSES TAX YEAR DEC 31 23,240.88 22,596.36 22,596.36 8,342 69 10,496.97 10,496.97 1,679.45 1,899.98 1,899.98 631.35 724.27 724.27 7,077.89 8,192.36 8,192.36 14.15 18.09 18.09 NET PROCEEDS FEDERAL TAX COST STATE TAX COST 1,667.81 1,487.31 29,098.81 VIRGINIA & MATT REESE TRUST TAX IDENT NO 58-6352347 ADM OFFICER WFM INV OFFICER MTU DATE SOLD DATE ACQ 12/02/09 05/30/07 12/02/09 08/11/03 12/02/09 06/05/07 12/02/09 02/20/08 12/02/09 06/03/08 12/02/09 02/20/08 12/02/09 06/16/09 REPORT PTR140 5A SYNOVUS TRUST CO N A. ICM SMALL COMPANY PORTFOLIO #1229 SOLD 3791.335 SHS 12/02/09 @ 6.13 SENTINEL SMALL COMPANY FUND CL-I TRANSACTION DESCRIPTION SOLD .771 SHS 12/02/09 @ 18.35 LAZARD EMERGING MARKETS PORTFOLIO - IN AMERICAN EXPRESS CO COM ACCOUNT 31-A150-01-5 SOLD 305 SHS 12/02/09 TO BONY ESI @ 27.3713 AT&T INC COM SOLD 33 SHS 12/02/09 TO BONY ESI @ 19.15 ALTRIA GROUP INC COM SOLD 173 SHS 12/02/09 TO BONY ESI @ 40.9312 SOLD 36 SHS 12/02/09 TO BONY ESI @ 46 67 SOLD 29 SHS 12/02/09 TO BONY ESI AFLAC INC COM



721.73- FL 721.73- SL FLFL SL SL  $_{
m SL}$ FL 4,999.42- I 568.33-13 23-13.23-41.94- 141.94- 8 FEDERAL LONG TERM STATE LONG TERM FEDERAL 5 YR GAIN STATE 5 YR GAIN FEDERAL LOSS CARRYOVER ST .00 LT .00 1,384 30 1,384.30 01/11/10 PAGE 158 FEDERAL SHORT TERM FEDERAL LONG TI 3,396 63 3,396 63 180.50 SCHEDULE OF CAPITAL GAINS AND LOSSES FOR TAX PURPOSES TAX YEAR DEC 31 13,801 06 18,800.48 18,800.48 13,793.32 9,012.39 9,012.39 917 47 1,485 80 1,485.80 136.25 178 19 178.19 9,791.62 10,513.35 10,513.35 NET PROCEEDS FEDERAL TAX COST STATE TAX COST 31.53 44.76 44.76 1,487.31 VIRGINIA & MATT REESE TRUST TAX IDENT NO 58-6352347
ADM OFFICER WFM
INV OFFICER MTU DATE SOLD DATE ACQ 12/02/09 08/13/08 12/02/09 06/16/09 12/02/09 09/10/07 12/02/09 02/20/08 12/02/09 08/13/08 12/02/09 02/20/08 5A SYNOVUS TRUST CO N.A. TRANSACTION DESCRIPTION SOLD 1 SHS 12/02/09
TO BONY ESI
@ 31.55
ARCHER DANIELS MIDLAND CO COM SOLD 5 SHS 12/02/09 TO BONY ESI @ 27.27 BANK NEW YORK MELLON CORP COM SOLD 175 SHS 12/02/09
TO BONY ESI
@ 55.9711
BAXTER INTERNATIONAL INC COM SOLD 71 SHS 12/02/09 TO BONY ESI @ 12.94 APPLIED MATERIALS INC COM ACCOUNT 31-A150-01-5 SOLD 143 SHS 12/02/09 TO BONY ESI @ 96.531 APACHE CORP COM SOLD 70 SHS 12/02/09 TO BONY ESI @ 197.07 APPLE INC COM @ 57.53 AMGEN INC COM REPORT PTR140



642.28- FL 642.28- SL FL SL FL SL FL SL FL SL FL 딘 5,447 22- E 9,912.87- 1 9,912.87- 9 305.56-52-000 FEDERAL LONG TERM STATE LONG TERM FEDERAL 5 YR GAIN STATE 5 YR GAIN FEDERAL LOSS CARRYOVER 1,012 18 1,012.18 56.05 56.05 01/11/10 PAGE 159 722 FEDERAL SHORT TERM FEDERAL STATE SHORT TERM STATE 4,338.50 970.78 970.78 1,320.11 SCHEDULE OF CAPITAL GAINS AND LOSSES FOR TAX PURPOSES TAX YEAR DEC 31 10,072.15 8,695.99 8,695.99 20,701 74 26,148.96 26,148.96 33,677.21 29,644.27 29,644.27 11,082.08 9,099.12 9,099.12 5,430 89 6,073.17 6,073.17 NET PROCEEDS FEDERAL TAX COST STATE TAX COST 5,592.326,314.84 72 59 59 20,751 30,664 9 VIRGINIA & MATT REESE TRUST TAX IDENT NO 58-6352347 ADM OFFICER WFM INV OFFICER MTU DATE SOLD DATE ACQ 12/02/09 08/13/08 12/02/09 06/16/09 12/02/09 06/16/09 12/02/09 01/11/07 12/02/09 06/16/09 12/02/09 09/10/07 12/02/09 06/05/07 REPORT PTR140 SA SYNOVUS TRUST CO N A. SOLD 587 SHS 12/02/09
TO BONY ESI
@ 35.3706
DU PONT E I DE NEMOURS & CO COM TRANSACTION DESCRIPTION SOLD 268 SHS 12/02/09 , TO BONY ESI @ 37.6011 DOMINION RESOURCES INC/VA COM ACCOUNT 31-A150-01-5 SOLD 429 SHS 12/02/09 TO BONY ESI @ 78.5212 CHEVRON CORPORATION SOLD 154 SHS 12/02/09 TO BONY ESI @ 71.9809 DANAHER CORP COM SOLD 177 SHS 12/02/09 TO BONY ESI @ 30.7013 DISNEY WALT CO COM SOLD 352 SHS 12/02/09 TO BONY ESI @ 58.8308 CATERPILLAR INC COM SOLD 334 SHS 12/02/09 TO BONY ESI



F. S. FL F. St. SISL FEDERAL LONG TERM STATE LONG TERM FEDERAL 5 YR GAIN STATE 5 YR GAIN 2,045 96- 1 2,045.96- 3 4,992.65- 14,992.65- 8 31,206 88- 1 31,206 88- 3 FEDERAL LOSS CARRYOVER ST 00 LT 00 27.26 27.26 01/11/10 PAGE 160 FEDERAL SHORT TERM FEDERA STATE SHORT TERM STATE 279.02 402.29 402.29 SCHEDULE OF CAPITAL GAINS AND LOSSES FOR TAX PURPOSES TAX YEAR DEC 31 22,827.35 54,034.23 54,034.23 NET PROCEEDS FEDERAL TAX COST STATE TAX COST 8,818 56 13,811.21 13,811.21 785.62 758.36 758.36 2,315.00 1,912.71 1,912.71 1,817.52 1,538.50 1,538.50 5,931.98 7,977.94 7,977.94 6,314.84 VIRGINIA & MATT REESE TRUST
TAX IDENT NO 58-6352347
ADM OFFICER WFM
INV OFFICER MTU DATE SOLD DATE ACQ 12/02/09 06/05/07 12/02/09 08/13/08 12/02/09 09/10/07 12/02/09 02/20/08 12/02/09 06/16/09 12/02/09 06/16/09 SA SYNOVUS TRUST CO N.A. SOLD 46 SHS 12/02/09
TO BONY ESI
@ 39.53
HONEYWELL INTERNATIONAL INC COM TRANSACTION DESCRIPTION ACCOUNT 31-A150-01-5 SOLD 1422 SHS 12/02/09 TO BONY ESI @ 16 0709 GENERAL ELEC CO COM SOLD 16 SHS 12/02/09 TO BONY ESI @ 49.12 HEWLETT PACKARD CO COM SOLD 178 SHS 12/02/09 TO BONY ESI @ 49.5613 EXELON CORPORATION COM SOLD 82 SHS 12/02/09 TO BONY ESI @ 28.25 HOME DEPOT INC COM SOLD 249 SHS 12/02/09 TO BONY ESI @ 23.8413 EBAY INC COM @ 16.7614 E M C CORP MASS COM REPORT PTR140



FL FL 2,410.97- FL 2,410.97- SL 6,305.31- I 6,305.31- S FEDERAL LONG TERM STATE LONG TERM FEDERAL 5 YR GAIN STATE 5 YR GAIN FEDERAL LOSS CARRYOVER 3,489 39 3,489.39 43 70 43 70 01/11/10 PAGE FEDERAL SHORT TERM FEDE: STATE SHORT TERM STATE 4,875.95 SCHEDULE OF CAPITAL GAINS AND LOSSES FOR TAX PURPOSES DEC 31 TAX YEAR 15,496.55 10,620.60 10,620.60 17,234.31 19,645.28 19,645.28 28,799.70 25,310.31 25,310.31 2,681.88 2,269.63 2,269.63 1,358.77 1,138.74 NET PROCEEDS FEDERAL TAX COST STATE TAX COST 1,533.14 1,489.44 1,489.44 16,382 22,688 22,688 VIRGINIA & MATT REESE TRUST
TAX IDENT NO 58-6352347
ADM OFFICER WFM
INV OFFICER MTU DATE SOLD DATE ACQ 12/02/09 06/16/09 12/02/09 10/06/05 12/02/09 06/16/09 12/02/09 01/26/04 12/02/09 06/05/07 12/02/09 06/03/08 12/02/09 06/16/09 5A SYNOVUS TRUST CO N.A. SOLD 21 SHS 12/02/09
TO BONY ESI
© 127.73
INTERNATIONAL BUSINESS MACHS CORP
COM TRANSACTION DESCRIPTION SOLD 243 SHS 12/02/09 TO BONY ESI @ 63.791 MEDCO HEALTH SOLUTIONS INC COM ACCOUNT 31-A150-01-5 SOLD 398 SHS 12/02/09 TO BONY ESI @ 43.3209 MEDTRONIC INC COM SOLD 967 SHS 12/02/09 TO BONY ESI @ 29.8008 MICROSOFT CORP COM SOLD 446 SHS 12/02/09 TO BONY ESI @ 36.751 MERCK & CO INC NEW COM SOLD 24 SHS 12/02/09 TO BONY ESI @ 63.9 JOHNSON & JOHNSON COM SOLD 31 SHS 12/02/09 TO BONY ESI REPORT PTR140



01/11/10 PAGE 162	PAGE SS CARRY		GAIN/LOSS "ERM FEDERAL LONG TERM M STATE LONG TERM FEDERAL 5 YR GAIN		164.99 FL 164.99 SL	7,123.51- FL 7,123.51- SL	38 30- FL 38 30- SL		92- FL .92- SL	83.77- FL 83.77- SL	
R DEC 31	Ē.	TAX PURPOSES	FEDERAL SHORT TERM STATE SHORT TERM	220.03		687.63 687.63		945.73 945.73			
REPORT PTR140 5A SYNOVUS TRUST CO N.A.	ACCOUNT 31-A150-01-5 VIRGINIA & MATT REESE TRUST TAX IDENT NO 58-6352347 ADM OFFICER WFM INV OFFICER MTU	CAPITAL GAINS AND LOSSES FOR T	NET PROCEEDS FEDERAL TAX COST STATE TAX COST	1,138.74	6,662.69 6,497.70 6,497.70	28,992.71 35,428.59 35,428.59	2,025.91 2,064.21 2,064.21	5,392.56 4,446.83 4,446.83	1,033.43 1,034 35 1,034.35	578.62 662.39 662.39	
		SCHEDULE OF CAPITAL GA	DATE SOLD DATE ACQ		12/02/09 11/06/07	12/02/09 02/27/09	12/02/09 06/03/08	12/02/09 06/16/09	12/02/09 06/05/07	12/02/09 06/03/08	
			TRANSACTION DESCRIPTION	@ 43.85 NATIONAL-OILWELL INC COM	SOLD 120 SHS 12/02/09 TO BONY ESI @ 55.5414 NEWMONT MINING CORP HLDG CO COM	SOLD 2469 SHS 12/02/09 TO BONY ESI @ 11 7605 NEWS CORP CL A	SOLD 31 SHS 12/02/09 TO BONY ESI @ 65.3712 NIKE INC CLASS B	SOLD 85 SHS 12/02/09 TO BONY ESI @ 63.461 PEPSICO INC COM	SOLD 21 SHS 12/02/09 TO BONY ESI @ 49 23 PHILIP MORRIS INTL INC COM	SOLD 7 SHS 12/02/09 TO BONY ESI @ 82.68 PRAXAIR INC COM	



PAGE 163	CARRYOVER 00 00		ONG TERM S TERM Y R GAIN	YR GAIN 1,677 90 FL 1,677 90 SL	126.66- FL 126.66- SL	279 46- FL 279 46- SL	102.37- FL 102.37- SL	353.27- FL 353.27- SL		
01/11/10	FEDERAL LOSS CARRYOVER ST LT 00		N/LOSS FEDERAL STATE LO FEDERAL	STATE 5 Y					08. 08.	
DEC 31		TAX PURPOSES	FEDERAL SHORT TERM STATE SHORT TERM						1,660.80	
TAX YEAR	RUST 7	CAPITAL GAINS AND LOSSES FOR TA	NET PROCEEDS FEDERAL TAX COST STATE TAX COST	13,706.21 12,028 31 12,028 31	1,665.34 1,792.00 1,792.00	9,308.37 9,587.83 9,587.83	7,967.95 8,070.32 8,070.32	7,806.49 8,159.76 8,159.76	18,076.73 16,415.93 16,415.93	250,000 00 250,000.00
N.A.	& MATT REESE TRUST T NO 58-6352347 CER WFM CER MTU	OF CAPITAL GAI	DATE SOLD DATE ACQ	12/02/09 12/28/04	12/02/09 04/11/06	12/02/09 04/11/06	12/02/09 06/03/08	12/02/09 05/19/05	12/02/09 06/16/09	12/07/09 01/04/01
REPORT PTR140 5A SYNOVUS TRUST CO	ACCOUNT 31-A150-01-5 VIRGINIA & M. TAX IDENT NO ADM OFFICER INV OFFICER	SCHEDULE	TRANSACTION DESCRIPTION	SOLD 217 SHS 12/02/09 TO BONY ESI @ 63.1814 PROCTER & GAMBLE CO COM	SOLD 35 SHS 12/02/09 TO BONY ESI @ 47.6 TARGET CORP COM	SOLD 119 SHS 12/02/09 TO BONY ESI @ 78 2412 3M CO COM	SOLD 117 SHS 12/02/09 TO BONY ESI @ 68.1215 UNITED TECHNOLOGIES CORP COM	SOLD 239 SHS 12/02/09 TO BONY ESI @ 32.6815 VERIZON COMMUNICATIONS INC COM	SOLD 331 SHS 12/02/09 TO BONY ESI @ 54.6314 WAL MART STORES INC COM	RECD PROCEEDS ON MATURITY OF 250,000 PAR VALUE

DEC 31 01/11/10 PAGE 164 FEDERAL LOSS CARRYOVER ST 00 LT .00		TAX PURPOSES	AL LON LONG	STATE 5 YR GAIN	7,937.17 FL 7,937.17 SL		912.49	82 64- 82.64-	192.28 FL 192.28 SL	19,679.01 241,647.14- FL 19,679.01 241,647.14- SL	13,669.87		
TAX YEAR I	UST	GAINS AND LOSSES FOR TAX I	NET PROCEEDS FEDERAL TAX COST FEI STATE TAX COST STATE	250,000.00	110,087.98 102,150.81 102,150.81	250,000.00 250,000.00 250,000.00	45,251.46 44,338.97 44,338.97	17,899.87 17,982.51 17,982.51	5,052.69 4,860.41 4,860.41	4,098,455.77 4,320,423.90 4,320,423.90	13,669,84	4084,785,93	4320,423,90
REPORT PIR140 SA SYNOVUS TRUST CO N.A.	ACCOUNT 31-A150-01-5 VIRGINIA & MATT REESE TRUST TAX IDENT NO 58-6352347 ADM OFFICER WFM INV OFFICER MTU	SCHEDULE OF CAPITAL GAIN	DATE SOLD DATE ACQ TRANSACTION DESCRIPTION	BEAR STEARNS COS INC GLOBAL NT 7.625% DTD 12/07/1999 DUE 12/07/2009	SOLD 9989.835 SHS 12/10/09 @ 11.02 SENTINEL GOVERNMENT SECURITIES FUND CLASS I #490	RECD PROCEEDS ON MATURITY OF 12/15/09 250,000 PAR VALUE 01/03/05 FEDERAL HOME LN WTG CORP 4.00% DTD 12/03/2004 DUE 12/15/2009	SOLD 4147.705 SHS 12/22/09 @ 10.91 FEDERATED TOTAL RETURN BOND FUND - IN #328	SOLD 1652.804 SHS 12/22/09 @ 10.83 PIMCO TOTAL RETURN FD INST #35	SOLD 475.324 SHS 12/22/09 @ 10.63 SENTINEL GOVERNMENT SECURITIES FUND CLASS I #490	INVESTED PRINCIPAL ASSETS TOTAL	LESS MUTUAL FUND SHORT-TERM CAPITAL GAINS RECLASSIFIED AS DIVIDEND INCOME	GROSS PROCEERS	Cost