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

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1	- // III.		ч

20	0	9
	•	

OMB No. 1545-0052

Inte	rnal Re	venue Ser	vice	Note: The foundation	n may b	e able to use a copy of th	iis return to sa	tisfy state re	porting requirements.	
Fo	r cale	endar y	ear 2009,	or tax year begin	ning	07/	01 ,2009	and endin	g	06/30,2010
_	_		at apply:	Initial return		Initial return	of a former p	ublic charit	у	Final return
				Amended r	eturn		s change		Name change	_ ,
_			Name of for	<del>- L L</del>		· · · · · · · · · · · · · · · · · · ·		<u> </u>	A Employer identifi	ication number
===	lea th	e IRS								
3	lab		3 AROU	LOUIS FOX C	ттядн	ABLE TRUST 100	150		43-	6317492
5	Other					nail is not delivered to street		Room/suit		page 10 of the instructions)
ר כ	pri	nt		3 Street (dir G. box ii	<b></b>	nan is not sonvered to street	ddd,033,	1.00, 00	S Totophano hamasi (ass	page to did not made on the
_	or ty	-	וגגם סאדו	חם ח שו	V /10	692 M/S 102030	E		/01	L6) 860-7711
		ecific		n, state, and ZIP cod		092 M/S 102030	<u> </u>		C If exemption applica	
ž Ir	istruc	tions.	City of town	i, state, and zir cou	10				pending, check here	· · · · · · · · [ <del> </del>
Ł			17331C3C	OTON NO CA	141 6	(0)			D 1 Foreign organizat	
훒				CITY, MO 64					2 Foreign organizat 85% test, check h	
	Chec		_			c)(3) exempt private for			computation •	▶∟
華	S	ection 4	.947(a)(1) no	nexempt charitable		Other taxable pri			E If private foundation	status was terminated
	Fair	market	value of al			unting method: X Ca	ash Acc	rual	under section 507(t	o)(1)(A), check here . 🕨 🗀
(2			m Part II, co			her (specify)	,-,		· 1 ·	in a 60-month termination
_		▶ \$		.11,639.	٠.,	column (d) must be or	n cash basis.,	<u>'                                    </u>	under section 507(t	o)(1)(B), check here
Ŀ	art I			enue and Expense o columns (b), (c), an		(a) Revenue and	(b) Net inve	estment	(c) Adjusted net	(d) Disbursements for charitable
		may n	ot necessarıl	y equal the amounts	s in	expenses per	incon	L	income	purposes
_				ge 11 of the instruct		books			· · ·	(cash basis only)
	1	Contribut		s, etc , received (attach ach	redule) .					
	2	Check	► X If the attac	foundation is not requ	ured to		<del>-</del> -			
	3	Interest		d temporary cash inves						
	4	Divider	nds and inter	est from securities		23,745.	2	3,745.	=	
	5a	Gross r	ents							
	ь	Net rent	al income or (	loss)					L DEOF	NIED
60	6a	Net gair	or (loss) from	sale of assets not on I	ine 10	611.			RECE	
Revenue	Ь		ales price for a in line 6a	"1 <u>17</u> ,	<u>578.</u>					100
eve	7			ome (from Part IV, I	ine 2) .			611.	의 NOV 1	8 2010  O
œ	8	•	-	tal gain						35
	9	Income	modificatio	ns						1 1 1 1 1 1
	10 a	Gross sa	eles less return	ns					I UGUE	N. U1_1
	ь		st of goods so							
	c	Gross	profit or (loss	) (attach schedule)						
	11			ch schedule)		281.				STMT
	12			hrough 11		24,637.	2	24,356.		
	13			ers, directors, trustees		12,919.		6,459.		6,4
	14	-		laries and wages .		i				,
S	15			loyee benefits						
Su				schedule)						
Expen				ttach schedule)STN		750		NONE	NON	E 7
	٦			fees (attach schedu						<del></del>
Administrative	17									
ITal	1			e) (see page 14 of the		347.		347.		
nist	18					347	1	<u> </u>		
Ē	19			h schedule) and de			<u> </u>			
A	20									
and	21			, and meetings				<del></del>		
	22			ations		<del></del>	-			
Operating	23		•	tach schedule)		-	<del> </del>			-
Frai	24			d administrative ex		14 016		c 000	31031	
Ö	·l			gh 23		14,016		6,806.	NON	<del></del>
	25	Contri	butions, gifts	, grants paid		20,000		6 005		20,0
_	26			oursements. Add lines 2	4 and 25	34,016	<u>.</u>	<u>6,806.</u>	NON	E 27,2
	27	Subtra	ct line 26 fro	om line 12:				1		
	a	Excess	of revenue over	expenses and disbursem	ients	-9,379	<del> </del>			<del> </del>
	b	Net in	vestment in	come (ıf negative, e	nter -0-)			17,550.		<u> </u>
	c	Adjus	ted net inco	me (if negative, ente	er -0-)					

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

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Form **990-PF** (2009)

JSA

Dart	II Rajan	na Shaats	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year
	Daiaii	e onecis	amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - no	n-interest-bear	ring			
2	Savings a	nd temporary	cash investments			
3	Accounts	receivable				
	Less: allo	wance for dou	ibtful accounts			
4						ě
	Less: allo	wance for dou	ubtful accounts			,
5						
			officers, directors, trustees, and other			
`			tach schedule) (see page 16 of the instructions)			
2	•	•	receivable (attach schedule)		,	
'			ubtful accounts		:	,
.   8			ISO			
ts S			deferred charges			
Assets	•	-	<del>-</del>			
<b>4</b> "			te government obligations (attach schedule)			
		<b>,</b>	, , , , , , , , , , , , , , , , , , , ,			
11		nts - corporate its-land, buildin	e bonds (attach schedule)		<del></del>	1
	and equip	ment: basis mulated deprec	vation N			-
	(attach so	nedule)				_
12			e loans		1 064 705	1 111 (20
13		nts - other (att dings, and	tach schedule)	<del></del>	1,064,725.	1,111,639
'			Plation N			. 1
	(attach sc	nedule)	elation	-		
1!	5 Other as	sets (describe	<b></b>			
10			mpleted by all filers - see the		4 044 505	
4	instruction	ns. Also, see	page 1, item I)	1,074,106.	1,064,725.	1,111,639
13			accrued expenses			
11	B Grants p	ayable				
g 1	9 Deferred	revenue				
Liabilities 5	0 Loans fro	n officers, direct	tors, trustees, and other disqualified persons			
2	1 Mortgag	es and other r	notes payable (attach schedule)			1
7 2	2 Other lia	bılitıes (descril	be <b>&gt;</b> )			
						i
2	3 Total lia	oilities (add lir	nes 17 through 22)			l t
			ollow SFAS 117, check here ▶ 🔃			i i
	and cor	nplete lines	24 through 26 and lines 30 and 31.	,		
8 2	4 Unrestri	ted				
E 2		rily restricted				
8 2		ntly restricted				}
or Fund Balances		•	o not follow SFAS 117,			(
ᆁ			mplete lines 27 through 31. ▶ X			
5 2	7 Capital :	tock, trust pri	ncipal, or current funds	1,074,106.	1,064,725	
	-		or land, bldg., and equipment fund			]
Net Assets	9 Retained	earnings, accum	nulated income, endowment, or other funds	-		
<u>چ</u> 3		•	nd balances (see page 17 of the			] i
S S				1,074,106.	1,064,725	
3			et assets/fund balances (see page 17		1	1
				1,074,106.	1,064,725	,
Par			hanges in Net Assets or Fund			·
			palances at beginning of year - Part II,		st agree with	
			ed on prior year's return)		l l	1.074.106
	•	t from Part I				1,074,106.
			.d.d := 1:== 0 1:4:		۱ م	7,313.
			·		<del></del>	1,064,727.
	dd lines 1,		n line 2 (itemize) b CPF CT7		4	2.
5 L	ecreases n	ote or find b	n line 2 (itemize) SEE STA	ing E) Port II solvers /L		1,064,725.
ן פ	otal net ass	era or inua (	parances at end of year (line 4 minus i	inie oj - rait II, column (c	η, iiie 30 <u>b</u>	Form <b>990-PF</b> (2009)

Part IV Capital Gains	and Losses for Tax on Inve	stment Income			
	describe the kind(s) of property sold (e.ick warehouse; or common stock, 200 s		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr.)	(d) Date sold (mo., day, yr.)
1a SEE PART IV DETA	IL				
_ <b>b</b>					
<u>c</u>					
<u>d</u>		<u> </u>			
<u>e</u>	(O Dannaistica allaurad	(g) Cost or other basis		(h) Coin or (le	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus expense of sale		(h) Gain or (lo (e) plus (f) min	
<u>a</u>					
<u>b</u>					
d					
e					
	wing gain in column (h) and owned	by the foundation on 12/31/69	m	Gains (Col. (h) g	ain minus
(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		(k), but not less Losses (from co	than -0-) <b>or</b>
a					-
b					_
C					
d					
е			ļ , , , , ,		
2 Capital gain net income or		gain, also enter in Part I, line 7 { (loss), enter -0- in Part I, line 7	2		611.
	or (loss) as defined in sections 122	`			
<u> </u>	line 8, column (c) (see pages 13 an				
If (loss), enter -0- in Part I, Ii	ine 8		3		
	der Section 4940(e) for Reduc private foundations subject to the				
	leave this part blank. the section 4942 tax on the distrib not qualify under section 4940(e). [	• •	ase perio	od? [	Yes X No
	ount in each column for each year;	see page 18 of the instructions be	fore mak		•
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution r (col (b) divided by	atio y col. (c))
2008	50,761.	1,027,075.			942287564
2007	63,727.	1,328,715.			<u>796137622</u>
2006	66,305.	1,293,233.	<del> </del>		127073002
2005	54,541.	1,281,444.			256214083 255040770
2004	41,525.	1,237,355.	<del>                                     </del>	0.03	<u>355948778</u>
2 Total of line 1, column (d)	) <u> </u>		2	0.22	477661049
_	for the 5-year base period - divide t	-		0 04	40552222
number of years the found	dation has been in existence if less	than 5 years	3	0.04	495532210
4 Enter the net value of non	charitable-use assets for 2009 from	m Part X, line 5	4		1,141,778
5 Multiply line 4 by line 3			5		51,329
6 Enter 1% of net investmen	nt income (1% of Part I, line 27b)		6		176
7 Add lines 5 and 6			7		51,505
8 Enter qualifying distribution of the street of the stree	ons from Part XII, line 4	n Part VI, line 1b, and complete	8 that part	using a 1% ta	27,209 ex rate. See the

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the	e inst	ructio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 )			I
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)		_	į
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		3	<u>51.</u>
	here and enter 1% of Part I, line 27b			į
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		3	<u>51.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4		N	<u>ONE</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		3	<u>51.</u>
6	Credits/Payments:			!
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 176.			
	Exempt foreign organizations-tax withheld at source			İ
	Tax paid with application for extension of time to file (Form 8868) 6c NONE			
d	Backup withholding erroneously withheld			į
7	Total credits and payments. Add lines 6a through 6d		1	<u>76.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1	<u>75.</u>
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			
Par	t 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		<u> </u>
b	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		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	į		
	published or distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. >\$ (2) On foundation managers >\$	}		
8	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	1		
	on foundation managers. ▶ \$	~		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	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			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	λ/	7A X
Ь	• • • • • • • • • • • • • • • • • • • •			<b>7</b> 4
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	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		v	
	conflict with the state law remain in the governing instrument?		$\frac{X}{X}$	
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		
8a	amen s			
	instructions) ▶STMT_5			
Ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	_	v	ļ
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	<u> </u>	<del>                                     </del>
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			,
	27)? 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			X
_	names and addresses	10		

	VII-A Statements Regarding Activities (continued)		<u>.</u>	<u> </u>
	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			
12	August 17, 2008?	12	1	Х
12	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
13	Website address ►N/A			
14	The books are in care of UMB BANK, N.A.  Telephone no. (816) 860-7	$\bar{7}\bar{1}\bar{1}^{-}$		
1	Located at ▶ P O BOX 419692, KANSAS CITY, MO ZIP+4 ▶ 64141			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	
13	and enter the amount of tax-exempt interest received or accrued during the year			_
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
_	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a				
10	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			1
	disqualified person?			1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	1	1	1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1	ļ	1
	(5) Transfer any income or assets to a disgualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			İ
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if		l	
	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.)			
ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			1
•	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			Ì
_	were not corrected before the first day of the tax year beginning in 2009?	1c	ļ	X
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? Yes X No			
	If "Yes," list the years			
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			ا ا
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)		1/	<b>1</b> 4
	to all years listed, answer "No" and attach statement - see page 20 of the instructions.)	2b	N/!	<u> </u>
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<b>&gt;</b>	1		] '
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year? Yes 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		1/	11
	foundation had excess business holdings in 2009.)	3b	10/	77
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<del> </del>	X
Ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			J
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?		OA DE	<u> </u>

Pari	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 amoun	t to:					,
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes X No						
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,						
	directly or indirectly, any voter registration drive?						
	(3) Provide a grant to an individual for travel, study, or other	er similar purposes?		Yes X No			,
	(4) Provide a grant to an organization other than a charital	ble, etc., organization	described in		ļ		ı
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (se	e page 22 of the inst	tructions)	Yes X No		1	1
	(5) Provide for any purpose other than religious, charitable	, scientific, literary, o	r educational				ı I
	purposes, or for the prevention of cruelty to children or	r animals?		YesX No			!
b	If any answer is "Yes" to 5a(1)-(5), did any of the transa	ctions fail to qualify	under the exceptions	described in		1,//	
	Regulations section 53.4945 or in a current notice regardi				<u>5b</u>	N/A	_
	Organizations relying on a current notice regarding disaste	r assistance check he	ere	▶□		1 ' 1	1
С	If the answer is "Yes" to question 5a(4), does the foundation						i
	because it maintained expenditure responsibility for the gr	ant?		Yes No			i
	If "Yes," attach the statement required by Regulations section					1 1	,
6a	Did the foundation, during the year, receive any funds, dire		pav premiums				- 1
	on a personal benefit contract?	•	• •	. Yes X No			
ь	Did the foundation, during the year, pay premiums, directly				6b		<u>X_</u>
	If "Yes" to 6b, file Form 8870.						- 1
7a	At any time during the tax year, was the foundation a part	y to a prohibited tax :	shelter transaction?	. Yes X No			į
	If yes, did the foundation receive any proceeds or have any				7b	NXA	
Par	t VIII Information About Officers, Directors,	Trustees, Foun	dation Managers,	Highly Paid Emplo	oγees,	, ,	
1	and Contractors  List all officers, directors, trustees, foundation mar	nagers and their co	ompensation (see p	page 22 of the instru	ctions).		—
<u> </u>	(a) Name and address	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Exper	se account,	_
	tal realite and address	hours per week devoted to position	(if not paid, enter -0-)	employee benefit plans and deferred compansation	other a	llowances	
SEE	E STATEMENT 6		12,919.	-0-		-0-	
2	Compensation of five highest-paid employees (oth If none, enter "NONE."	er than those incl	uded on line 1 - see	page 23 of the instr	ructions).		
	il lione, enter leoiet.	(h) Title and average		(d) Contributions to	4 ) 5		—
(a	a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred		nse account, ilowances	
		devoted to position		compensation			
<u>NOI</u>	NE		NONE	NONE	<u> </u>	NONE	—
					-		<del></del>
						-	_
							_
		L	L			<b>N</b>   17017	_
Tota	al number of other employees paid over \$50,000 .	<u></u>				► NON	
					Form 9	9 <b>0-PF</b> (20	(09

Page **7** 

Part VIII Info	ormation About Officers, Directors, Trustees, Foundation Ma d Contractors <i>(continued)</i>	magers, riigniy raid Employ	rees,
3 Five highest-pa	aid independent contractors for professional services (see page 23		
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			NONE
			<u>,</u>
Total number of	others receiving over \$50,000 for professional services	· · · · · · · · · · · · · · · · · · ·	▶ NONE
Part IX-A Su	mmary of Direct Charitable Activities		
List the foundation' of organizations and	's four largest direct charitable activities during the tax year. Include relevant statistical info d other beneficiaries served, conferences convened, research papers produced, etc.	rmation such as the number	Expenses
1NONE			
2			
3			
·			
4			
	immary of Program-Related Investments (see page 23 of the in-		
	argest program-related investments made by the foundation during the tax year on lines 1	and 2	Amount
1 <u>NONE</u>			
2			
All other program-	related investments See page 24 of the instructions		
Total, Add lines	1 through 3		<u>, ,</u>

Par	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	in foundation	iS,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	1,098,010.
	Average of monthly cash balances	1b	61,155.
C	Fair market value of all other assets (see page 24 of the instructions)	1c	NONE
		1d	1,159,165.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3		3	1,159,165.
4	Subtract line 2 from line 1d  Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see page 25		
	of the instructions)	4	17,387.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,141,778.
6	Minimum investment return. Enter 5% of line 5	6	57,089.
Pa	To the complete this private states and certain foreign organizations check here   □ and do not complete this private states are the complete this private states.		
1	Minimum investment return from Part X, line 6	1	57,089.
2a	Tax on investment income for 2009 from Part VI, line 5		
Ь	Income tax for 2009. (This does not include the tax from Part VI.) 2b		
C	Add lines 2a and 2b	2c	351.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	56,738.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	56,738.
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	56,738.
Pa	ort XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	I	<u> </u>
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	27,209.
Ь		1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
a		3a	NONE
b		3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	27,209.
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 (see page 26 of the instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	27,209.
J	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w		
	qualifies for the section 4940(e) reduction of tax in those years.		

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Page 9

	Undistributed Income (see page 2	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
	Distributable amount for 2009 from Part XI,	Corpus	Tours prior to 2000	2000	56,738
	Undistributed income, if any, as of the end of 2009				
	Enter amount for 2008 only			NONE	
ь	Total for prior years: 20, 20 20		NONE		
	Excess distributions carryover, if any, to 2009:				
а	From 2004 NONE				
b	From 2005 NONE				
C	From 2006				
d	From 2007 NONE				
e	From 2008 NONE				
f	Total of lines 3a through e	3,399.			
	Qualifying distributions for 2009 from Part XII,				
	line 4: ▶ \$				
а	Applied to 2008, but not more than line 2a			NONE	
b	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)		NONE		
_	Treated as distributions out of corpus (Election				
٠	required - see page 26 of the instructions)	NONE			
d	Applied to 2009 distributable amount				27,209
0	Remaining amount distributed out of corpus	NONE			
i	Excess distributions carryover applied to 2009	3,399.			3,399
;	(If an amount appears in column (d), the same 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	NONE			
	Prior years' undistributed income. Subtract line 4b from line 2b		NONE		
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		NONE		
					,
đ	Subtract line 6c from line 6b. Taxable amount - see page 27 of the instructions		NONE		
θ	Undistributed income for 2008. Subtract line				
	4a from line 2a. Taxable amount - see page 27 of the instructions			NONE	
Ť	Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2010				26,130
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	1		
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)	NONE	3		
9	Excess distributions carryover to 2010.				
	Subtract lines 7 and 8 from line 6a	NONE	3		
0	Analysis of line 9:				
а	Excess from 2005 NONE				
b	Excess from 2006 NONE		]	1	
C	Excess from 2007 NONE				
d	Excess from 2008 NONE		1		
е	Excess from 2009 NONE		<u> </u>		Form <b>990-PF</b> (200

Pai	t XIV Private Opera	ating Foundations (	see page 27 of the	e instructions and Par	rt VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has					
	foundation, and the ruling					
b	Check box to indicate who		private operating found		4942(j	)(3) or 4942(j)(5)
2a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part  I or the minimum investment	(a) 2009	(b) 2008	(c) 2007	(d) 2006	<del>                                     </del>
	return from Part X for each					
	year listed					<del></del>
ь	85% of line 2a			<u> </u>		<del></del>
C	Qualifying distributions from Part					
	XII, line 4 for each year listed .					<del>                                     </del>
đ	Amounts included in line 2c not used directly for active conduct of exempt activities					
0	Qualifying distributions made					
	directly for active conduct of exempt activities Subtract line					
_	2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section					
	4942(j)(3)(8)(i)					
b	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X,		1			
	line 6 for each year listed			<del> </del>		<del> </del>
С	"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		]		1	
	organization					
Pa		ary Information (C	omplete this par	t only if the found	lation had \$5.000	or more in assets
	at any time	during the year - se	e page 28 of the	instructions.)	40,000	
1	Information Regarding	Foundation Manage	rs:		-	
а	List any managers of	the foundation who	nave contributed me	ore than 2% of the total	al contributions received	red by the foundation
	before the close of an	y tax year (but only if t	hey have contributed	I more than \$5,000). (S	See section $507(d)(2)$ .)	
	NONE					
Ь	List any managers of					y large portion of the
	ownership of a partne	rship or other entity) o	f which the foundati	on has a 10% or greate	r interest.	
	NONE					
_	I de la Branchia	0-11-1-1	O'4 Lana Cabalan	Lin ota Duamana		
2	Information Regarding	_				
				s to preselected char		
	organizations under o			grants, etc. (see pag	e 28 of the instruction	ons) to individuals or
	<u></u>	<u></u>			L	
a	The name, address, ar	nd telephone number (	of the person to who	m applications should l	be addressed: 	
b	The form in which app	olications should be su	bmitted and informa	ition and materials they	should include:	
	<del></del>					
C	Any submission deadl	ines:				
_				<del></del>		
d	Any restrictions or factors:	limitations on awards	s, such as by geo	graphical areas, charit	able fields, kinds of	institutions, or other

Form 990-PF (2009)				Page 11
Part XV Supplementary Information (co 3 Grants and Contributions Paid Durin	ontinued)	oved for F	uture Payment	
Recipient	If recipient is an individual,			
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	Or Substantial contributor	, i		
SEE STATEMENT 7				
				) 
Total				20,000
b Approved for future payment				
		1		
			<u></u>	
Total	<u></u> <u></u>	<del> <u>.</u></del>	<u>▶ 3b</u>	<u> </u>

er gross amounts unless otherwise indicated.	Unrela (a)	ted business income (b)		section 512, 513, or 514 (d)	(e) Related or exempt function income
Program service revenue:	(a) Business code	Amount	(c) Exclusion code	Amount	(See page 28 of the instructions.)
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments	l				
Interest on savings and temporary cash investments					
Dividends and interest from securities			14	23,745.	
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income					
Gain or (loss) from sales of assets other than inventory			18	611.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue: a					
b FEDERAL TAX REFUND			1	281.	
c					
d	1				
d					
e				24.637.	
e Subtotal. Add columns (b), (d), and (e)				24,637.	
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 to talk XVLB Relationship of Activities	o verify calc	ulations.)	Exempt Purp	13	24,63
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 to the table.  Relationship of Activities	o verify calco	ulations.) complishment of lich income is report	Exempt Purpled in column	ooses  (e) of Part XVI-A con	24,63
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to take the columns (b).  Relationship of Activities the accomplishment of the form	o verify calco	ulations.) complishment of lich income is report	Exempt Purpled in column	ooses  (e) of Part XVI-A con	24,63
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to take the columns (b).  Relationship of Activities the accomplishment of the form	o verify calco	ulations.) complishment of lich income is report	Exempt Purpled in column	ooses  (e) of Part XVI-A con	24,63
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to take the columns (b).  Explain below how each active the accomplishment of the form	o verify calco	ulations.) complishment of lich income is report	Exempt Purpled in column	ooses  (e) of Part XVI-A con	24,63
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to take the columns (b).  Explain below how each active the accomplishment of the form	o verify calco	ulations.) complishment of lich income is report	Exempt Purpled in column	ooses  (e) of Part XVI-A con	24,63
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to tax XVI-B Relationship of Activities  ne No. Explain below how each active the accomplishment of the form	o verify calco	ulations.) complishment of lich income is report	Exempt Purpled in column	ooses  (e) of Part XVI-A con	24,63
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to take the columns (b).  Explain below how each active the accomplishment of the form	o verify calco	ulations.) complishment of lich income is report	Exempt Purpled in column	ooses  (e) of Part XVI-A con	24,63
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to take the columns (b).  Explain below how each active the accomplishment of the form	o verify calco	ulations.) ccomplishment of I ich income is report s exempt purposes	Exempt Purpled in column (other than	ooses  (e) of Part XVI-A con	24,63
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to tax XVI-B Relationship of Activities  ne No. Explain below how each active the accomplishment of the form	o verify calco	ulations.) complishment of lich income is report	Exempt Purpled in column (other than	ooses  (e) of Part XVI-A con	24,6
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to the total columns (b).  Explain below how each active the accomplishment of the form	o verify calco	ulations.) ccomplishment of I ich income is report s exempt purposes	Exempt Purpled in column (other than	ooses  (e) of Part XVI-A con	24,6
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to the total columns (b).  Explain below how each active the accomplishment of the form	o verify calco	ulations.) ccomplishment of I ich income is report s exempt purposes	Exempt Purpled in column (other than	ooses  (e) of Part XVI-A con	24,6
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to take the columns (b).  Relationship of Activities the accomplishment of the form	o verify calco	ulations.) ccomplishment of I ich income is report s exempt purposes	Exempt Purpled in column (other than	ooses  (e) of Part XVI-A con	24,63
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to take the columns (b).  Relationship of Activities the accomplishment of the form	o verify calco	ulations.) ccomplishment of I ich income is report s exempt purposes	Exempt Purpled in column (other than	ooses  (e) of Part XVI-A con	24,63
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to take the columns (b).  Relationship of Activities the accomplishment of the form	o verify calco	ulations.) ccomplishment of I ich income is report s exempt purposes	Exempt Purpled in column (other than	ooses  (e) of Part XVI-A con	24,63
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to take the columns (b).  Relationship of Activities the accomplishment of the form	o verify calco	ulations.) ccomplishment of I ich income is report s exempt purposes	Exempt Purpled in column (other than	ooses  (e) of Part XVI-A con	24,63
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to take the columns (b).  Relationship of Activities the accomplishment of the form	o verify calco	ulations.) ccomplishment of I ich income is report s exempt purposes	Exempt Purpled in column (other than	ooses  (e) of Part XVI-A con	24,63
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions on page 28 to take the columns (b).  Relationship of Activities the accomplishment of the form	o verify calco	ulations.) ccomplishment of I ich income is report s exempt purposes	Exempt Purpled in column (other than	ooses  (e) of Part XVI-A con	24,63
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  se worksheet in line 13 instructions on page 28 to art XVI-B Relationship of Activities  ine No. Explain below how each activithe accomplishment of the form	o verify calco	ulations.) ccomplishment of I ich income is report s exempt purposes	Exempt Purpled in column (other than	ooses  (e) of Part XVI-A con	24,63

Form	990-PF (2009	1)						43-631	L7492			Pa	ge <b>13</b>
Par	t XVII	Informa Exempt		Transfer	s To a	nd Transac	tions	and Re	elationship	s With	Nonc	harit	able
1									organization 27, relating t			Yes	No
	:		 •							•	1	1 1	i

				: & 1 .	!	FAT!-					
a Trans	ection 501(c) of the Co nizations?				or in secti	on 527, rela	ting to p	olitical			1
	nizations? sfers from the reporting fou	indation to a nonch	aritable exempt organ	ization of:							*
(1) (	Cash								1a(1)		<u> X</u>
(2) (	Other assets								1a(2)		X
<b>b</b> Other	r transactions:										1
(1) 5	Sales of assets to a noncha	ritable exempt orga	anization		· · · · ·				1b(1)		<u>X</u>
(2) F	Purchases of assets from a	noncharitable exem	npt organization						1b(2)		X
(3) F	Rental of facilities, equipme	nt, or other assets							1b(3)		X
(4) F	Reimbursement arrangeme	nts							1b(4)		X
(5) 1	Loans or loan guarantees								1b(5)		X
(6) F	Performance of services or	membership or fund	draising solicitations					]	1b(6)		X
c Shar	ing of facilities, equipment,	, mailing lists, other	r assets, or paid emplor	yees					_1c		X
d If th	ne answer to any of t	he above is "Ye	s," complete the fo	llowing sch	edule. Col	umn ( <b>b)</b> sho	uld alway	s show	the	fair i	narket
value	e of the goods, other	assets, or service	s given by the rep	porting foun	dation. If	the foundation	on receive	d less	than	fair i	narket
value	e in any transaction or	sharing arranger	ment, show in colui	mn (d) the	value of	the goods,	other asse	ets, or	service	es rec	eived.
Line no.	. (b) Amount involved	(c) Name of non	ncharitable exempt organiz	zation	(d) Descripti	ion of transfers,	transactions	and shari	ng arra	ngeme	nts
						- · · · · · · · · · · · · · · · · ·					
-	<u> </u>					•					
								,			
			-								
	· · · · · · · · · · · · · · · · · · ·		<del> </del>								
	1					·					
					<del></del>						
								<u> </u>			
a le th	ne foundation directly or	indurectly affiliated	1 with or related to	one or mo	re tax-exen	nnt organizate	ons descri	hed in	<u>-</u>		
	he foundation directly or	•		•						es [	X] No
secti	ion 501(c) of the Code (oth	ner than section 50		•						es [	X No
secti	•	ner than section 50°		277				[		es	X No
secti	ion 501(c) of the Code (oth es," complete the following	ner than section 50°	1(c)(3)) or in section 5:	277			• • • • •	[		es [_	X No
secti	ion 501(c) of the Code (oth es," complete the following	ner than section 50°	1(c)(3)) or in section 5:	277			• • • • •	[		es	X No
secti	ion 501(c) of the Code (oth es," complete the following	ner than section 50°	1(c)(3)) or in section 5:	277			• • • • •	[		es .	X No
secti	ion 501(c) of the Code (oth es," complete the following	ner than section 50°	1(c)(3)) or in section 5:	277			• • • • •	[		es .	X No
secti	ion 501(c) of the Code (oth es," complete the following	ner than section 50°	1(c)(3)) or in section 5:	277			• • • • •	[		es	X No
secti	ion 501(c) of the Code (oth es," complete the following	ner than section 50° g schedule. n	1(c)(3)) or in section 5:  (b) Type of orga	anization		(c) (	Description o	f relations	ship		
secti	ion 501(c) of the Code (oth es," complete the following (a) Name of organizatio	ner than section 50°	1(c)(3)) or in section 5.  (b) Type of organized this return, including	anization	ing schedule	(c) [	Description o	f relations	ship	nowled	dge and
section If "Y	ion 501(c) of the Code (oth es," complete the following (a) Name of organization	ner than section 50°	1(c)(3)) or in section 5.  (b) Type of organized this return, including	anization	ing schedule	(c) [ (c) [	ts, and to t	f relations	ship	nowled	dge and
sectibolif "Y	er penalties of perjury, I declar, it is true, correct, and com	ner than section 50°	1(c)(3)) or in section 5.  (b) Type of organized this return, including	anization  anization  ng accompanyipayer or fiducia	ing schedule ary) is based	(c) [	ts, and to to to to to of which	f relations	ship	nowled	dge and
sectib If "Y	ion 501(c) of the Code (oth es," complete the following (a) Name of organization	ner than section 50°	1(c)(3)) or in section 5.  (b) Type of organized this return, including	anization  anization  ng accompanyipayer or fiducia	ing schedule	(c) [ (c) [	ts, and to to to to of which	f relations the best on preparet	f my k	nowled ny kno	dge and
sectib If "Y	er penalties of perjury, I declar, it is true, correct, and com	ner than section 50°	1(c)(3)) or in section 5.  (b) Type of organized this return, including	anization  anization  ng accompanyipayer or fiducia	ing schedule ary) is based 11/09	es and statement on all information.	ts, and to t	f relations  the best of preparer's eparer's imber (Se	f my k	nowledny kno	dge and wledge
Section If "Y	er penalties of perjury, I decler, it is true, correct, and com	ner than section 50°	1(c)(3)) or in section 5.  (b) Type of organized this return, including	anization  ng accompany, payer or fiducio	ing schedule ary) is based 11/09	es and statement on all informat	ts, and to t tion of which	f relations  the best of preparer  preparer's imber (Sege 30 of the segon of the se	f my kr has a	nowledny kno	dge and wiedge
sectible If "Y	er penalties of perjury, I decler, it is true, correct, and com	are that I have examplete. Declaration of	(b) Type of organized this return, including preparer (other than taxposition).	anization  ng accompanyi payer or fiducio	ing schedule ary) is based 11/09 Date	c) (c) (c) (c) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	ts, and to t to of which the page 1	f relations  the best of preparer's imber (Sege 30 of to 00162)	f my kr has a dentifie Sign he instit 244	nowledny kno	dge anwiedge
Section If "Y	er penalties of perjury, I decisf, it is true, correct, and com  Signature of officer or trustee  Preparer's signature  Firm's name (or yours if	are that I have examplete. Declaration of	(b) Type of organized this return, including preparer (other than taxon	anization  ng accompanying ayer or fiducial payer of the companying area are also become a companying ayer are also become a companying ayer are also become a companying ayer are also become a companying ayer are also become a companying ayer are also become a companying ayer are also become a companying ayer are also become a companying ayer are also become a companying ayer are also become a companying accompanying a companying accompanying a companying	ing schedule ary) is based 11/09 Date (2010)	cs and statement on all information of the control	ts, and to t to of which the page 1	f relations  the best of preparer  preparer's imber (Sege 30 of the segon of the se	f my kr has a dentifie Sign he instit 244	nowledny kno	dge anwiedge
sectible If "Y	er penalties of perjury, I decler, it is true, correct, and com	are that I have examplete. Declaration of	(b) Type of organized this return, including preparer (other than taxper)  N. REUTERS (TAX)	anization  ng accompanying ayer or fiducial payer of the companying area are also become a companying ayer are also become a companying ayer are also become a companying ayer are also become a companying ayer are also become a companying ayer are also become a companying ayer are also become a companying ayer are also become a companying ayer are also become a companying ayer are also become a companying accompanying a companying accompanying a companying	ing schedule ary) is based 11/09 Date	cs and statement on all information of the control	ts, and to t upon of which the Property	f relations  the best of preparer's imber (Sege 30 of to 00162)	f my kr has a	nowled ny kno K I	dge and wiedge

UMB Bank, n.a.
P.O. Box 419692
Kansas City, MO 64141-701+

Account Title

Dora & Louis Fox Charitable Tr

100150

Account Number

### Portfolio(s) Included in Statement Statement of Investment Position

Units	95	Cost Basis	ıs	Marke	Market Value	اں ہ
Ongual Face A	Ongural Face Asset Description	Total	Unit	Total	Price	Account
Common Stock						
400	Adobe Systems Inc ADBE 00724F101	13,387 72	33 47	10,572 00	26 43	%56 0
200	Aeina Inc New AET 00817Y108	10,941 72	54 71	5,276 00	26 38	0 47%
200	Allergan Inc AGN 018490102	13,641.04	68 21	11,652 00	58 26	1 05%
300	Altria Group Inc	7,044 58	23 48	6,012 00	20 04	0 54%

. ...

8 00

Market

Estimated Annual Income 6 9

420 00

0 3+

40 00

UMB -05000-0 L/04840310305503055E0!UMBP1CUSTUMBSTMT000000000164UMBSTM1100150 MSETINC

MO 02209S103

100150

Account Number

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UMB Bank, n a.
P.O. Box 419692
Kansas City, MO 64141-7014

Stateme	Statement of Investment Position (continued)	ontinued)						
Units	ડ્યુ	Cost Basis		Market Value	Value	yo oʻ	Esunated	Market
Ongwal Fa	Ongusal Face Asset Description	Total	Chart	Total	Price	Account	Annual Inconic	Yield
230	Apache Corp APA 037411105	5,818 09	25 30	19,363 70	84 19	1 74%	138 00	17 0
100	Apple Inc AAPL 037833100	16,964 78	169.65	25, 153 00	251 53	2 26%		, ,
350	AT & T Inc T 00206R102	14, 105 00	40 30	8,466 50	24 19	%92 0	288 00	6 95
250	Autodesk Inc ADSK 052769106	12,079 65	48 32	00 060'9	24 36	0 55%		
200	Baxter International Inc BAX 071813109	11,825 72	59 13	8,128 00	40 64	0 73%	232 00	2 85
300	Cerner Corp CERN 156782104	15,609 00	52 03	22,767 00	75 89	2 05%		
300	Cisco Systems Inc CSCO 17275R102	9,083 16	30 28	6,393 00	21 31	0 58%		
400	Coca Cola Co KO 191216100	18,756 00	46 89	20,048 00	50 12	1 80%	704 00	3.51
200	Costco Wholesale Corp COST 22160K105	20,383 50	40 77	27,415 00	54 83	2 47%	410 00	1 50
200	Covance Inc CVD 222816100	16,301 36	81 51	10,264 00	51 32	0 92%		
400	Danaher Corp Del DHR 235851102	11,431 50	28 58	14,848 00	37 12	1 34%	32 00	0 22
009 -	Dominion Resources Inc D 25746U109	24,432 78	40 72	23,244 00	38 74	2 09%	1,098 00	4 72
009	Duke Energy Hidg Corp DUK 26441C105	11,150 70	18 58	00 009'6	16 00	%98 0	588 00	6 13

Account Tide

Dora & Louis Fox Charitable Tr Account Number

100150

## Statement of Investment Position (continued)

Unuts	Ş	Cost Basis	asıs	Marke	Market Value	yo of	Esumated	Market
Onginal Fa	Onginal Face Asset Description	Total	Unit	Total	Price	Account Ar	Annual Income	Yield
300	ExxonMobil Corp XOM 302316102	21,648 00	72 16	17, 121 00	57 07	1 54%	528 00	3 08
250	Fedex Corp FDX 31428X106	10,780 25	43 12	17,527 50	70 11	1 58%	120 00	89 0
400	General Dynamics Corp GD 369550108	20,481 36	51 20	23,424 00	58 56	2 11%	672 00	2 87
500	General Electric Co GE 369604103	18,349 40	36 70	7,210 00	14 42	%59 0	200 00	2 77
200	Gilead Sciences Inc GILD 375558103	9,509 72	47 55	6,856 00	34 28	0 62%		
20	Google Inc Class A GOOG 38259P508	14,429 40	721 47	8,899 00	444 95	%08 0		
300	Hewlett Packard Co HPQ 428236103	15,801 00	52 67	12,984 00	43 28	1 17%	00 96	0 74
200	McDonalds Corp MCD 580135101	20,870 00	41 74	32,935 00	65 87	2 96%	1,100 00	3 34
006	Occidental Petroleum Corp OXY 674599105	20,802 73	23 11	69, 435 00	77 15	6 25%	1,368 00	1 97
300	Philip Morris International Inc PM 718172109	16,052 39	53 51	13,752 00	45 84	1 24%	00 969	5 06
400	Procter & Gamble Co PG 742718109	23,496 00	58 74	23,992 00	59 98	2 16%	770 80	3 21
200	Qualconin Inc QCOM 747525103	17,937 00	35 87	16,420 00	32 84	1 48%	380 00	2 31
400	Staples Inc SPLS 855030102	9,832 00	24 58	7,620 00	19 05	%69 0	144 00	1 89



Account Inde

Account Number

Dora & Louis Fox Charitable Tr

100150

## Statement of Investment Position (continued)

												, , , , , , , , , , , , , , , , , , ,			
Market	Yield	2 03	2 62	1 76	68 0	3 37	6 78	0 78	2.13			1 31	98 0	0 84	1 68
Estmrated	Annual Income	400 00	510 00	100 00	80 00	480 00	570 00	180 00	12,652 80			2,414 45	245 38	2,659.83	15,312 63
Jo %	Account	1 77%	1 75%	0 51%	%08 0	1 28%	%92 0	2 07%	53.34%		2 69%	16 60%	6 20%	28.49%	81 82%
Market Value	Price	49 17	64 91	28 40	22 35	71 18	28 02	25 60			18 84	25 91	10 39		
Mark	Total	19,668 00	19,473 00	5,680 00	8,940 00	14,236 00	8,406 00	23,040 00	592,910 70		63,213 42	184,538 04	19 †06′89	316,656.07	71 995,606
sis	Unut	31 33	75 92	35 37	31 37	68 45	43 93	19 27			19 96	24 98	10 45		
Cost Basis	Total	12,531 88	22,775 58	7,073 79	12,546 92	13,690 06	13,177 67	17,345 25	552,086.70		66,957 22	177,915 32	98 306 86	314,179 40	866,266 10
	Onginal Face Asset Description	Target Corp TGT 87612E106	United Technologies Corp UTX 913017109	UnitedHealth Group Inc UNH 91324P102	US Bancorp Del USB 902973304	V F Corp VFC 918204108	Verizon Communications Inc VZ 92343V104	Wells Fargo & Co WFC 949746101	Total Common Stock		Baron Small Cap Fund BSCFX 068278308	Scout International Fund UMBWX 81063U503	Scout Mid Cap Fund UMBMX 81063U206	Total Equity Funds	rilies
Units	Onginal Face	400	300	200	400	200	300	006		Equity Funds	3355 277	1122 271	6631 82	•	Total Equity Securities



Account Title

Dora & Louis Fox Charitable Tr

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100150

Account Number

# Statement of Investment Position (continued)

Units		Cost Basis		Mark	Market Value	Jo %	Esumated	Market
Onginal Face Asset Des Fixed Income Securities	Onguial Face Asset Description Income Securities	Total	Unit	Total	Pnce	Account	Annual Income	Yield
Gov't & Agency Bonds	Sonds							
7395 2595 50000	Govt National Mtg Assn DTD 12/1/2004 5 0000% 12/15/2019 36200GAW6 Pool # 600421	7,603 24	1 03	7,973 01	107 81	0 72%	369 76	4 64
1271 477 25000	Govt National Mtg Assn DTD 4/1/1999 6 0000% 4/20/2014 36202DBQ3 Pool # 002747	1,265 10	66 0	1,348 96	106 09	0 12%	76 29	5 66
2613 185 100000	Govt National Mtg Assn DTD 6/1/1999 6 5000% 6/20/2014 36202DCL3 Pool # 002775	2,572_37	86 0	2,805 91	107 38	0 25%	98 691	6 05
24787 354 100000	Govt National Mtg Assn DTD 7/1/2003 5 0000% 7/15/2018 36200MDT3 Pool # 604466	25,190 16	1 02	26,723 87	107 81	2 40%	1,239 37	4 64
	Total Gov't & Agency Bonds	36, 630.87		38,851.75		3.49%	1,855.28	4.78
Corporate Bonds								
25000	Israel St DTD 2/16/2001 6 800% 9/1/2011 4651382X2	25,000 00	1 00	25,000 00	100 00	2 25%	1,700 00	08 9
	Total Corporate Bonds	25,000.00	:	25,000.00		2.25%	1,700.00	6.80

529786

UMB Bank, n a. P O Box +19692 Kansas City, MO 64141-701+

Account Title

Account Number

Dora & Louis Fox Charitable Tr

100150

Statement of Investment Position	(continued)						
1	Cost Basis		Market Value	Value	jo %	Esumated	Market
Ongual Face Asset Description  Fixed Income Funds	Total	Unit	Total	Pace	Account Annual Income	nual Income	Yield
6187.162 Dodge & Cox Income Fund DODIX 256210105	80,216 19	12 96	81,608 67	13 19	7 34%	3,941 22	4 83
Total Fixed Income Funds	80,216.19		81,608.67		7.34%	3,941.22	4.83
Total fixed Income Securities	141,847 06		145,460 42		13 09%	7,496.50	i 15
Cash & Equivalents							
Money Market Funds							
56612 27 Fidelity Money Market Fund #59 FMPXX 316175207	56,612 27	1 00	56,612 27	1 00	2 09%	147 47	0 26
Total Money Market Funds	56,612.27		56,612.27		2.09%	147.47	0.26
Cash							
Cash				1 00	%00 O	,	
Total Cash					0.00%		
Total Cash & Equivalents	56,612 27		56,612 27		2 09%	147 47	0 26
Total Assets	1,064,725 43		1,111,639 46		100 00%	22,956 60	2.07
Account Total	1,064,725 43		1,111,639 46				

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

CAI	PITAL GA	INS AND LO	SSES FOR	R TAX ON	INVEST	/IE	ENT INCOM	
Kind of Pro	· · ·			iption		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)	<del></del>
100 000 00		100000. FED PROPERTY TY			TD 8/24/		12/21/2004	08/18/2009
100,000.00		100,049.00						
92.00		15305.4585 PROPERTY TY 94.00			N DTD 12		12/30/2004	07/15/2009
32.00		12264.604	OVT NATION	AL MTG ASSN	DTD 12/	Ì	12/30/2004	08/17/2009
3,041.00		PROPERTY TY 3,126.00					-85.00	,,
5,012.00		12189.649	OVT NATION	AL MTG ASSN	I DTD 12/	į l	12/30/2004	09/15/2009
75.00		PROPERTY TY			·		-2.00	
		12114.35 GO			DTD 12/1		12/30/2004	10/15/200
75.00		PROPERTY TY	PE: SECURI	ries -			-2.00	
		7741.2705			T DTD 12/		12/30/2004	11/16/200
4,373.00		PROPERTY TY 4,496.00	PE: SECURI	TIES			-123.00	
			OVT NATIONA (PE: SECURI		DTD 12/1		12/30/2004	12/15/200
49.00		50.00	IPE: SECURI	1125			-1.00	
		PROPERTY T	OVT NATIONA YPE: SECURI		DTD 12/1		12/30/2004	01/15/201
49.00		50.00					-1.00	
		PROPERTY T	GOVT NATION YPE: SECURI		N DTD 12/		12/30/2004	02/16/201
49.00		51.00					-2.00	
			GOVT NATION YPE: SECURI		N DTD 12/		12/30/2004	03/15/201
49.00		51.00					-2.00	
		PROPERTY T	GOVT NATION YPE: SECURI		N DTD 12/		12/30/2004	04/15/201
50.00		51.00					-1.00	

FORM 990-PF - PART IV

Kind of Pro		INS AND LO		ription		P or	Date	Date sold
Gross sale price less	Depreciation allowed/	Cost or other	FMV as of	Adj. basis	Excess of FMV over	D	acquired Gain or	
openses of sale	allowable	basis	12/31/69	12/31/69	adj basis	Н	(loss)	
50.00		7445.37 GOV PROPERTY TY 51.00			TD 12/1/		12/30/2004	05/17/201
30.00			IOITE NAMEON	ar uma agan	, pmp 10/			06/15/201
50.00		7395.2595 G PROPERTY TY			I DTD 12/		12/30/2004	06/15/201
50.00		52.00					-2.00	
		31088.931 G			T DTD 7/1		08/20/2003	07/15/200
804.00		817.00					-13.00	
		30694.832 G			I DTD 7/1		08/20/2003	08/17/200
394.00		401.00		1120			-7.00	
		29578.182 C			T DTD 7/1		08/20/2003	09/15/200
1,117.00		1,135.00	PE: SECURI	1152			-18.00	
		29205.12 GC			DTD 7/1/		08/20/2003	10/15/200
373.00		PROPERTY TY	PE: SECURI	TIES			-6.00	
		28920.091			N DTD 7/1		08/20/2003	11/16/200
285.00		PROPERTY TY	(PE: SECURI	1162			-5.00	
		28422.903 ( PROPERTY TY			N DTD 7/1		08/20/2003	12/15/200
497.00		505.00	IFE. BECOKI	1110			-8.00	
		28025.745 ( PROPERTY TY			N DTD 7/1		08/20/2003	01/15/203
397.00		404.00	IFE. SECORI	1100		1	-7.00	
		27753.127 ( PROPERTY T			N DTD 7/1		08/20/2003	02/16/20:
273.00		277.00		1165			-4.00	
			GOVT NATION	IAL MTG ASSI	N DTD 7/1		08/20/2003	03/15/20
621.00		631.00		.1110		ļ	-10.00	
							L	

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

Kind of Property		Description			or D	Date acquired	Date sold	
Gross sale price less penses 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)	
1,002.00		26130.429 G PROPERTY TY 1,018.00		AL MTG ASSN TIES	DTD 7/1		08/20/2003	04/15/201
		PROPERTY TY		L MTG ASSN TIES	DTD 7/1/		08/20/2003	05/17/201
795.00		808.00					-13.00	
		PROPERTY TY		AL MTG ASSN TIES	TDTD 7/1		08/20/2003	06/15/201
548.00		557.00					-9.00	
		PROPERTY TY	1877.339 GOVT NATIONAL MTG ASSN POOL# 27 PROPERTY TYPE: SECURITIES				04/26/1999	07/20/200
39.00		38.00					1.00	
62.00		1815.38 GOV PROPERTY TY 62.00		MTG ASSN P	POOL# 274		04/26/1999	08/20/200
35.00		1780.6853 (PROPERTY TY 35.00		IAL MTG ASSN TIES	I POOL# 2	: .	04/26/1999	09/21/200
34.00		1746.5268 (PROPERTY TY 34.00		NAL MTG ASSN TIES	1 POOL# 2		04/26/1999	10/20/20
35.00		1711.8435 (PROPERTY TO 35.00		NAL MTG ASSN	POOL# 2		04/26/1999	11/20/20
71.00		1640.781 G PROPERTY T 71.00		AL MTG ASSN	POOL# 27		04/26/1999	12/21/20
94.00			GOVT NATION YPE: SECURI	NAL MTG ASSN	N POOL# 2		04/26/1999	01/20/20
44.00		1502.47 GO PROPERTY T 44.00	YPE: SECUR	L MTG ASSN E	POOL# 274		04/26/1999	02/22/20

FORM 990-PF - PART IV

Kind of Property		INS AND LOSSES FOR TAX ON INVESTI			P 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)	
47.00			GOVT NATION. (PE: SECURI	AL MTG ASSN TIES	POOL# 2		04/26/1999	03/22/2010
62.00			OVT NATIONA PE: SECURI	L MTG ASSN TIES	POOL# 27		04/26/1999	04/20/201
92.00		i i	GOVT NATION YPE: SECURI	AL MTG ASSN TIES	POOL# 2		04/26/1999	05/20/201
		1271.477 GOVT NATIONAL MTG ASSN POOL# 27 PROPERTY TYPE: SECURITIES				04/26/1999	06/21/201	
31.00		30.00	IPE: SECURI	1165			1.00	
			VT NATIONAL YPE: SECURI	MTG ASSN F	POOL# 277		06/10/1999	07/20/200
51.00		50.00	IFE. BECOKI	1115			1.00	
		PROPERTY T	OVT NATIONA YPE: SECURI	L MTG ASSN TIES	POOL# 27		06/10/1999	08/20/200
51.00		50.00					1.00	
51.00			OVT NATIONA YPE: SECURI	L MTG ASSN TIES	POOL# 27		1.00	09/21/200
			OVT NATIONA YPE: SECURI	L MTG ASSN	POOL# 27		06/10/1999	10/20/200
51.00		50.00					1.00	
			3161.22 GOVT NATIONAL MTG ASSN POOL# 277 PROPERTY TYPE: SECURITIES			06/10/1999	11/20/20	
52.00		51.00		-1-10			1.00	
57.00			YPE: SECURI	L MTG ASSN	POOL# 27		06/10/1999	12/21/20
2			3051.697 GOVT NATIONAL MTG ASSN POOL# 27 PROPERTY TYPE: SECURITIES			06/10/1999	01/20/20	
52.00		51.00					1.00	

FORM 990-PF - PART IV

CAPITAL GA			_	ription		P or	Date	Date sold
Kind of Property  Gross sale Depreciation		Cost or	FMV	Adj basis	Excess of	D	acquired Gain	
price less penses of sale	allowed/ allowable	other basis	as of 12/31/69	as of 12/31/69	FMV over adj basis	li	or (loss)	
Mariona of Aprio	MINTERIO	DBAIA				П		
		2999.116 GO	VT NATIONAL	L MTG ASSN	POOL# 27		06/10/1999	02/22/201
		PROPERTY TY						- , , .
53.00		52.00					1.00	
		2946.032 GO			POOL# 27		06/10/1999	03/22/201
53.00		PROPERTY TY 52.00	PE: SECURI	LIES			1.00	
		2001 567 60	ιτ <i>τ</i> το λίλ πτολίλι	ו איזים אכינאז	DOOT # 27		06/10/1999	04/20/201
		2891.567 GO PROPERTY TY			POOL# 27		06/10/1999	04/20/201
54.00		54.00						
		2663.693 GO	VT NATIONA	L MTG ASSN	POOL# 27		06/10/1999	05/20/201
228.00		PROPERTY TY 224.00	PE: SECURI	TIES		H	4.00	
220.00								
		2613.185 GO PROPERTY TY			POOL# 27		06/10/1999	06/21/201
51.00		50.00	.FE. BECORI	1165			1.00	
		11.9565 GOV		MTG ASSN 1	POOT.# 385		07/17/1995	07/15/200
		PROPERTY TY			100Dm 303		07/17/1999	07/15/200
25.00		25.00						
		25000. GOVI			OOL# 3858		07/17/1995	08/17/200
12.00		PROPERTY TY 12.00	PE: SECURI	TIES				
22.00								
TAL GAIN(L	oss)					$\  \ $	611.	
							========	
						П		
						Ш		
		<u> </u>		·		Ш		<u> </u>

FORM 990PF, PART I - OTHER INCOME

REVENUE
AND
EXPENSES
PER BOOKS

DESCRIPTION

FEDERAL TAX REFUND

281.

TOTALS

STATEMENT

ACCOUNTING FEES	
1	ii
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PART	
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90P	II.
9	ii
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CHARITABLE PURPOSES	750.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	NONE
REVENUE AND EXPENSES PER BOOKS	750. 750. ====================================
DESCRIPTION	TAX PREPARATION FEE (NON-ALLOC TOTALS

RL8770 553R 11/09/2010 16:11:31

TAXES	
	ii
Η	11
PART	
990PF,	
FORM	11 11 11 11

NET INVESTMENT INCOME	347.  347. ============
REVENUE AND EXPENSES PER BOOKS	347. 347. ====================================
DESCRIPTION	FOREIGN TAXES ON QUALIFIED FOR TOTALS

STATEMENT 5

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

OFFICER NAME:

UMB BANK, N.A.

ADDRESS:

P O BOX 419692

KANSAS CITY, MO 6414-6692

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 2

COMPENSATION ..... 12,919.

TOTAL COMPENSATION:

12,919.

DORA & L@UIS FOX CHARITABLE TRUST 100150 43-6317492 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

JEWISH FEDERATION OF

GREATER KANSAS CITY

ADDRESS:

5801 WEST 115TH STREET

OVERLAND PARK, KS 66211

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

EXEMPT

RECIPIENT NAME:

KEHILATH ISRAEL SYNAGOGUE

ADDRESS:

10501 CONSER

OVERLAND PARK, KS 66323

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

EXEMPT

AMOUNT OF GRANT PAID ...... 5,000.

TOTAL GRANTS PAID:

20,000.

Ε