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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements.

ОМЕ	No.	154	5-00!	52
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Fo	r cal	endar	year 2009, d	or tax year begin	ning	10,	/01 ,2009	, and end	ing		09/	30,2010
G	Che	ck all t	hat apply:	Initial return	n		of a former p				Final re	turn
				Amended r	eturn	Addre	ss change	Ι. Γ		lame change	_	
			Name of four	ndation				***		A Employer Identifi	cation num	ber
ι	Jse th	ne IRS										
	lab	el.	JOY SPIV	VA CRAGIN C	HARI'	TABLE TRUST				43-	636508	3
(Other	wise,				mail is not delivered to stree	t address)	Room/su	ite	B Telephone number (see		
	pri	int										
_	or ty		P.O. BOX	X 387						/31	4) 418	1-2643
	•	pecific ctions.		state, and ZIP cod	e	,				C if exemption applica-	tion is	<u> </u>
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			ST. LOUI	IS, MO 6316	6				l	2. Foreign organizat		
н	Che	ck type				(c)(3) exempt private f	oundation			85% test, check h	ere and attach	, <u> </u>
Ϊ	_			nexempt charitable		Other taxable pr		ion		computation •		
亡						unting method. X C		rual		E If private foundation		.
•			om Part II, coi			ther (specify)	C311 /\CC			under section 507(b		
	•	▶ \$	-			column (d) must be o	n cash basis.			F If the foundation is in under section 507(b		- 1 1
P				nue and Expense						ander addition bevilo		oursements
		total c	of amounts in a	columns (b), (c), and	d (d)	(a) Revenue and expenses per	(b) Net inve		(4	c) Adjusted net	for c	haritable
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For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

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Form 990-PF (2009)

43-6365083____ Page 2

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year Beginning of year End of year (b) Book Value (c) Fair Market Value (a) Book Value amounts only. (See instructions) 4,755 -35,307 -35,307.27,477. 66,586 66,586. Savings and temporary cash investments Accounts receivable J. adog 3 Less: allowance for doubtful accounts Pledges receivable 1 3/ 3 19/21 والأراطين والرا Less: allowance for doubtful accounts Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 16 of the instructions) Other notes and loans receivable (attach schedule) Less: allowance for doubtful accounts 122,695. 87,695 10 a Investments - U.S and state government obligations (attack school) 89,105. b Investments - corporate stock (attach schedule) . STMT .4. 354,908. 326,404 340,501. 129,085. 172,421 178,512 Investments - corporate bonds (attach schedule). STMT 6 11 Investments - land, buildings, and equipment basis 1957 Less. accumulated depreciation (attach schedule) 12 13 Land, buildings, and equipment: basis
Less. accumulated depreciation admir et a (attach schedule) Other assets (describe >_ Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I) 617,799 638,920 17 18 19 20 Loans from officers, directors, trustees, and other disqualified persons . 21 Mortgages and other notes payable (attach schedule) Other liabilities (describe 22 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here ▶ and complete lines 24 through 26 and lines 30 and 31. Balances 24 25 Temporarily restricted 26 Fund Foundations that do not follow SFAS 117. check here and complete lines 27 through 31. ▶ X 5 638,920 617,799 Capital stock, trust principal, or current funds 27 Assets 58 Paid-in or capital surplus, or land, bldg , and equipment fund Retained earnings, accumulated income, endowment, or other funds . . Total net assets or fund balances (see page 17 of the 30 Į. 638,920. 617,799 Total liabilities and net assets/fund balances (see page 17 638,920. 617,799 of the instructions) . . Part III Analysis of Changes in Net Assets or Fund Balances Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 638,920. -21,260. 2 Enter amount from Part I, line 27a 2 3 Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 139. 3 617.799. 4 Add lines 1, 2, and 3 4 Decreases not included in line 2 (itemize) ▶___ 5

6

617,799.

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

			(b) How	(c) Date	/-/\ D-41-
(a) List and 2-story br	acquired P-Purchase D-Donation	acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)		
a SEE PART IV DETA	ick warehouse; or common stock, 200 : IL	one was on,	D-Donation		
b					
<u> </u>	- -				
<u>d</u>					
<u>e </u>	<u> </u> 	(h) Gain or (lo	L		
(e) Gross sales price		(e) plus (f) minu			
a .					
b					
<u>c</u>					
<u>d</u>					
e Complete only for assets sho	wing gain in column (h) and owner	d by the foundation on 12/31/69		Gains (Col. (h) ga	ain minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis	(k) Excess of col. (i)		(k), but not less t	than -0-) or
(I) F.IVI.V. as OI 12/31/05	as of 12/31/69	over col. (j), if any		Losses (from co	ol. (h))
a			ļ		
b					
d d			-		
e					
Capital gain net income or	(not capital loss)	gain, also enter in Part I, line 7			
	("	(loss), enter -0- in Part I, line 7	2		-8,086.
	or (loss) as defined in sections 122 line 8, column (c) (see pages 13 an				
n nossi, enter -u- in Part I. li	ne 8		1311		
Part V Qualification Unifor optional use by domestic	der Section 4940(e) for Reduce private foundations subject to the	ced Tax on Net Investment Inc section 4940(a) tax on net investr	_	me.)	
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8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the		
	instructions) ►		,
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		,
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		l
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page	. 1	l
	27)7 If "Yes," complete Part XIV	9	
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	.	İ
	names and addresses	10	İ

Form 990-PF (2009)

X

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?

(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred compensation	other allowances
NONE		NONE	NONE	NONE
Total number of other employees paid over \$50,000 .				▶ NONE

Form 990-PF (2009)

and Contractors (continued)	
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none,	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	NONE
1012	1101111
otal number of others receiving over \$50,000 for professional services	▶ NONE
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1NONE	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see page 23 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1NONE	7.111.00711
2	
All other program-related investments. See page 24 of the instructions.	
3 NONE	
Total Add lines 1 through 3	
Total. Add lines 1 through 3 · · · · · · · · · · · · · · · · · ·	5 000 DE /000

Pa	see page 24 of the instructions.)	in toundation	s,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	71	
	purposes:	1 2	
а	Average monthly fair market value of securities	1a	618,828.
Ь	Average of monthly cash balances	1b	NONE
C	Fair market value of all other assets (see page 24 of the instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	618,828.
8	Reduction claimed for blockage or other factors reported on lines 1a and	3 - 2	
	1c (attach detailed explanation)	3 1	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3		3	618,828.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see page 25		
	of the instructions)	4	9,282.
5	of the instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	609,546.
6	Minimum investment return. Enter 5% of line 5	6	30,477.
Par	To the complete this provided in the complete this provided provided in the complete this provi		-
1	Minimum investment return from Part X, line 6	1	30,477.
2a	Tax on investment income for 2009 from Part VI, line 5	ř	
b	Income tax for 2009. (This does not include the tax from Part VI.) 2b	, , , , , , , , , , , , , , , , , , ,	
C	Add lines 2a and 2b	2c	248.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	30,229.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	30,229.
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	30,229.
Pa	rt XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	25,500.
Ь	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	NONE
Ь	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	25,500.
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	25,500.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating when calculating when calculating when the protection (1940/s) reduction of the in these years.	nether the foun	

Form 990-PF (2009)

Pai	t XIII Undistributed Income (see page	26 of the instructio	ns)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7	1 20	1 1 1 1 1	1 9	30,229.
2	Undistributed income, if any, as of the end of 2009	, , , , , , , , , , , , , , , , , , , ,		i diskla a sa	1 1 1
а	Enter amount for 2008 only			19,069.	
Ь	Total for prior years: 20 07 , 20, 20	la terminate	NONE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
3	Excess distributions carryover, if any, to 2009.		775 12 12 12 12 12 12 12 12 12 12 12 12 12 1	1 12	医温温度 医乳色素
а	From 2004 NONE				
b	From 2005 NONE	1 1 1 1 1 1 1 1 1 1 1			
C	From 2006 NONE			14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
d	From 2007 NONE				
8	From 2008 NONE	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
f	Total of lines 3a through e	NONE) ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;		, , , , ,
4	Qualifying distributions for 2009 from Part XII,		A		in the second
	line 4 [.] ▶ \$25,500.			a marani i	
a	Applied to 2008, but not more than line 2a	i transmission	11 1 1 1 2 mg 1 5	19,069.	2 1 1 1 2
Ь	Applied to undistributed income of prior years (Election	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			
	required-see page 26 of the instructions)	Marian San Carl	NONE	71 71 1	[10] [10] [10] [10] [10] [10] [10] [10]
C	Treated as distributions out of corpus (Election	170177			
	required - see page 26 of the instructions)	NONE			6 421
d	Applied to 2009 distributable amount	NON	The state of the s		6,431.
е _	Remaining amount distributed out of corpus	NONE		5 1 5 a	NONE
5	Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same	NONE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	* 4	<u>NONE</u>
	amount must be shown in column (a).)				
6	Enter the net total of each column as		STATE OF BEET		
	indicated below:	NONE	图1873年,198		
a	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	ILA STATE AND AT		7 7 7 7	
b	Prior years' undistributed income. Subtract line 4b from line 2b		NONE	4 3	
c	Enter the amount of prior years' undistributed			3 1 n	1 1 2 1 1
	income for which a notice of deficiency has been			50	
	issued, or on which the section 4942(a) tax has been previously assessed	A The second second second second second second second second second second second second second second second	NONE	1500 1800	
ч	Subtract line 6c from line 6b. Taxable			·····································	17 a 1 a 1 a 1
_	amount - see page 27 of the instructions	15 24 . 5	NONE		ñ .
e	Undistributed income for 2008. Subtract line	En State of the			1 3 3 1 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	4a from line 2a. Taxable amount - see page 27 of the instructions	1800 1 18 18 14 14 14	1		1 11 12
f	Undistributed income for 2009. Subtract lines	1 1			
•	4d and 5 from line 1. This amount must be				
_	distributed in 2010		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		23,798.
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			1 1404	, ' , ' , ' , ' 4
	instructions)	NONE			<u> </u>
8	Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the	,,,,,,,	ું અકું હીં કર	High 1	
	instructions)	NONE			* * * * * * * * * * * * * * * * * * * *
9	Excess distributions carryover to 2010.	MONT	100 100	And the second	
	Subtract lines 7 and 8 from line 6a	NONI	1 3 mm s 1 1	Fig. 1 States 1.	
10	Analysis of line 9:				
a	Excess from 2005 NONE Excess from 2006 NONE	[편점등장 # 17]		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
ь					
9		11.00			
d		\$ 50 \$.		7 5 11 4 1 9	
e	EXCESS From 2009 NONE	· · · ·		1.3	5 - 000 PE (0000)

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

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

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

Check here ► X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- The name, address, and telephone number of the person to whom applications should be addressed:
- b The form in which applications should be submitted and information and materials they should include:
- c Any submission deadlines:
- Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Form 990-PF (2009)			··· ·	Page 11
Part XV Supplementary Information (co	ntinued)	16 F		
3 Grants and Contributions Paid Durin	g the Year or Appr	oved for F		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
a raid daring the year				
SEE STATEMENT 18				
]		
•				
	1			24 750
b Approved for future payment	· · · · · · · · · · · · · · · · · · ·	· · · · · ·	▶ 3a	24,750.
a Approved for luture payment		ľ		
		<u> </u>		
Total			▶ 3b	

art XVI-A Analysis of Income-Produc	cing Activ	/ities	,		
er gross amounts unless otherwise indicated.	(a)	eted business income (b)	(c)	section 512, 513, or 514 (d)	(e) Related or exempt function income (See page 28 of
Program service revenue:	Business code	Amount	Exclusion code	Amount	(See page 28 of the instructions.)
a			<u> </u>		
ь		<u> </u>	ļ		
С					_
d					
e			-		
f				<u> </u>	
g Fees and contracts from government agencies		<u> </u>			
Membership dues and assessments					
Interest on savings and temporary cash investments			14	17,760.	
Dividends and interest from securities		3.50	14	17,700.	
a Debt-financed property		` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `		•	
b Not debt-financed property					-
Net rental income or (loss) from personal property					
Other investment income				<u> </u>	
Gain or (loss) from sales of assets other than inventory			18	-8,086.	_
Net income or (loss) from special events			 	0,000.	
Gross profit or (loss) from sales of inventory.			1		
Other revenue: a					
b					
- ' '					
· · · · · · · · · · · · · · · · · · ·					-
e Subtotal. Add columns (b), (d), and (e)			,	9,674.	
d	verify calcuto to the Ac	ulations.) complishment of Ex	empt Purp	oses 13	9,674
e 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 art XVI-B Relationship of Activities	verify calcute to the Act ty for whi	ulations.) complishment of Ex	empt Purp	ooses (e) of Part XVI-A con	9,674
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 act XVI-B Relationship of Activities ne No. Explain below how each activities the accomplishment of the form	verify calcute to the Act ty for whi	ulations.) complishment of Ex	empt Purp	ooses (e) of Part XVI-A con	9,674
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions on page 28 to art XVI-B Relationship of Activities ine No. Explain below how each activities the accomplishment of the form	verify calcute to the Act ty for whi	ulations.) complishment of Ex	empt Purp	ooses (e) of Part XVI-A con	9,674
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 tall tall tall tall tall tall tall t	verify calcute to the Act ty for whi	ulations.) complishment of Ex	empt Purp	ooses (e) of Part XVI-A con	9,67
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions on page 28 to art XVI-B Relationship of Activities ine No. Explain below how each activities the accomplishment of the form	verify calcute to the Act ty for whi	ulations.) complishment of Exch income is reported exempt purposes (o	empt Purp	ooses (e) of Part XVI-A con	9,67
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions on page 28 to art XVI-B Relationship of Activities ine No. Explain below how each activities the accomplishment of the form	verify calcute to the Act ty for whi	ulations.) complishment of Exch income is reported exempt purposes (o	empt Purp	ooses (e) of Part XVI-A con	9,67
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions on page 28 to art XVI-B Relationship of Activities ine No. Explain below how each activities the accomplishment of the form	verify calcute to the Act ty for whi	ulations.) complishment of Exch income is reported exempt purposes (o	empt Purp	ooses (e) of Part XVI-A con	9,674
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 act XVI-B Relationship of Activities ne No. Explain below how each activities the accomplishment of the form	verify calcute to the Act ty for whi	ulations.) complishment of Exch income is reported exempt purposes (o	empt Purp	ooses (e) of Part XVI-A con	9,67
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions on page 28 to art XVI-B Relationship of Activities ine No. Explain below how each activities the accomplishment of the form	verify calcute to the Act ty for whi	ulations.) complishment of Exch income is reported exempt purposes (o	empt Purp	ooses (e) of Part XVI-A con	9,67
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions on page 28 to art XVI-B Relationship of Activities ine No. Explain below how each activities the accomplishment of the form	verify calcute to the Act ty for whi	ulations.) complishment of Exch income is reported exempt purposes (o	empt Purp	ooses (e) of Part XVI-A con	9,67
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions on page 28 to art XVI-B Relationship of Activities ine No. Explain below how each activities the accomplishment of the form	verify calcute to the Act ty for whi	ulations.) complishment of Exch income is reported exempt purposes (o	empt Purp	ooses (e) of Part XVI-A con	9,67
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions on page 28 to art XVI-B Relationship of Activities ine No. Explain below how each activities the accomplishment of the form	verify calcute to the Act ty for whi	ulations.) complishment of Exch income is reported exempt purposes (o	empt Purp	ooses (e) of Part XVI-A con	9,674
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions on page 28 to art XVI-B Relationship of Activities ine No. Explain below how each activities the accomplishment of the form	verify calcute to the Act ty for whi	ulations.) complishment of Exch income is reported exempt purposes (o	empt Purp	ooses (e) of Part XVI-A con	9,674
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) we worksheet in line 13 instructions on page 28 to art XVI-B Relationship of Activities ine No. Explain below how each activities the accomplishment of the form	verify calcute to the Act ty for whi	ulations.) complishment of Exch income is reported exempt purposes (o	empt Purp	ooses (e) of Part XVI-A con	9,674

Form 990-PF (20					43-6365063		Page 13
Part XVII	Information Regarding Exempt Organizations	Transfers	To and	Transactions	and Relationships	With	Noncharitable

1	Did the	he organization directly stion 501(c) of the Co	or indirectly ode (other than	engage in any of the section 501(c)(3) organ	following w	ith any in sect	other orga ion 527, r	enization delating to	escribed political	1	Yes	No
а	organi: Transf	zations? ers from the reporting for	undation to a nor	ncharitable exempt organiza	ation of					' <u>.</u> '	,	- 1
	(1) Ca	nsh								1a(1)		<u>X</u>
	(2) Ot	her assets								1a(2)		X
Ь	Other 1	transactions:									a '	T.
				rganization						1b(1)		<u>X</u>
				cempt organization						1b(2)		X
				ets					· · · · ·	1b(3)		X
										1b(4) 1b(5)		<u>X</u>
				· · · · · · · · · · · · · · · · · · ·						1b(6)		<u>X</u>
			=	her assets, or paid employe						1c		<u> </u>
			-	Yes," complete the folio							fair r	
_		•		uces given by the repo	-							
		- :		gement, show in column	-							
		·										
(a) L	ine no.	(b) Amount involved	(c) Name of	noncharitable exempt organizat	ion (c	d) Descript	tion of transfe	rs, transactio	ns, and shar	ing arra	ngeme	nts
												
											-	
												<u> </u>
												
2a				ited with, or related to, o						\neg .	<u></u>	با
				501(c)(3)) or in section 527	7		• • • • •		l	٧,	es	X No
ь	It "Yes	s," complete the following (a) Name of organizatio		(b) Type of organ	ization			c) Descriptio	of relation	shin		
		10/ 140 TIC OT OTGERIZATIO	·· · · · · · · · · · · · · · · · · · ·	15/ Type or organi				-,				
				<u> </u>								
_												
	Under	penalties of perjury, I decl	are that I have ex	camined this return, including of preparer (other than taxpay	accompanying	g schedule	es and staten	nents, and to	the best o	of my k	nowled	ige and
	Deliti,	A A)	or property (other than taxpa)	,					0	,	ogo.
		John F. L	oose	 			/2010	TRUSTE	E			
j.	8	gnature of officer or trustee	U.S.	BANK NA	Da	te		Title				
Ŧ					Date		Check if		Preparer's number (S			n
Sign Here	, s' 5	Preparer's					self-employe	ed PL	page 30 of			
S	Paid reparer's Use Only	signature			<u>. </u>			EIN S				
	Paid Preparer's Use Only	Firm's name (or yours if self-employed), address						EIN ►				
		and ZIP code	, ,					Phone no.				
				 				. 110116 110.	F	orm 99	0-PF	(2009)

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

Kınd of P				ription		P	Date acquired	Date sold
Gross sale	Depreciation	Cost or	FMV	Adj. basis	Excess of	P	Gain	
price less expenses of sale	allowed/ allowable	other basis	as of 12/31/69	as of 12/31/69	FMV over adj basis	Ц	or (loss)	
10,876.00		200. I SHAR PROPERTY TY 16,683.00			ND E T F		10/08/2007 -5,807.00	10/06/2009
		1490.313 T	ROWE PRICE	TNTL GRAIN	C ADV		10/27/2005	10/06/2009
18,435.00		PROPERTY TY 20,000.00					-1,565.00	10,00,200
		378.65 T RO	WE PRICE S	M CAP VAL A	עת		01/13/2004	10/06/2009
10,682.00		PROPERTY TY 11,424.00					-742.00	10, 00, 2003
		1983.843 T			LUE CL A		01/13/2004	10/06/2009
39,102.00		PROPERTY TY 40,927.00	PE: SECURI	ries			-1,825.00	
		100. LOWES					03/22/2000	10/14/2009
2,168.00		PROPERTY TY 1,275.00	PE: SECURI	ries			893.00	
		100. WYETH					07/11/2003	10/14/2009
4,885.00		PROPERTY TY 4,783.00	PE: SECURI	TIES .			102.00	
		100. WYETH					07/11/2003	10/19/2009
5,039.00		PROPERTY TY 4,797.00	PE: SECURI	TIES			242.00	
9.00		.5 PFIZER I PROPERTY TY 9.00		TIES			10/15/2009	10/20/2009
		. AOL TIME			ATION			01/19/2010
19.00		PROPERTY TY	PE: SECURI	ries -			19.00	
		100. BECTON					03/30/2009	04/28/2010
7,645.00		PROPERTY TY 6,739.00	PE: SECURI	TIES			906.00	
35,000.00		35000. F N PROPERTY TY 35,000.00			5% 6/01		07/06/2005	06/01/2010

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

	Kind of Property		Description		P	Date	Date sold	
Gross sale	Depreciation	Cost or	FMV	Adj. basis	Excess of	D	acquired Gain	
price less expenses of sale	allowed/ allowable	other basis	as of 12/31/69	as of 12/31/69	FMV over adı basıs	1	or (loss)	
4,603.00		200. ORACLE PROPERTY TY 4,483.00					05/21/2008	06/21/2010
		200. WELLS		nt na			10/26/2005	06/21/2010
5,570.00		PROPERTY TY 5,998.00	PE: SECURIT	TIES			-428.00	
2.00		.2848 FRONT PROPERTY TY			RP		09/17/1998	07/12/2010
2.00		3.00					-1.00	
TOTAL GAIN(L	OSS)							
L							<u> </u>	1

FEES	
ACCOUNTING	
ı	Ï
PART I	
990PF,	
FORM	H H H H

CHARITABLE PURPOSES	750.
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	NONE
REVENUE AND EXPENSES PER BOOKS	750.
DESCRIPTION	TAX PREPARATION FEE (NON-ALLOC TOTALS

08764510

STATEMENT 1

~

STATEMENT

TAXES	11 13 11 11 11 13
1	Ш
	ii
\vdash	ii
	ij.
₽	H
RT	ii.
PAR	II
ρì	11
	13
-	Ш
990PF	11
Д	11
0	11
σ	11
σ	11
	П
Σ	H
OR P	II
O	Ш
14	11

NET INVESTMENT INCOME	1 1 2 1 1	92.	92.
REVENUE AND EXPENSES PER BOOKS	1 1 1 1 1 1 1 1	102.	194.
			TOTALS
DESCRIPTION	1 1 1 1 1 1 1 1 1 1 1 1	FEDERAL EXCISE TAXES FOREIGN TAXES PAID	

08764510

FORM 990PF, PART II - U.S. AND STATE OBLIGATIONS

. JOY SPIVA CRAGIN CHARITABLE TRUST

ENDING FMV	36,761.	25,289. 27,055.	89,105.
ENDING BOOK VALUE	35,869.	25,524.	87,695.
DESCRIPTION	FHLB DEB 4.875% 11/18/11	FNMA MTN 4.625% 6/01/10 FHLMC MTN 3.250% 2/25/11 FHLB DEB 4.50% 11/15/12	TOTALS

08764510

4

FORM 990PF, PART II - CORPORATE STOCK

JOY SPIVA CRAGIN CHARITABLE TRUST

ENDING ENDING BOOK VALUE FMV	6,711. 2,422. 2,449. 4,754. 8,391. 4,28. 6,179. 1,577. 3,310. 3,344. 2,705. 4,010. 6,644. 2,852. 1,256. 6,196.	7,393. 7,229. 2,763. 5,185. 4,258. 4,498. 3,986. 4,510. 2,529. 7,770.
EN BOOK		
DESCRIPTION	ALCOA INC GENERAL ELEC CO ILLINOIS TOOL WKS INC 3M CO APACHE CORP EXXON MOBIL CORP LOWE'S COS INC TARGET CORP COSTCO WSL CORP PEPSICO INC PROCTER & GAMBLE CO SYSCO CORP ABBOTT LABS	WYETH GOLDMAN SACHS GROUP INC WELLS FARGO & CO DUKE ENERGY CORP EXELON CORP FPL GROUP INC AT&T INC VERIZONS COMMUNICATIONS MOTOROLA INC QUALCOMM INC TEXAS INSTRUMENTS INC FIRST AMER REAL ESTATE SECS FD T ROWE PRICE INTL GR & INC ADV T ROWE PRICE MID CAP VALIE

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TRUST	
CHARITABLE	
CRAGIN (
SPIVA	
JOY	

43-6365083

FORM 990PF, PART II - CORPORATE STOCK		
DESCRIPTION	ENDING BOOK VALUE	ENDING FMV
T ROWE PRICE SMALL CAP VALUE I SHARES MSCI EAFE INDEX FD ALTRIA GROUP INC CISCO SYS INC INTEL CORP NIKE INC	78,373. 4,548. 3,276. 4,772. 6,594.	2.4.4.2.8.8.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0
BECTON DICKINSON & CO ECOLAB INC EMERSON ELEC CO	3,372.	5,0
GENERAL MILLS INC HEWLETT PACKARD CO JP MORGAN CHASE & CO	6,773. 3,179. 5,149.	4,7,7,6
OCCIDENTAL PETROLEUM CORP SCHLUMBERGER LID FRONTIER COMMUNICATIONS CORP	5,709. 4,143. 292.	
NEXTERA ENERGY INC PFIZER INC	3,190. 1,716.	5, T
×z	10,919. 10,300. 37,000. 28,000.	4 11 4 8 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9

55,909. 4,804. 2,190. 3,840. 8,014. 5,074. 7,308. 4,207. 7,612. 7,830. 6,161. 5,439. 1,691. 1,691. 9,945. 11,734. 30,506.

340,501.

326,404.

TOTALS

9

BONDS
CORPORATE
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PART
990PF.
ORM

. JOY SPIVA CRAGIN CHARITABLE TRUST

43-6365083

FORM 990PF, PART II - CORPORATE BONDS	
DESCRIPTION	ENDII BOOK VI
GENL ELEC 5% 12/1/10 WAL MART 4.125% 2/15/11 HONEYWELL INTL 4.250% 3/1/13 NIKE INC MTN 4.70% 10/1/13 CONOCOPHILLIPS 4.750% 2/1/14 BANK OF AMERICA 3.70% 9/1/15	
BARCLAYS BANK PLC 10/31/11	

TOTALS

ENDING FMV 	25,179. 25,341. 27,046. 27,220. 27,850. 25,257. 20,619.	178,512.
ENDING BOOK VALUE	25,312. 25,535. 25,883. 26,328. 26,027. 25,336.	172,421.

FORM	990PF,	PART	III -	OTHER	INCREASES	IN NET	' WORTH	OR	FUND	BALANCES
=====				======	-=======		======	===:	=====	=======

DESCRIPTION AMOUNT

COST ADJ 139.

TOTAL 139. _____ STATE(S) WHERE THE FOUNDATION IS REGISTERED

MO

JOY SPIVA CRAGIN CHARITABLE TRUST

43-6365083

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

OFFICER NAME:

US BANK NA

ADDRESS:

PO BOX 387

ST LOUIS, MO 63166

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

COMPENSATION

5,240.

TOTAL COMPENSATION:

5,240.

JOY SPIVA CRAGIN CHARITABLE TRUST 43-6365083 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: OSAGE PRAIRIE YMCA ADDRESS: 500 W HIGHLAND NEVADA, MO 64772 **RELATIONSHIP:** NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 1,500. RECIPIENT NAME: JOPLIN AREA CHAMBER OF COMMERCE FOUNDATION ADDRESS: 320 E 4TH STREET JOPLIN, MO 64801 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: OZARK CENTER AUTISM SCHOOL ADDRESS: PO BOX 2526 JOPLIN, MO 64803 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

PUBLIC

500.

JOY SPIVA CRAGIN CHARITABLE TRUST 43-6365083 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID _____ RECIPIENT NAME: NEVEDA HIGH SCHOOL SCHOLARSHIP FUND ADDRESS: 800 W HICKORY ST NEVADA, MO 64772 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC 500. AMOUNT OF GRANT PAID RECIPIENT NAME: ST LAURENCE EPISCOPAL CHURCH ADDRESS: PO BOX 361 CONIFER, CO 80433 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC 1,000. AMOUNT OF GRANT PAID RECIPIENT NAME: ST PHILIPS EPISCOPAL CHURCH ADDRESS: 706 BYERS AVE JOPLIN, MO 64801 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC

AMOUNT OF GRANT PAID

1,000.

RECIPIENT NAME:

TRINITY LUTHERAN CHURCH

OF NEVADA

ADDRESS:

1630 NORTH ASH STREET

NEVADA, MO 64772

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EXEMPT PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

TURNAROUND RANCH OZARK CENTER

ADDRESS:

PO BOX 2526

JOPLIN, MO 64803

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EXEMPT PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

VERNON COUNTY CANCER RELIEF FUND

ADDRESS:

1901 S SPRING

NEVADA, MO 64772

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EXEMPT PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

JOY SPIVA CRAGIN CHARITABLE TRUST	43-6365083
FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANT	S PAID
	=====
RECIPIENT NAME:	
YOUNG LIFE	
ADDRESS:	
PO BOX 814 JOPLIN, MO 64802	
RELATIONSHIP:	
NONE	
PURPOSE OF GRANT:	
EXEMPT PURPOSE	
FOUNDATION STATUS OF RECIPIENT:	
PUBLIC	
AMOUNT OF GRANT PAID	250.
RECIPIENT NAME:	
MOUNTAIN RESOURCE CENTER	
ADDRESS:	
PO BOX 425	
CONIFER, CO 80433 RELATIONSHIP:	
NONE	
PURPOSE OF GRANT:	
EXEMPT PURPOSE	
FOUNDATION STATUS OF RECIPIENT:	
PUBLIC	
AMOUNT OF GRANT PAID	1,000.
RECIPIENT NAME:	
CHILDRENS HAVEN OF SOUTHWEST	
MISSOURI	
ADDRESS:	
701 S PICHER	
JOPLIN, MO 64801 RELATIONSHIP:	
NONE	
PURPOSE OF GRANT:	
EXEMPT PURPOSE	
FOUNDATION STATUS OF RECIPIENT:	
PIRITC	

AMOUNT OF GRANT PAID

500.

JOY SPIVA CRAGIN CHARITABLE TRUST 43-6365083 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: SW MISSOURI AUDOBON CENTER ADDRESS: 210 W RIVIERA DR STE A JOPLIN, MO 64804 **RELATIONSHIP:** NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: MISSOURI SOUTHERN FOUNDATION ADDRESS: 3950 NEWMAN RD JOPLIN, MO 64801-1512 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 3,000. RECIPIENT NAME: LAFAYETTE HOUSE ADDRESS: PO BOX 1765 JOPLIN, MO 64802 **RELATIONSHIP:** NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC

AMOUNT OF GRANT PAID

2,000.

JOY SPIVA CRAGIN CHARITABLE TRUST 43-6365083 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: CROSSLINES CHURCHES OF JOPLIN ADDRESS: 131 S HIGH JOPLIN, MO 64801 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC 500. AMOUNT OF GRANT PAID RECIPIENT NAME: PRO MUSICA ADDRESS: 211 S MAIN ST STE 318 JOPLIN, MO 64801 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 500. RECIPIENT NAME: THOMAS JEFFERSON INDEPENDENT DAY SCHOOL ADDRESS: 3401 E NEWMAN RD JOPLIN, MO 64801 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC 1,000. AMOUNT OF GRANT PAID

JOY SPIVA CRAGIN CHARITABLE TRUST 43-6365083 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: COMMUNITY HEALTH CLINIC OF JOPLIN ADDRESS: 701 S JOPLIN AVENUE JOPLIN, MO 64801 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: CHILDRENS CENTER OF SW MISSOURI ADDRESS: 921 EAST 34TH STREET SUITE A JOPLIN, MO 64804 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 500. RECIPIENT NAME: SALVATION ARMY OF JOPLIN ADDRESS: 320 EAST 8TH ST PO BOX 1362 JOPLIN, MO 64802-1362 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC

AMOUNT OF GRANT PAID

500.

JOY SPIVA CRAGIN CHARITABLE TRUST 43-6365083 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: CEREBRAL PALSY OF TRI COUNTY ADDRESS: 1401 W AUSTIN WEBB CITY, MO 64870 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 500. RECIPIENT NAME: BOYS AND GIRLS CLUBS OF JOPLIN MO ADDRESS: PO BOX 819 JOPLIN, MO 64802-0819 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 500. RECIPIENT NAME: AMERICAN RED CROSS SOUTHWEST MISSOURI CHAPTER ADDRESS: 410 JACKSON JOPLIN, MO 64801 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 500. JOY SPIVA CRAGIN CHARITABLE TRUST 43-6365083 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: GEORGE A SPIVA CENTER FOR THE ARTS ADDRESS: 222 WEST 3RD JOPLIN, MO 64801 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 3,000. RECIPIENT NAME: CENTAUR RISING ADDRESS: 12889 S PARKER AVENUE PINE, CO 80470 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 500. TOTAL GRANTS PAID: 24,750. ==========

SCHEDULE D (Form 1041)

Capital Gains and Losses

Department of the Treasury Internal Revenue Service

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

2009

OMB No. 1545-0092

Name	of estate or trust	Employer identification number					
JOY SPIVA CRAGIN CHARITABLE TRUST							3
	: Form 5227 filers need to complete only Pa						···
Pari	Short-Term Capital Gains and Lo	sses - Assets	Held One Ye	ar or Less	1110		10.0: 11.14-
	(a) Description of property (Example: 100 shares 7% preferred of "Z" Co.)	(b) Date acquired (mo , day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other (see page 4 of instructions	the	(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a							
							
		<u> </u>			-		
		<u> </u>					
							·
b	Enter the short-term gain or (loss), if any, fr	om Schedule D-	1, line 1b			1b	NONE
2	Short-term capital gain or (loss) from Forms	s 4684, 6252, 6	781, and 8824	1		2	
3 4	Net short-term gain or (loss) from partnersh Short-term capital loss carryover. Enter the					3	
•	Carryover Worksheet			·		4	()
5	Net short-term gain or (loss). Combine lin	es 1a through 4	in column (f). E	Enter here and on li	ne 13,		
	column (3) on the back				<u> ▶</u>	5	NONE
Par	(a) Description of property (Example 100 shares 7% preferred of "Z" Co.)	(b) Date acquired (mo , day, yr)		(d) Sales price	(e) Cost or other (see page 4 of	the	(f) Gain or (loss) for the entire year
6a			,	<u></u>	instructions	5)	Subtract (e) from (d)
	-			_		: 	
b	Enter the long-term gain or (loss), if any, fro	om Schedule D-	I, line 6b			6b	-8,086
7	Long-term capital gain or (loss) from Forms	s 2439, 4684, 6	252, 6781, and	d 8824		7_	
8	Net long-term gain or (loss) from partnersh	ips, S corporatio	ns, and other e	estates or trusts		8	
9	Capital gain distributions					9	
10	Gain from Form 4797, Part I					10	
11	Long-term capital loss carryover. Enter the	amount, if any,	from line 14 of	the 2008 Capital L	oss		
12	Carryover Worksheet	s 6a through 11	in column (A			11)
	column (3) on the back					12	-8,086.
For F	aperwork Reduction Act Notice, see the Instruc					hedule	D (Form 1041) 2009

_	ule D (Form 1041) 2009		<u></u>			Page 2
Par	Summary of Parts I and II		(1) Beneficiaries'	(2) Es	_	(3) Total
	Caution: Read the instructions before completing this	T .	(see page 5)	or tru	JST S	
3		13				NONE
	Net long-term gain or (loss):	14a				-8,086.
h	Total for year	-				0,000.
	28% rate gain					
15	Total net gain or (loss). Combine lines 13 and 14a	15		·		-8,086.
Vote	: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Fo	rm 990				n (2), are net gains, go
	rt V, and do not complete Part IV. If line 15, column (3), is a net loss, complete F	Part IV	and the Capital Loss Ca	rryover Worl	k sheet, as	necessary.
_	Capital Loss Limitation		4 5			
	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, P				40 /	2 0001
a Jote	The loss on line 15, column (3) or b \$3,000	e 1. lu	ne 22 (or Form 990-T. I	ine 34), is a	loss, com	3,000)
arry	over Worksheet on page 7 of the instructions to figure your capital loss carryove	er.				
	Tax Computation Using Maximum Capital Gains Rate					
	1 1041 filers. Complete this part only if both lines 14a and 15 in colu			nount is er	ntered in	Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more ion: Skip this part and complete the worksheet on page 8 of the instruc					
	ther line 14b, col. (2) or line 14c, col. (2) is more than zero, or	LUUIIS	<i>.</i>			
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.					
orn	990-T trusts. Complete this part only if both lines 14a and 15 ar	e gair	ns, or qualified divid	ends are i	ncluded	in income in Part I
of Fo	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this pa	rt and	complete the work	sheet on p	page 8 o	f the instructions if
eithe	er line 14b, col. (2) or line 14c, col. (2) is more than zero.					
7	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34) .	17			
8	Enter the smaller of line 14a or 15 in column (2)		7 64			
	but not less than zero				1	
19	Enter the estate's or trust's qualified dividends		,		2.	
	from Form 1041, line 2b(2) (or enter the qualified				1	
	dividends included in income in Part I of Form 990-T) 19				25.00	
20	Add lines 18 and 19				11.5	
21	If the estate or trust is filing Form 4952, enter the		1			
	amount from line 4g; otherwise, enter -0 21					
22	Subtract line 21 from line 20. If zero or less, enter -0	• • •	22		-	
23	Subtract line 22 from line 17. If zero or less, enter -0	• • •	23		-	
24	Enter the smaller of the amount on line 17 or \$2,300		24		l	
25	Is the amount on line 23 equal to or more than the amount on line 24		24		-	
.5	Yes. Skip lines 25 and 26; go to line 27 and check the "No" box					
	No. Enter the amount from line 23		25		3.5	
26	Subtract line 25 from line 24		26		1	
27	Are the amounts on lines 22 and 26 the same?				1	
	Yes. Skip lines 27 thru 30; go to line 31. No. Enter the smaller of line 17 or li	ne 22	27			
					1 `	
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		. 28			
					1	
29	Subtract line 28 from line 27		29]	
30	Multiply line 29 by 15% (.15)				30	
31	Figure the tax on the amount on line 23. Use the 2009 Tax Rat					
	(see the Schedule G instructions in the instructions for Form 1041) .				31	
32	Add lines 30 and 31				32	
3	Figure the tax on the amount on line 17. Use the 2009 Tax Rat					
	(see the Schedule G instructions in the instructions for Form 1041)				33	
₹4	Tax on all taxable income. Enter the smaller of line 32 or line 33	horo o	and on Form 10/1	Sahadula		

G, line 1a (or Form 990-T, line 36)

Schedule D (Form 1041) 2009

SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D (Form 1041)

OMB No. 1545-0092

Employer identification number

2009

Department of the Treasury Internal Revenue Service Name of estate or trust

▶ See instructions for Schedule D (Form 1041). ▶ Attach to Schedule D to list additional transactions for lines 1a and 6a.

JOY SPIVA CRAGIN CHARITABLE TRUST 43-6365083 Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less (d) Sales price (see page 4 of the instructions) (e) Cost or other basis (see page 4 of the instructions) (c) Date sold (mo , day, yr.) (b) Date (f) Gain or (loss) (a) Description of property (Example 100 sh 7% preferred of "Z" Co.) acquired (mo., day, yr.) 1a .5 PFIZER INC 10/15/2009 10/20/2009 9.00 9.00 1b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 1b

Schedule D-1 (Form 1041) 2009

Schedule D-1 (Form 1041) 2009

Page 2

JOY SPIVA CRAGIN CHARITABL	•	yer identinication numbe	i ii shuwn on the other sid	43-63650	
Part II Long-Term Capital Gains and		Held More Tha	n One Year		
(a) Description of property (Example 100 sh. 7% preferred of "Z" Co)	(b) Date acquired (mo., day, yr)	(c) Date sold (mo., day, γr.)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
6a 200. I SHARES MSCI EAFE INDEX FUND E T F	10/08/2007	10/06/2009	10,876.00	16,683.00	-5,807.00
1490.313 T ROWE PRICE INTL GR&INC ADV	10/27/2005	10/06/2009	18,435.00	20,000.00	-1,565.00
378.65 T ROWE PRICE SM CAP VAL ADV	01/13/2004	10/06/2009	10,682.00	11,424.00	-742.00
1983.843 T ROWE PRICE MID CAP VALUE CL ADV	01/13/2004	10/06/2009	39,102.00	40,927.00	-1,825.00
100. LOWES CO INC	03/22/2000	10/14/2009	2,168.00	1,275.00	893.00
100. WYETH	07/11/2003	10/14/2009	4,885.00	4,783.00	102.00
100. WYETH . AOL TIME WARNER SECURITY	07/11/2003	10/19/2009	5,039.00	4,797.00	242.00
LITIGATION 100. BECTON DICKINSON AND		01/19/2010	19.00		19.00
CO 35000. F N M A M T N	03/30/2009	04/28/2010	7,645.00	6,739.00	906.00
4.625% 6/01/10 200. ORACLE CORPORATION	07/06/2005	06/01/2010	35,000.00	35,000.00	
200. WELLS FARGO CO	05/21/2008	06/21/2010	4,603.00	4,483.00	120.00
.2848 FRONTIER COMMUNICATI	10/26/2005	06/21/2010	5,570.00	5,998.00	-428.00
ONS CORP	09/17/1998	07/12/2010	2.00	3.00	-1.00
					
Sh Tatal Combine the amount is a live	(5) Energy bear 1	d on Cohedula D			0.006.55
6b Total. Combine the amounts in column	1 (I). Enter nere an	a on Schedule D, I	ine bb		-8,086.00 -1 (Form 1041) 2009