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Form 990

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)

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

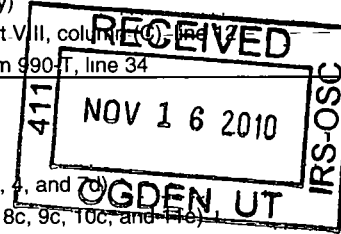
2009 Open to Public Inspection

Department of the Treasury Internal Revenue Service

Header section A-M containing organization name (JEAN PIPKIN TRUST), EIN (74-6044102), and other identifying information.

Part I Summary

Table with columns for Revenue, Expenses, and Net Assets or Fund Balances. Includes rows for mission statement, revenue (9,267), expenses (67,287), and net assets (1,146,218).



SCANNED DEC 06 2010

Part II Signature Block

Signature block containing officer signature (William R. Moxey) and date (11-15-10).

Preparer information section for Lawrence, Blackburn, Meek, Maxey & Co. with EIN 76-0001095.

May the IRS discuss this return with the preparer shown above? (see instructions)

197

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:

THE EXEMPT STATUS WAS GRANTED FOR THE SOLE PURPOSE OF MAKING PAYMENTS TO MEMORIAL HERMANN BAPTIST-BEAUMONT HOSPITAL TO ASSIST THE NEEDY WITH HOSPITAL EXPENSES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 43,170 including grants of \$ 43,170) (Revenue \$)

THE EXEMPT STATUS WAS GRANTED FOR THE SOLE PURPOSE OF MAKING PAYMENTS TO MEMORIAL HERMANN BAPTIST-BEAUMONT HOSPITAL TO ASSIST THE NEEDY WITH HOSPITAL EXPENSES.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► 43,170

Part 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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II		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		
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		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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		X
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		X
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		X
	• 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 related 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 Schedule D, Parts XI, XII, and XIII		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II		X
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		X
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		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		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		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		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 Schedule J		X
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 Schedule K. If "No," go to line 25		X
24b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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		X
25b 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		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		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 Schedule L, Part III		X
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)		
28a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
28b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
28c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	X	

Part V 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		
1b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		
	1b 0		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
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		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
3b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
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)?		X
4b	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?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
7a	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?		
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
7d	If "Yes," indicate the number of Forms 8282 filed during the year		
7e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
7g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
7h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
9a	Did the organization make any taxable distributions under section 4966?		
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	Section 501(c)(12) organizations. Enter.		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		

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.

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body		
1b	Enter the number of voting members that are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?		X
10b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?		X
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13		X
12b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		
12c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done		
13	Does the organization have a written whistleblower policy?		X
14	Does the organization have a written document retention and destruction policy?		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
15a	The organization's CEO, Executive Director, or top management official		X
15b	Other officers or key employees of the organization		X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ► **TX**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply
 Own website Another's website Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization ► **CAPITAL ONE, N.A. 510 PARK**

BEAUMONT

TX 77704-3928 409-880-1351

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f	\$					
	h Total. Add lines 1a-1f						
Program Service Revenue		Busn. Code					
	2a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		35,595			35,595	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross Rents	(i) Real	(ii) Personal				
	b Less rental exps						
	c Rental inc or (loss)						
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		420,596	2,008				
		b Less cost or other basis & sales exps					
		467,117					
	c Gain or (loss)	-46,521	2,008				
	d Net gain or (loss)			-44,513	-46,521		2,008
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a						
	b Less direct expenses	b					
	c Net income or (loss) from fundraising events						
9a Gross income from gaming activities See Part IV, line 19	a						
	b Less direct expenses	b					
	c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	a						
	b Less cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Busn. Code					
11a							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total Revenue. See instructions			-8,918	-46,521	0	37,603	

Part IX Statement of Functional Expenses

**Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).**

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	43,170	43,170		
2 Grants and other assistance to individuals in 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				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	9,778		9,778	
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):				
a Management				
b Legal				
c Accounting	2,775		2,775	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other	24		24	
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				
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):				
a				
b				
c				
d				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	55,747	43,170	12,577	
26 Joint costs. Check here <input type="checkbox"/> 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.				

Part X Balance Sheet

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing		1	
	2 Savings and temporary cash investments	67,973	2	105,195
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	901
	10a Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b		10c
	11 Investments—publicly traded securities	1,142,910	11	1,040,122
	12 Investments—other securities See Part IV, line 11		12	
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	1,210,883	16	1,146,218	
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	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	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
25 Other liabilities. Complete Part X of Schedule D		25		
26 Total liabilities. Add lines 17 through 25		26		
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets		27	
	28 Temporarily restricted net assets		28	
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	1,210,883	30	1,146,218
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	1,210,883	33	1,146,218	
34 Total liabilities and net assets/fund balances	1,210,883	34	1,146,218	

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990. Cash Accrual Other _____

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

c 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?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

d 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 Consolidated basis Both consolidated and separate basis

3a 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?

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

	Yes	No
2a		X
2b		X
2c		
3a		X
3b		

Form **990** (2009)

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

Name of the organization **JEAN PIPKIN TRUST**
CAPITAL ONE, N.A., TRUSTEE Employer identification number
74-6044102

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry 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 Type III—Other

e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

- (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) A family member of a person described in (i) above?
- (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		<input checked="" type="checkbox"/>
11g(ii)		<input checked="" type="checkbox"/>
11g(iii)		<input checked="" type="checkbox"/>

h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
MEMORIAL HERMANN BAPTIST-BEAUMONT HOSPITAL	74-1303720	7	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		43,170
Total									43,170

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

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2005, (b) 2006, (c) 2007, (d) 2008, (e) 2009, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc; 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2009; 15 Public support percentage from 2008 Schedule A, Part II, line 14; 16a 33 1/3 % support test—2009; 16b 33 1/3 % support test—2008; 17a 10%-facts-and-circumstances test—2009; 17b 10%-facts-and-circumstances test—2008; 18 Private foundation.

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
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						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 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.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%

19a 33 1/3 % support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line 17 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3 % support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV : **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

SUPPLEMENTAL INFORMATION

THIS ORGANIZATION ASSISTS MEMORIAL HERMANN BAPTIST HOSPITAL BY COVERING
SOME OF THE MEDICAL EXPENSES INCURRED BY INDIGENT PATIENTS.

SCHEDULE O
(Form 990)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990**Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.

▶ Attach to Form 990.

OMB No 1545-0047

2009Open to Public
Inspection

Name of the organization

**JEAN PIPKIN TRUST
CAPITAL ONE, N.A., TRUSTEE**

Employer identification number

74-6044102

FORM 990, PART VI, LINE 10B - POLICIES AND PROCEDURES GOVERNING CHAPTERS
THIS ORGANIZATION IS A TRUST AND DOES NOT HAVE ANY LOCAL CHAPTERS,
BRANCHES, OR AFFILIATES.

FORM 990, PART VI, LINE 11A - ORGANIZATION'S PROCESS TO REVIEW FORM 990
NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION
NO DOCUMENTS AVAILABLE TO THE PUBLIC

ACCT A387 430055012
 FROM 01/01/2009
 TO 12/31/2009

CAPITAL ONE, N A
 STATEMENT OF CAPITAL GAINS AND LOSSES
 JEAN PIPKIN CHARITABLE TRUST
 TRUST YEAR ENDING 12/31/2009

PAGE 57
 RUN 02/01/2010
 01 51 34 PM

TAX PREPARER 649
 TRUST ADMINISTRATOR MSV
 INVESTMENT OFFICER EBK

LEGEND F - FEDERAL S - STATE I - INHERITED
 E - EXEMPT FROM STATE U - ACQ COST UNKNOWN

PROPERTY DESCRIPTION	SHARES	DATE	SALES PRICE	COST BASIS	GAIN/LOSS	TERM
5 0000 APPLE COMPUTER INC COMMON STOCK - 037833100 - MINOR = 484						
SOLD		01/06/2009	466.76			
ACQ	5 0000	01/04/2007	466.76	425.31	41.45	LT15
125 0000 BANK OF AMERICA CORP COM - 060505104 - MINOR = 471						
SOLD		01/26/2009	848.75			
ACQ	105 0000	09/19/2008	712.95	4011.81	-3298.86	ST
	20 0000	11/12/2008	135.80	373.32	-237.52	ST
39 0000 BANK NEW YORK MELLON CORP COM - 064058100 - MINOR = 469						
SOLD		03/02/2009	868.44			
ACQ	30 0000	12/31/2007	668.03	1459.80	-791.77	LT15
	5 0000	12/17/2007	111.34	240.00	-128.66	LT15
	4 0000	01/14/2008	89.07	187.92	-98.85	LT15
65.0000 BOEING CO - 097023105 - MINOR = 410						
SOLD		05/15/2009	2832.11			
ACQ	10 0000	10/29/2007	435.71	962.56	-526.85	LT15
	35 0000	04/24/2006	1524.98	3029.25	-1504.27	LT15
	10 0000	01/14/2008	435.71	806.80	-371.09	LT15
	5 0000	10/29/2008	217.85	252.55	-34.70	ST
	5 0000	01/28/2009	217.85	221.55	-3.70	ST
445 0000 DUKE ENERGY HLDG CORP COM - 26441C105 - MINOR = 492						
SOLD		02/17/2009	6282.79			
ACQ	15.0000	12/17/2007	211.78	305.40	-93.62	LT15
	40.0000	01/14/2008	564.75	812.00	-247.25	LT15
	110.0000	01/26/2007	1553.05	2099.90	-546.85	LT15
	200 0000	09/29/2003	2823.73	2094.90	728.83	LT15
	35 0000	10/29/2008	494.15	578.55	-84.40	ST
	45 0000	01/28/2009	635.34	687.97	-52.63	ST
210 0000 ENSCO INTERNATIONAL INC - 26874Q100 - MINOR = 465						
SOLD		12/23/2009	8856.75			
ACQ	45 0000	01/04/2007	1897.88	2154.44	-256.57	LT15
	5 0000	12/17/2007	210.88	276.45	-65.58	LT15
	10 0000	01/03/2008	421.75	619.44	-197.69	LT15
	5 0000	10/29/2008	210.88	190.75	20.13	LT15
	10 0000	01/28/2009	421.75	303.05	118.70	ST
	135 0000	05/11/2009	5693.63	4411.54	1282.09	ST
FOUND UPDATE						
15 0000 EXPRESS SCRIPTS INC COM - 302182100 - MINOR = 478						
SOLD		05/04/2009	947.13			
ACQ	15 0000	09/20/2007	947.13	818.62	128.51	LT15
25000.0000 FEDERAL HOME LN MTG CORP MEDIUM TERM NTS 4 05% DTD 02/17/2004 DUE - 3128X2WB7 - MINOR = 055						
SOLD		11/17/2009	25000.00			
ACQ	25000 0000	02/06/2004	25000.00	25064.75	-64.75	LT15
25000 0000 FEDERAL HOME LN MTG CORP MEDIUM TERM NTS 6 00% DTD 02/09/2007 DUE - 3128X5YG7 - MINOR = 055						
SOLD		02/09/2009	25000.00			
ACQ	25000.0000	05/01/2007	25000.00	25000.00	0.00	LT15
25000.0000 FEDERAL HOME LOAN BKS CONS BDS 3.00% DTD 03/25/2009 DUE 03/25/2013 - 3133XTC87 - MINOR = 046						
SOLD		09/25/2009	25000.00			
ACQ	25000.0000	03/06/2009	25000.00	25000.00	0.00	ST
1201 2010 FIDELITY ADVISOR MID CAP II FUND CLASS A - 315807537 - MINOR = 570						
SOLD		01/28/2009	12240.24			
ACQ	220.4080	06/29/2007	2245.96	4469.70	-2223.74	LT15
	926.5580	05/02/2006	9441.63	18572.28	-9130.65	LT15
	54 2350	04/09/2007	552.65	1073.22	-520.57	LT15
448 1820 FIDELITY ADVISOR MID CAP II FUND CLASS A - 315807537 - MINOR = 570						
SOLD		03/03/2009	3926.07			
ACQ	183 0120	04/09/2007	1603.18	3621.48	-2018.30	LT15
	265.1700	03/23/2007	2322.89	5207.62	-2884.73	LT15
403 3640 FIDELITY ADVISOR MID CAP II FUND CLASS A - 315807537 - MINOR = 570						
SOLD		03/04/2009	3614.14			
ACQ	403 3640	03/23/2007	3614.14	7921.58	-4307.44	LT15
19735 0000 FIDELITY ADVISOR GOVERNMENT INCOME FUND CLASS A - 31617K782 - MINOR = 592						
SOLD		01/26/2009	214322.10			
ACQ	2807 7360	12/17/2007	30492.01	30000.00	492.01	LT15
	7547 6180	10/26/2007	81967.13	80000.00	1967.13	LT15
	2833 2100	12/18/2006	30768.66	30000.00	768.66	LT15
	964 8280	05/10/2006	10478.03	10000.00	478.03	LT15
	5581 6080	04/23/2008	60616.26	60353.11	263.15	ST
185 0000 HEWLETT PACKARD CO - 428236103 - MINOR = 484						
SOLD		05/20/2009	6430.36			
ACQ	5 0000	12/17/2007	173.79	257.00	-83.21	LT15
	30 0000	01/14/2008	1042.76	1381.50	-338.74	LT15
	95 0000	01/04/2007	3302.08	3948.08	-646.00	LT15
	25 0000	07/25/2008	868.97	1079.31	-210.34	ST
	15 0000	01/28/2009	521.38	552.27	-30.89	ST
	15 0000	10/29/2008	521.38	543.30	-21.92	ST
110 0000 HUDSON CITY BANCORP INC COM - 443683107 - MINOR = 469						
SOLD		04/17/2009	1414.56			
ACQ	60 0000	05/05/2008	771.58	1150.13	-378.55	ST
	20 0000	10/29/2008	257.19	355.60	-98.41	ST
	30 0000	06/18/2008	385.79	514.99	-129.20	ST
76 0000 HUDSON CITY BANCORP INC COM - 443683107 - MINOR = 469						
SOLD		04/27/2009	959.53			
ACQ	61 0000	06/18/2008	770.15	1047.16	-277.01	ST
	15 0000	01/28/2009	189.38	188.52	0.86	ST

TAX PREPARER: 649
 TRUST ADMINISTRATOR: MSV
 INVESTMENT OFFICER: EBK

LEGEND. F - FEDERAL S - STATE I - INHERITED
 E - EXEMPT FROM STATE U - ACQ COST UNKNOWN

PROPERTY DESCRIPTION	SHARES	DATE	SALES PRICE	COST BASIS	GAIN/LOSS	TERM
10 0000 INTUITIVE SURGICAL INC COM NEW - 46120B602 - MINOR = 479						
SOLD		04/07/2009	955 99			
ACQ	10.0000	12/05/2008	955 99	1254 53	-298 54	ST
115 0000 J P MORGAN CHASE & CO NT - 46625H100 - MINOR = 471						
SOLD		03/02/2009	2526 62			
ACQ	15 0000	10/23/2007	329 56	680 54	-350 98	LT15
	15 0000	12/17/2007	329 56	677 55	-347 99	LT15
	15.0000	12/31/2007	329 56	654 63	-325 07	LT15
	10 0000	01/14/2008	219 71	410 20	-190 49	LT15
	60 0000	11/27/2000	1318 24	2389 20	-1070.96	LT15
55 0000 JACOBS ENGR GROUP INC COM - 469814107 - MINOR = 413						
SOLD		03/09/2009	1840.19			
ACQ	30 0000	01/22/2008	1003.74	2289 88	-1286 14	LT15
	10 0000	03/10/2008	334.58	711 37	-376 79	ST
	5.0000	01/28/2009	167.29	213 66	-46.37	ST
	5 0000	10/29/2008	167 29	173.20	-5 91	ST
	5 0000	10/28/2008	167 29	144 85	22 44	ST
30000 0000 LAUDER ESTEE COS INC SR NTS 6 00% DTD 01/10/2002 DUE 01/15/2012 - 518439AA2 - MINOR = 210						
SOLD		10/02/2009	32178 60			
ACQ	30000 0000	01/23/2007	32178 60	30412 77	1765 83	LT15
40.0000 MOLSON COORS BREWING CO CL B - 60871R209 - MINOR = 455						
SOLD		04/17/2009	1544 22			
ACQ	35 0000	11/13/2008	1351 19	1461.87	-110 68	ST
	5 0000	01/28/2009	193 03	206 41	-13 38	ST
95 0000 MOSAIC CO COM - 61945A107 - MINOR = 402						
SOLD		04/03/2009	4285 43			
ACQ	40.0000	10/09/2008	1804 39	1544 48	259 91	ST
	10 0000	01/28/2009	451 10	376.96	74 14	ST
	5.0000	10/29/2008	225 55	168.90	56 65	ST
	40.0000	10/16/2008	1804 39	1268 82	535 57	ST
95 0000 NOVARTIS AG SPONSORED ADR - 66987V109 - MINOR = 482						
SOLD		05/04/2009	3659 47			
ACQ	20.0000	08/05/2008	770 41	1208.23	-437.82	ST
	55 0000	07/29/2008	2118.64	3240.44	-1121.80	ST
	10 0000	10/29/2008	385 21	501.00	-115 79	ST
	10 0000	01/28/2009	385 21	426.76	-41 55	ST
90 0000 NUCOR CORP - 670346105 - MINOR = 409						
SOLD		04/03/2009	3873 84			
ACQ	5 0000	12/17/2007	215 21	293 69	-78 48	LT15
	5 0000	09/20/2007	215 21	291 90	-76 69	LT15
	50 0000	01/11/2005	2152 13	1226 69	925.44	LT15
	15 0000	08/12/2008	645 64	755 02	-109 38	ST
	15 0000	01/28/2009	645 64	661 90	-16 26	ST
40 0000 PEPSICO INC - 713448108 - MINOR = 462						
SOLD		04/27/2009	1971 03			
ACQ	10.0000	12/17/2007	492 76	780 70	-287 94	LT15
	15 0000	01/14/2008	739 14	1158 45	-419 31	LT15
	15 0000	04/11/2007	739 14	948 60	-209 46	LT15
45 0000 PROCTER & GAMBLE CO - 742718109 - MINOR = 457						
SOLD		04/27/2009	2255 95			
ACQ	10 0000	12/17/2007	501 32	735 90	-234 58	LT15
	35 0000	01/14/2008	1754 63	2474.85	-720 22	LT15
80 0000 SCHLUMBERGER LTD - 806857108 - MINOR = 466						
SOLD		05/11/2009	4372 56			
ACQ	10 0000	01/14/2008	546 57	947 80	-401 23	LT15
	55 0000	01/04/2007	3006 14	3283 53	-277 40	LT15
	15 0000	01/28/2009	819 86	660 40	159 46	ST
175.0000 TEXAS INSTRUMENTS, INC COMMON STOCK - 882508104 - MINOR = 490						
SOLD		05/11/2009	3038 71			
ACQ	100 0000	09/20/2007	1736 41	3580 33	-1843 92	LT15
	45.0000	01/14/2008	781 38	1363 50	-582.12	LT15
	10.0000	10/29/2008	173.64	186.70	-13.06	ST
	20 0000	01/28/2009	347 28	308 96	38 32	ST
141.0040 THORNBERG INTERNATIONAL VALUE FUND CLASS I - 885215566 - MINOR = 572						
SOLD		01/28/2009	2543.71			
ACQ	119 8180	12/17/2007	2161 51	3960 00	-1798 49	LT15
	21 1860	04/28/2006	382 20	580 50	-198 30	LT15
135 0000 TRINITY INDS INC COM - 896522109 - MINOR = 417						
SOLD		04/28/2009	1690 25			
ACQ	110 0000	05/21/2008	1377 24	4418 84	-3041.60	ST
	10 0000	10/29/2008	125 20	188 10	-62.90	ST
	15 0000	01/28/2009	187 81	193.77	-5 96	ST
360 0000 US BANCORP DEL COM NEW - 902973304 - MINOR = 469						
SOLD		03/02/2009	4874 08			
ACQ	130 0000	12/13/2007	1760 08	4268 80	-2508 72	LT15
	5 0000	12/17/2007	67 70	160 40	-92 70	LT15
	100 0000	12/31/2007	1353 91	3177.29	-1823 38	LT15
	10 0000	01/14/2008	135 39	300.50	-165 11	LT15
	50 0000	06/18/2008	676 96	1518.63	-841 67	ST
	30.0000	10/29/2008	406.17	901 80	-495 63	ST
	35.0000	01/28/2009	473 87	516 03	-42 16	ST
155 0000 UNITED TECHNOLOGIES - 913017109 - MINOR = 410						
SOLD		05/15/2009	8014 63			
ACQ	5 0000	12/17/2007	258 54	378 90	-120 36	LT15
	10 0000	01/14/2008	517 07	718 50	-201 43	LT15
	15 0000	05/18/2007	775 61	1046 25	-270.64	LT15
	15 0000	02/14/2007	775 61	1016 06	-240 45	LT15

ACCT A387 430055012
 FROM 01/01/2009
 TO 12/31/2009

CAPITAL ONE, N A
 STATEMENT OF CAPITAL GAINS AND LOSSES
 JEAN PIPKIN CHARITABLE TRUST

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 01:51 34 PM

TRUST YEAR ENDING 12/31/2009

TAX PREPARER 649
 TRUST ADMINISTRATOR MSV
 INVESTMENT OFFICER EBK

LEGEND F - FEDERAL S - STATE I - INHERITED
 E - EXEMPT FROM STATE U - ACQ COST UNKNOWN

PROPERTY DESCRIPTION	SHARES	DATE	SALES PRICE	COST BASIS	GAIN/LOSS	TERM
	30 0000	04/12/2007	1551.22	1935 77	-384.55	LT15
	40 0000	01/04/2007	2068 29	2508 73	-440.44	LT15
	10 0000	10/29/2008	517.07	525.20	-8.13	ST
	10 0000	01/28/2009	517.07	507 16	9.91	ST
	20 0000	04/28/2009	1034.15	968.20	65 95	ST
80.0000 FRONTLINE LTD - G3682E127 - MINOR = 464						
SOLD		05/22/2009	1744.11			
ACQ	60 0000	11/10/2008	1308 08	2042 32	-734 24	ST
	20.0000	01/28/2009	436 03	584.20	-148 17	ST
		TOTALS	420379 12	467116.60		

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the extended due date for filing the return See instructions	Name of Exempt Organization JEAN PIPKIN TRUST CAPITAL ONE, N.A., TRUSTEE	Employer identification number 74-6044102
	Number, street, and room or suite no. If a P O box, see instructions P.O. BOX 3928	For IRS use only
	City, town or post office, state, and ZIP code For a foreign address, see instructions BEAUMONT TX 77704-3928	

Check type of return to be filed (File a separate application for each return):

<input checked="" type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 6069
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 4720	<input type="checkbox"/> Form 8870
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 5227	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

• The books are in the care of **CAPITAL ONE, N.A.**

Telephone No. **409-880-1351** FAX No.

• If the organization does not have an office or place of business in the United States, check this box

• 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 **11/15/10**.

5 For calendar year **2009**, or other tax year beginning _____, and ending _____

6 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

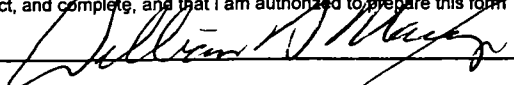
7 State in detail why you need the extension

ADDITIONAL TIME IS REQUESTED TO GATHER INFORMATION TO PREPARE A COMPLETE AND ACCURATE RETURN.

8a If 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	\$
8b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
8c 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	\$

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature 

Title **CPA/AGENT**

Date **08/16/10**

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

Form **8868**

(Rev. April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury
Internal Revenue Service

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T) However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868 For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits

Type or print File by the due date for filing your return See instructions	Name of Exempt Organization JEAN PIPKIN TRUST CAPITAL ONE, N.A., TRUSTEE	Employer identification number 74-6044102
	Number, street, and room or suite no. If a P O box, see instructions P.O. BOX 3928	
	City, town or post office, state, and ZIP code For a foreign address, see instructions BEAUMONT TX 77704-3928	

Check type of return to be filed (file a separate application for each return)

- | | | |
|--|--|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

● The books are in the care of ▶ **CAPITAL ONE, N.A.**

Telephone No ▶ **409-880-1351** FAX No ▶

- If the organization does not have an office or place of business in the United States, check this box
- 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 will cover

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **08/15/10**, to file the exempt organization return for the organization named above The extension is for the organization's return for
▶ calendar year **2009** or
▶ tax year beginning _____, and ending _____

2 If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions	3a	\$
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit	3b	\$
c Balance Due. Subtract line 3b from line 3a 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	3c	\$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

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