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

OMB No. 1545-0052 മെക

	ment of the T Revenue Se		Note	: The foundati	on mav b	Treated as a Priva be able to use a copy of t	nte Foundation	on itisfy state	reporti	na requirements.	2009
				ax year begi			01 ,2009,			3	05/31,20 10
		hat apply:		Initial retur			of a former p				Final return
		,		Amended	return	Addre	ss change	Γ	⊤'∫Na	me change	
		Name of fo	unda	tion				_		A Employer identifi	cation number
Use	the IRS										
	abel.	MARY EI	T7.7	ABETH MAR	אדים	CHOLARSHIP TRU	IST			48-	6104170
Oth	erwise,					mail is not delivered to stree		Room/su	uite		page 10 of the instructions)
	print				,				,,-		
	type.	P.O. BO	י אר	387						/31	4) 418-2643
	Specific uctions.			ite, and ZIP cod	de			l .		C If exemption applica	tion is
ınsır	uctions.	'		•						pending, check here	▶
		ST. LOT	ITS.	, MO 6316	6				l'	 1 Foreign organizat 2 Foreign organizat 	
H Ch	eck type					c)(3) exempt private f	oundation			85% test, check h	ere and attach
				empt charitable		Other taxable pr		ion		computation -	
		t value of a				unting method: X C			⊣ '	E If private foundation	
		om Part II, c			11	ther (specify)			١.		I(1)(A), check here .
	5) ▶ \$					column (d) must be o	n cash basis.)		1		n a 60-month termination
	Analy	sis of Rev	enue	and Expens	es (The		-			· · · · · · · · · · · · · · · · · · ·	(d) Disbursements
	total o	of amounts II	ı colu	ımns (b), (c), an	ıd (d)	(a) Revenue and expenses per	(b) Net inve		(c)	Adjusted net	for charitable
				ial the amount I of the instruct		books	incom	ie		income	purposes (cash basis only)
1											(cusii busis oniy)
2	Check I	X if the	found	dation is not requ	ured to						-
3				B							
4		_		om securities		20,164.	2	0,164.			
5											
1									-		
ء ا			-	of assets not on I		3,907.		1 1	₹F(3	
	b Gross sa	ales price for a		100,				1. [-1VED-	7
8 7				(from Part IV, I			,	39,907			
æ 8		-		in			i	- 1 0	CT 7	2 22. /	21
9						=	<i>i</i>		-	~ 2010 5) <i>/</i>
10	a Gross sa	ales less return	s				Ĺ	Oc.	n,-	10	ĺ
		est of goods so							25	IV. GT =	
		-		ach schedule)				,			
11				hedule)				_			
_ 12				gh 11		24,071.	2	4,071.			
13	Comper	nsation of offic	ers, dı	rectors, trustees,	, etc	13,145.		1,831.			1,315
14				and wages .				NONE		NONE	
9 15				benefits				NONE		NONE	
5 16				ule)							
<u>- X. </u>	b Accour	nting fees (at	tach	schedule)STM	1T-i-	1,000.		NONE		NONE	1,000
and Administrative E 12 0 12 12 12 12 12 12 12 12 12 12 12 12 12	c Other p	-		attach schedul							
뒱 17	Interes	t									
18 St	Taxes (a			page 14 of the The		263.		223.			
[]	Depred			edule) and dep							
등 20	Occupa	ancy									
21	Travel,	conferences	, and	meetings				NONE		NONE	
E 22	Printing							NONE		NONE	
Operating 22	Other 6	expenses (att	ach s	schedule)							
E 24	Total o	perating and	d adn	ninistrative ex	penses.						
be	Add lin	nes 13 throug	gh 23			14,408.	1	2,054.		NONE	2,315
25	Contrib	utions, gifts,	gran	its paid		50,000.					50,000
26	Total exp	enses and disb	urseme	ents Add lines 24	and 25	64,408.	1	2,054.		NONE	52,315
27	Subtra	ct line 26 fro	תול מזי	e 12							
			-	es and disburseme	1	-40,337.				<u> </u>	
	b Net inv	estment inc	ome	(ıf negative, er	nter -0-)		1	2,017.			
1_	c Adjust	ed net incon	ne (if	negative, ente	r -0-)				L		<u></u>
For Pr	rivacy Act	t and Papery	vork	Reduction Act	Notice.	see page 30 of the insti	netions		SA		Form 990-PF (2009)

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. $^{9E1410\,1\,000}$ AIL 717 M633 06/15/2010 15:16:43 047006

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Part	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
	amounts only, (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
. 2	Savings and temporary cash investments	64,648.	12,086.	12,086
,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 (attach schedule) (see page 16 of the instructions)			
7	Other notes and loans receivable (attach schedule)	· · ·		
'	Less allowance for doubtful accounts NONE			
8	Inventories for sale or use			
Assets 0 0	Prepaid expenses and deferred charges			·
SS		301,486.	251,691.	271,058
	a Investments - U S and state government obligations (attach schleiblig)	573,889.	635,911.	
	b Investments - corporate stock (attach schedule) STMT 4			653,022
11	Investments - corporate bonds (attach schedule). STMT .5 . Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule)	25,301.	25,301.	27,048
12	Investments - mortgage loans			
13 14	Investments - other (attach schedule) Land, buildings, and equipment basis Less accumulated depreciation (attach schedule)			
15	(attach schedule)			
1	Other assets (describe			
16	Total assets (to be completed by all filers - see the	065 224	004 000	062 214
+-	ınstructions. Also, see page 1, ıtem I)	905,324.	924,989.	963,214
17	Accounts payable and accrued expenses		·	
18	Grants payable			
Liabilities 20 21 21	Deferred revenue			
∄ 20	Loans from officers, directors, trustees, and other disqualified persons			
림 21	Mortgages and other notes payable (attach schedule)			
22	Other liabilities (describe			
23	Total liabilities (add lines 17 through 22)			
	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
89 24 25 26 26	Unrestricted		- · · · · · · · · · · · · · · · · · · ·	
E 25	Temporarily restricted			
g 26	Permanently restricted			
힏	Foundations that do not follow SFAS 117,			
Pung 27	check here and complete lines 27 through 31. ▶ X		•	
ත් 27	Capital stock, trust principal, or current funds	965,324.	924,989.	
₽ 28⁻	Paid-in or capital surplus, or land, bldg., and equipment fund			
Net Assets 30 58 58	Retained earnings, accumulated income, endowment, or other funds			
₹ 30	Total net assets or fund balances (see page 17 of the			
2	Instructions)	965,324.	924,989.	
31	Total liabilities and net assets/fund balances (see page 17			
	of the instructions)	965,324.	924,989.	
Part	Analysis of Changes in Net Assets or Fund E			
	al net assets or fund balances at beginning of year - Part II, co		agree with	
	d-of-year figure reported on prior year's return)			965,324.
				-40,337.
3 0+1	er amount from Part I, line 27a	TEMENT 6		2.
				924,989.
				744,703.
	al net assets or fund balances at end of year (line 4 minus lin	e 5) - Part II, column (b)		924,989.
<u>U</u> 101	arrier assets or runu barances at end of year time 4 minus lin	io 5) - Fait II, COlumn (D),	iiiie 30 b	724,707.

Form 990-PF (2009)		10 0101			Page 3
	s and Losses for Tax on Inv		(b) How	(a) Data	
	d describe the kind(s) of property sold (= -	acquired P-Purchase	(c) Date	(d) Date sold (mo , day, yr.)
1a 'SEE PART IV DETA	rick warehouse, or common stock, 200	SIIS. WILC CO)	D-Donation	(mo., day, yr.)	-
b					
C				 	
d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	•
a					
b					
С					
<u>d</u>					
<u>e</u>		L			
Complete only for assets sho	owing gain in column (h) and owne			Gains (Col. (h) ga	
(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	col.	(k), but not less t Losses (from co	
<u>a</u>					
<u>b</u>			ļ		
<u>c</u>	,,,				
<u>d</u>					
<u>e</u>		Buddl 7	 		
2 Capital gain net income or		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		2 007
3 Net short-term capital gain	or (loss) as defined in sections 122		-		3,907.
	line 8, column (c) (see pages 13 ar				
	ine 8		3		
Part V Qualification Un	der Section 4940(e) for Reduc	ed Tax on Net Investment Inc	ome		
	private foundations subject to the			me.)	• ••
•	,			,	
If section 4940(d)(2) applies,	leave this part blank.				
	the section 4942 tax on the distrib		ase perio	d?	Yes X No
	not qualify under section 4940(e). I				
1 Enter the appropriate amo	ount in each column for each year;	see page 18 of the instructions be	fore maki		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution ra (col (b) divided by	
2008	69,275.	921,073.			21119390
2007	85,218.	1,213,113.			24737184
2006	71,970.	1,202,693.			84070748
2005	55,113.	1,171,459.			704646087
2004	55,933.	1,245,540.		0.044	90662684
0 T.a.l. (1)			_		
2 fotal of line 1, column (d)			2	0.297	<u> 725236093</u>
	for the 5-year base period - divide t			0.05	
number of years the lound	dation has been in existence if less	tnan 5 years	3	0.055	45047219
4 Enter the net value of non	charitable-use assets for 2009 from	n Part X, line 5	4		945,223.
5 Multiply line 4 by line 3			5		56,194.
6 Enter 1% of net investmen	it income (1% of Part I, line 27b)		6		120.
7 Add lines 5 and 6			7		56,314.
8 Enter qualifying distribution If line 8 is equal to or greater VI instructions on page	ons from Part XII, line 4	n Part VI, line 1b, and complete t	8 hat part	using a 1% tax	52,315. rate. See the

Form !	990-PF (2009) 48 - 6104170		Pa	age 4
Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of t	he ins	tructio	ns)
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 ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		2	<u>40.</u>
•	here 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-) 2			
3	Add lines 1 and 2			<u>40.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4			ONE
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			<u>40.</u>
6	Credits/Payments 2009 estimated tax payments and 2008 overpayment credited to 2009 6a 196.			
	37037			
7 7	Backup withholding erroneously withheld		1	96.
8	Enter any penalty for underpayment of estimated tax. Check here I f Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			44.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.			
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax ▶ Refunded ▶ 11			
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		Yes	No
	participate or intervene in any political campaign?	1a		X
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1b		<u>X</u>
	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		<u>X</u>
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. >\$ (2) On foundation managers. > \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers. > \$			v
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u>X</u>
_	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	,	l	<u> </u>
40	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3 4a		$\frac{x}{X}$
7a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
•	If "Yes," attach the statement required by General Instruction T.			
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 page 19 of the			
	instructions) ►			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	1		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8Ъ	Х	
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 on page	'		7.7
	27)7 If "Yes," complete Part XIV	9		<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			

names and addresses

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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 page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	1		_
•	August 17, 2008?	12		<u> X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		X	
	Website address ► N/A			
14	The books are in care of ► US_BANK_NA Telephone no. ► (314)418-26	43		
	Located at ► PO BOX 387, ST LOUIS, MO ZIP+4 ► 63166			
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			
	VII-B Statements Regarding Activities for Which Form 4720 May Be Required		1	
	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 X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if			
	the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government services, it terminating vitaling to day, or the control of the contro			
Ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			v
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		<u>X</u>
	Organizations relying on a current notice regarding disaster assistance check here			
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			v
	were not corrected before the first day of the tax year beginning in 2009?	1c	-	<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		1	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	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?			
	oo, rank xiii, for tax your(s) beginning belone 2005***********************************			
	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)	26		Х
	to all years listed, answer "No" and attach statement - see page 20 of the instructions.)	2Ь		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
2-	Did she foundation held man short a 20/ disease of a local time to be seen as in any business.			
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
D	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 30 year first phase holding posited? (Use Schedule C. Form 4730, to determine if the			
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	3b		
	foundation had excess business holdings in 2009)	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		Х

orm 990-PF (2009)		48-61	04170		Page 6
Part VII-B Statements Regarding Activities for	Which Form 47	20 May Be Requi	red (continued)		
5a During the year did the foundation pay or incur any amou (1) Carry on propaganda, or otherwise attempt to influence (2) Influence the outcome of any specific public election	ce legislation (section		Yes X No		
 (2) Influence the outcome of any specific public election directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or otlerable. 				1 1	
(4) Provide a grant to an organization other than a charita section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s	=		. Yes X No		
(5) Provide for any purpose other than religious, charitable purposes, or for the prevention of cruelty to children of			. Yes X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the trans Regulations section 53.4945 or in a current notice regard	actions fail to qualify	under the exceptions	described in	5b	
Organizations relying on a current notice regarding disast	er assistance check h	ere	▶ 🔲		
c If the answer is "Yes" to question 5a(4), does the foundation because it maintained expenditure responsibility for the g	•		Yes No	,	
If "Yes," attach the statement required by Regulations sect					
6a Did the foundation, during the year, receive any funds, dir	ectly or indirectly, to		Yes X No		
on a personal benefit contract?				6ь	Х
If "Yes" to 6b. file Form 8870	ly of munectly, on a p	ersonar benent contrat	^{4.}		
7a At any time during the tax year, was the foundation a part	ty to a prohibited tax	shelter transaction?	Yes X No	,	
b If yes, did the foundation receive any proceeds or have an		-		7b	
Part VIII Information About Officers, Directors and Contractors	, Trustees, Foun	dation Managers,	Highly Paid Emple	oyees,	
1 List all officers, directors, trustees, foundation ma	nagers and their c	(c) Compensation	oage 22 of the instru		
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expense other allo	
ODD CMAMDADAM O		12 145	,		0
SEE STATEMENT 8		13,145.	-0-		-0-
					···
2 Compensation of five highest-paid employees (oth If none, enter "NONE."	er than those incl	uded on line 1 - see		ructions).	
(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 other allo	
NONE		NONE	NONE	N(ONE
Total number of other employees paid over \$50,000 .					NONE (2009)

3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none,	enter "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensatio
IONE	NONE
otal number of others receiving over \$50,000 for professional services	····▶ NOI
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 NONE	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see page 23 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	
1NONE	Amount
1NONE	
2	
All other program-related investments. See page 24 of the instructions.	
3 <u>NONE</u>	
otal. Add lines 1 through 3	• I

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	gn foundation	s,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
٠,	purposes:		
а	Average monthly fair market value of securities	1a	959,617.
b		1b	NONE
C	Fair market value of all other assets (see page 24 of the instructions)	1c	NONE
d		1d	959,617.
е	Reduction claimed for blockage or other factors reported on lines 1a and		· ·
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3	Cubtrast line 2 from line 1d	3	959,617.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see page 25		
	of the instructions)	4	14,394.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	945,223.
6	Minimum investment return. Enter 5% of line 5	6	47,261.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) priva foundations and certain foreign organizations check here		
1	Minimum investment return from Part X, line 6	1	47,261.
2a	Tax on investment income for 2009 from Part VI, line 5 2a 240.		
b	Income tax for 2009. (This does not include the tax from Part VI.) 2b		
C	Add lines 2a and 2b	2c	240.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	47,021.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	47,021.
6	Deduction from distributable amount (see page 25 of the instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	47,021.
	Oualifying Distributions (see page 25 of the 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	52,315.
þ	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	<u>NONE</u>
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	52,315.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	_	4-
_	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	<u> N/A</u>
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	52,315.
	Note: The amount on line 6 will be used in Part V, column (b) in subsequent years when calculating will qualifies for the section 4940(e) reduction of tax in those years.	nether the foun	dation

Page 9

	990-PF (2009)	00 (1)			Page 9
Pa	t XIII Undistributed Income (see page	26 of the instruction			
•		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	fine 7		·		47,021.
2	Undistributed income, if any, as of the end of 2009			NONE	
	Enter amount for 2008 only	····	NONE	NONE	
	Total for prior years 20 07 , 20, 20		NONE		
3	Excess distributions carryover, if any, to 2009				
	From 2004				
D	11111				
ر. 2					
	00.400				
	From 2008	20,488.			
,' ,	Qualifying distributions for 2009 from Part XII,	20,400.		1	
•	line 4 ► \$ 52,315.				
а	Applied to 2008, but not more than line 2a			NONE	
b	Applied to undistributed income of prior years (Election		NONE		
	required - see page 26 of the instructions)		NONE		
C	Treated as distributions out of corpus (Election	NONE			
	required - see page 26 of the instructions)	NOME		-	47,021.
	Applied to 2009 distributable amount	5,294.			41,021.
е 5	Excess distributions carryover applied to 2009	NONE	!		NONE
•	(If an amount appears in column (d), the same	110111			HONE
6	amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	25,782.			
Ь	Prior years' undistributed income. Subtract			1	
_	line 4b from line 2b		NONE		
С	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		110111		
	been previously assessed		NONE		
d	Subtract line 6c from line 6b. Taxable		NONE		
e	amount - see page 27 of the instructions Undistributed income for 2008. Subtract line		NONE		· · · - · · · · · · · · · · · · · · · ·
Ī	4a from line 2a. Taxable amount - see page			NONE	
	27 of the instructions			NOME	
f	Undistributed income for 2009. Subtract lines				
	4d and 5 from line 1. This amount must be distributed in 2010				NONE
7	Amounts treated as distributions out of corpus				
	to—satisfy—requirements—imposed—by—section—		-		
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)	NONE			
8	Excess distributions carryover from 2004 not				
	applied on line 5 or line 7 (see page 27 of the instructions)	NONE			
9	Excess distributions carryover to 2010.				
-	Subtract lines 7 and 8 from line 6a	25,782.			
10	Analysis of line 9				
а	Excess from 2005 NONE		1		
Ь	Excess from 2006 NONE				
C	Excess from 2007 NONE				
d	Excess from 2008 20,488.				
e	Excess from 2009 5,294.				

_	foundation, and the ruling Check box to indicate whe		nrivate operation foun	dation described in section	— — —	4942(j)(3) or	4942(1
2 a	•	Tax year	private operating four	Prior 3 years		7372()(3) 01	
	Enter the lesser of the ad- justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006		(e) Total
	I or the minimum investment	(2) 2005	(5) 2005	(0) 2007	(4, 2000		
	return from Part X for each year listed					i	
ь	85% of line 2a				-		
		··········					
C	Qualifying distributions from Part XII, line 4 for each year listed						
đ	Amounts included in line 2c not					-	
	used directly for active conduct				ŀ	1	
e	of exempt activities						
	directly for active conduct of					ŀ	
	exempt activities Subtract line 2d from line 2c						
	Complete 3a, b, or c for the						-
а	alternative test relied upon "Assets" alternative test - enter					ŀ	
_	(1) Value of all assets					l	
	(2) Value of assets qualifying						
	under section 4942(j)(3)(B)(i)						
ь	"Endowment" alternative test-			•			
	enter 2/3 of minimum invest- ment return shown in Part X,						
	line 6 for each year listed					Ī	
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 sup-						
	port from an exempt organization						
	(4) Gross investment income .		<u> </u>				
?a	t XV Supplementa	ry Information (C	complete this par	t only if the founda	ation had \$5,	000 or mo	re in ass
	Information Regarding		e page 28 of the i	nstructions.)			
а	List any managers of the			era than 20/ of the total	l aantributiana	randinad by t	
u	before the close of any	tax year (but only if t	hey have contributed	more than \$5,000). (Si	ee section 507(d	1900 by 11 1)(2).)	ie iouridat
	NONE	, , ,	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	-,,-,,	
		ha foundation who	01/2 109/ or more	of the steel of a com-			
U	List any managers of t ownership of a partners	hip or other entity) a	own 10% or more of which the foundation	on has a 10% or greater	interest	quany rarge p	portion of
	NONE						
	1,01,2						
]	Information Regarding	Contribution, Grant,	Gift, Loan, Scholars	hip, etc., Programs:			
	Check here ▶ if th	e foundation only	makes contributions	to preselected charit	able organizatio	ons and doe	s not acc
	Check here ► if th unsolicited requests fo	e foundation only r funds. If the foun	makes contributions	to preselected charit grants, etc. (see page	able organization	ons and doe tructions) to	s not acc
	Check here ▶ if th	e foundation only r funds. If the foun	makes contributions	to preselected charit grants, etc. (see page	able organization	ons and doe tructions) to	s not acc individuals
	Check here ► if th unsolicited requests fo	e foundation only r funds. If the foun er conditions, compl	makes contributions dation makes gifts, ete items 2a, b, c, an	to preselected charit grants, etc. (see page d d.	28 of the inst	ons and doe tructions) to	s not acc individuals
a	Check here ► if the unsolicited requests for organizations under oth	e foundation only r funds. If the foun er conditions, compl	makes contributions dation makes gifts, ete items 2a, b, c, an	to preselected charit grants, etc. (see page d d.	28 of the inst	ons and doe tructions) to	s not acc individuals
a	Check here ► if th unsolicited requests fo organizations under oth The name, address, and	e foundation only r funds. If the foun er conditions, compl telephone number o	makes contributions idation makes gifts, ete items 2a, b, c, and of the person to who	to preselected charit grants, etc. (see page d d. n applications should be	28 of the instance addressed:	ons and doe tructions) to	s not acc individuals
a	Check here ► if the unsolicited requests for organizations under othe The name, address, and SEE STATEMENT 9	e foundation only r funds. If the foun er conditions, compl telephone number o cations should be su	makes contributions adation makes gifts, ete items 2a, b, c, and of the person to who bmitted and informations.	to preselected charit grants, etc. (see page d d. n applications should be	28 of the instance addressed:	ons and doe tructions) to	s not acc individuals
a b	Check here ▶ if th unsolicited requests fo organizations under oth The name, address, and SEE STATEMENT 9 The form in which appliance ATTACHED ST.	e foundation only r funds. If the foun er conditions, compl telephone number o cations should be su ATEMENT FOR L.	makes contributions adation makes gifts, ete items 2a, b, c, and of the person to who bmitted and informations.	to preselected charit grants, etc. (see page d d. n applications should be	28 of the instance addressed:	ons and doe tructions) to	s not acc individuals
a b	Check here if th unsolicited requests fo organizations under oth The name, address, and SEE STATEMENT 9 The form in which appliage ATTACHED ST. Any submission deadlin	e foundation only r funds. If the founder conditions, completelephone number contains should be sufficient for L.	makes contributions ideation makes gifts, ete items 2a, b, c, and the person to who bmitted and informations 2	to preselected charit grants, etc. (see page d d. n applications should be	28 of the instance addressed:	ons and doe tructions) to	s not acc
a b	Check here ▶ if th unsolicited requests fo organizations under oth The name, address, and SEE STATEMENT 9 The form in which appliance ATTACHED ST.	e foundation only r funds. If the founder conditions, completelephone number contains should be sufficient for L.	makes contributions dation makes gifts, ete items 2a, b, c, and the person to who bmitted and informations 2	to preselected charit grants, etc. (see page d d. n applications should be	28 of the instance addressed:	ons and doe tructions) to	s not acc
a b	Check here if th unsolicited requests fo organizations under oth The name, address, and SEE STATEMENT 9 The form in which appliage ATTACHED ST. Any submission deadlin SEE ATTACHED ST.	e foundation only r funds. If the founder conditions, completelephone number of cations should be sufficient FOR L. Ses:	makes contributions dation makes gifts, determined the person to who britted and informatine 2	to preselected charit grants, etc. (see page d d. m applications should be tion and materials they s	28 of the instead addressed: should include:	tructions) to	individuals
a b	Check here if th unsolicited requests fo organizations under oth The name, address, and SEE STATEMENT 9 The form in which appliage ATTACHED ST. Any submission deadlin	e foundation only r funds. If the founder conditions, completelephone number of cations should be sufficient FOR L. Ses:	makes contributions dation makes gifts, determined the person to who britted and informatine 2	to preselected charit grants, etc. (see page d d. m applications should be tion and materials they s	28 of the instead addressed: should include:	tructions) to	individuals
a b	Check here if the unsolicited requests for organizations under othe The name, address, and SEE STATEMENT 9 The form in which applies ATTACHED ST. Any submission deadlin SEE ATTACHED ST. Any restrictions or limit factors:	e foundation only r funds. If the founder conditions, completelephone number of cations should be supported by the cations of the cations of the cations on awards of the cations on awards	makes contributions dation makes gifts, ete items 2a, b, c, and the person to who bmitted and informatine 2 INE 2 , such as by geog	to preselected charit grants, etc. (see page d d. m applications should be tion and materials they s	28 of the instead addressed: should include:	tructions) to	individuals
a b	Check here if the unsolicited requests for organizations under other than the name, address, and SEE STATEMENT 9 The form in which applies ATTACHED ST. Any submission deadling SEE ATTACHED ST. Any restrictions or limit factors: SEE ATTACHED ST.	e foundation only r funds. If the founder conditions, completelephone number of cations should be supported by the cations of the cations of the cations on awards of the cations on awards	makes contributions dation makes gifts, ete items 2a, b, c, and the person to who bmitted and informatine 2 INE 2 , such as by geog	to preselected charit grants, etc. (see page d d. m applications should be tion and materials they s	28 of the instead addressed: should include:	s of institution	individuals

n 990-PF (2009)			48-6104170	_
rt XV Supplementary Information (c	ontinued)			Page
Grants and Contributions Paid Durin	ng the Year or Appr	oved for F	uture Payment	
. Recipient	If recipient is an individual,	Foundation status of		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
SEE STATEMENT 21				
		}	İ	
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			i	
			1	
			į	
Total			3a	50,00
Approved for future payment				3070.
.,				
Total	1	·	▶ 3b	

Part XVI-	Analysis of income-Produ	cing Activit	162			(a)
•	amounts unless otherwise indicated.	Unrelate (a) Business code	d business income (b) Amount	(c)	section 512, 513, or 514 (d) Amount	(e) Related or exempt function income (See page 28 of the instructions.)
1 Program	service revenue.	-				the instructions.)
a		 		-		
		 		 		
·				 		
				+		
e		 - 		+		
f			 .	-		
-	and contracts from government agencies	 		+		
	ship dues and assessments	 	****	 		
	s and interest from securities			14	20,164.	
	al income or (loss) from real estate		 .	+	20/101.	
	-financed property			 		
		1 1				······································
	debt-financed property					****
	Income or (loss) from personal property .vestment income			 		
	oss) from sales of assets other than inventor	1		18	3,907.	
-	me or (loss) from special events			 	2,207.1	
	ofit or (loss) from sales of inventory					
•	venue a					
_						
				 		· · · · · · · · · · · · · · · · · · ·
e				1		
	. Add columns (b), (d), and (e)			1	24,071.	
	dd line 12, columns (b), (d), and (e)			.1		24,071.
	eet in line 13 instructions on page 28					
Part XVI-				empt Purp	oses	
Line No. ▼	Explain below how each active the accomplishment of the finage 29 of the instructions.)	rity for which oundation's	n income is reporte exempt purposes (c	d in columr other than I	n (e) of Part XVI-A com by providing funds for	tributed importantly to such purposes). (See
						·
						
			· ·			
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			· · · · · · · · · · · · · · · · · ·	-		
			NOT APPLICABI	Æ		
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	990-PF (ransfers To and	Transactions	48-61041' and Relati		With N	oncha	Page 13 Iritable
1	in sea	he organization directly ction 501(c) of the Constantions?	or indirectly ode (other than	engage in any of the section 501(c)(3) organicharitable exempt organic	inizations) or in	any other org section 527,	janization di relating to	escribed political	Y	es No
•	(1) Ca	ash						· · · · ·	a(1) a(2)	X
b	(1) Sa			ganization empt organization					lb(1) lb(2)	X X
	(3) Re (4) Re	ental of facilities, equipm eimbursement arrangeme	ent, or other asset	ts				<u> </u>	Ib(3) Ib(4) Ib(5)	X X X
	(6) Pe Sharin If the	erformance of services or ig of facilities, equipment answer to any of	membership or for , mailing lists, oth the above is "\	undraising solicitations . ner assets, or paid employ Yes," complete the fol	ees lowing schedule.		should alwa	ays show	1c the fa	X X ir market
		•	•	ices given by the rep gement, show in colum	-					
(a) L	Ine no	(b) Amount involved	(c) Name of n	oncharitable exempt organiz	ation (d) Di	escription of transf	ers, transaction	ns, and sharin	g arrang	ements
				-						· · · · · · · · · · · · · · · · · · ·
_										
_										
	sectio	-	er than section 5	ted with, or related to, io1(c)(3)) or in section 52					Yes	X No
		(a) Name of organizatio	n .	(b) Type of organ	nization	_	(c) Description	of relationsh	qi	
							· · · · · · · · · · · · · · · · · · ·	-		
	Under belief,	penalties of perjury, I decl	are that I have exa plete. Declaration o	amined this return, including of preparer (other than taxpa	g accompanying sch yer or fiduciary) is	hedules and stater based on all infor	ments, and to mation of whi	the best of ch preparer	my kno has any	wledge and knowledge
رو	> 3	John 7. L gnature of officer or trustee	U.S.BA	NK NA	06 Date	/15/2010	TRUSTE	3		
Sign Here	d rer's Snly	Preparer's signature			Date	Check if self-employ	_ _ r	Preparer's id number (See page 30 of th	Signatu	re on
	Paid Preparer's Use Only	Firm's name (or yours if self-employed), address and ZIP code					EIN ▶ Phone no.			

FORM 990-PF - PART IV CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

CA	APITAL GAI	<u>NS AND LO</u>	SSES FOR	<u> (IAX ON I</u>	<u>IIA NESTIŅ</u>	<u>/ </u>	FINIT HACOIN	<u> </u>
Kind of P	roperty		Descr	ription		or D	Date acquired	Date sold
'Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		TOTAL LONG-	TERM CAPITA	AL GAIN DIV	IDENDS		62.	
		1. FRANKLIN PROPERTY TY			RITY LIT		11/11/1911	08/12/2009
143.00							143.00	
66.00		. FRANKLIN/' PROPERTY TY			ITY LITI		66.00	09/10/2009
66.00		,					66.00	
		. FRANKLIN/' PROPERTY TY			ITY LITI	į		09/10/2009
35.00							35.00	
		377.074 PRI			FD INC #		07/05/2005	11/20/2009
10,000.00		10,045.00					-45.00	
		50000. F F PROPERTY TY			0% 1/08		02/06/2003	01/08/2010
50,000.00		49,795.00					205.00	
		193.33 DODG PROPERTY TY					02/15/2002	04/30/2010
20,000.00		19,135.00	ID. BECKI	110			865.00	
		684.463 PRI PROPERTY TY			FD INC #		07/05/2005	04/30/2010
20,000.00		17,424.00	PE: SECURI	1163			2,576.00	
FOTAL GAIN(L	oss)						3,907.	
	- -						-	
SA						_		

FORM 990PF, PART I - ACCOUNTING FEES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME	ADJUSTED NET INCOME	CHARITABLE PURPOSES
TAX PREPARATION FEE (NON-ALLOC	1,000.			1,000.
TOTALS	1,000.	11 11	NONE	1,000.

04700641

STATEMENT

- TAXES

FORM 990PF, PART I

223.

40. 223. 263.

TOTALS

FEDERAL EXCISE TAXES FOREIGN TAXES PAID

DESCRIPTION

INVESTMENT INCOME

EXPENSES PER BOOKS

REVENUE AND

7

STATEMENT

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STATEME	~
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OBLIGATIONS
STATE
AND
U.S.
1
ΙI
PART
990PF,
FORM

MARY ELIZABETH MARTIN SCHOLARSHIP TRUST

48-6104170

END ING FMV	;		23,	27,	54,	27,	6. 52,032.	27,	27,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1. 271,058.	
ENDING BOOK VALUE			50,51	25,00	50,34	24,95	50,566.	25,12	25,14		251,691	
DESCRIPTION	 	FFCB DEB 3.860% 1/08/10	DEB 4.50% 11/15/1	4.375% 3/15/1	NT 4.250% 8/1	N 4.50% 1/15/1	MTN 5.125% 4/15/1	5.125% 8/14/1	/1		TOTALS	

MARY ELIZABETH MARTIN SCHOLARSHIP TRUST

- CORPORATE STOCK FORM 990PF, PART II

ENDING FMV	83,529. 43,468. 25,174. 58,656. 118,254. 37,047. 61,570. 56,287. 56,287. 25,000. 21,140. 14,097. 47,552. 653,022.
ENDING BOOK VALUE	86,334. 42,183. 21,220. 41,796. 95,872. 29,288. 33,626. 69,277. 77,000. 25,000. 25,000. 30,689. 12,454. 46,172. 635,911.
DESCRIPTION	DODGE & COX STOCK FUND FIDELITY INVT DIVERS INTL FD FIDELITY LOW PRICED STK FD HARBOR INTERNATIONAL FUND # 11 PRICE T ROWE GRWTH STK FD # 40 ROWE T PRICE MID CAP VALUE FD T ROWE PRICE MID CAP VALUE FD T ROWE PRICE MID CAP VALUE SHARES RUSSELL 1000 GWTH FD EATON VANCE LARGE CAP VALUE BARCLAYS IPATH DJ AIG COMMOD PIMCO TOTAL RETURN FUND FIRST AMER SHORT TERM BOND FD IPATH DOW JONES UBS COMMODITY ISHARES MSCI EMERGING MKTS ETF SPDR GOLD TRUST

Ŋ

MARY ELIZABETH MARTIN SCHOLARSHIP TRUST FORM 990PF, PART II - CORPORATE BONDS

 	DESCRIPTION	

ENDING BOOK VALUE

48-6104170

ENDING FMV

25,301.

27,048.

25,301.

TOTALS

CONOCOPHILLIPS 4.60% 1/15/15

FORM 990PF,	PART III -	OTHER	INCREASES	IN NET	WORTH	OR FUN	D BALANCES
=========	========	======		======	======	=	========

DESCRIPTION AMOUNT
----COST ADJ 2.
TOTAL 2.

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

OFFICER NAME:

US BANK NA

ADDRESS:

PO BOX 387

ST LOUIS, MO 63166

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

13,145. COMPENSATION

TOTAL COMPENSATION:

13,145.

==========

RECIPIENT NAME:
US BANK NA

ADDRESS:
6940 MISSION ROAD
PRAIRIE VILLAGE, KS 66208-2609
RECIPIENT'S PHONE NUMBER: 913-261-5706
FORM, INFORMATION AND MATERIALS:
PLEASE CONTACT THE ABOVE
SUBMISSION DEADLINES:
MARCH 31
RESTRICTIONS OR LIMITATIONS ON AWARDS:
TO 501(C)(3) ORGANIZATIONS IN THE

KANSAS / MISSOURI AREA

MARY ELIZABETH MARTIN SCHOLARSHIP TRUST 48-6104170 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID _______ . RECIPIENT NAME: ST MARYS MEDICAL CENTER FOUNDATION ADDRESS: 201 NW R D MIZE ROAD BLUE SPRINGS, MO 64014 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC RECIPIENT NAME: RESEARCH FOUNDATION ADDRESS: 2316 EAST MEYER BOULEVARD KANSAS CITY, MO 64132-1199 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 2,000. RECIPIENT NAME: DON BOSCO COMMUNITY CENTER ADDRESS: 531 GARFIELD AVE KANSAS CITY, MO 64124-1513 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC

AMOUNT OF GRANT PAID

-1,500.

MARY ELIZABETH MARTIN SCHOLARSHIP TRUST 48-6104170 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: MR GOODCENTS CHARITABLE FOUNDATION ADDRESS: 8997 COMMERCE DR DESOTO, KS 66018-8428 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: CYSTIC FIBROSIS FOUNDATION ADDRESS: 6950 SQUIBB ROAD SUITE 310 MISSION, KS 66202 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: OPERATION BREAKTHOUGH INC ADDRESS: 3039 TROOST KANSAS CITY, MO 64109 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC

AMOUNT OF GRANT PAID

48-6104170 MARY ELIZABETH MARTIN SCHOLARSHIP TRUST FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ . RECIPIENT NAME: SETON CENTER FAMILY & HEALTH **SERVICE** ADDRESS: 2816 E 23RD ST KANSAS CITY, MO 64127 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: TLC FOR CHILDREN AND FAMILIES INC ADDRESS: 480 S ROGERS ROAD OLATHE, KS 66062-1706 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC

RECIPIENT NAME:

NILES HOME FOR CHILDREN

ADDRESS:

1911 E 23RD ST

KANSAS CITY, MO 64127

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EXEMPT PURPOSE

FOUNDATION STATUS OF RECIPIENT:

-PUBLIC

AMOUNT OF GRANT PAID 500.

AMOUNT OF GRANT PAID

1,000.

RECIPIENT NAME: FOUNDATION SHAWNEE MISSION MED CTR ADDRESS: 7315 FRONTAGE ROAD SUITE 221 SHAWNEE MISSION, KS 66204 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: BAKER UNIVERSITY ADDRESS: PO BOX 65 BALDWIN CITY, KS 66006 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 2,000. RECIPIENT NAME: URBAN RANGERS CORPS ADDRESS:

ADDRESS:
5908 SWOPE PARKWAY
KANSAS CITY, MO 64130
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
EXEMPT PURPOSE
FOUNDATION STATUS OF RECIPIENT:

48-6104170 MARY ELIZABETH MARTIN SCHOLARSHIP TRUST FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID ______________________________ RECIPIENT NAME: BEREA COLLEGE ADDRESS: CPO 2142 BEREA, KY 40404 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 2,500. RECIPIENT NAME: KC HEALTHY KIDS HARTWIG LEGACY FDN ADDRESS: PO BOX 18296 KANSAS CITY, MO 64133 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 1,500. RECIPIENT NAME: BOY SCOUTS OF AMERICA HEART OF AMERICA COUNCIL ADDRESS: 10210 HOLMES ROAD KANSAS CITY, MO 64131 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION-STATUS-OF-RECIPIENT: ---PUBLIC

AMOUNT OF GRANT PAID

2,500.

MARY ELIZABETH MARTIN SCHOLARSHIP TRUST 48-6104170 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: CHILDREN'S CENTER FOR VISUALLY IMPAIRED ADDRESS: 3101 MAIN STREET KANSAS CITY, MO 64111 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: DELASALLE EDUCATION CENTER ADDRESS: 3740 FOREST KANSAS CITY, MO 64109 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 2,000. RECIPIENT NAME: DONNELLY COLLEGE ADDRESS: 608 N 18TH STREET KANSAS CITY, KS 66102 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: -- PUBLIC ---

MARY ELIZABETH MARTIN SCHOLARSHIP TRUST 48-6104170 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: HARVESTERS COMMUNITY FOOD NETWORK ADDRESS: 3810 TOPPING AVENUE KANSAS CITY, MO 64129 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 2,000. RECIPIENT NAME: KANSAS CITY BALLET ASSOCIATION 1616 BROADWAY BLVD KANSAS CITY, MO 64108-1207 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: KANSAS CITY HOSPICE ADDRESS: 9221 WARD PARKWAY SUITE 100 KANSAS CITY, MO 64114

AMOUNT OF GRANT PAID

1,500.

RELATIONSHIP: NONE

- PUBLIC-

PURPOSE OF GRANT: **EXEMPT PURPOSE**

FOUNDATION STATUS OF RECIPIENT:

MARY ELIZABETH MARTIN SCHOLARSHIP TRUST 48-6104170 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: KANSAS CITY RESCUE MISSION ADDRESS: 1520 CHERRY STREET KANSAS CITY, MO 64108-1530 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC RECIPIENT NAME: MOCSA - METRO ORGANIZATION TO COUNTER SEXUAL ASSAULT ADDRESS: 3100 BROADWAY SUITE 400 KANSAS CITY, MO 64111 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: OZANAM HOME ADDRESS: PO BOX 480227 KANSAS CITY, MO 64145 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE

AMOUNT OF GRANT PAID

- PUBLIC -

FOUNDATION STATUS OF RECIPIENT:

2,500.

RECIPIENT NAME:
PRAIRIE VILLAGE KANSAS MUNICIPAL
FOUNDATION UTILITY ASSISTANCE
ADDRESS:
7700 MISSION ROAD
PRAIRIE VILLAGE, KS 66208
RELATIONSHIP:

NONE
PURPOSE OF GRANT:
EXEMPT PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:
RESTART INC
ADDRESS:
918 E 9TH STREET

KANSAS CITY, MO 64106-3072

RELATIONSHIP:

NONE

PURPOSE OF GRANT: EXEMPT PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

SALVATION ARMY OF KS & WESTERN MO

ADDRESS:

3637 BROADWAY

KANSAS CITY, MO 64111

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EXEMPT PURPOSE

FOUNDATION STATUS OF RECIPIENT:

---PUBLIC--

MARY ELIZABETH MARTIN SCHOLARSHIP TRUST 48-6104170 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: SHAWNEE MISSION MEALS ON WHEELS ADDRESS: 8029 OVERLAND PARK DRIVE OVERLAND PARK, KS 66204 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: SUNFLOWER HOUSE ADDRESS: 15440 W 65TH STREET SHAWNEE, KS 66217-9306 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 1,500. RECIPIENT NAME: YOUTH SYMPHONY ASSOCIATION OF KC ADDRESS: 7301 MISSION ROAD SUITE 143 PRAIRIE VILLAGE, KS 66208 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE

PUBLIC

FOUNDATION STATUS OF RECIPIENT:

MARY ELIZABETH MARTIN SCHOLARSHIP TRUST 48-6104170 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: NATIONAL MULTIPLE SCLEROSIS SOCIETY 7611 STATE LINE ROAD SUITE 100 KANSAS CITY, MO 64114 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: WILDWOOD OUTDOOR EDUCATION CENTER ADDRESS: 7095 W 399TH STREET LACYGNE, KS 66040 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 500. RECIPIENT NAME: AMERICAN HEART ASSOCIATION ADDRESS: 6800 W 93RD STREET OVERLAND PARK, KS 64145

AMOUNT OF GRANT PAID

RELATIONSHIP:

PURPOSE OF GRANT: EXEMPT PURPOSE

FOUNDATION STATUS OF RECIPIENT:

NONE

1,000.

MARY ELIZABETH MARTIN SCHOLARSHIP TRUST 48-6104170 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: CATHOLIC EDUCATION FOUNDATION ADDRESS: 12615 PARALLEL PARKWAY KANSAS CITY, KS 66109 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC RECIPIENT NAME: LITERACY KANSAS CITY ADDRESS: 211 W ARMOUR KANSAS CITY, MO 64111 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 2,500. TOTAL GRANTS PAID: 50,000.

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SCHEDULE D (Form 1041)

Department of the Treasury

Internal Revenue Service

Capital Gains and Losses

Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable).

OMB No. 1545-0092

2009

Employer identification number MARY ELIZABETH MARTIN SCHOLARSHIP TRUST 48-6104170 Note: Form 5227 filers need to complete only Parts I and II. Short-Term Capital Gains and Losses - Assets Held One Year or Less (f) Gain or (loss) for (e) Cost or other basis (b) Date acquired (a) Description of property (c) Date sold the entire year (see page 4 of the (d) Sales price (Example 100 shares 7% preferred of "Z" Co) (mo , day, yr) (mo, day, yr) Subtract (e) from (d) instructions) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts Short-term capital loss carryover, Enter the amount, if any, from line 9 of the 2008 Capital Loss 4 Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (e) Cost or other basis (see page 4 of the instructions) (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold (d) Sales price the entire year Subtract (e) from (d) (Example 100 shares 7% preferred of "Z" Co.) (mo., day, yr.) (mo, day, yr.) 6a LONG-TERM CAPITAL GAIN DIVIDENDS STMT 1 62. b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b....... 3,845. Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts Capital gain distributions 10 10 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2008 Capital Loss Net long-term gain or (loss). Combine lines 6a through 11 in column (f). Enter here and on line 14a, 3,907

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2009

Part	ule D (Form 1041) 2009 Summary of Parts I and II	(1) R	neficiaries'	(2) Esta	te's	Page :
	Caution: Read the instructions before completing this part.		page 5)	or trus		(3) Total
13	Net short-term gain or (loss)					
,	Net long-term gain or (loss):					
	Total for year					3,907
	Unrecaptured section 1250 gain (see line 18 of the wrksht.) 14b					
	28% rate gain					
	Total net gain or (loss). Combine lines 13 and 14a ▶ 15					3,907
Note	: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990	T, Part I	line 4a) If line	es 14a and 15	, column	(2), are net gains, go
	rt V, and do not complete Part IV If line 15, column (3), is a net loss, complete Part IV a	nd the C	apital Loss Car	rryover Works	sheet, as n	ecessary
Part	Capital Loss Limitation					
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line				1.	
а	The loss on line 15, column (3) or b \$3,000			<u></u> ļ	16 (
Note <i>Carry</i>	: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, lin over Worksheet on page 7 of the instructions to figure your capital loss carryover.	e 22 (or	Form 990-1, II	ine 34), is a l	oss, comp	lete the Capital Loss
Pari		-				
	1041 filers. Complete this part only if both lines 14a and 15 in column (2) are ga	ins, or an an	nount is ent	ered in P	art I or Part II and
there	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than	zero.				
	ion: Skip this part and complete the worksheet on page 8 of the instructions	if.				
	ther line 14b, col. (2) or line 14c, col. (2) is more than zero, or					
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.		المالية المساكنية		ماييطمط أس	incomo in Dort I
	n 990-T trusts. Complete this part only if both lines 14a and 15 are gain orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part and					
	er line 14b, col. (2) or line 14c, col. (2) is more than zero.	compi	oto the work	silect on pi	ago o o.	the matruotions n
17		17			-	
17 18	Enter the smaller of line 14a or 15 in column (2)	· · ''	- 			
10	but not less than zero					
19	Enter the estate's or trust's qualified dividends	\dashv				
13	from Form 1041, line 2b(2) (or enter the qualified					
	dividends included in income in Part I of Form 990-T) . 19		1			
20	Add lines 18 and 19					
21	If the estate or trust is filing Form 4952, enter the				į	
٠.	amount from line 4g, otherwise, enter -0 > 21				į	
22	Subtract line 21 from line 20. If zero or less, enter -0-	22	,			
23	Subtract line 22 from line 17. If zero or less, enter -0-	23				
23	Subtract line 22 from line 17. If 28/0 of 1633, effect 40	· ·	<u> </u>			
24	Enter the smaller of the amount on line 17 or \$2,300	24			j	
25	Is the amount on line 23 equal to or more than the amount on line 24?	· · =				
	Yes. Skip lines 25 and 26; go to line 27 and check the "No" box.	i				
	No. Enter the amount from line 23	25	; 			
26	Subtract line 25 from line 24	26	:		1	
27	Are the amounts on lines 22 and 26 the same?					
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22	27				
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)	28				
29	Subtract line 28 from line 27	29				
30	Multiply line 29 by 15% (.15)				30	
31	Figure the tax on the amount on line 23. Use the 2009 Tax Rate Sch			nd Trusts		
	(see the Schedule G instructions in the instructions for Form 1041)				31	
						
32	Add lines 30 and 31				32	
33	Figure the tay on the amount on line 17. Use the 2009 Tay Rate Sch	مطبیام f	or Estates a	nd Truete		

Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule

MARY ELIZABETH MARTIN SCHOLARSHIP TRUST 48-6104170					
Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year					
' (a) Description of property (Example 100 sh. 7% preferred of "Z" Co)	(b) Date acquired (mo., day, yr)	(c) Date sold (mo., day, ут)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
6a 1. FRANKLIN/TEMPLETON FUNDS SECURITY LITIGATION	11/11/1911	08/12/2009	143.00		143.00
. FRANKLIN/TEMPLETON FUNDS SECURITY LITIGATION		09/10/2009	66.00		66.00
. FRANKLIN/TEMPLETON FUNDS SECURITY LITIGATION					35.00
377.074 PRICE T ROWE		09/10/2009	35.00		
GROWTH STK FD INC_#40	07/05/2005	11/20/2009	10,000.00	10,045.00	-45.00
50000. F F C B DEB 3.860% 1/08/10	02/06/2003	01/08/2010	50,000.00	49,795.00	205.00
193.33 DODGE & COX STOCK FUND	02/15/2002	04/30/2010	20,000.00	19,135.00	865.00
684.463 PRICE T ROWE GROWTH STK FD INC #40	07/05/2005		20,000.00	17,424.00	2,576.00
GROWIN SIR PD INC #40	07/03/2003	04/30/2010	20,000.00	17,424.00	2,376.00
				- .	
					- -
			<u> </u>		
Ch Total Combine the server to			! Ch	1	2 045 00
6b Total. Combine the amounts in colum	n (T). Enter here an	ia on Schedule D, I	ine bb		3,845.00 -1 (Form 1041) 2009

FEDERAL	CAPITAL	GAIN	DIVIDENDS
			

LONG-TERM CAPITAL GAIN DIVIDENDS

15% RATE CAPITAL GAIN DIVIDENDS

TOTAL 15% RATE CAPITAL GAIN DIVIDENDS TOTAL LONG-TERM CAPITAL GAIN DIVIDENDS

62.00

62.00

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