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990-PF

## Return of Private Foundation

OMB No 1545-0052

Fo	r ca	endar year 2010,	or tax year beg	inning			, 2010,	and endin	ng	, 2
G	Che	ck all that apply:	Initial retu	rn		Initial return	of a former p	ublic chari	ty	Final return
			Amended	return		Addre	ss change		Name change	
Na	me c	of foundation							A Employer identifi	ication number
			E HARRIS R				•		}	
_			JANNA ODDLI			STEES			04-	6820699
Νι	ımbe	r and street (or PO b	ox number if mail is n	ot delivere	ed to street a	ddress)		Room/suit	te B Telephone number (	see page 10 of the inst
		0/0 3/17	ANDTO DDIIO	T. GO.	100 551	ND31 00	2 5 5 5 5		1.50	
Cit	v or	C/O ATI	LANTIC TRUS'	r co .	TOO EFI	JERAL ST,	37TH	<u> </u>	C If exemption applica	7) 357-960
CII	y Ui	iown, state, and zir	code						pending, check here	'
		ВОСТОИ	MA 02110						D 1 Foreign organizat	
н	Che	ck type of organiz		on 501	Icl(3) exe	mnt private f	oundation		2 Foreign organizat 85% test, check h	nere and attach
Ϊ		ection 4947(a)(1) no					ivate foundat	ion	computation -	
i		market value of a	<del></del>			ethod: X C			E If private foundation	status was terminated
		ear (from Part II, c			ther (spec				_ F If the foundation is	
		•	910,147.				n cash basis )			o)(1)(B), check here .
P	art	Analysis of Revo			(a) Re	venue and	(I-A Manager		43.61	(d) Disbursem
			n columns (b), (c), and ly equal the amount		expe	enses per	(b) Net inve incom	1	(c) Adjusted net income	for charitable purposes
_			ge 11 of the instruc		t	ooks			<u> </u>	(cash basis of
	1	Contributions, gifts, grant	s, etc., received (attach so			50,000.	-			
	2	Check  attac	h Sch B							
	3	Interest on savings and	· ·			22 552		2 [[]		
	4	Dividends and inter				33,553.	3	3,553.		ST
		Gross rents					-			
		Net rental income or ( Net gain or (loss) from		line 10		216,257.			· · · · · · · · · · · · · · · · · · ·	<u> </u>
nge		Gross sales price for a				210,201.				
Revenue	7	assets on line 6a Capital gain net inc					21	6,257.		<u> </u>
ĕ	8	Net short-term capu	•	1						
	9	Income modificatio Gross sales less return								
	10 a	Gross sales less return and allowences	<u></u>	<b></b>						
		Less Cost of goods so		1	ļ					
		Gross.profflog (loss		. 1		12 027		4 100		
	11	Other income (attac		=	-	13,231. 313,041.		4,100.		ST
$\dashv$	12	Total Add lines Lt	prough 11 T · ·	1		313,041.	25	3,910.		_
	13 14	Other employee sal								
	15	Pension plans, emp	- · · · · · · · · · · · · · · · · ·							
Expenses		Legal fees (attach s		• • • •						
Ř		Accounting fees (at								
- 1		Other professional	•	何.3.		14,650.	1	0,988.		3
Administrative	17	Interest								
istr	18	Taxes (attach schedul	e) (see page 14 of the T	ATCuAs)		1,627.		759.		
Ē	19	Depreciation (attack	n schedule) and de	pletion .		_				
Adi	20	, ,			ļ					
ᅙ	21	Travel, conferences,								
-	22	Printing and publica				35.		2 102	<del></del> -	
Operating	23	Other expenses (att						3,193.		-
era	24					16,312.	1	4,940.		3
ဝ	25	Add lines 13 through Contributions, gifts,	=		<b> </b>	115,000.		1, 270		115
	26 26	Total expenses and disb				131,312.	1	4,940.		118
$\neg$	27	Subtract line 26 fro		. 0.10 20				_,,,,,,,		
		Excess of revenue over		ents		181,729.				
		Net investment inc					23	8,970.	***************************************	
		Adjusted net incon	·							
	. Don	erwork Reduction	Act Notice, see pag	re 30 of	the instruc	tions		JSA	61	Form 990-PF

FO	rm 990	PPF (2010)	<u> </u>		6820699		Page 2
Р	art II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year		nd o	f year
_		-	amounts only (See instructions )	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1		ng	11 410	40.4	0.0	40.406
	2		cash investments	11,419.	40,4	86.	40,486
i	3	Accounts receivable					
	_	Less allowance for doub	otful accounts			$\dashv$	
	4	Pledges receivable					
			otful accounts ►		- <del></del> -		
	5						
	6	Receivables due from	officers, directors, trustees, and other			İ	
			ach schedule) (see page 15 of the instructions)				
	7		eceivable (attach schedule)				
		Less allowance for doub	otful accounts				<u> </u>
s	8	Inventories for sale or us	se		. ,,		<u></u>
Assets	9	Prepaid expenses and d	eferred charges	.,.			
As			government obligations (attach schedule)				
				1,066,955.	1,111,8	05.	1,327,523
		Investments - corporate	bonds (attach schedule). STMT .7	146,125.	251,2	39.	260,047
	11	Investments - land, building and equipment basis	IS,			1	
		Less accumulated deprecia (attach schedule)	ation				
	12		loans				
	13	Investments - other (atta	ch schedule)	300,000.	300,0	00.	279,392
	14	Land, buildings, and					
		Less accumulated deprecia	tion CTMT 0				
	15	Other assets (describe	► STMT 9 )	3.	2,6	99	2,699
	16	Total assets (to be	completed by all filers - see the				
				1,524,502.	1,706,2	29	1,910,147
	17		ccrued expenses	1/021/001	27.0072		1/510/11/
	18						
ß							
ţį	20		rs, trustees, and other disqualified persons				
Liabilities	21		tes payable (attach schedule)				
Ë	22		e >)		<del></del>	$\dashv$	
	22	Other habilities (describe	· / <del>-</del>				
	23	Total liabilities (add line	s 17 through 22)				
_			ow SFAS 117, check here		<u>.</u>		
		and complete lines 2	4 through 26 and lines 30 and 31.				
s						- 1	
ances	24					-	
alar	25	lemporarily restricted					
ä	26						
Fund			not follow SFAS 117,			ŀ	
Œ			plete lines 27 through 31. ▶ X	1 504 500	1 706 0		
	27		ipal, or current funds	1,524,502.	1,706,2	29.	
ets	28		land, bldg, and equipment fund				
455	29	•	ated income, endowment, or other funds				
Net Assets	30	Total net assets or	fund balances (see page 17 of the				
ž				1,524,502.	1,706,2	29.	
	31	Total liabilities and ne	t assets/fund balances (see page 17				
			· · · · · · · · · · · · · · · · · · ·	1,524,502.	1,706,2	<u> 29.</u>	<u> </u>
			anges in Net Assets or Fund B				
1			alances at beginning of year - Part II			T	<del> = = = = = = = = = = = = = = = = </del>
	end⊣	of-year figure reported	on prior year's return)		. <b></b> L	1	1,524,502.
2	Ente	r amount from Part I, I	ine 27a			2	181,729.
3	Othe	r increases not include	ed in line 2 (itemize)			3	
4	Add	lines 1, 2, and 3				4	1,706,231.
5	Decr	eases not included in	line 2 (itemize) ▶ SEE STATI	EMENT 10		5	2.
6	Tota	net assets or fund ba	lances at end of year (line 4 minus line	5) - Part II, column (b), I	ine 30	6	1,706,229.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )				(b) How acquired P-Purchase D-Donation (mo , day, yr )		
1a SEE PART IV DETA			D-Donation	,,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
b						
С						
_d						
<u>е</u>				ļ		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini		
a						
_b			1			
<u>c</u>	<del></del>					
d				<del></del>		
e Complete actudes access at		h				
Complete only for assets s	howing gain in column (h) and owned	····		Gains (Col (h) ga (k), but not less t		
(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	COI	Losses (from co		
a					<del></del>	
_b						
<u>c</u>			ļ	·		
d e	····		<u> </u>			
If gain, also enter in Part I, I	(not capital loce)	nd 17 of the instructions).	2		216,257.	
	nder Section 4940(e) for Redu				······································	
	he section 4942 tax on the distrib ot qualify under section 4940(e)		ase perio	d?	Yes X No	
	unt in each column for each year;	<del> </del>	fore maki	ng any entries.		
(a)	(b)	(c)		(d)		
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col (b) divided by		
2009	139,686.	1,572,392.		0.088	883662598	
2008	136,000.	2,009,658.		0.067	67320609	
2007	163,348.	2,388,557.		0.068	338773368	
2006	105,958.	2,165,567.			392852542	
2005	342,904.	2,093,137.	ļ,	0.163	82300824	
<ul><li>2 Total of line 1, column (d)</li><li>3 Average distribution ratio</li></ul>	for the 5-year base period - divide t	the total on line 2 by 5, or by the	2	0.437	64909941	
	ation has been in existence if less		3	0.087	52981988	
4 Enter the net value of none	charitable-use assets for 2010 from	m Part X, line 5	4	1	,761,921.	
5 Multiply line 4 by line 3 .			5		154,221.	
6 Enter 1% of net investmen	t income (1% of Part I, line 27b)		6		0.200	
7 Add lines 5 and 6			1 1		2,390.	
8 Enter qualifying distributio			7		2,390. 156,611.	

8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

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 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page

instructions)

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4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . . . . b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010? .

Χ

2 Compensation of five highest-paid employees (other than those included on line 1 - see page 23 of the instructions).

(a) Name and address of each employee paid more than \$50,000

(b) Title, and average hours per week devoted to position

(c) Compensation

(d) Contributions to employee benefit plans and deferred compensation

(e) Expense account, other allowances

NONE

NONE

NONE

NONE

NONE

NONE

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Total number of other employees paid over \$50,000

3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If no	ne, enter "NONE.
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	NONE
	NONE
Fotal number of others receiving over \$50,000 for professional services	NONE
Part IX-A Summary of Direct Charitable Activities	NONE
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 24 of the instructions)	
Describe the two largest 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  3 NONE	
Total. Add lines 1 through 3	

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	gn foundatior	ıs,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:	<b>i</b>	
а	Average monthly fair market value of securities	1a	1,788,752.
b	Average of monthly cash balances	1b	NONE
C	Fair market value of all other assets (see page 25 of the instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	1,788,752.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3		3	1,788,752.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see page 25 of		
	the instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	4	26,831.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,761,921.
6	Minimum investment return. Enter 5% of line 5	6	88,096.
Pa	t XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privation foundations and certain foreign organizations check here ▶ and do not complete this process.	te operating	
1	Minimum investment return from Part X, line 6	1	88,096.
2 a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010 (This does not include the tax from Part VI.) 2b	]	
C	Add lines 2a and 2b	2c	4,779.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	83,317.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	83,317.
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	83,317.
Pa	t XII Qualifying Distributions (see page 25 of the instructions)		<u> </u>
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	118,663.
b	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
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	118,663.
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	118,663.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when cal qualifies for the section 4940(e) reduction of tax in those years	culating whetl	

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	t XIII Undistributed Income (see page	26 of the instruction	ns)		r age 3
		(a)	(b)	(c)	(d)
1	Distributable amount for 2010 from Part XI,	Corpus	Years prior to 2009	2009	2010
	line 7				83,317.
2	Undistributed income, if any, as of the end of 2010				
а	Enter amount for 2009 only			NONE	
b	Total for prior years 20 <u>08</u> , 20, 20		NONE		
3	Excess distributions carryover, if any, to 2010				
а	From 2005				
b	From 2006 5,411.				
	From 2007				
d	From 2008				
е	From 2009				
f	Total of lines 3a through e	395,944.			
4	Qualifying distributions for 2010 from Part XII,				
	line 4 ▶ \$ 118,663.				
а	Applied to 2009, but not more than line 2a	········		NONE	
b	Applied to undistributed income of prior years (Election				
	required - see page 26 of the instructions)		NONE		
С	Treated as distributions out of corpus (Election				
	required - see page 26 of the instructions)	NONE			
d	Applied to 2010 distributable amount				83,317.
e	Remaining amount distributed out of corpus	35,346.			
5	Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same	NONE			NONE
	amount must be shown in column (a) )				
6	Enter the net total of each column as				
	indicated below:	431 300			
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	431,290.			
b	Prior years' undistributed income Subtract		NONE	}	
	line 4b from line 2b  Enter the amount of prior years' undistributed		INOINE		
•	income for which a notice of deficiency has been	1			
	issued, or on which the section 4942(a) tax has		NONE		
	been previously assessed		NOIVL		
d	Subtract line 6c from line 6b Taxable amount - see page 27 of the instructions		NONE		
е	Undistributed income for 2009 Subtract line		110112		
	4a from line 2a Taxable amount - see page			NONE	
	27 of the instructions			1,02,12	
f	Undistributed income for 2010 Subtract lines 4d and 5 from line 1 This amount must be				
	distributed in 2011				NONE
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)	NONE			
8	Excess distributions carryover from 2005 not				
	applied on line 5 or line 7 (see page 27 of the instructions)	241,443.			
9	Excess distributions carryover to 2011.				
	Subtract lines 7 and 8 from line 6a	189,847.			
10	Analysis of line 9				
а	Excess from 2006 5,411.				
b	Excess from 2007 54,164.				
С	Excess from 2008 35,634.				
	Excess from 2009				
e	Excess from 2010 35,346.				
					Form 990-PF (2010)

Form	1 990-PF (2010)			04-682	20699		Page 10
Pai	Part XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9) NOT APPLICABLE						
1 a	If the foundation has	received a ruling or d	etermination letter that	it is a private operating	9		
	foundation, and the ruling	ıs effective for 2010, en	ter the date of the ruling		<b>&gt;</b>		
b	Check box to indicate whi				4942()	(3) or	4942(j)(5)
_		Tax year	<u> </u>	Prior 3 years			
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e)	Total
	for the minimum investment		(0) 2000	(0) 2000	(4) 2007	<u> </u>	
	return from Part X for each						
_	year listed			-	<del></del>	<del></del>	
b	85% of line 2a						
C	Qualifying distributions from Part						
	XII, line 4 for each year listed .		· · ·				
d	Amounts included in line 2c not used directly for active conduct						
	of exempt activities						
е	Qualifying distributions made						
	directly for active conduct of exempt activities Subtract line						
	2d from line 2c						
3	Complete 3a, b, or c for the						
а	"Assets" alternative test - enter					1	
	(1) Value of all assets					1	
	(2) Value of assets qualifying						
	under section 4942(j)(3)(B)(i)						
b	"Endowment" alternative test						
	enter 2/3 of minimum invest						
	ment return shown in Part X, line 6 for each year listed						
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)				<del></del>	<b></b>	
	public and 5 or more						
	exempt organizations as provided in section 4942					1	
	(j)(3)(B)(m)					<u> </u>	
	(3) Largest amount of sup- port from an exempt					1	
	organization					<u> </u>	
	(4) Gross investment income	1.6				<u></u>	<del> </del>
Pa			omplete this part e page 28 of the ins	only if the foundation	on had \$5,000	or more	in assets
_				structions.)	· · · · · · · · · · · · · · · · · · ·		
1	Information Regarding						
а				than 2% of the total concrethan \$5,000). (See		a by the	toundation
	•	tox your tout only it to	icy navo continuated in	1010 ιπαπ ψο,σσο). (σσο :	section sortants,		
	NONE						
b				the stock of a corporat		large por	tion of the
	, , , , , , , , , , , , , , , , , , ,	ship or other entity) of	f which the foundation	has a 10% or greater int	erest.		
	NONE						
	1.6	0	014 1 011				
2	Information Regarding			<del>-</del>			
	Check here ► X If t	he foundation only i	makes contributions	o preselected charitabl	e organizations ai	nd does r	not accept
				rants, etc. (see page 28	3 of the instructio	ns) to ind	ividuals or
	organizations under ot	her conditions, comple	ete items 2a, b, c, and	a 			<u></u>
a	The name, address, an	d telephone number o	f the person to whom	applications should be a	ddressed:		
b	The form in which app	lications should be sul	omitted and information	n and materials they sho	uld include		
	•			•			
С	Any submission deadli	nes <sup>-</sup>					
	,						
Ч	Any restrictions or h	mitations on awards	such as by geogra	phical areas, charitable	fields kinds of i	nstitutions	or other
<b>J</b>	factors.	uvuidi	30 b, googia	sar arodo, chantable			, or other

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Pa	t XV Supplementary Information (	continued)			
_3	Grants and Contributions Paid Durin	g the Year or Appr	oved for F	uture Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	contribution	
а	Paid during the year				
	SEE STATEMENT 19		1		
			1		
			}		
			1		
			ļ		
			ŀ		
_	T-A-1	<u> </u>		L	115 000
b	Approved for future payment		i · · · · ·		115,000.
	, , , , , , , , , , , , , , , , , , ,				
				<u> </u>	
	Total			▶ 3b	
		<del></del>	<u> </u>	- · · · · · · · · · · · · · · · · · · ·	1

Part XVI-	A Analysis of Income-Produ	cing Activ	rities			
Enter gross	amounts unless otherwise indicated	Unrela	ited business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
1 Program	n service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of the instructions)
-		-			<del></del>	
			<del></del>	<del> </del>		<del></del>
			<del></del>	<del> </del>		
				<del> </del>		
					-	
f			<del></del>			
-	and contracts from government agencies rship dues and assessments					
			<u> </u>	<u> </u>		
	on savings and temporary cash investments ds and interest from securities			14	33,553.	
	al income or (loss) from real estate			1 1 1	33,333.	<del></del>
	· · ·			-		<del></del>
	-financed property			<u> </u>		<del></del>
	Il income or (loss) from personal property					
				-		
	vestment income	l	<u></u>	18	216,257.	
	oss) from sales of assets other than inventory			10	210,237.	
	ome or (loss) from special events					
•	rofit or (loss) from sales of inventory					
_	evenue a					
				<del> </del>		<del></del>
				<del>  - · - · - · - · - · · · · · · · · · · </del>	<u> </u>	
e					240 010	·
	Add columns (b), (d), and (e)			ŀ	249,810.	249,810.
	dd line 12, columns (b), (d), and (e)			• • • • • •	13	249,810.
	Relationship of Activities			omnt Durn		<u> </u>
Line No ▼	Explain below how each activit accomplishment of the foundations (instructions)					
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Part	XVII	Information Exempt Orga		ansfers To and 1	<b>Transactions</b>	and Relationship	s With N	onci	narit	able
11		on 501(c) of the Co			<del>-</del>	any other organization section 527, relating	- 1		Yes	No
аT	ransfer	s from the reporting fo	undation to a nonc	haritable exempt organiz	ation of					İ
t	1) Casi	٠					[	<u>1a(1)</u>		_X
(:	2) Othe	er assets						1a(2)		X
		ansactions								
								1b(1)		X
										<u>X</u>
							1	- 1		X
							1			X
									_	X
										X
						Column (b) should a		1c	four r	
					=	n If the foundation re	•			
		_			_	e of the goods, other				
(a) Line	1 1	(b) Amount involved	1	ncharitable exempt organiza		escription of transfers, transac				
		<del> </del>								
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d	lescribe	·	the Code (other the			more tax-exempt organi	_	Ye	s Z	No.
		(a) Name of organizatio	n	(b) Type of organ	ization	(c) Descrip	tion of relationsh	пр		
									_	
	_	·								
		··				<u> </u>	<del></del> -			
Sign Here	Unde belief	and correct, and correct, and cor	mplet Declaration o	ramped this return, includir i reparer (other than taxpay	er or fiduciary) is b	schedules and statements, and ased on all information of which	d to the best of ch preparer has a	my kr	nowledg	ge and
	1 2	phature of officer or truste		J. Dranger de c	Date	▼ Title	T ==	TIRL		
		Print/Type preparer's	name	Preparer's signature		Date		TIN		
Paid		SHERRY L WATS	SON	Shern	1 L. U	<i>)</i>	lecklf lf-employed P	004	0828	<u> 39</u>
Prepa					AN YNA	Firm's E				
Use (	Uniy	Firm's address ▶ 11	.270 WEST PA	ARK PLACE						

53224

Phone no 414-815-3500

MILWAUKEE,

### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

OMB No 1545-0047

Name of the organization		Employer identification number					
MADIODIE UADDIC DEVNOII	DC EDM	04 6920609					
MARJORIE HARRIS REYNOLI Organization type (check one):	DS FDN .	04-6820699					
Filers of:	Section:						
Form 990 or 990-EZ	501(c)( ) (enter number) organization						
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private four	ndation					
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundate	ion					
	501(c)(3) taxable private foundation						
Note. Only a section 501(c)(7), (8), instructions	ed by the <b>General Rule</b> or a <b>Special Rule</b> . , or (10) organization can check boxes for both the General Rule and a S	Special Rule. See					
General Rule							
<del></del>	Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or contributor. Complete Parts I and II	r more (in money or					
Special Rules							
sections 509(a)(1) and 1	organization filing Form 990 or 990-EZ that met the 331/3% support test 70(b)(1)(A)(vi), and received from any one contributor, during the year, (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-	a contribution of the					
the year, aggregate cont	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III						
the year, contributions for aggregate to more than year for an exclusively reapplies to this organization.	(8), or (10) organization filing Form 990 or 990-EZ that received from an or use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions that we stigious, charitable, etc., purpose. Do not complete any of the parts unless on because it received nonexclusively religious, charitable, etc., contributions.	ributions did not ere received during the es the <b>General Rule</b> utions of \$5,000 or more					
Caution An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)							

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

			<u>                                     </u>
(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution )
(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	Name, address, and 211 + 4	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
5A		Schedule B	(Form 990, 990-EZ, or 990-PF) (2010

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

Kind of Pi		INS AND LO		ription		P or Date D acquired		Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other	FMV as of	Adj basis as of	Excess of FMV over	ט	Gain or	
expenses of sale	allowable	TOTAL LONG-	L 12/31/69 TERM CAPITA	L 12/31/69 AL GAIN DIV	<u>adi basis</u> IDENDS		(loss) 756.	
60,000.00		2570.694 AS' PROPERTY TY 56,716.00			GTH FD		VAR 3,284.00	03/30/2010
50,000.00		2287.283 AS' PROPERTY TY 34,812.00			GTH FD		02/27/2009 15,188.00	08/02/2010
62,000.00		2675.874 AS' PROPERTY TY 40,727.00			GTH FD		02/27/2009	10/26/2010
1,648.00		68.444 ASTO PROPERTY TY 1,554.00			TH FD CL		12/29/2009	12/09/2010
137,535.00		5711.604 AS' PROPERTY TY 86,931.00			GTH FD		02/27/2009	12/09/2010
10,000.00		1109.878 IN PROPERTY TY 9,465.00			ITY FD C		VAR 535.00	01/25/2010
140,000.00		14583.333 IX PROPERTY TY 86,771.00			JITY FD		02/27/2009	03/30/2010
5,000.00		520.291 INV PROPERTY TY 4,355.00			TY FD CL		08/21/2009	10/26/2010
5,000.00		431.034 BOS' PROPERTY TY 4,232.00			JND		VAR 768.00	03/30/2010
17,000.00		1475.694 BO PROPERTY TY 14,477.00			FUND		08/21/2009	08/02/2010

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

Kınd of P		NS AND LO	Descri			Р 01	Date	Date sold
Gross sale	Depreciation	Cost or	FMV	Adj basis	Excess of	ᄆᆛ	acquired Gain	
price less	allowed/	other	as of	as of	FMV over		or	
expenses of sale	allowable	basis	12/31/69	12/31/69	adı basıs	┸	(loss)	
		427 25 CDM	MID CAD WAT	HE ED INCO	TOTTOTA		02/00/2007	12/00/201
		427.35 CRM PROPERTY TY			ANOTIUII		03/09/2007	12/09/201
12,000.00		13,205.00	PE: SECURII	160		ĺ	-1,205.00	
12,000.00		15,205.00					1,203.00	
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OTAL GAIN(L	OSS)						216,257.	
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- DIVIDENDS AND INTEREST FROM SECURITIES FORM 990PF, PART I

NET INVESTMENT INCOME	4,400. 1,137. 2,139. 2,139. 2,282. 2,563. 1,281. 2,244. 2,244. 2,244. 2,244. 3,985. 2,244. 1,71.
REVENUE AND EXPENSES PER BOOKS	4,400. 1,137. 2,139. 2,139. 2,823. 2,563. 1,281. 2,61. 2,244. 2,244. 2,244. 2,244. 2,244. 2,131. 3,985. 2,731. 2,131. 1,131.
DESCRIPTION	INVESCO DISCIPLINED EQUITY FD CL Y #8542 BERKSHIRE HATHAWAY FIN CORP SR NT 4.625% BOSTON TRUST SMALL CAP FUND DREYFUS EMERGING MARKETS DEBT LOCAL CURR DU PONT E I DE NEMOURS & CO NT 5.25% DTD ABSOLUTE STRATEGIES FUND CLASS I GENERAL HOME LN MTG CORP DEB 5.125% DTD ABSOLUTE STRATEGIES FUND CLASS I GENERAL ELEC CO NT 5.25% DTD 12/06/2007 GOLDMAN SACHS GROUP INC 5.125% DTD 01/12 HARBOR INTERNATIONAL FD JPMORGAN CHASE & CO ALERIAN MLP INDEX ET LAZARD EMERGING MARKETS PORTFOLIO - IN # MAINSTAY EPOCH GLOBAL EQUITY YIELD FUND MATTHEWS PACIFIC TIGER FD CL I PIMCO COMMODITY REALRETURN STRATEGY FD I RIDGEWORTH CLASSIC SEIX FLOATING RATE HI INVESCO SHORT TERM LIQUID ASSET FUND US TREASURY NOTE 4.750% DTD 05/15/04 DUE VODAFONE AIRTOUCH PLC NT 7.75% DTD 10/15 CRM MID CAP VALUE FD INSTITUTIONAL

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

Kınd of P		INS AND LO		ription		P	Date acquired	Date sold
Gross sale price less	Depreciation allowed/	Cost or other	FMV as of	Adj basis as of	Excess of FMV over	ľ	Gain or	
expenses of sale	allowable	1094.605 BO			adı basis		(loss) 08/21/2009	12/09/2010
14,000.00		10,738.00 2302.861 DR			S DEBT L		3,262.00 03/30/2010	12/09/2010
33,000.00		PROPERTY TY: 31,941.00	PE: SECURIT	TIES .			1,059.00	
7,500.00		141.297 HARI PROPERTY TY 8,728.00					03/09/2007 -1,228.00	01/25/2010
,		3099.927 HAI					VAR	08/02/2010
170,000.00		126,140.00	il. Olconi	. 1			43,860.00	
		201.511 HARI PROPERTY TY					08/21/2009	10/26/2010
12,000.00		10,065.00	il. blecki	1100			1,935.00	
20,018.00		571. JPMORGA PROPERTY TYN 18,908.00			MLP IND		VAR 1,110.00	10/26/2010
41,000.00		1153. JPMORO PROPERTY TY			N MLP IN		03/30/2010 6,168.00	12/09/2010
5,000.00		282.008 LAZZ PROPERTY TY 4,778.00			PORTFOLI		VAR 222.00	01/25/2010
2,000.00		93.457 LAZAJ PROPERTY TY 1,514.00			RTFOLIO		08/21/2009 486.00	12/09/2010
30,000.00		2373.418 MAI PROPERTY TY 25,348.00			1ESSQUAR		08/21/2009 4,652.00	03/30/2010
		2809.415 MAI PROPERTY TY			1ESSQUAR		08/21/2009	10/26/2010
37,000.00		30,005.00					6,995.00	

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

<u> </u>	PITAL GAI	NS AND LO	SSES FOR	R TAX ON	INVEST	N	ENT INCOM	E
Kind of P	· · ·			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)	
		, , , , , , , , , , , , , , , , , , ,		11/11/11/11		П		
		429.799 MAN			ESSQUARE		08/21/2009	12/09/2010
6,000.00		PROPERTY TY 4,590.00	PE: SECURI'	les.			1,410.00	
		134.989 MAT			D CL I		VAR	01/25/2010
2,500.00		PROPERTY TY 2,328.00	PE: SECURIT	TES			172.00	
		1766.953 MA			FD CL I		VAR	08/02/2010
37,000.00		PROPERTY TY 31,943.00	PE: SECURIT	TES			5,057.00	
		339.271 MAT PROPERTY TY			D CL I		08/21/2009	10/26/2010
8,000.00		5,686.00					2,314.00	
		3420.753 PI PROPERTY TY			URN STRA		VAR	10/26/2010
30,000.00		26,077.00	ii. oleeni	.110			3,923.00	
		335.946 PIM			RN STRAT		08/21/2009	12/09/2010
3,000.00		2,560.00	PE: SECURI	TEO (			440.00	
		2247.191 RI PROPERTY TY			FLOATIN		10/26/2010	12/09/2010
20,000.00		19,933.00	ru. blecki	. 110			67.00	
		25000. VODA PROPERTY TY			7.75% DT		04/07/2004	02/15/2010
25,000.00		29,708.00					-4,708.00	
		900.196 CRM PROPERTY TY			TITUTION		03/09/2007	03/30/2010
23,000.00		27,816.00		. 120			-4,816.00	
		565.885 CRM			TITUTION		03/09/2007	08/02/2010
14,000.00		17,486.00	rs. BBCORT	. 1155			-3,486.00	
		75.443 CRM PROPERTY TY			ITUTIONA		03/09/2007	10/26/2010
2,000.00		2,331.00	ID. BECKI	.110			-331.00	
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FORM 990PF, PART I - OTHER INCOME	

NET INVESTMENT INCOME	 	4,100.	4,100.
REVENUE AND EXPENSES PER BOOKS	1 1 1 1 1 1 1	13,231.	13,231.
			TOTALS
DESCRIPTION	,	PARTNERSHIP REBATE AND REFUNDS HATTERAS MULTI-STRATEGY	

CHARITABLE PURPOSES		. 505, 2	3,663.	
NET INVESTMENT INCOME			10,988.	
REVENUE AND EXPENSES PER BOOKS	C L L L L L L L L L L L L L L L L L L L	. 050, 4.	14,650.	
SCRIPTI	אמדבאידמת המחמת תהשונהמצים/ ממשפוומת אמדבאידמת המחמת מהשונהמצים/	IROSIEE/EAECOIOR FEES-PRINCIPA	TOTALS	

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FORM 990PF, PART I - TAXES

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NET INVESTMENT INCOME	714.	759.
REVENUE AND EXPENSES PER BOOKS	600. 268. 714.	1,627.
DESCRIPTION	FEDERAL TAX PAYMENT - PRIOR YE FEDERAL ESTIMATES - INCOME FOREIGN TAXES ON QUALIFIED FOR FOREIGN TAXES ON NONQUALIFIED	TOTALS

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04-6820699

FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION

1 1 1 1 REVENUE AND EXPENSES PER BOOKS

NET INVESTMENT INCOME

FORM PC FILING REQUIREMENTS HATTERAS MULTI-STRATEGY

3,193.

35.

TOTALS

35. 

3,193.

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CORPORATE	
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DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV
ABSOLUTE STRATEGIES FUND CLASS AIM DISCIPLINED EQUITY FD CL Y ASTON MONTAG & CALDWELL GTH FD	215,803.	94,000.	94,945.
		22,062.	28,950.
HARBOR FD INTL FD INST	174,146.	146,675.	3,56
LAZARD EMERGING MARKEST PORTFO MANAGERS AMG FINDS - TIMESSOHA	77,152.	107,795.	134,786.
MATTHEWS PACIFIC TIGER FD CL I	65,566.	59,797.	, 22
PIMCO COMMODITY REALRETURN STR	42,553.	80,669.	8,3
INVESCO DISCIPLINED EQUITY FD		393,612.	1,02
JPMORGAN CHASE & CO ALERIAN ML		47,883.	57,615.
MAINSTAY EPOCH GLOBAL EQUITY Y		.000,	56,610.
TOTALS	1,066,955.	1,111,805.	1,327,523.

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04-6820699

FORM 990PF, PART II - CORPORATE BONDS

ENDING ENDING BOOK VALUE FMV	53,417. 57,114. 51,464. 53,475. 24,432. 26,860. 15,422. 16,757. 16,532. 16,289. 17,391. 16,778. 16,514. 16,201. 56,067. 56,573.
BEGINNING BOOK VALUE 	25,099. 51,464. 24,432. 15,422. 29,708. 146,125.
DESCRIPTION	DREYFUS EMERGING MARKETS DEBT FEDERAL HOME LN MTG 5.125 GOLDMAN SACHS GROUP INC 5.125% US TREASURY NOTE 4.750% VODAFONE AIRTOUCH PLC NT 7.75% BERKSHIRE HATHAWAY FIN CORP SR DU PONT E I DE NEMOURS & CO NT GENERAL ELEC CO NT 5.25% RIDGEWORTH CLASSIC SEIX FLOATI

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	COST/			
	FMV	BEGINNING	ENDING	ENDING
DESCRIPTION	CORF	BOOK VALUE	BOOK VALUE	FMV
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HATTERAS MULTI-STRATEGY TEI	Ũ	300,000.	300,000.	279,392.
TOTALS	ALS	300,000.	300,000.	279,392.

300,000.

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04-6820699

ENDING FMV 	2,699.
ENDING BOOK VALUE	2,699.
BEGINNING BOOK VALUE	
	TOTALS
DESCRIPTION	ACCRUED INCOME

FORM 990PF,	PART	III	- OTH	ER DECRE	CASES IN	NET	WORTH	OR	FUND	BALAN	CES
========	=====	====	=====	======	=====	====		====	: <b>::</b> = = = :	=====	===
DESCRIPTION										A	MOUNT
										-	
ROUNDING											2.
					TOTAL						2.
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STATE(S) WHERE THE FOUNDATION IS REGISTERED MA

990PF, PART VII-B LINE 2b - SECTION 4942a2 EXPLANATION STATEMENT

N/A

. . . . . .

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

OFFICER NAME:

ERIC ODDLEIFSON

ADDRESS:

25 RIVER ROAD

COHASSET, MA 02025

TITLE:

CO-TRUSTEE, AS REQUIRED

OFFICER NAME:

JANNA ODDLEIFSON

ADDRESS:

25 RIVER ROAD

COHASSET, MA 02025

TITLE:

CO-TRUSTEE, AS REQUIRED

MARJORIE HARRIS REYNOLDS FDN . 04-6820699 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

FIRST CHURCH OF CHRIST,

SCIENTIST

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

GENERAL CHARITABLE PURPOSES

FOUNDATION STATUS OF RECIPIENT:

N/A

RECIPIENT NAME:

FRIENDS OF WOMPATUCK

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

N/A

RECIPIENT NAME:

PARTNERS IN HOPE FOR HAITIAN RELIEF

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL CHARITABLE PURPOSES

RECIPIENT NAME:

STRONG KIDS CAMPAIGN

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE PURPOSES

FOUNDATION STATUS OF RECIPIENT:

N/A

 MARJORIE HARRIS REYNOLDS FDN 04-6820699 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: GREENHILLS SCHOOL RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE PURPOSES FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 1,000. RECIPIENT NAME: OZONE HOUSE RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE PURPOSE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 2,000. RECIPIENT NAME: THE CENTER FOR POLICY STUDIES RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE PURPOSE FOUNDATION STATUS OF RECIPIENT: N/A AMOUNT OF GRANT PAID ..... 20,000.

RECIPIENT NAME:

MANOMET CENTER FOR CONSERVATION/SCI

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

CHARITABLE PURPOSES

FOUNDATION STATUS OF RECIPIENT:

N/A

AMOUNT OF GRANT PAID .....

RECIPIENT NAME:
VENDANTA CENTER
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
N/A

RECIPIENT NAME:

MAINE HANDICAPPED SKIING
RELATIONSHIP:

NONE
PURPOSE OF GRANT:
GENERAL CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
N/A

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

RECIPIENT NAME:
COLLEGE BOUND
RELATIONSHIP:
NONE
PURPOSE OF GRANT:
GENERAL CHARITABLE
FOUNDATION STATUS OF RECIPIENT:
N/A
AMOUNT OF GRANT DAID

6,000.

\_\_\_\_\_\_

RECIPIENT NAME:

OBERLIN COLLEGE

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

GENERAL CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID ..... 9,500.

RECIPIENT NAME:

OPERA HOUSE ARTS

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

GENERAL CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID ..... 500.

RECIPIENT NAME:

THE THOMAS CRANE PUBLIC LIBRARY

**RELATIONSHIP:** 

NONE

PURPOSE OF GRANT:

GENERAL CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

N/A

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

RECIPIENT NAME:

SOUTH SHORE HOSPITAL

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

N/A

AMOUNT OF GRANT PAID ..... 20,000.

RECIPIENT NAME:

MAKE A WISH FOUNDATION

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL CHARITABLE

FOUNDATION STATUS OF RECIPIENT:

N/A

 MARJORIE HARRIS REYNOLDS FDN 04-6820699 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID **----**RECIPIENT NAME: PIHI HOOPS TIP OFF CLUB RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID ..... 2,000. RECIPIENT NAME: BOY SCOUTS OF AMERICA RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: 

115,000.

TOTAL GRANTS PAID:

#### **SCHEDULE D** (Form 1041)

**Capital Gains and Losses** 

OMB No 1545-0092

Employer identification number

2010

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

► 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).

	ARJORIE HARRIS REYNOLDS FDN				04-682	069	9
	: Form 5227 filers need to complete only P						
Par	Short-Term Capital Gains and Lo	osses - Assets	Held One Ye	ar or Less			I 10 0 1 11 11
	(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 instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a							
					ļ		
					1		
					<del> </del>		
					1		
b	Enter the short-term gain or (loss), if any, f	rom Schedule D-	1, line 1b			1b	22,427
2	Short-term capital gain or (loss) from Form	s 4684 6252 f	3781 and 882	4		2	
-	Chart term capital gain of (1033) from Form	3 4004, 0202, 0	,, and 002	<sup>7</sup>			
3	Net short-term gain or (loss) from partners					3	
4	Short-term capital loss carryover Enter the			•			,
5	Carryover Worksheet					4	1
5	column (3) on the back	-				5	22,427
Par							22,127
	(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 instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a	010 000 0000						
<u>1</u>	ONG-TERM CAPITAL GAIN DIVIDI	ENDS	STMT 1				756
			-			•	
					1		
<b>L</b>	Enter the long term gain or (long) if any fe	om Cabadula D	l line 6h			c h	193,074
b	Enter the long-term gain or (loss), if any, fr	om Scheddle D-	i, iiile 00			6b_	193,074
7	Long-term capital gain or (loss) from Form	s 2439, 4684, 6	252, 6781, an	d 8824		7	
8	Net long-term gain or (loss) from partnersh	nips, S corporation	ons, and other	estates or trusts		8	
9	Capital gain distributions					9	
10	Gain from Form 4797 Post I					10	
	Long-term capital loss carryover Enter the	amount if any	rom line 14 of	the 2009 Capital Lo	ss	10	
- •	• •			•		11	(
12	Net long-term gain or (loss). Combine line	es 6a through 11	in column (f)	Enter here and on lin	ie 14a,		
	column (3) on the back	<u> </u>		<del> </del>		12	193,830
9 10 11	Capital gain distributions	amount, if any,	from line 14 of	the 2009 Capital Lo	ss 	9 10 11 12	

Schedule D (Form 1041) 2010

30

31

32

33

28

29

Subtract line 28 from line 27 Multiply line 29 by 15% (15)

Enter the amount from line 26 (If line 26 is blank, enter -0-)

Figure the tax on the amount on line 23 Use the 2010 Tax Rate Schedule for Estates and Trusts (see the Schedule Ginstructions in the instructions for Form 1041)

# SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D
(Form 1041)

► See instructions for Schedule D (Form 1041).

► See instructions for Schedule D (Form 1041).

► Attach to Schedule D to list additional transactions for lines 1a and 6a.

OMB No 1545-0092

2010

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

MARJORTE HARRIS REYNOLDS FDN

Employer identification number

MARJORIE HARRIS REYNOLDS FDN				04-6820699	
Part I Short-Term Capital Gains and	Losses - Asset	s Held One Year	r or Less		
(a) Description of property (Example 100 sh 7% preferred of "Z" Co )	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
1a 68.444 ASTON MONTAG & CALDWELL GTH FD CL I	12/29/2009	12/09/2010	1,648.00	1,554.00	94.00
1109.878 INVESCO DISCIPLINED EQUITY FD CL Y	VAR	01/25/2010	10,000.00	9,465.00	535.00
431.034 BOSTON TRUST SMALL CAP FUND 1475.694 BOSTON TRUST	VAR	03/30/2010	5,000.00	4,232.00	768.00
SMALL CAP FUND 2302.861 DREYFUS EMERGING	08/21/2009	08/02/2010	17,000.00	14,477.00	2,523.00
MARKETS DEBT LOCAL CURRENCY 571. JPMORGAN CHASE & CO	03/30/2010	12/09/2010	33,000.00	31,941.00	1,059.00
ALERIAN MLP INDEX ETN BASED 1153. JPMORGAN CHASE & CO	VAR	10/26/2010	20,018.00	18,908.00	1,110.00
ALERIAN MLP INDEX ETN BASED 282.008 LAZARD EMERGING		12/09/2010	41,000.00	•	6,168.00
MARKETS PORTFOLIO - IN #638 2373.418 MANAGERS AMG		01/25/2010	5,000.00		222.00
FUNDS - TIMESSQUARE MID CAP 134.989 MATTHEWS PACIFIC		03/30/2010	30,000.00	25,348.00	4,652.00
TIGER FD CL I 1766.953 MATTHEWS PACIFIC TIGER FD CL I	VAR VAR	01/25/2010 08/02/2010	2,500.00		172.00
2247.191 RIDGEWORTH CLASSIC SEIX FLOATING RATE	10/26/2010	12/09/2010	20,000.00		5,057.00 67.00
- C2110010 02111 120111110 11112	10/20/2010	12/05/2010	20,000.00	19,955.00	07.00
	<del>-</del>				

1b Total. Combine the amounts in column (f). Enter here and on Schedule D, line 1b . .

22,427.00

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side **Employer identification number** MARJORIE HARRIS REYNOLDS FDN 04-6820699 Part | Long-Term Capital Gains and Losses - Assets Held More Than One Year (b) Date (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (e) Cost or other basis (see instructions) (f) Gain or (loss) Subtract (e) from (d) (c) Date sold (d) Sales price acquired (mo, day, yr) (mo, day, yr) 6a 2570.694 ASTON MONTAG & CALDWELL GTH FD CL VAR 03/30/2010 60,000.00 56,716.00 3,284.00 2287.283 ASTON MONTAG & CALDWELL GTH FD CL I 02/27/2009 08/02/2010 50,000.00 34,812.00 15,188.00 2675.874 ASTON MONTAG & CALDWELL GTH FD CL I 02/27/2009 10/26/2010 62,000.00 40,727.00 21,273.00 5711.604 ASTON MONTAG & CALDWELL GTH FD CL I 02/27/2009 12/09/2010 137,535.00 86,931.00 50,604.00 14583.333 INVESCO 140,000.00 DISCIPLINED EOUITY FD CL Y 02/27/2009 03/30/2010 86,771.00 53,229.00 520,291 INVESCO DISCIPLINED EQUITY FD CL Y 08/21/2009 10/26/2010 5,000.00 4,355.00 645.00 1094.605 BOSTON TRUST SMALL CAP FUND 08/21/2009 12/09/2010 14,000.00 10,738.00 3,262.00 141.297 HARBOR INTERNATION 03/09/2007 7,500.00 AL FD 01/25/2010 8,728.00 -1,228.00 3099.927 HARBOR INTERNATIONAL FD VAR 08/02/2010 170,000.00 126,140.00 43,860.00 201.511 HARBOR INTERNATION 08/21/2009 AL FD 10/26/2010 12,000.00 10,065.00 1,935.00 93.457 LAZARD EMERGING MARKETS PORTFOLIO - IN #638 08/21/2009 12/09/2010 2,000.00 1,514.00 486.00 2809.415 MANAGERS AMG 08/21/2009 FUNDS - TIMESSQUARE MID CAP 10/26/2010 37,000.00 30,005.00 6,995.00 429.799 MANAGERS AMG FUNDS - TIMESSQUARE MID CAP GROWT 08/21/2009 12/09/2010 6,000.00 4,590.00 1,410.00 339.271 MATTHEWS PACIFIC 08/21/2009 2,314.00 TIGER FD CL I 10/26/2010 8,000.00 5,686.00 3420.753 PIMCO COMMODITY REALRETURN STRATEGY FD INS VAR 10/26/2010 30,000.00 26,077.00 3,923.00 335.946 PIMCO COMMODITY REALRETURN STRATEGY FD INS 08/21/2009 12/09/2010 3,000.00 2,560.00 440.00 25000. VODAFONE AIRTOUCH PLC NT 7.75% DTD 10/15/2000 04/07/2004 02/15/2010 25,000.00 29,708.00 -4,708.00 900.196 CRM MID CAP VALUE FD INSTITUTIONAL 03/09/2007 03/30/2010 23,000.00 27,816.00 -4,816.00 565.885 CRM MID CAP VALUE FD INSTITUTIONAL 03/09/2007 08/02/2010 14,000.00 17,486.00 -3,486.00 75.443 CRM MID CAP VALUE 03/09/2007 10/26/2010 FD INSTITUTIONAL 2,000.00 2,331.00 -331.00 427.35 CRM MID CAP VALUE FD INSTITUTIONAL 03/09/2007 12/09/2010 12,000.00 13,205.00 -1,205.00

6b Total Combine the amounts in column (f) Enter here and on Schedule D, line 6b . . .

193,074.00

FEDERAL	CAPITAL	GAIN	DIVIDENDS

LONG-TERM CAPITAL GAIN DIVIDENDS

15% RATE CAPITAL GAIN DIVIDENDS

BOSTON TRUST SMALL CAP FUND 295.00
DREYFUS EMERGING MARKETS DEBT LOCAL CURRENCY 64.00
CLASS ACTION PROCEEDS RECEIVED 398.00

TOTAL 15% RATE CAPITAL GAIN DIVIDENDS

756.00 -----756.00

=========

TOTAL LONG-TERM CAPITAL GAIN DIVIDENDS

### Form **8868**

(Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury File a separate application for each return. Internal Revenue Service If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Part | Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization Employer identification number MARJORIE HARRIS REYNOLDS FDN Type or ERIC & JANNA ODDLEIFSON, TRU 04-6820699 print Number, street, and room or suite no. If a PO box, see instructions File by the due date for C/O ATLANTIC TRUST CO 100 FEDERAL ST, 37TH FL filing your City, town or post office, state, and ZIP code For a foreign address, see instructions return See instructions BOSTON, MA 02110 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return Application Return Is For Code Is For Code Form 990-T (corporation) Form 990 01 07 Form 1041-A 80 Form 990-BL 02 Form 990-EZ Form 4720 09 Form 990-PF 04 Form 5227 10 Form 6069 Form 990-T (sec. 401(a) or 408(a) trust) 05 11 Form 990-T (trust other than above) Form 8870 12 The books are in the care of ► ATLANTIC TRUST COMPANY Telephone No. ► (617) 357-9600 FAX No ▶ If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box . . . . . . . If it is for part of the group, check this box . . . . and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 08/15 , 20 11 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2010 or tax year beginning , 20 , and ending If the tax year entered in line 1 is for less than 12 months, check reason | Initial return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 4,761. 3a |\$ If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. 3ь \$ 384.

c Balance Due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS

Caution If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for

For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev 1-2011)

payment instructions

(Electronic Federal Tax Payment System) See instructions

7,759.

Form 8868 (Rev 1-2011)				Page 2
• If you are filing for an Additional (Not Automatic) 3-Mo	onth Exten	ision, complete only Part II and che	ck this box	<b>▶</b> X
Note. Only complete Part II if you have already been gran	ted an auto	omatic 3-month extension on a previ	ously filed Form 880	68
• If you are filing for an Automatic 3-Month Extension,	complete (	only Part I (on page 1)		
Part II Additional (Not Automatic) 3-Month Ex	tension o	of Time. Only file the original (no	copies needed).	
Type or Name of exempt organization MARJORIE HA	RRIS RE	EYNOLDS FDN	Employer identificati	on number
print . ERIC & JANNA ODDLEIFSON, T			04-682069	99
File by the Number, street, and room or suite no If a P O box		ctions	1 01 00000	<u>, , , , , , , , , , , , , , , , , , , </u>
extended due date for C/O ATLANTIC TRUST CO 100 FE	DERAL S	ያም <u>37ም</u> ዞ ም፤.		
filing your City, town or post office, state, and ZIP code For				
return See Instructions BOSTON, MA 02110				
Instructions BOOTON, PRI 02110				
Enter the Return code for the return that this application is	s for (file a	separate application for each return	)	04
Application	Return	Application	•••	Return
Is For	Code	Is For		Code
Form 990	01		· F	-
Form 990-BL	02	Form 1041-A		08
Form 990-EZ	03	Form 4720	· · · · · · · · · · · · · · · · · · ·	09
Form 990-PF	04	Form 5227		<del>-   · </del>
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069	<del></del>	10
Form 990-T (trust other than above)			<del></del>	11
STOP! Do not complete Part II if you were not already g	06	Form 8870	mentionals filed for	12
			previously filed For	m 8868.
• The books are in the care of • ATLANTIC TRUST		<del></del>		
Telephone No ► (617) 357-9600		FAX No ►	<del></del>	. $\square$
If the organization does not have an office or place of b				
If this is for a Group Return, enter the organization's for	ur digit Gro	oup Exemption Number (GEN)		this is
for the whole group, check this box		art of the group, check this box	▶ and a	attach a
list with the names and EINs of all members the extension			<del></del>	
4 I request an additional 3-month extension of time ur		11/15_,		
5 For calendar year $2010_{-}$ , or other tax year beginning		, 20, and ending		_, 20
6 If the tax year entered in line 5 is for less than 12 me	onths, che	ck reason Initial return	Final return	
Change in accounting period				
7 State in detail why you need the extension WAIT				
COMPLETE THIS RETURN. THIS ACCT H				
ASSETS, FOR WHICH WE HAVE NOT RECE	IVED SC	CH. K-1.		
8a If this application is for Form 990-BL, 990-PF, 99	90-T, 4720	), or 6069, enter the tentative tax	, less any	
nonrefundable credits. See instructions			8a \$	4,761.
<b>b</b> If this application is for Form 990-PF, 990-T,	4720, oi	r 6069, enter any refundable cr	edits and	
estimated tax payments made Include any pri	or year o	overpayment allowed as a credit	and any	
amount paid previously with Form 8868			8b \$	384.
c Balance Due. Subtract line 8b from line 8a Include	your paym	nent with this form, if required, by us		
(Electronic Federal Tax Payment System) See instru	ctions		8c \$	7,759.
Sign	ature an	d Verification	-   -	
Under penalties of perjury, I declare that I have examined this form, it is true, correct, and complete, and that I am authorized to prepare this fo	including acc		to the best of my knowl	edge and belief,
Signature Aan Signature	_	Title ►	Date ▶ 08/(	04/2011
MADOWN - TOOLS				8 (Rev 1-2011)
MARSHALL & ILSLEY TRUST	' COMPAN	NY NA		
11270 WEST PARK PLACE				

MILWAUKEE, WI 53224