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Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2009Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

► Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

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A For the 2009 calendar year, or tax year beginning <u>7/01</u> , 2009, and ending <u>6/30</u> , 2010	
B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Termination ☐ Amended return ☐ Application pending	C MARY BAKER EMERICK TRUST P.O. BOX 597 HELENA, MT 59624
D Employer identification number 81-6053279	E Telephone number 406-447-2050
F Group Exemption Number _____	
G Accounting method ☒ Cash ☐ Accrual Other (specify) _____	
H Check ☒ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)	
I Website: <u>N/A</u>	
J Tax-exempt status (check only one) — ☒ 501(c) (<u>3</u>) (insert no) <u>4947(a)(1)</u> or <u>527</u>	
K Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return	
L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$ 309,594.	

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)	
1 Contributions, gifts, grants, and similar amounts received	1
2 Program service revenue including government fees and contracts	2
3 Membership dues and assessments	3
4 Investment income	4 44,871.
5a Gross amount from sale of assets other than inventory 5a 264,557.	
b Less: cost or other basis and sales expenses 5b 279,805.	
c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c -15,248.	
6 Special events and activities (complete applicable parts of Schedule G) If any amount is from gaming, check here ☐	
a Gross revenue (not including \$ _____ of contributions reported on line 1) 6a	
b Less: direct expenses other than fundraising expenses 6b	
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a) 6c	
7a Gross sales of inventory, less returns and allowances 7a	
b Less: cost of goods sold 7b	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c	
8 Other revenue (describe <u>See Statement 1</u>) 8 166.	
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8 9 29,789.	
10 Grants and similar amounts paid (attach schedule <u>See Statement 3</u>) 10 36,000.	
11 Benefits paid to or for members	11
12 Salaries, other compensation, and employee benefits	12
13 Professional fees and other payments to independent contractors	13 8,813.
14 Occupancy, rent, utilities, and maintenance	14
15 Printing, publications, postage, and shipping	15
16 Other expenses (describe _____)	16
17 Total expenses. Add lines 10 through 16 17 44,813.	
18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 -15,024.	
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) 19 1,177,249.	
20 Other changes in net assets or fund balances (attach explanation) 20	
21 Net assets or fund balances at end of year. Combine lines 18 through 20 21 1,162,225.	

Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ	
(See the instructions for Part II)	
22 Cash, savings, and investments	(A) Beginning of year 1,177,249. (B) End of year 1,162,225.
23 Land and buildings	23
24 Other assets (describe _____)	24
25 Total assets	25 1,177,249. 25 1,162,225.
26 Total liabilities (describe _____)	26 0. 26 0.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	27 1,177,249. 27 1,162,225.

BAA For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

Form 990-EZ (2009)

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Part V Other Information (Note the statement requirements in the instrs for Part V.) See Statement 5

	Yes	No
33 Did the organization engage in any activity not previously reported to the IRS? If 'Yes,' attach a detailed description of each activity.		X
34 Were any changes made to the organizing or governing documents? If 'Yes,' attach a conformed copy of the changes		X
35 If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T		
a Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If 'Yes,' complete applicable parts of Schedule N.		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ <u>37a</u> 0.		
b Did the organization file Form 1120-POL for this year?		X
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?		X
b If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b N/A		
39 Section 501(c)(7) organizations Enter		
a Initiation fees and capital contributions included on line 9 39a N/A		
b Gross receipts, included on line 9, for public use of club facilities 39b N/A		
40a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ▶ 0., section 4912 ▶ 0., section 4955 ▶ 0.		
b Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I 40b		X
c Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ 0.		
d Section 501(c)(3) and 501(c)(4) organizations Enter amount of tax on line 40c reimbursed by the organization ▶ 0.		
e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If 'Yes,' complete Form 8886-T 40e		X
41 List the states with which a copy of this return is filed ▶ <u>None</u>		

42a The organization's books are in care of **▶** MARTIN LEWIS Telephone no **▶** 406-447-2050
 Located at **▶** P.O. BOX 597, HELENA MT ZIP + 4 **▶** 59624

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? **42b**

Yes	No
	X

If 'Yes,' enter the name of the foreign country **▶** _____

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts.

c At any time during the calendar year, did the organization maintain an office outside of the U S ? **42c**

Yes	No
	X

If 'Yes,' enter the name of the foreign country: **▶** _____

43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of **Form 1041** — Check here **▶** ☐ N/A
 and enter the amount of tax-exempt interest received or accrued during the tax year **▶** 43 N/A

	Yes	No
44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		X
45 Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If 'Yes,' Form 990 must be completed instead of Form 990-EZ		X

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

46 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I

	Yes	No
46		X

47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II

47		X
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48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E

48		X
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49a Did the organization make any transfers to an exempt non-charitable related organization?

49a		X
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b If 'Yes,' was the related organization a section 527 organization?

49b		
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50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

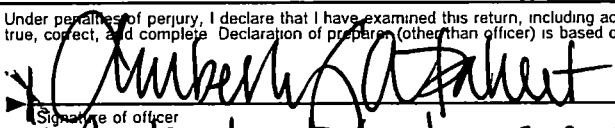
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
None				

f Total number of other employees paid over \$100,000

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving over \$100,000

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.				
	 Signature of officer		Date <u>10.30.10</u>		
Paid Preparer's Use Only	Preparer's signature <u>Marcia Miller</u>		Check if self-employed ☐	Preparer's Identifying Number (See instructions) <u>000187058</u>	
	Firm's name (or yours if self-employed), address, and ZIP + 4 <u>Kindred Booker & Company, P.C.</u> <u>616 Helena Ave., Ste. 307</u> <u>Helena, MT 59601</u>				EIN <u>81-0441066</u>
					Phone no <u>(406) 442-4206</u>

May the IRS discuss this return with the preparer shown above? See instructions

☒ Yes	☐ No
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BAA

Form 990-EZ (2009)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

MARY BAKER EMERICK TRUST

Employer identification number

81-6053279

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

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

- 1 ☐ A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3 ☐ A hospital or cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 ☒ An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a ☐ Type I
 - b ☒ Type II
 - c ☐ Type III — Functionally integrated
 - d ☐ Type III — Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).**
- f ☐ If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box.
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

	Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?		X
(ii) a family member of a person described in (i) above?		X
(iii) a 35% controlled entity of a person described in (i) or (ii) above?		X

h Provide the following information about the supported organizations.

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?		(vii) Amount of Support
			Yes	No	Yes	No	Yes	No	
WESTERN MONTANA COLLEGE FOUNDATION	81-0386970	10		X					36,000.
Total									36,000.

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

Schedule A (Form 990 or 990-EZ) 2009

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)						
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						
4 Total. Add lines 1-through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	%

16a **33-1/3 support test — 2009.** If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization. ☐

b **33-1/3 support test — 2008.** If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization. ☐

17a **10%-facts-and-circumstances test — 2009** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ☐

b **10%-facts-and-circumstances test — 2008.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and **stop here.** Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ☐

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

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

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants'.)						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13 Total support. (add lns 9, 10c, 11, and 12)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ☐						

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

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

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

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

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

[illegible]

Client F13

MARY BAKER EMERICK TRUST

81-6053279

10/22/10

02 45PM

Statement 1
Form 990-EZ, Part I, Line 5c
Net Gain (Loss) from Noninventory Sales

Nonpublicly Traded Securities

Description:	50000 US TREASURY NOTES		
Date Acquired:	2/16/2000		
How Acquired:	Purchased		
Date Sold:	2/16/2010		
To Whom Sold:			
Gross Sales Price:	50,000.		
Cost or Other Basis:	50,254.	Gain (Loss)	-254.
Description:	50000 ALLSTATE LIFE GLOBAL 4.250%		
Date Acquired:	2/26/2000		
How Acquired:	Purchased		
Date Sold:	2/26/2010		
To Whom Sold:			
Gross Sales Price:	50,000.		
Cost or Other Basis:	49,789.	Gain (Loss)	211.
Description:	50000 HONEYWELL INTERNATIONAL 7.500%		
Date Acquired:	3/01/2000		
How Acquired:	Purchased		
Date Sold:	3/01/2010		
To Whom Sold:			
Gross Sales Price:	50,000.		
Cost or Other Basis:	49,567.	Gain (Loss)	433.
Description:	25000 PROCTER & GAMBLE 4.600%		
Date Acquired:	6/28/2000		
How Acquired:	Purchased		
Date Sold:	6/28/2010		
To Whom Sold:			
Gross Sales Price:	27,299.		
Cost or Other Basis:	25,871.	Gain (Loss)	1,428.
Description:	25000 WACHOVIA BOND 5.750%		
Date Acquired:	11/30/1999		
How Acquired:	Purchased		
Date Sold:	11/30/2009		
To Whom Sold:			
Gross Sales Price:	26,242.		
Cost or Other Basis:	24,481.	Gain (Loss)	1,761.
Description:	.0909 AOL INC		
Date Acquired:	12/16/2009		
How Acquired:	Purchased		
Date Sold:	12/16/2009		
To Whom Sold:			
Gross Sales Price:	2.		
Cost or Other Basis:	3.	Gain (Loss)	-1.
Description:	50 BRISTOL MYERS SQUIBB		
Date Acquired:	Various		
How Acquired:	Purchased		
Date Sold:	10/28/2009		
To Whom Sold:			
Gross Sales Price:	1,112.		
Cost or Other Basis:	1,443.		

Client F13

MARY BAKER EMERICK TRUST

81-6053279

10/22/10

02 45PM

Statement 1 (continued)
Form 990-EZ, Part I, Line 5c
Net Gain (Loss) from Noninventory Sales

Description:	420 CITIGROUP	Gain (Loss)	-331.
Date Acquired:	Various		
How Acquired:	Purchased		
Date Sold:	3/31/2010		
To Whom Sold:			
Gross Sales Price:	1,785.		
Cost or Other Basis:	16,384.		
		Gain (Loss)	-14,599.
Description:	150 EXELON CORPORATION		
Date Acquired:	Various		
How Acquired:	Purchased		
Date Sold:	10/28/2009		
To Whom Sold:			
Gross Sales Price:	7,472.		
Cost or Other Basis:	10,880.		
		Gain (Loss)	-3,408.
Description:	125 GENERAL DYNAMICS		
Date Acquired:	Various		
How Acquired:	Purchased		
Date Sold:	10/28/2009		
To Whom Sold:			
Gross Sales Price:	8,336.		
Cost or Other Basis:	10,038.		
		Gain (Loss)	-1,702.
Description:	50 HALLIBURTON		
Date Acquired:	Various		
How Acquired:	Purchased		
Date Sold:	10/28/2009		
To Whom Sold:			
Gross Sales Price:	1,515.		
Cost or Other Basis:	1,712.		
		Gain (Loss)	-197.
Description:	50 HEWLETT PACKARD CO		
Date Acquired:	Various		
How Acquired:	Purchased		
Date Sold:	10/28/2009		
To Whom Sold:			
Gross Sales Price:	2,425.		
Cost or Other Basis:	2,003.		
		Gain (Loss)	422.
Description:	50 JOHNSON & JOHNSON		
Date Acquired:	Various		
How Acquired:	Purchased		
Date Sold:	10/28/2009		
To Whom Sold:			
Gross Sales Price:	3,011.		
Cost or Other Basis:	3,300.		
		Gain (Loss)	-289.
Description:	50 MEDTRONIC INC		
Date Acquired:	Various		
How Acquired:	Purchased		
Date Sold:	10/28/2009		
To Whom Sold:			
Gross Sales Price:	1,826.		
Cost or Other Basis:	2,698.		
		Gain (Loss)	-872.
Description:	.923 MERCK & CO		
Date Acquired:	Various		

Client F13

MARY BAKER EMERICK TRUST

81-6053279

10/22/10

02 45PM

Statement 1 (continued)
Form 990-EZ, Part I, Line 5c
Net Gain (Loss) from Noninventory Sales

How Acquired:	Purchased		
Date Sold:	11/17/2009		
To Whom Sold:			
Gross Sales Price:		31.	
Cost or Other Basis:		47.	
			Gain (Loss) -16.
Description:	50 MICROSOFT		
Date Acquired:	Various		
How Acquired:	Purchased		
Date Sold:	10/28/2009		
To Whom Sold:			
Gross Sales Price:		1,415.	
Cost or Other Basis:		1,481.	
			Gain (Loss) -66.
Description:	50 ORACLE		
Date Acquired:	Various		
How Acquired:	Purchased		
Date Sold:	10/28/2009		
To Whom Sold:			
Gross Sales Price:		1,110.	
Cost or Other Basis:		1,093.	
			Gain (Loss) 17.
Description:	.75 PFIZER		
Date Acquired:	Various		
How Acquired:	Purchased		
Date Sold:	10/21/2009		
To Whom Sold:			
Gross Sales Price:		13.	
Cost or Other Basis:		20.	
			Gain (Loss) -7.
Description:	200 PHILIP MORRIS INTERNATIONAL		
Date Acquired:	Various		
How Acquired:	Purchased		
Date Sold:	10/28/2009		
To Whom Sold:			
Gross Sales Price:		9,798.	
Cost or Other Basis:		6,724.	
			Gain (Loss) 3,074.
Description:	75 PROCTER & GAMBLE		
Date Acquired:	Various		
How Acquired:	Purchased		
Date Sold:	7/22/2009		
To Whom Sold:			
Gross Sales Price:		4,165.	
Cost or Other Basis:		2,735.	
			Gain (Loss) 1,430.
Description:	100 SYMANTEC CORP		
Date Acquired:	Various		
How Acquired:	Purchased		
Date Sold:	10/28/2009		
To Whom Sold:			
Gross Sales Price:		1,675.	
Cost or Other Basis:		1,888.	
			Gain (Loss) -213.
Description:	50 TIME WARNER		
Date Acquired:	Various		
How Acquired:	Purchased		
Date Sold:	10/28/2009		

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Statement 1 (continued)
Form 990-EZ, Part I, Line 5c
Net Gain (Loss) from Noninventory Sales

To Whom Sold:			
Gross Sales Price:	1,549.		
Cost or Other Basis:	2,121.		
		Gain (Loss)	-572.
Description:	50 WALT DISNEY CO		
Date Acquired:	Various		
How Acquired:	Purchased		
Date Sold:	10/28/2009		
To Whom Sold:			
Gross Sales Price:	1,447.		
Cost or Other Basis:	1,582.		
		Gain (Loss)	-135.
Description:	150 WYETH		
Date Acquired:	Various		
How Acquired:	Purchased		
Date Sold:	10/16/2009		
To Whom Sold:			
Gross Sales Price:	7,538.		
Cost or Other Basis:	6,587.		
		Gain (Loss)	951.
Description:	100 NABORS INDUSTRIES		
Date Acquired:	Various		
How Acquired:	Purchased		
Date Sold:	10/28/2009		
To Whom Sold:			
Gross Sales Price:	2,273.		
Cost or Other Basis:	4,903.		
		Gain (Loss)	-2,630.
Description:	50 TEVA PHARMACEUTICAL		
Date Acquired:	Various		
How Acquired:	Purchased		
Date Sold:	10/28/2009		
To Whom Sold:			
Gross Sales Price:	2,518.		
Cost or Other Basis:	2,201.		
		Gain (Loss)	317.
Total Gain (Loss) Nonpublicly Traded Securities		\$	<u>-15,248.</u>
Total Net Gain (Loss) From Noninventory Sales		\$	<u>-15,248.</u>

Statement 2
Form 990-EZ, Part I, Line 8
Other Revenue

CLASS ACTION MERRILL LYNC		\$	166.
	Total	\$	<u>166.</u>

2009

Federal Statements

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Statement 3
Form 990-EZ, Part I, Line 10
Grants and Similar Amounts Paid

Class of Activity:	EDUCATION
Donee's Name:	UNIVERSITY OF MT-WESTERN
	DILLON, MT 59725
Relationship of Donee:	NONE
Cash Amount Given:	\$ 36,000.

Statement 4
Form 990-EZ, Part III
Organization's Primary Exempt Purpose

EARNINGS PROVIDE FOR MAINTENANCE AND EQUIPMENT

Statement 5
Form 990-EZ, Part V
Regarding Transfers Associated with Personal Benefit Contracts

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	No
(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	No

Mary Baker Emerick Trust
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Cost

Part II. Line 22. Investments

Government Bonds

Fed Home Ln Bk	5.250% 6/18/2014	\$51,029
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Line 10b. Corporate Stock

	Shares	
Air Prods and Chemicals	180	\$9,598
Du Pont	345	6,760
Monsanto	50	4,061
Caterpillar Inc	200	13,673
Emerson Electric	400	13,188
General Electric	800	2,334
Honeywell Intl	362	10,318
United Technologies	300	19,830
3M Co	240	7,019
AT&T	658	19,029
Verizon	252	10,957
AOL Inc	12	339
Best Buy	100	3,791
Fortune Brands	140	2,918
Kohls	100	5,465
Lowes	350	10,479
McDonalds	225	6,371
McGraw Hill Companies	200	6,895
Nike	100	5,405
Target	325	13,269
Time Warner Cable	46	2,356
Time Warner Inc	133	4,677
VF Corp	50	2,758
Walt Disney	300	8,630
Coca Cola	175	9,481
Costco Wholesale	150	9,182
CVS/Caremark	375	13,612
McCormick & Co	125	3,634
Pepsico	275	4,206
Proctor & Gamble	355	11,576
Safeway Inc	350	11,147
Sysco Corp	455	12,935
Wal Mart Stores	100	5,674
Apache Corp	25	1,895
Chesapeake Energy	300	9,219
Chevron	235	10,215
ConocoPhillips	235	6,889
Exxon Mobil	425	1,481

Line 10b. Continued to next Page

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<u>Corporate Stock, continued</u>	<u>Shares</u>	Cost
Halliburton	350	\$11,351
Marathon Oil	225	11,679
Occidental Petroleum	75	5,769
Schlumberger LTD	150	13,980
American Express	300	2,654
Amerprise Financial	125	3,826
Bank New York Mellon	450	17,080
Bank of America	980	25,567
JP Morgan Chase	634	6,680
Metlife	280	9,667
Prudential Finl	100	4,269
State Street Corp	200	13,584
Travelers Companies	215	8,006
US Bancorp	544	6,305
Abbott Labs	400	17,867
Baxter Intl	100	5,232
Becton Dickinson	73	2,192
Bristol Myers Squibb	450	12,310
Johnson & Johnson	250	4,488
Medco Health Solutions	75	3,172
Medtronic Inc	325	15,390
Merck	350	16,499
Pfizer	587	14,412
TEVA Pharmaceutical	200	9,376
United Health Group	175	8,714
Apple Inc	50	6,297
Automatic Data Processing	200	8,887
Cisco Systems	795	21,001
Hewlett Packard	450	2,258
Intel Corp	840	19,280
Int'l Business Machines	200	20,134
Mastercard	25	4,190
Microsoft	915	25,573
Nokia Corp	415	7,241
Oracle Corporation	750	15,319
Symantec Corp	550	10,340
Texas Instruments	350	12,114
Dominion Res	224	8,774
Nextra Energy	200	7,477
PG&E Corp	150	6,223
Public Service Enterprise	150	<u>3,639</u>
		\$730,082

Investments continued to next page

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Cost

Line 10c. Corporate Bonds

Goldman Sachs	6.875% 01/15/2011	
Hewlett Packard	5.400% 03/01/2017	\$15,066
JP Morgan Chase	6.750% 02/01/2011	14,770
Jp Morgan Chase	4.750% 03/01/2015	26,614
Lowe's Companies	5.400% 10/15/2016	49,834
SBC Communications	6.250% 06/15/2011	24,824
		<u>51,250</u>
		\$182,358

<u>TOTAL INVESTMENTS</u>	\$963,469
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