Form **990-PF**

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0052

2009

For calendar year 2009, or tax year beginning APR 1, 2009 , and ending MAR 31, 2010

G Check all that apply [ ] Initial return [ ] Initial return of a former public charity [ ] Final return
[ ] Amended return [ ] Address change [ ] Name change

Use the IRS label Otherwise, print or type See Specific Instructions

Name of foundation
THE MARY CECILE CHAMBERS
CHARITABLE TRUST

Number and street (or P O box number if mail is not delivered to street address) | Room/suite
C/O MOODY NATL BANK, P. O. BOX 1139

City or town, state, and ZIP code
GALVESTON, TX 77553

A Employer identification number
76-6071425

B Telephone number
(409)765-5561

C If exemption application is pending, check here ▶ [ ]
D 1 Foreign organizations, check here ▶ [ ]
2 Foreign organizations meeting the 85% test, check here and attach computation ▶ [ ]

H Check type of organization [X] Section 501(c)(3) exempt private foundation
[ ] Section 4947(a)(1) nonexempt charitable trust [ ] Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ [ ]

I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶$ 4,777,571.

J Accounting method [X] Cash [ ] Accrual
[ ] Other (specify)
(Part I, column (d) must be on cash basis)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ [ ]

Part I **Analysis of Revenue and Expenses** (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))

		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received			N/A	
	2 Check ▶ [X] if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	350.	350.		STATEMENT 1
	4 Dividends and interest from securities	184,722.	132,361.		STATEMENT 2
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	146,757.			
	b Gross sales price for all assets on line 6a 1,955,105.				
	7 Capital gain net income (from Part IV, line 2)		146,757.		
	8 Net short-term capital gain				
	9 Income modifications			1,673.	
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income				
	12 **Total.** Add lines 1 through 11	331,829.	279,468.	1,673.	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	41,899.	13,827.		28,072.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees STMT 3	169.	85.		84.
	b Accounting fees STMT 4	2,500.	1,250.		1,250.
	c Other professional fees				
	17 Interest				
	18 Taxes STMT 5	2,252.	0.		0.
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses STMT 6	-100.	0.		0.
	24 **Total operating and administrative expenses** Add lines 13 through 23	46,720.	15,162.		29,406.
	25 Contributions, gifts, grants paid	235,923.			235,923.
	26 **Total expenses and disbursements.** Add lines 24 and 25	282,643.	15,162.		265,329.
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	49,186.			
	b **Net investment income** (if negative, enter -0-)		264,306.		
	c **Adjusted net income** (if negative, enter -0-)			1,673.	

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Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments	123,854.	229,384.	229,384.
	3 Accounts receivable ▶			
	Less allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	3,120.	2,280.	2,280.
	10a Investments - U S and state government obligations STMT 8	2,189,466.	1,994,924.	2,061,939.
	b Investments - corporate stock STMT 9	694,395.	684,594.	1,741,357.
	c Investments - corporate bonds STMT 10	352,470.	352,470.	370,700.
	11 Investments - land, buildings, and equipment basis ▶			
	Less accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other STMT 11	193,481.	343,993.	371,898.
	14 Land, buildings, and equipment basis ▶			
	Less accumulated depreciation ▶			
	15 Other assets (describe ▶ MINERAL ASSETS)	13.	13.	13.
	16 **Total assets** (to be completed by all filers)	3,556,799.	3,607,658.	4,777,571.
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
	23 **Total liabilities** (add lines 17 through 22)	0.	0.	
Net Assets or Fund Balances	**Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31**			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ [X] and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	0.	0.	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund	0.	0.	
	29 Retained earnings, accumulated income, endowment, or other funds	3,556,799.	3,607,658.	
	30 **Total net assets or fund balances**	3,556,799.	3,607,658.	
	31 **Total liabilities and net assets/fund balances**	3,556,799.	3,607,658.	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	3,556,799.
2	Enter amount from Part I, line 27a	2	49,186.
3	Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 7	3	1,673.
4	Add lines 1, 2, and 3	4	3,607,658.
5	Decreases not included in line 2 (itemize) ▶	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	3,607,658.

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a				
b	SEE ATTACHED STATEMENTS			
c				
d				
e				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a				
b				
c				
d				
e	1,955,105.		1,808,348.	146,757.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a				
b				
c				
d				
e				146,757.

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 } 2 146,757.

3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)
If gain, also enter in Part I, line 8, column (c)
If (loss), enter -0- in Part I, line 8 } 3 N/A

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2008	300,550.	4,677,952.	.064248
2007	296,280.	5,348,347.	.055397
2006	321,274.	5,174,598.	.062087
2005	280,198.	5,061,371.	.055360
2004	155,651.	5,030,265.	.030943

2 Total of line 1, column (d)	2	.268035
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.053607
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	4,577,976.
5 Multiply line 4 by line 3	5	245,412.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	2,643.
7 Add lines 5 and 6	7	248,055.
8 Enter qualifying distributions from Part XII, line 4	8	265,329.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate
See the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here ▶ [ ] and enter "N/A" on line 1 Date of ruling or determination letter ________ **(attach copy of letter if necessary-see instructions)** **b** Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ [X] and enter 1% of Part I, line 27b **c** All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		1	2,643.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2	0.
3 Add lines 1 and 2		3	2,643.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0.
5 **Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-		5	2,643.
6 Credits/Payments			
a 2009 estimated tax payments and 2008 overpayment credited to 2009	6a 2,280.		
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments Add lines 6a through 6d		7	2,280.
8 Enter any **penalty** for underpayment of estimated tax Check here [ ] if Form 2220 is attached		8	
9 **Tax due** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶		9	363.
10 **Overpayment** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶		10	
11 Enter the amount of line 10 to be **Credited to 2010 estimated tax** ▶	Refunded ▶	11	

Part VII-A Statements Regarding Activities

		Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		X
b Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
If the answer is "Yes" to **1a** *or* **1b**, *attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities*			
c Did the foundation file **Form 1120-POL** for this year?	1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year **(1)** On the foundation ▶ $ 0. **(2)** On foundation managers ▶ $ 0.			
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ 0.			
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities.*	2		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*	3		X
4a Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		X
b If "Yes," has it filed a tax return on **Form 990-T** for this year? N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T.*	5		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X	
7 Did the foundation have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col (c), and Part XV.*	7	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ TX			
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by *General Instruction G? If "No," attach explanation*	8b	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? *If "Yes," complete Part XIV*	9		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X

Part VII-A Statements Regarding Activities *(continued)*

			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	

Website address ▶ N/A

14 The books are in care of ▶ MOODY NATIONAL BANK TRUST DEPT. Telephone no ▶ (409) 765-5561

Located at ▶ P. O. BOX 1139, GALVESTON, TX ZIP+4 ▶ 77553

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here ▶ ☐

and enter the amount of tax-exempt interest received or accrued during the year ▶ 15 N/A

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

			Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No			
	(6) Agree to pay money or property to a government official? (**Exception.** Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) ☐ Yes ☒ No			
b	If any answer is "Yes" to 1a(1)-(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? ☐ Yes ☒ No			
	If "Yes," list the years ▶ ____, ____, ____, ____			
b	Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement - see instructions) N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here ▶ ____, ____, ____, ____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No			
b	If "Yes," did it have excess business holdings in 2009 as a result of **(1)** any purchase by the foundation or disqualified persons after May 26, 1969, **(2)** the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or **(3)** the lapse of the 10-, 15-, or 20-year first phase holding period? *(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)* N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required *(continued)*

5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No			
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No			
(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No			
(4) Provide a grant to an organization other than a charitable, etc, organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?	☐ Yes ☒ No			
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☒ No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?	N/A	5b		
Organizations relying on a current notice regarding disaster assistance check here	▶ ☐			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A	☐ Yes ☐ No			
If "Yes," attach the statement required by Regulations section 53 4945-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b		X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☒ No			
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	N/A	7b		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
MOODY NATIONAL BANK P. O. BOX 1139 GALVESTON, TX 77553	TRUSTEE 10.00	41,899.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than $50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over $50,000 ▶ 0

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than $50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over $50,000 for professional services ▶ 0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	0.
2	
All other program-related investments See instructions 3	
Total. Add lines 1 through 3 ▶	0.

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Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations, see instructions)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes				
a	Average monthly fair market value of securities			1a	4,456,046.
b	Average of monthly cash balances			1b	190,134.
c	Fair market value of all other assets			1c	1,511.
d	**Total** (add lines 1a, b, and c)			1d	4,647,691.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.		
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	4,647,691.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)			4	69,715.
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4			5	4,577,976.
6	**Minimum investment return** Enter 5% of line 5			6	228,899.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part)

1	Minimum investment return from Part X, line 6			1	228,899.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	2,643.		
b	Income tax for 2009 (This does not include the tax from Part VI)	2b			
c	Add lines 2a and 2b			2c	2,643.
3	Distributable amount before adjustments Subtract line 2c from line 1			3	226,256.
4	Recoveries of amounts treated as qualifying distributions			4	1,673.
5	Add lines 3 and 4			5	227,929.
6	Deduction from distributable amount (see instructions)			6	0.
7	**Distributable amount** as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1			7	227,929.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	265,329.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	**Qualifying distributions.** Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	265,329.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b	5	2,643.
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	262,686.

Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				227,929.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			54,748.	
b Total for prior years ______ , ______ , ______		0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004 ______				
b From 2005 ______				
c From 2006 ______				
d From 2007 ______				
e From 2008 ______				
f **Total** of lines 3a through e	0.			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ $ 265,329.				
a Applied to 2008, but not more than line 2a			54,748.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2009 distributable amount				210,581.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 **Enter the net total of each column as indicated below:**				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable amount - see instructions		0.		
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010				17,348.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7	0.			
9 **Excess distributions carryover to 2010.** Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2005 ______				
b Excess from 2006 ______				
c Excess from 2007 ______				
d Excess from 2008 ______				
e Excess from 2009 ______				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			
	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had $5,000 or more in assets at any time during the year-see the instructions.)

1 **Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000) (See section 507(d)(2))

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

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

Check here ▶ ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

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

THE MARY CECILE CHAMBERS CHARITABLE TRUST, 409/765-5561
MOODY NATIONAL BANK, GALVESTON, TX 77553

b The form in which applications should be submitted and information and materials they should include

SEE FORMS ATTACHED

c Any submission deadlines

APPLICATIONS ACCEPTED THROUGHOUT YEAR

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

AWARDS HAVE BEEN LIMITED TO WORTHY YOUNG MEN OF THE STATE OF TEXAS

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient: Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
OUR LADY OF LIGHT CATHOLIC CHURCH RT2 BOX 1-F ANAHUAC, TX 77514	NONE	NONE	DEVISE UNDER WILL	1,000.
VARIOUS STUDENTS & UNIVERSITIES	NONE	NONE	EDUCATIONAL GRANTS	234,923.
Total			▶ 3a	235,923.
b Approved for future payment				
NONE				
Total			▶ 3b	0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income (a) Business code	Unrelated business income (b) Amount	Excluded by section 512, 513, or 514 (c) Exclusion code	Excluded by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	350.	
4 Dividends and interest from securities			14	184,722.	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					146,757.
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0.		185,072.	146,757.

13 **Total**. Add line 12, columns (b), (d), and (e) 13 331,829.

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)
	N/A

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

			Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a	Transfers from the reporting foundation to a noncharitable exempt organization of			
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		X
b	Other transactions			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
	(3) Rental of facilities, equipment, or other assets	1b(3)		X
	(4) Reimbursement arrangements	1b(4)		X
	(5) Loans or loan guarantees	1b(5)		X
	(6) Performance of services or membership or fundraising solicitations	1b(6)		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X

d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		N/A	

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge

Signature of officer or trustee | Date 8-16-10 | Title VICE PRESIDENT & TRUST OFFICER

Paid Preparer's Use Only

Preparer's signature	Date 7.14.10	Check if self-employed ▶ ☐	Preparer's identifying number
Firm's name (or yours if self-employed), address, and ZIP code	HEAD,MAXWELL & MCKENNA, P.C. 2200 MARKET STREET, SUITE 401 GALVESTON, TX 77550	EIN ▶	Phone no (409) 763-6479

923622 02-02-10

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold, e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a	100000 FHLMC MTN	P	03/10/04	05/05/09
b	300000 FHLMC MTN	P	04/07/04	05/05/09
c	300000 FHLMC MTN	P	01/28/03	05/05/09
d	40000 FHLMC MTN	P	03/08/04	05/05/09
e	275000 FNMA	P	02/10/05	04/02/09
f	300000 FNMA	P	02/11/03	04/09/09
g	250000 FNMA	P	06/09/08	04/13/09
h	25000 JACKSONVILLE FL	P	03/27/09	VARIOUS
i	10000 TENNESSEE HSG DEV	P	05/07/09	VARIOUS
j	75000 TEXAS ST DEPT HSG	P	01/02/09	VARIOUS
k	25000 TEXAS ST HSG V-A	P	04/08/09	VARIOUS
l	190 SHS CHEVRON CORP	P	05/09/95	05/07/09
m	284 SHS EXXON MOBIL	P	06/13/89	05/07/09
n	200 SHS WYETH	P	11/18/91	05/07/09
o	311.595 UNITS FIDELITY CONTRAFUND	P	04/10/07	04/01/09

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	100,000.		98,751.	1,249.
b	300,000.		300,000.	0.
c	300,000.		300,000.	0.
d	40,000.		40,000.	0.
e	275,000.		274,987.	13.
f	300,000.		300,000.	0.
g	250,000.		250,000.	0.
h	25,000.		24,625.	375.
i	10,000.		9,113.	887.
j	75,000.		75,467.	-467.
k	25,000.		25,000.	0.
l	12,899.		4,837.	8,062.
m	19,282.		3,549.	15,733.
n	8,668.		3,349.	5,319.
o	13,321.		20,148.	-6,827.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Losses (from col (h)) Gains (excess of col (h) gain over col (k), but not less than "-0-")
a				1,249.
b				0.
c				0.
d				0.
e				13.
f				0.
g				0.
h				375.
i				887.
j				-467.
k				0.
l				8,062.
m				15,733.
n				5,319.
o				-6,827.

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }	2	
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If (loss), enter "-0-" in Part I, line 8	3	

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold, e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a	397.391 UNITS SEI LARGE CAP VALUE FD	P	04/10/07	04/01/09
b	76.547 UNITS VANGUARD INT'L GROWTH FD	P	04/10/07	04/01/09
c	523.637 UNITS SEI CORE FIXED INCOME	P	04/10/07	04/01/09
d	3800 WYETH	P	VARIOUS	10/16/09
e	CAPITAL GAIN DISTRIBUTIONS	P	VARIOUS	VARIOUS
f				
g				
h				
i				
j				
k				
l				
m				
n				
o				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	4,169.		7,908.	-3,739.
b	858.		1,634.	-776.
c	4,676.		5,354.	-678.
d	190,959.		63,626.	127,333.
e	273.			273.
f				
g				
h				
i				
j				
k				
l				
m				
n				
o				

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Losses (from col (h)) Gains (excess of col (h) gain over col (k), but not less than "-0-")
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a				-3,739.
b				-776.
c				-678.
d				127,333.
e				273.
f				
g				
h				
i				
j				
k				
l				
m				
n				
o				

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter "-0-" in Part I, line 7 }	2	146,757.
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If (loss), enter "-0-" in Part I, line 8	3	N/A

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	AMOUNT
SEI DAILY INCOME TRUST	350.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	350.

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
ABBOTT LABORATORIES	3,200.	0.	3,200.
AMERICAN EXPRESS 6.15%	15,375.	0.	15,375.
BP PLC SPONS ADR	8,891.	0.	8,891.
CHEVRON CORP	9,711.	0.	9,711.
DISNEY WALT CO	1,050.	0.	1,050.
DU PONT E I NEMOURS	3,280.	0.	3,280.
EXXON MOBIL CORP	9,057.	0.	9,057.
FFCB 4.60%	3,227.	0.	3,227.
FHLMC 5.0%	2,500.	0.	2,500.
FHLMC MTN 4.0%	1,575.	0.	1,575.
FHLMC MTN 5.0%	17,500.	0.	17,500.
FHLMC MTN 5.0%	2,500.	0.	2,500.
FHLMC MTN 5.0%	3,250.	0.	3,250.
FHLMC MTN 5.15%	2,146.	0.	2,146.
FHLMC MTN 5.25%	1,969.	0.	1,969.
FHLMC MTN 5.25%	987.	0.	987.
FIDELITY CONTRAFUND INC #22	178.	0.	178.
FIDELITY SMALL CAP INDEPENDENC FUND	4.	0.	4.
FNMA 5.0%	3,514.	0.	3,514.
FNMA 5.25%	2,231.	0.	2,231.
FNMA 6.0%	4,458.	0.	4,458.
GEN ELEC CAP CRP MTN 5.45%	2,725.	0.	2,725.
GEN ELEC CAP MTN V-A 6.00%	3,180.	0.	3,180.
GENERAL ELECTRIC	5,447.	0.	5,447.
HOUSTON TX 5.125%	4,612.	0.	4,612.
JACKSONVILLE FL 5.0%	6,292.	0.	6,292.
MICROSOFT CORP	416.	0.	416.
PEPSICO	3,600.	0.	3,600.
PFIZER	8,681.	0.	8,681.
PROCTER & GAMBLE CO	687.	0.	687.
SEI CORE FIXED INCOME	1,152.	0.	1,152.
SEI GNMA FUND	1,432.	0.	1,432.
SEI LARGE CAP VALUE FUND	721.	0.	721.
SEI MID-CAP FUND	71.	0.	71.
SEI SHORT TERM GOVT FUND	112.	0.	112.

SEI SMALL CAP VALUE FUND	34.	0.	34.
SEQUOIA FUND	4.	0.	4.
T ROWE PRICE REAL ESTATE FUND	161.	0.	161.
TENNESSEE HSG DEV 4.95%	8,327.	0.	8,327.
TEXAS ST DEPT HSG 4.8%	6,669.	0.	6,669.
TEXAS ST DEPT HSG 5.0%%	12,892.	0.	12,892.
TEXAS ST HSG V-A 5.25%	4,783.	0.	4,783.
TRAVELERS COMPANIES INC	1,008.	0.	1,008.
VANGUARD EQUITY INC INV FD	1,033.	0.	1,033.
VANGUARD INT'L GROWTH FD	179.	0.	179.
VANGUARD INT'L VA	251.	0.	251.
WACO TX 5.0%	8,786.	0.	8,786.
WINDSTREAM CORP	2,584.	0.	2,584.
WYETH	2,280.	0.	2,280.
TOTAL TO FM 990-PF, PART I, LN 4	184,722.	0.	184,722.

FORM 990-PF — LEGAL FEES — STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MCELROY, SULLIVAN & MILLER, LLP	169.	85.		84.
TO FM 990-PF, PG 1, LN 16A	169.	85.		84.

FORM 990-PF — ACCOUNTING FEES — STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
HEAD, MAXWELL & MCKENNA, PC PREPARE TAX RETURN	2,500.	1,250.		1,250.
TO FORM 990-PF, PG 1, LN 16B	2,500.	1,250.		1,250.

FORM 990-PF TAXES STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAXES	2,252.	0.		0.
TO FORM 990-PF, PG 1, LN 18	2,252.	0.		0.

FORM 990-PF OTHER EXPENSES STATEMENT 6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
GRAVESITE CARE	-100.	0.		0.
TO FORM 990-PF, PG 1, LN 23	-100.	0.		0.

FORM 990-PF OTHER INCREASES IN NET ASSETS OR FUND BALANCES STATEMENT 7

DESCRIPTION	AMOUNT
REPAYMENTS OF PRIOR YEAR DISTRIBUTIONS	1,673.
TOTAL TO FORM 990-PF, PART III, LINE 3	1,673.

FORM 990-PF U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS STATEMENT 8

DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
U.S. GOVERNMENT AGENCIES	X		651,690.	661,502.
MUNICIPAL OBLIGATIONS		X	1,343,234.	1,400,437.
TOTAL U.S. GOVERNMENT OBLIGATIONS			651,690.	661,502.
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS			1,343,234.	1,400,437.
TOTAL TO FORM 990-PF, PART II, LINE 10A			1,994,924.	2,061,939.

FORM 990-PF CORPORATE STOCK STATEMENT 9

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
COMMON EQUITY SECURITIES	684,594.	1,741,357.
TOTAL TO FORM 990-PF, PART II, LINE 10B	684,594.	1,741,357.

FORM 990-PF CORPORATE BONDS STATEMENT 10

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CORPORATE & FOREIGN BONDS	352,470.	370,700.
TOTAL TO FORM 990-PF, PART II, LINE 10C	352,470.	370,700.

FORM 990-PF OTHER INVESTMENTS STATEMENT 11

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
DOMESTIC EQUITY MUTUAL FUNDS	COST	228,992.	253,694.
GLOBAL EQUITY MUTUAL FUNDS	COST	6,409.	6,889.
INTL EQUITY MUTUAL FUNDS	COST	23,281.	21,507.
TAXABLE FIXED INCOME FUNDS	COST	85,311.	89,808.
TOTAL TO FORM 990-PF, PART II, LINE 13		343,993.	371,898.

Mary Cecile Chambers Scholarship

RETURN BY APRIL 15, 2009

The Mary Cecile Chambers Scholarship is available to male residents of the State of Texas and is renewable for four years, or until a Bachelor's Degree is obtained Scholarship awards pay up to $1,000 per semester (Spring and Fall semesters only) towards a student's tuition, fees, books, supplies, and on campus housing costs. Attached you will find a Mary Cecile Chambers Scholarship Application. Please review the information below if you would like to apply for the scholarship.

BASIC ELIGIBILITY CRITERIA:

1. **Applicant must be a male student residing in the State of Texas.**

2. Applicant must be in need of financial assistance.

3. Applicant must have a grade point average of 78 (C+) or higher.

4. Applicant must attend college, vocational or trade school on a full time basis and must maintain 9-12 hours each semester as well as maintain a 2.50 Cumulative GPA. **If the applicant maintains 9-12 hours and a 2.50 Cumulative GPA, the scholarship is renewable until a Bachelor degree is achieved.**

PROCEDURES FOR APPLYING:

1. The ***Student Section of the Application*** is to be completed by the student in his own handwriting using a ball-point pen. All items should be completed; leaving no blanks. **Please attach a letter of recommendation.**

2. The ***Parent(s) or Legal Guardian's Section*** should be completed by the Parent(s) or Legal Guardian. All items should be completed; leaving no blanks. Verification of financial information is to be provided; for example, copies of Tax Returns and/or W2 Statements, proof of Government Assistance and/or Child Support. If your parents would like to keep their finance information confidential they may seal the completed *Legal Guardian's Confidential Financial Statement* in an envelope marked **"Confidential Financial Information - for review only by the Mary Cecile Chambers Scholarship Committee and Staff"**. The sealed envelope must accompany your completed ***Application*** when it is delivered to your School Counselor.

3. Please make sure the application has been signed by you and your Parent(s) or Legal Guardian after it has been completed.

4. Return the **completed** *Application* and other requested information and attach a current copy of your **Transcript** as well as **SAT/ACT** Scores, if available. College students – transcript only.

5. Scholarships will be awarded on or before May 15, 2009.

RETURN APPLICATION AND REQUESTED INFORMATION TO:
Moody National Bank – Trust Division
Attn: Scholarship Coordinator
P. O. Box 1139
Galveston, Texas 77553-1139

MARY CECILE CHAMBERS SCHOLARSHIP
2009 APPLICATION

STUDENT'S NAME:____
(Last) (First) (Middle)

SOCIAL SECURITY NUMBER:______________________________________

HIGH
SCHOOL:____

INSTRUCTIONS

Take your time in completing this application, giving full consideration to each answer. Incomplete or deliberately misleading information will lead to automatic disqualification.

Complete **all** items; leaving no blanks. If an item is not applicable, write "n/a", if none, write "none".

Use supplemental pages for any additional comments you may wish to make in order to complete the questions. Number your additional comments to correspond to the number of the questions on the applications.

RETURN THE FOLLOWING ITEMS ALONG WITH THE COMPLETED APPLICATION:

1. A copy of your Transcript
2. SAT/ACT Scores – if applicable
3. A Letter of Recommendation from your Counselor or other teacher
4. Copies of Parent(s)/Guardians Tax Returns
5. W2 Statements
6. Proof of Government Assistance and/or Child Support

This Section to be Completed by Scholarship Committee:

______ACCEPTED ______DENIED (REASON)______________________________

STUDENT SECTION

A. *GENERAL INFORMATION:*

1 Name· ____
(Last) (Fırst) (Mıddle)

2 Home Address ____

____

3 Home Telephone ____________________ Socıal Securıty # ____________________

4. Date of Bırth. ____________________ Marıtal Status. ____________________

B. *EDUCATIONAL EXPERIENCE AND PLANS:*

1. Hıgh School/College presently attendıng: ______________________________

2. Have you ever been convıcted of a Mısdemeanor or Felony (other than traffic vıolatıons)?. If Yes, please explaın. ______________________________

3 Lıst any school and communıty actıvıtıes partıcıpated ın durıng the past two years·

4 What College, Vocatıonal or Trade school do you wısh to attend?·

First Choıce: ______________________________ Major· ______________

Second Choıce. ______________________________ Major· ______________

5. If you have been awarded a scholarshıp(s) from another organızatıon, please lıst the name and the amount of the scholarshıp(s)

____

____

____

C. *FAMILY INFORMATION:*

1. You Lıve wıth: ________Mother ________Father ________Guardıan
________Other, please explaın ______________________

2. Provıde the names of the people who lıve ın your household, theır relatıon to you and theır age.
a. ____
b. ____
c. ____
d. ____

3 Has Anyone ın Your Famıly Ever Been Awarded a Scholarshıp From the Mary Cecıle Chambers Scholarshıp Trust?: ____________ Name: ______________________

PARENT SECTION

D. GENERAL INFORMATION (this section is to be filled out by the Parent(s)):

1 Applicant's Father· ______________________ Age:________

Home Address. ______________________________

____

Parents Marital Status: ____________ Spouses Name.______________

Home Phone.______________________ Work Phone ______________

Name and Address of Employer· ______________________

____

Years with Firm:______ Occupation, Title, Rank·______________

Annual Salary: $______________________

2. Applicant's Mother ______________________ Age·________

Home Address: ______________________________

____

Parents Marital Status. ____________ Spouses Name·______________

Home Phone:______________________ Work Phone: ______________

Name and Address of Employer: ______________________

____

Years with Firm·______ Occupation, Title, Rank·______________

Annual Salary: $______________________

E. FINANCIAL INFORMATION:

I. Please provide the following Income information as it applies to your family.

1.	Father's annual salary	$______________
2	Mother's annual salary:	$______________
3	Welfare, V A. Benefits	$______________
4	Child Support:	$______________
5	Social Security or other benefits:	$______________
6	Income from Mutal Funds, Stocks, etc..	$______________
7	Funds set aside for College by Parent(s) or Legal Guardian	$______________
8.	Funds set aside for College by Student.	$______________
9	Current amount in Checking Account.	$______________
10.	Current amount in Savings Account:	$______________

II. Please provide the following Debt information as it applies to your family.

1 Home: Rent______ Own______

Monthly Payments. $________________________________
Mortgage Balance $________________________________

2. Other Real Estate:

Monthly Payments: $________________________________
Mortgage Balance. $________________________________

3. The number of Vehicles, make, model and the monthly payment amount.

$____________________ Description. _________________________
$____________________ Description. _________________________
$____________________ Description: _________________________
$____________________ Description: _________________________
$____________________ Description: _________________________

4. Unusual Expenses and Other Liabilities (Medical Expense, Private Schools, Loans, etc):

$____________________ Description: _________________________
$____________________ Description: _________________________
$____________________ Description: _________________________

5 Total credit card debt: ______________ Total monthly payments: ________________

STUDENT CERTIFICATION: I hereby apply for a scholarship from the Mary Cecile Chambers Scholarship Trust to assist exclusively in the payment of my educational expenses while in full-time (credit hours) attendance at the educational instution of my choice during the academic year. The information is true and correct to the best of my knowledge and belief.

____ ___________________________

Signature of Applicant Date

PARENT(S) OR GUARDIAN CERTIFICATION: The foregoing information is true and correct to the best of my knowledge. We agree to provide, if requested, official documentation necessary to verify any of the in formation reported in this statement.

____ ___________________________

Signature of Father or Guardian Date

____ ___________________________

Signature of Mother or Guardian Date