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

2009

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

For calendar year 2009, or tax year beginning JUN 1, 2009, and ending MAY 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 <b>THE MATJASKO-CHIU FOUNDATION, INC.</b>		A Employer identification number <b>20-2944342</b>	
	Number and street (or P O box number if mail is not delivered to street address) <b>10 E LEE ST</b>		Room/suite <b>2401</b>	B Telephone number <b>410-625-0661</b>
City or town, state, and ZIP code <b>BALTIMORE, MD 21202</b>		<input type="checkbox"/> C If exemption application is pending, check here ► <input type="checkbox"/> <input type="checkbox"/> D 1. Foreign organizations, check here ► <input type="checkbox"/> <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/> <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/> <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/>		
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation				
I Fair market value of all assets at end of year <i>(from Part II, col (c), line 16)</i> <b>► \$ 689,740.</b>		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____		
<b>Part I Analysis of Revenue and Expenses</b> (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
Revenue	1 Contributions, gifts, grants, etc., received	<b>1,606.</b>		
	2 Check ► <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B			
	3 Interest on savings and temporary cash investments			
	4 Dividends and interest from securities	<b>7,988.</b>	<b>7,988.</b>	<b>STATEMENT 1</b>
	5a Gross rents			
	b Net rental income or (loss)	<b>0.</b>		
	6a Net gain or (loss) from sale of assets not on line 10			
	b Gross sales price for all assets on line 6a	<b>113,000.</b>		
	7 Capital gain net income (from Part IV, line 2)		<b>0.</b>	
	8 Net short-term capital gain			
	9 Income modifications			
	Gross sales less returns			
10a and allowances				
b Less Cost of goods sold				
c Gross profit or (loss)				
11 Other income				
12 Total. Add lines 1 through 11	<b>9,594.</b>	<b>7,988.</b>	<b>0.</b>	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	<b>0.</b>	<b>0.</b>	<b>0.</b>
	14 Other employee salaries and wages			
	15 Pension plans, employee benefits			
	16a Legal fees			
	b Accounting fees	<b>1,429.</b>	<b>1,429.</b>	<b>0.</b>
	c Other professional fees	<b>1,708.</b>	<b>1,708.</b>	<b>0.</b>
	17 Interest	<b>227.</b>	<b>227.</b>	<b>0.</b>
	18 Taxes			
	19 Depreciation and depletion			
	20 Occupancy			
	21 Travel, conferences, and meetings			
	22 Printing and publications			
	23 Other expenses	<b>198.</b>	<b>198.</b>	<b>0.</b>
	24 Total operating and administrative expenses. Add lines 13 through 23	<b>3,562.</b>	<b>3,562.</b>	<b>0.</b>
25 Contributions, gifts, grants paid	<b>2,000.</b>		<b>2,000.</b>	
26 Total expenses and disbursements. Add lines 24 and 25	<b>5,562.</b>	<b>3,562.</b>	<b>0.</b>	
27 Subtract line 26 from line 12	<b>4,032.</b>			
a Excess of revenue over expenses and disbursements				
b Net investment income (if negative, enter -0)		<b>4,426.</b>		
c Adjusted net income (if negative, enter -0)			<b>0.</b>	

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
			1.	336,967.	387,027.
Assets	1 Cash - non-interest-bearing				
	2 Savings and temporary cash investments				
	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				
	10a Investments - U S and state government obligations	STMT 6	100,000.	0.	0.
	b Investments - corporate stock	STMT 7	339,207.	393,180.	302,713.
	c Investments - corporate bonds				
Liabilities	11 Investments - land, buildings, and equipment basis ►				
	Less: accumulated depreciation ►				
	12 Investments - mortgage loans				
	13 Investments - other				
	14 Land, buildings, and equipment basis ►				
	Less: accumulated depreciation ►				
	15 Other assets (describe ► )				
	16 Total assets (to be completed by all filers)		776,175.	780,207.	689,740.
	17 Accounts payable and accrued expenses				
	18 Grants payable				
Net Assets or Fund Balances	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.	
	Foundations that follow SFAS 117, check here ► <input type="checkbox"/>				
	and complete lines 24 through 26 and lines 30 and 31.				
	24 Unrestricted				
	25 Temporarily restricted				
	26 Permanently restricted				
Net Assets or Fund Balances	Foundations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/>				
	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		776,175.	780,207.	
	30 Total net assets or fund balances		776,175.	780,207.	
	31 Total liabilities and net assets/fund balances		776,175.	780,207.	

## 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	776,175.
2 Enter amount from Part I, line 27a	2	4,032.
3 Other increases not included in line 2 (itemize) ►	3	0.
4 Add lines 1, 2, and 3	4	780,207.
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	780,207.

**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 MASSACHUSETTS ST HEFA RV BOND (REDEEMED)		P	04/22/09	11/16/09
b ML&CO CAPPED LIRN (REDEEMED)		P	10/03/08	04/05/10
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 100,000.		100,000.	0.	
b 13,000.		13,000.	0.	
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a			0.	
b			0.	
c				
d				
e				
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	0.
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	500.	528,980.	.000945
2007	0.	642,911.	.000000
2006	815,916.	773,364.	1.055022
2005	200,000.	285,506.	.700511
2004			

2 Total of line 1, column (d)

2 1.756478

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 .439120

4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5

4 675,201.

5 Multiply line 4 by line 3

5 296,494.

6 Enter 1% of net investment income (1% of Part I, line 27b)

6 44.

7 Add lines 5 and 6

7 296,538.

8 Enter qualifying distributions from Part XII, line 4

8 2,000.

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 ► <input type="checkbox"/> and enter "N/A" on line 1	Date of ruling or determination letter _____ (attach copy of letter if necessary-see instructions)	1	89.
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input type="checkbox"/> 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)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
3	Add lines 1 and 2	2	0.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	3	89.	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	4	0.	
6	Credits/Payments	5	89.	
a	2009 estimated tax payments and 2008 overpayment credited to 2009	6a		
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	0.	
8	Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> 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	89.	
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 ►	11		
			Refunded ►	

**Part VII-A Statements Regarding Activities**

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	Yes	No
1b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? <i>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</i>	X	
1c	Did the foundation file Form 1120-POL for this year?	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? <i>If "Yes," attach a detailed description of the activities.</i>	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? <i>If "Yes," attach a conformed copy of the changes</i>	X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	N/A	
b	If "Yes," has it filed a tax return on Form 990-T for this year?		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T.</i>		
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?		
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i>	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ► <u>MD</u>		
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		
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		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		

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

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)

11		X
----	--	---

12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before 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 ► GERALD H LEAN, JD, CPA Telephone no ► 410-453-5500  
Located at ► 1966 GREENSPRING DR, STE 405, TIMONIUM, MD ZIP+4 ► 21093

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
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**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.

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?

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X	No
------------------------------	---------------------------------------	----

(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X	No
------------------------------	---------------------------------------	----

(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X	No
------------------------------	---------------------------------------	----

(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X	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)?

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X	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)

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X	No
------------------------------	---------------------------------------	----

b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?

N/A	
-----	--

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?

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X	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	
-----	--

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?

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> X	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)

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)?

Organizations relying on a current notice regarding disaster assistance check here  N/Ac 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?  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?

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
M JANE MATJASKO 10 E LEE ST, #2401 BALTIMORE, MD 21202	PRESIDENT 1.00	0.	0.	0.
SHAO-HAUNG CHIU 10 E LEE ST, #2401 BALTIMORE, MD 21202	VICE-PRES/SEC 1.00	0.	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

&gt;

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	N/A	
2		
3		
	All other program-related investments. See instructions	

**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	317,813.
b	Average of monthly cash balances	1b	367,670.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	685,483.
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	685,483.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	10,282.
5	Net value of noncharitable-use assets Subtract line 4 from line 3 Enter here and on Part V, line 4	5	675,201.
6	Minimum investment return Enter 5% of line 5	6	33,760.

**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	33,760.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	89.
b	Income tax for 2009 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	89.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	33,671.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	33,671.
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	33,671.

**Part XII Qualifying Distributions** (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	1a	2,000.
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1b	0.
b	Program-related investments - total from Part IX-B	2	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	3a	
3	Amounts set aside for specific charitable projects that satisfy the	3b	
a	Suitability test (prior IRS approval required)	4	2,000.
b	Cash distribution test (attach the required schedule)	5	0.
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	6	2,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b		
6	Adjusted qualifying distributions Subtract line 5 from line 4		

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

**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				33,671.
2 Undistributed income, if any, as of the end of 2009			0.	
a Enter amount for 2008 only				
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004				
b From 2005	135,351.			
c From 2006	795,516.			
d From 2007				
e From 2008				
f Total of lines 3a through e	930,867.			
4 Qualifying distributions for 2009 from Part XII, line 4 ► \$ 2,000.			0.	
a Applied to 2008, but not more than line 2a				
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				2,000.
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))	31,671.			31,671.
6 Enter the net total of each column as indicated below:	899,196.			
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				0.
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	899,196.			
10 Analysis of line 9				
a Excess from 2005	103,680.			
b Excess from 2006	795,516.			
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				



**Part XV** **Supplementary Information** (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	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
Name and address (home or business)				
<b>a Paid during the year</b>				
SEE STATEMENT 8				
<b>Total</b>			► 3a	<b>2,000.</b>
<b>b Approved for future payment</b>				
NONE				
<b>Total</b>			► 3b	<b>0.</b>

923611 02-02-10

Form 990-PF (2009)

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

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
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					
4 Dividends and interest from securities			14	7,988.	
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			18		
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.		7,988.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	7,988.
(See worksheet in line 13 instructions to verify calculations )					

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

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

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
- (2) Other assets

## b Other transactions

**(1) Sales of assets to a noncharitable exempt organization**

**(2) Purchases of assets from a noncharitable exempt organization**

**(3) Rental of facilities, equipment, or other assets**

#### (4) Reimbursement arrangements

**(5) Loans or loan guarantees**

**(6) Performance of services or membership or fundraising solicitations**

**c Sharing of facilities, equipment, mailing lists, other assets, or paid employees**

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.

**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		

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	Title	
Paid Preparer's Use Only	Preparer's signature	Date 12/22/10		Check if self- employed <input type="checkbox"/>
	NADEN/LEAN, LLC 1966 GREENSPRING DRIVE, SUITE 405 TIMONIUM, MD 21093-4139			Preparer's identifying number  EIN <input type="checkbox"/>
Firm's name (or yours if self-employed), address, and ZIP code				Phone no (410) 453-5500

**Schedule B**(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

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

OMB No 1545-0047

**2009**

Name of the organization

THE MATJASKO-CHIU FOUNDATION, INC.

Employer identification number

20-2944342

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ► \$ \_\_\_\_\_

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

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

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

Name of organization

Employer identification number

THE MATJASKO-CHIU FOUNDATION, INC.

20-2944342

## Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	SHAO H CHIU & M JANE MATJASKO-CHIU 10 E LEE ST BALTIMORE, MD 21202	\$ 1,606.	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II if there is a noncash contribution.)</small>
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II if there is a noncash contribution.)</small>
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II if there is a noncash contribution.)</small>
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II if there is a noncash contribution.)</small>
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II if there is a noncash contribution.)</small>
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II if there is a noncash contribution.)</small>
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II if there is a noncash contribution.)</small>
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II if there is a noncash contribution.)</small>
		\$ _____	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <small>(Complete Part II if there is a noncash contribution.)</small>

Name of organization

Employer identification number

THE MATJASKO-CHIU FOUNDATION, INC.

20-2944342

**Part II Noncash Property** (see instructions)

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

---

**Name of organization**

**Employer identification number**

20-2944342

THE P  
**Part III**

**Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year.** Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$

FORM 990-PF	DIVIDENDS AND INTEREST FROM SECURITIES	STATEMENT	1
-------------	--	-----------	---

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
MERRILL LYNCH	7,988.	0.	7,988.
TOTAL TO FM 990-PF, PART I, LN 4	7,988.	0.	7,988.

FORM 990-PF	ACCOUNTING FEES	STATEMENT	2
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PROFESSIONAL FEES	1,429.	1,429.	0.	0.
TO FORM 990-PF, PG 1, LN 16B	1,429.	1,429.	0.	0.

FORM 990-PF	OTHER PROFESSIONAL FEES	STATEMENT	3
-------------	-------------------------	-----------	---

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES	1,708.	1,708.	0.	0.
TO FORM 990-PF, PG 1, LN 16C	1,708.	1,708.	0.	0.

FORM 990-PF	TAXES	STATEMENT	4
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAX ON INVESTMENT INCOME	177.	177.	0.	0.
TAX ON FOREIGN DIVIDENDS	50.	50.	0.	0.
TO FORM 990-PF, PG 1, LN 18	227.	227.	0.	0.

FORM 990-PF

OTHER EXPENSES

STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
	ACCOUNT FEES	198.	198.	0.
TO FORM 990-PF, PG 1, LN 23	198.	198.	0.	0.

FORM 990-PF

U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS

STATEMENT 6

DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
	STATE AND MUNICIPAL OBLIGATIONS		X	0.
TOTAL U.S. GOVERNMENT OBLIGATIONS				
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS				
TOTAL TO FORM 990-PF, PART II, LINE 10A			0.	0.

FORM 990-PF

CORPORATE STOCK

STATEMENT 7

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
	CORPORATE STOCKS	393,180.
TOTAL TO FORM 990-PF, PART II, LINE 10B	393,180.	302,713.

FORM 990-PF

GRANTS AND CONTRIBUTIONS  
PAID DURING THE YEAR

STATEMENT 8

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
AMERICAN MEDICAL ASSOC 515 N. STATE STREET CHICAGO, IL 60610	NONE GENERAL FUNDS	EDUCATIONA INSTITUTIO	
BRIGHAM AND WOMENS HOSPITAL 116 HUNTINGTON AVE BOSTON, MA 02116	NONE GENERAL FUNDS	EDUCATIONA INSTITUTIO	1,000.
FOUNDATION FOR ANESTHESIA EDUCATION & RESEARCH 200 FIRST STREET SW ROCHESTER, MN 55905	NONE GENERAL FUNDS	EDUCATIONA INSTITUTIO	1,000.
HILLCDALE COLLEGE 33 EAST COLLEGE ST HILLCDALE, MI 49242	NONE GENERAL FUNDS	EDUCATIONA INSTITUTIO	
ST JOSEPH HIGH SCHOOL 1733 WEST GIRARD AVENUE PHILADELPHIA, PA 19130	NONE GENERAL FUNDS	EDUCATIONA INSTITUTIO	
UNIVERSITY OF MARYLAND HOSPITAL RESIDENTS & FELLOWS FUND 100 N GREENE ST BALTIMORE, MD 21201	NONE GENERAL FUNDS	EDUCATIONA INSTITUTIO	
UNIVERSITY OF MARYLAND SCHOOL OF MEDICINE 100 N GREENE ST BALTIMORE, MD 21201	NONE FUND TWO PROFESSORSHIPS	EDUCATIONA INSTITUTIO	
TOTAL TO FORM 990-PF, PART XV, LINE 3A			2,000.

Online at: [www.mlol.ml.com](http://www.mlol.ml.com)

Account Number: 641-04025,  
\* \* Duplicate Copy \* \*

24-Hour Assistance: (800) MERRILL  
TOTAL MERRILL\*

FAO M. JANE MATJASKO-CHIU  
ENDOWMENT ACCOUNT  
NADEN/LEAN, LLC  
TIMONIUM ONE  
1966 GREENSPRING DR STE 405  
TIMONIUM MD 21093-4139

## ■ FOUNDATION

This account is enrolled in the Master Financial Service

### ASSETS

	May 28	April 30
Cash/Money Accounts	<u>380,811.77</u>	380,457.28
Fixed Income	-	-
Equities	<u>122,628.66</u>	130,369.89
Mutual Funds	<u>62,214.70</u>	68,377.50
Options	-	-
Other	-	-
Subtotal (Long Portfolio)	<u>565,655.13</u>	579,204.67
<b>TOTAL ASSETS</b>	<b>\$565,655.13</b>	<b>\$579,204.67</b>

### LIABILITIES

Debit Balance	-
Short Market Value	-
<b>TOTAL LIABILITIES</b>	<b>\$565,655.13</b>
<b>NET PORTFOLIO VALUE</b>	<b>\$565,655.13</b>
	\$579,204.67

	May 28	April 30
Cash/Money Accounts	-	<u>\$380,457.28</u>
CREDITS	-	-
Funds Received	-	2.67
Electronic Transfers	-	-
Other Credits	-	-
Subtotal	-	2.67
DEBITS	-	-
Electronic Transfers	-	-
Margin Interest Charged	-	(19.77)
Other Debits	-	-
Visa Purchases (debits)	-	-
ATM/Cash Advances	-	(1,000.00)
Checks Written/Bill Payment	-	(1,019.77)
Subtotal	-	(1,017.10)
<b>Net Cash Flow</b>	<b>354.49</b>	<b>1,255.68</b>
Dividends/Interest Income	-	-
Security Purchases/Debits	-	-
Security Sales/Credits	-	-
<b>Closing Cash/Money Accounts</b>	<b>\$380,811.77</b>	<b>13,000.00</b>

Securities You Transferred In/Out

FOUNDATION

Account Number: 641-04025

24-Hour Assistance: (800) MERRILL

## YOUR EMA BANK DEPOSIT INTEREST SUMMARY

Money Account Description	Opening Balance	Average Deposit Balance	Current Yield%	Interest on Deposits	Closing Balance
FIA Card Services, N.A.	246.099	246.010	.50	93.43	<b>246,093</b>
Bank of America RI, N.A.	134.356	134.446	.50	51.06	<b>134,508</b>
<b>TOTAL</b> ML Bank Deposit Program	<b>380 455</b>			<b>144.49</b>	<b>380,601</b>

## YOUR EMA ASSETS

CASH/MONEY ACCOUNTS Description	Quantity	Total Cost Basis	Estimated Market Price	Estimated Market Value	Estimated Annual Income	Estimated Annual Income	Estimated Current Yield%
<b>CASH</b>	210.77	210.77		<b>210.77</b>			
<b>ML BANK DEPOSIT PROGRAM</b>	380,601.00	380,601.00	1.0000	<b>380,601.00</b>	<b>1,903</b>	<b>50</b>	
<b>TOTAL</b>	<b>380,811.77</b>			<b>380,811.77</b>	<b>1,903</b>	<b>50</b>	
EQUITIES Description	Symbol Acquired	Quantity	Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain/(Loss)/Annual Income Yield%
ACCURAY INC CALIF	ARAY 02/13/07	250	28.7500	7,187.50	6.1000	1,525.00	(5,662.50)
	02/13/07	100	28.7500	2,875.00	6.1000	61.00	(2,265.00)
<b>Subtotal</b>		350		10,062.50		<b>2,135.00</b>	(7,927.50)
CHINA SUNERGY CO LTD ADR	CSUN 05/30/07	1,000	10.8180	10,818.00	3.8300	<b>3,830.00</b>	(6,988.00)
CUBIST PHARMACEUTICALS	CBST 01/25/06	200	21.4000	4,280.00	21.5000	4,300.00	20.00
	01/25/06	200	21.4000	4,280.00	21.5000	4,300.00	20.00
	01/25/06	200	21.4000	4,280.00	21.5000	4,300.00	20.00
	01/25/06	100	21.4000	2,140.00	21.5000	2,150.00	10.00
	01/25/06	200	21.4000	4,280.00	21.5000	4,300.00	20.00
	01/25/06	100	21.4000	2,140.00	21.5000	2,150.00	10.00
<b>Subtotal</b>		1,000		21,400.00		<b>21,500.00</b>	100.00
HANSEN MED INC	HNSN 07/24/07	1,000	21.5200	21,520.00	2,1800	<b>2,180.00</b>	(19,340.00)

+ 010





## FOUNDATION

Account Number: 641-04025

## TOTAL MERRILL®

## YOUR EMA ASSETS

EQUITIES (continued)		Symbol	Acquired	Quantity	Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain/(Loss)	Estimated Current Annual Income Yield%
HOME INNS & HOTELS MGMT INC	HMIN	10/26/06	140	23.1200	3,236.80	38.0900	5,332.60	5,332.60	2,095.80	2.095.80
		10/26/06	200	23.1200	4,624.00	38.0900	7,618.00	7,618.00	2,994.00	2.994.00
		10/26/06	60	23.1200	1,387.20	38.0900	2,285.40	2,285.40	898.20	898.20
		10/26/06	40	23.1400	925.60	38.0900	1,523.60	1,523.60	598.00	598.00
		10/26/06	20	23.1400	462.80	38.0900	761.80	761.80	299.00	299.00
		10/26/06	100	23.1400	2,314.00	38.0900	3,809.00	3,809.00	1,495.00	1,495.00
		10/26/06	240	23.1400	5,553.60	38.0900	9,141.60	9,141.60	3,588.00	3,588.00
			800		18,504.00		30,472.00		11,968.00	
		INFY 02/06/07	100	58.6100	5,861.00	57.5300	5,753.00	5,753.00	(108.00)	78 1.34
		02/06/07	250	58.6100	14,652.50	57.5300	14,382.50	14,382.50	(270.00)	195 1.34
			350		20,513.50		20,135.50		(378.00)	
		Subtotal					7,942.00		(10,770.00)	
		MACQUARIE INFRASTRUCTURE CO LLC	MIC 02/26/08	550	34.0218	18,712.00	14.4400			
		PETROBANK ENERGY & RES	PBEGF 02/15/08	350	55.8485	19,547.00	41.5747	14,551.14	(4,995.86)	
		PLUM CREEK TIMBER CO INC	PCL 03/12/07	500	38.8000	19,400.00	35.0200	17,510.00	(1,890.00)	841 4.79
		URANIUM ONE INC	SXRZF 05/30/07	1,150	14.6173	16,810.00	2.0635	2,373.02	(14,436.98)	
						177,287.00				
							122,628.66		(54,655.34)	
								1,114	91	

## RESEARCH RATINGS

Security	Symbol	BofAML Research	Morningstar
CUBIST PHARMACEUTICALS	CBST	N/A	Hold
CHINA SUNERGY CO LTD ADR	CSUN	Buy (C19)	Hold
HOME INNS & HOTELS MGMT	HMIN	N/A	Hold
INFOSYS TECH LTD ADR	INFY	Buy (C17)	Hold
MACQUARIE INFRASTRUCTURE CO LLC	MIC	N/A	Sell
PLUM CREEK TIMBER CO INC	PCL	Neutral (B28)	Hold

**PLEASE REFER TO THE BACK OF YOUR STATEMENT FOR A GUIDE TO BOFAML AND THIRD PARTY RESEARCH RATINGS.**

May 01, 2010 - May 28 2010

May 01, 2010 - May 28 2010

FOUNDATION

Account Number: 641-04025

## YOUR EMA ASSETS

May 01, 2010 - May 28, 2010						
MUTUAL FUNDS/CLOSED END FUNDS/UIT Description	Quantity	Total Client Investment	Cumulative Investment Return	Total Cost Basis	Estimated Market Price	Estimated Market Value
INDIA FUND INC SYMBOL: IFN Initial Purchase: 01/25/06 Equity 100%	400	18,332	(6.876)	18,332.00	28.6400	<b>11,456.00</b>
POWERSHARES ETF TR II SYMBOL: PKN Initial Purchase: 04/11/08 Equity 100%	500	12,890	(4,201)	12,890.00	17.3774	<b>8,688.70</b>
TEMPLETON DRAGON FD SYMBOL: TDF Initial Purchase: 01/25/06 Equity 100%	1,000	20,990	3,150	20,990.00	24.1400	<b>24,140.00</b>
WISDOMTREE EQUITY DEFA EQUITY INCOME FUND SYMBOL: DTH Initial Purchase: 12/13/06 Equity 100%	500	30,575	(12,645)	30,575.00	35.8600	<b>17,930.00</b>
<b>TOTAL</b>		(20,572)		82,787.00		<b>62,214.70</b>
						<b>62,214.70</b>
						(20,572.30)
						<b>1,570</b>
						<b>2,52</b>

**Total Client Investment:** Cost of shares directly purchased and still held. Does not include shares purchased through reinvestment.

**Cumulative Investment Return:** Estimated Market Value minus Total Client Investment

**Cumulative Investment Return is the capital appreciation (depreciation) of all shares purchased, including shares purchased through reinvestment**

**Market Timing:** Merrill Lynch's policies prohibit mutual fund market timing, which involves the purchase and sale of mutual fund shares within short periods of time with the intention of capturing short-term profits resulting from market volatility. Market timing may result in lower returns for long-term fund shareholders because market timers capture short-term gains that would otherwise pass to all shareholders and due to increased transaction costs and fewer assets for investment due to the need to retain cash to satisfy redemptions.



24-Hour Assistance: (800) MERRILL

May 01, 2010 - May 28, 2010



Online at: [www.mlol.ml.com](http://www.mlol.ml.com)

Account Number: 641-04032  
\* \* Duplicate Copy \* \*

24-Hour Assistance: (800) MERRILL  
TOTAL MERRILL®

FAO M. JANE MATJASKO-CHIU  
ENDOWMENT ACCOUNT  
NADEN/LEAN, LLC  
TIMONIUM ONE  
1966 GREENSPRING DR STE 405  
TIMONIUM MD 21093-4139

**\$124,084.88**

**Net Portfolio Value:**

**Your Financial Advisor:**  
HOULT/LITRELL GROUP  
P.O. BOX 841  
FREDERICK MD 21705  
(800) 753-3113

## ■ FOUNDATION TRADING

This account is enrolled in the Merrill Lynch Personal Advisor™ Program

### ASSETS

Cash/Money Accounts	May 28	April 30	This Statement	Year to Date
	6,214.88	6,092.55	\$6,092.55	
Fixed Income				
Equities	88,060.00	98,205.00	Funds Received	
Mutual Funds	29,810.00	32,490.00	Electronic Transfers	
Options			Other Credits	
Other			Subtotal	
Subtotal (Long Portfolio)	124,084.88	136,787.55	<b>DEBITS</b>	
<b>TOTAL ASSETS</b>	<b>\$124,084.88</b>	<b>\$136,787.55</b>	Electronic Transfers	

### LIABILITIES

Debit Balance				
Short Market Value				
<b>TOTAL LIABILITIES</b>			Margin Interest Charged	
<b>NET PORTFOLIO VALUE</b>	<b>\$124,084.88</b>	<b>\$136,787.55</b>	Other Debits	
			Visa Purchases (debits)	
			ATM/Cash Advances	
			Checks Written/Bill Payment	
			Subtotal	
				(754.22)
			<b>Net Cash Flow</b>	
			Dividends/Interest Income	
			Security Purchases/Debits	
			Security Sales/Credits	
			<b>Closing Cash/Money Accounts</b>	
			<b>\$6,214.88</b>	
			Securities You Transferred In/Out	

FOUNDATION TRADING

Account Number: 641-04032

24-Hour Assistance: (800) MERRILL

## YOUR EMA SUBACCOUNT BANK DEPOSIT INTEREST SUMMARY

Money Account Description	Opening Balance	Average Deposit Balance	Current Yield%	Interest on Deposits	Closing Balance
FIA Card Services, N.A.	5,757	6,160	10	0.45	<b>6,214</b>
<b>TOTAL</b> ML Bank Deposit Program	<b>5,757</b>			<b>0.45</b>	<b>6,214</b>

## ITEMS FOR ATTENTION

Security	Message	Date	Security	Message	Date
ARCELORMITTAL SA.	Opinion Downgraded	-	-	-	-

## YOUR EMA SUBACCOUNT ASSETS

CASH/MONEY ACCOUNTS	Quantity	Total Cost Basis	Estimated Market Price	Estimated Market Value	Estimated Annual Income	Est. Annual Yield %
CASH	0.88	0.88	.88	.88		
ML BANK DEPOSIT PROGRAM	6,214.00	6,214.00	1.0000	6,214.00	6	.10
<b>TOTAL</b>	<b>6,214.88</b>			<b>6,214.88</b>	<b>6</b>	<b>.10</b>

  

EQUITIES	Symbol	Acquired	Quantity	Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain/(Loss)	Estimated Current Annual Income	Estimated Current Yield %
ACCURAY INC CALIF	ARAY	10/16/07	1,000	18.0000	18 000.00	6.1000	6,100.00	(11 900.00)		
ARCELORMITTAL SA, LUXEMBOURG	MT	08/29/07	150	63.2100	9,481.50	30 3200	4,548.00	(4,933.50)		
BARRICK GOLD CORPORATION	ABX	09/25/08	550	36.9390	20,316.45	42.0800	23,144.00	2,827.55	<b>221</b>	.95
BP PLC	BP	08/26/09	100	51.5400	5,154.00	42.9500	4,295.00	(859.00)	336	7.82
SUPON ADR		08/26/09	300	51.5500	15,465.00	42.9500	12,885.00	(2,580.00)	1,009	7.82
<i>Subtotal</i>			400		20,619.00		17,180.00	(3,439.00)	<b>1,345</b>	7.82



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FOUNDATION TRADING

Account Number: 641-04032

## YOUR FMA SIBACCO/INT ASSETS

May 01 2010 - May 28, 2010

## RESEARCH RATINGS

Security	Symbol	BofAML Research	Morningstar	S&P
ARCELORMITTAL SA,	MT	Neutral (C28)	Buy	No Coverage
BARRICK GOLD CORPORATION	ABX	Buy (C17)	Hold	Buy
BP PLC	BP	Buy (A17)	Hold	Buy
MEMC ELECTR MATLS INC	WFR	Neutral (C29)	Hold	Buy

**PLEASE REFER TO THE BACK OF YOUR STATEMENT FOR A GUIDE TO BofAML AND THIRD PARTY RESEARCH RATINGS.**

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FOUNDATION TRADING

Account Number: 641-04032

24-Hour Assistance: (800) MERRILL

YOUR FMA SUBACCOUNT ASSETS

MUTUAL FUNDS/CLOSED END FUNDS/JIT		Total Client Investment	Cumulative Investment Return	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain/(Loss)	Annual Income	Estimated Current Yield%
Description	Quantity								
FDUCIÁŘ/CLAY MLP OPP	1,000	16.544	2.035	16,544.70	18.5800	18,580.00	2.035 30	1,341	7.21
OPPTY FD									
SYMBOL·FMO									
Equity 100%									
PIMCO HIGH INCOME	1,000	9.548	1.681	9.548.40	11.2300	11,230.00	1.681 60	1,462	13.01
SYMBOL·PHK									
Initial Purchase 08/26/09									
Fixed Income 100%									
Subtotal (Fixed Income)									
Subtotal (Equities)									
<b>TOTAL</b>				3.716	26.093.10	29,810.00	3,716.90	2,803	9.40
<b>Total Client Investment:</b> Cost of shares directly purchased and still held. Does not include shares purchased through reinvestment.									
<b>Cumulative Investment Return:</b> Estimated Market Value minus Total Client Investment									
<b>Cumulative Investment Return</b> is the capital appreciation (depreciation) of all shares purchased, including shares purchased through reinvestment.									
<b>Market Timing:</b> Merrill Lynch's policies prohibit mutual fund market timing, which involves the purchase and sale of mutual fund shares within short periods of time with the intention of capturing short-term profits resulting from market volatility. Market timing may result in lower returns for long-term fund shareholders because market timers capture short-term gains that would otherwise pass to all shareholders and due to increased transaction costs and fewer assets for investment due to the need to retain cash to satisfy redemptions									
<b>Initial Purchase:</b> Date of your initial investment in this fund									
<b>Unrealized Gain or (Loss):</b> Estimated Market Value minus Total Cost Basis (total cost of shares directly purchased and still held, as well as cost of shares acquired through reinvestment). Provided for Tax Planning purposes only and is not applicable to retirement accounts.									
<b>LONG PORTFOLIO</b>	Adjusted/Total Cost Basis								
		Estimated Market Value							
		Unrealized Gain/(Loss)							
<b>TOTAL</b>	156,571.93	124,084.88	(32,487.05)						
				Estimated Interest	Estimated Annual Income	Current Yield%			
								4,471	3.60

