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# - Form **990-PF**

Department of the Treasury Internal Revenue Service

# 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.

OMB No 1545-0052

**2010** 

For	calendar year 2010, or tax year beginning			, and er	nding		<u> </u>
<b>G</b> C	Check all that apply: Initial return		Initial return of a f	ormer public c	harity	Final retur	n
	Amended return		Address char	ige		Name change	
Nan	me of foundation					A Employer identificatio	n number
	OLIVIA JONES FAMILY					20-3313453	3
Num	mber and street (or P O box number if mail is not delivered to s				Room/suite	B Telephone number	
Cib	303 EAST 17TH AVE,	SOTJR	_600		<del> </del>	303-830-11	
Lity	y or town, state, and ZIP code  DENVER, CO 80203					C if exemption application is p	
H_C	Check type of organization: X Section 501(c)(3					D 1. Foreign organization 2. Foreign organizations m check here and attach o	
<u> </u>	Section 4947(a)(1) nonexempt charitable trust		xable private found	$\overline{}$		E If private foundation sta	itus was terminated
	air market value of all assets at end of year   J Acco			Accri	Jal	under section 507(b)(1	)(A), check here $ ightharpoonup$
	rom Part II, col. (c), line 16)	Other (sp		h \		F If the foundation is in a	
	•\$ 680,463. (Part I, c					under section 507(b)(1	
ra	(The total of amounts in columns (b), (c), and (d) may no necessarily equal the amounts in column (a).)	ot ext	) Revenue and benses per books	(b) Net inv		(c) Adjusted net income	(0) Disbursements for chantable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received		0.			N/A	
	2 Check X if the foundation is not required to attach Sch B						
	3 Interest on savings and temporary cash investments		1,594.		1,594.		STATEMENT 1
Ì	4 Dividends and interest from securities		15,236.	1.	5,236.		STATEMENT 2
	5a Gross rents		·-·				
l	Net rental income or (loss)	_					
9	68 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all		15,119.				<u> </u>
Ē	b Gross sales price for all assets on line 6a 321,563	<u>-</u>		•			
Revenue	7 Capital gain net income (from Part IV, line 2)	<b>\</b>		1.	<u>5,119.</u>		
_	8 Net short-term capital gain	∤ <b>%</b> }					<u></u>
	8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns b Less Cost of goods sold	19		=-:		_	
	b Less Cost of goods sold	10/	<del></del>			<del> </del>	<del> </del>
1		_4 `				<u> </u>	
	c Gross profit or (loss)		·		•	<del>                                     </del>	
	11 Other income 12 12 Total, Add lines 1 through 13 CO	$\neg$	31,949.	3.	1,949.		
$\dashv$	11 Other income 2 12 Total. Add lines 1 through 11 CODE 13 Compensation of officers, directors, trustees, etc		<u>31,949.</u> 0.	<u> </u>	0.	·	0
	14 Other employee salaries and wages	·	<u> </u>			<del> </del>	0
	15 Pension plans, employee benefits						
9898	16a Legal fees STMT 3		82.		41.		41
E E	l		3,730.		1,865.		1,865
Ехре	c Other professional fees STMT 5		9,467.		4,733.		4,734
8	17 Interest						
Ħ	18 Taxes STMT 6		268.		133.		135
jet	19 Depreciation and depletion						
Ē	20 Occupancy				_		
A	21 Travel, conferences, and meetings						
E	22 Printing and publications						
Operating and Administrative	23 Other expenses STMT 7		30.		0.		30
at	24 Total operating and administrative						
園	expenses. Add lines 13 through 23		<u>13,577.</u>	(	<u>6,772.</u>		6,805
9	25 Contributions, girts, grants paid		30,000.				30,000
	26 Total expenses and disbursements.						
	Add lines 24 and 25		43,577.	. (	<u>5,772.</u>		36,805
	27 Subtract line 26 from line 12;						
	& Excess of revenue over expenses and disbursements		<11,628.				
	b Net investment income (if negative, enter -0-)			2	<u>5,177.</u>		
	c Adjusted net income (if negative, enter -0-)					N/A	<u> </u>

Q Q

023511 12-07-10 606,187.

Decreases not included in line 2 (itemize)

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

36,805.

See the Part VI instructions.

14110512 759523 JON106

Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

_	m 990-PF (2010) OLIVIA JONES FAMILY FOUNDATION			331345		Page 4
Ρģ	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 49	40(e), or 4	948	- see inst	ruction	ns)
18	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.	)	- 3		rian de la companya d	i ipří
	Date of ruling or determination letter: (attach copy of letter if necessary-see instruction	8)		7		
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🗶 and enter 1%	<b>)</b>	_1_		2	<u>52.</u>
	of Part I, line 27b		E Chicago.	Mark Transporter agency Transporter to the state of the state Table Transporter to the state of	-	
C	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (	b). J		is in the second section is the second	ಸಹಕ್ಕೆ ಶಿಕ್ಷಿಸಿದ ಕ್ಷ	- 0# - 7
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2			0.
3	Add lines 1 and 2		3		2	<u>52.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		2	<u>52.</u>
6	Credits/Payments:					
	a 2010 estimated tax payments and 2009 overpayment credited to 2010					
	Exempt foreign organizations - tax withheld at source 6b					-50
	Tax paid with application for extension of time to file (Form 8868)					
	Backup withholding erroneously withheld 6d			nga da gara <b>a ka∺ay</b> a.	or age (and an	· · · · · ·
7	Total credits and payments. Add lines 6a through 6d		7_			<u>0.</u>
	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached		8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	. •	9		2	<u>52.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10			
11		lefunded 🚩	11			
	Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participat	te or intervene	in		Yes	-
	any political campaign?			1 <u>a</u>	$\rightarrow$	<u>X</u>
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for			<u>1b</u>		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mater	tals publishe	d or			
_	distributed by the foundation in connection with the activities.			4.	7	
	: Did the foundation file Form 1120-POL for this year?			10		X
u	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation. ▶ \$  0. (2) On foundation managers. ▶ \$	0				
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on fou	0 <u>.</u>				
Ç	managers. > \$	IIIuauoii				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		Х
•	If "Yes," attach a detailed description of the activities.	•••••				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of in	corporation o	ır			
-	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	001 poruson, c	•	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		•••••	48		X
	of "Yes," has it filed a tax return on Form 990-T for this year?		N	/A 4b	+	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		•	5		X
	If "Yes," attach the statement required by General Instruction T.	•				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict	with the state	law			
	remam in the governing instrument?			_ 6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	•		7	X	
	If "Yes," complete Part II, col. (c), and Part XV.					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	CO					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or desi	gnate)				: <del>.</del>
	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 4942	2(j)(5) for cale	ndar			
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV	••••		9	4	X
10	Did any persons become substantial contributors during the tax year? If "yes," attach a schedule listing their names and as	Iriroccoe		110	_   _ <b>!</b>	I X

Total. Add lines 1 through 3

<u>-</u> -	Minimum Investment Return (All domestic foundations must complete this part. Foreign fo	undations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	<u>552,856</u> .
þ	Average of monthly cash balances	1b	97,778.
C	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	650,634.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	<u>650,634.</u>
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	<u>9,760.</u>
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	<u>640,874.</u>
6	Minimum investment return. Enter 5% of line 5	6	32,044.
 	<b>Distributable Amount</b> (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations foreign organizations check here  and do not complete this part.)	and certain	
1	Minimum investment return from Part X, line 6	1	32,044.
2a	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.)		
G	Add lines 2a and 2b	2c	252.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	31,792.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	31,792.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	31,792.
(P)	Qualifying Distributions (see 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	36,805.
b	Program-related investments - total from Part IX-B	16	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
8	Suntability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	<u>36,805.</u>
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	5	252.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	36,553.
	Note: The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation	qualifies for th	e section

4940(e) reduction of tax in those years.

Part.XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	( <b>d)</b> 2010
1 Distributable amount for 2010 from Part XI,	Оограз	rears prior to 2009	2003	2010
line 7				31,792.
2 Undistributed income, if any, as of the end of 2010				<u> </u>
a Enter amount for 2009 only			0.	
b Total for prior years:				
, , , , , , , , , , , , , , , , , , , ,		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
b From 2006 11,538.				
c From 2007 4,427.				
d From 2008 1,472.				
e From 2009 6,641.				
f Total of lines 3a through e	24,078.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ►\$ 36,805.				
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.	_	
c Treated as distributions out of corpus		•		
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount				31,792.
e Remaining amount distributed out of corpus	5,013.			
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	29,091.			
b Prior years' undistributed income. Subtract	20,001.			
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract		-		
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011.	ŀ			
Subtract lines 7 and 8 from line 6a	29,091.	· · · · · · · · · · · · · · · · · · ·		·
O Analysis of line 9:				
a Excess from 2006 11,538.				
<b>b</b> Excess from 2007 <b>4 , 4 2 7 .</b>				
c Excess from 2008 1, 472.				
d Excess from 2009 6, 641.				
e Excess from 2010 5, 013.				

Page (2010) OLIVIA Private Operating F	oundations (see in	IST FOUNDATIONS and Part V	II-A, question 9)		13453 Page II
1 a If the foundation has received a ruling o	_			24/ 22	
foundation, and the ruling is effective fo			<b>.</b>		
b Check box to indicate whether the found	lation is a private operati	ng foundation described	ın section	4942(j)(3) or 49	)42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	<b></b>	<u> </u>
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					-
each year listed _					
<b>b</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	<u> </u>				
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the	· · · · · · · · · · · · · · · · · · ·		-		
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (ınterest, dıvıdends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt					
organizations as provided in				İ	
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization (4) Gross investment income			<del> </del>		
Supplementary Info	mation (Comple	te this part only	if the foundation	n had \$5 000 or mo	re in secote
at any time during the			ii dio iodiidadoi	11 11dd <del>40</del> ,000 01 1110	ore in assets
1 Information Regarding Foundation					
a List any managers of the foundation who	-	than 2% of the total con	tributions received by th	e foundation before the clos	se of any tax
year (but only if they have contributed m	ore than \$5,000). (See s	section 507(d)(2).)		0 1001100000 210 0100	o or any abo
NONE					
b List any managers of the foundation who other entity) of which the foundation has	o own 10% or more of the	ne stock of a corporation	(or an equally large port	on of the ownership of a pa	artnership or
NONE	<del> </del>	-			
2 Information Regarding Contribution	on Grant Gift I can	Scholarshin etc. D	roorams.		<del> </del>
Check here ► X if the foundation of				not accept unsolicited requi	ests for funds. If
the foundation makes gifts, grants, etc. (	see instructions) to indiv	viduals or organizations i	inder other conditions, o	complete items 2a, b, c, and	d.
a The name, address, and telephone numb	per of the person to who	m applications should be	addressed;		. ··-
<b>b</b> The form in which applications should be	e submitted and informa	tion and materials they s	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	. such as by geographic	al areas, charitable fields	kinds of institutions or	other factors:	
	,	Indiana in the incide	, or moderations, or		

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Perf XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year ANIMAL WELFARE INSTITUTE N/A PRIVATE 6,500. TO REDUCE PAIN & FEAR 900 PENNSYLVANIA AVE SE ASSOCIATIO INFLICTED ON ANIMALS WASHINGTON, DC 20003 BY HUMANS DOCTORS WITHOUT BORDERS 14,000. N/A PRIVATE TO HELP PROVIDE CARE 333 7TH AVE, 2ND FLOOR ASSOCIATION POPULATIONS IN NEW YORK, NY 10001-5004 DISTRESS INTERNATIONAL RESCUE N/A PRIVATE 6,500. TO WORK WITH PEOPLE COMMITTEE ASSOCIATIOAFFECTED BY ARMED 122 EAST 42ND STREET NEW CONFLICT WORLD YORK, NY 10168 MAXFUND N/A PRIVATE 3,000. PROVIDE MEDICAL CARE 1025 GALAPAGO ST DENVER, ASSOCIATIOFOR INJURED PETS CO 80204 30,000. ▶ 3a Total b Approved for future payment NONE 0. ➤ 3b Total

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### Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)	
•	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt	
1 Program service revenue:	code	Amount	sion code	Amount	function income	
a						
b						
C						
d						
e						
1			1			
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash						
investments	l i		14	1,594.		
4 Dividends and interest from securities			14	1,594. 15,236.		
5 Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property						
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory			18	15,119.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory		-				
11 Other revenue:						
a						
b						
c						
d						
e						
12 Subtotal. Add columns (b), (d), and (e)		C	) .	31,949.	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	31,949.	
(See worksheet in line 13 instructions to verify calculations.)		•				

### Relationship of Activities to the Accomplishment of Exempt Purposes

▼	the foundation's exempt purposes (other than by providing funds for such purposes).
_	
_	
	<del></del>
_	<del></del>

Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of

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Line No.

### 0) OLIVIA JONES FAMILY FOUNDATION 20-3313453 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Petri Livii **Exempt Organizations**

1	Did the	e organization directly or indii	rectly engage in any	of the following	g with any other organization	on described in sect	ion 501(c) of	ļ	Yes	S NO
	the Co	de (other than section 501(c)	)(3) organizations)	or in section 52	?7, relating to political organ	uzations?				
a	Transf	ers from the reporting founda	ation to a noncharit	able exempt or	ganization of:			į		
	(1) C			•	•			ſ	1a(1)	Х
		ther assets	•	•			• -		1a(2)	X
		transactions:	•		•				ia(z)	
D			h.l	_4:					41.441	77
		ales of assets to a noncharital			••••	•		Г	1b(1)	X
		urchases of assets from a no	-	organization				Г	1b(2)	X
	• •	ental of facilities, equipment,							1b(3)	X
		eimbursement arrangements				-			1b(4)	X
		oans or loan guarantees		•••					1b(5)	X
	(6) P	erformance of services or me	mbership or fundra	using solicitatio	ns			1	<u>1b(6)</u>	X
		g of facilities, equipment, ma				•			1c	<u> </u>
d	If the a	enswer to any of the above is	"Yes," complete the	following sche	dule. Column (b) should ah	ways show the fair r	narket value of the g	oods, oth	ier assets,	
	or serv	rices given by the reporting fo	oundation. If the for	undation receiv	ed less than fair market valu	ie in any transactior	or sharing arranger	nent, sho	w in	
	colum	n (d) the value of the goods,	other assets, or ser	vices received.				_		
(a) L	ine no	(b) Amount involved	(c) Name o	of noncharitable	e exempt organization	(d) Description	of transfers, transaction	ns, and sha	arıng arranger	nents
				N/A						
		<del>-</del>								
		·				_				
		<del></del>								
		<del></del>	<del></del>							
					<del></del>	<del></del>				
		·		<del></del>			-			
						<del></del>				
							-		_	
		<del></del>	<del>                                     </del>			<del>-</del>				
_			<u></u>		<del></del> _				<del></del>	
-		foundation directly or indirect	the officeted with or	rolated to one	or more thy evernt errors	rations described	<del></del>		<del></del>	
Za		foundation directly or indirect				zauons described			l v	<b>X</b> No
		ion 501(c) of the Code (other		c)(3)) or in seci	JON 52/7		••		l Yes 🚨	MO LA
D	IT Yes	"complete the following sche			(h) Time of organization	<del></del>	(a) Deparintion of so	lationahim		
		(a) Name of org	anizauon	<del></del>	(b) Type of organization		(c) Description of re	auonsmp	<u> </u>	
		N/A								
							<del></del> _			
		<del> </del>			<u> </u>	<u> </u>				
	1 9	Inder penalties of perjury, I declare and complete Declaration of prepa			ing accompanying schedules and ased on all information of which i			and belief,	, it is true, cor	rect,
	gn	DOLDIAN IV	don		احراجي	111	A ma NAA			
H	ere	-KIXIXI)IIII	- PRIVING	<u> </u>	19/10	<u> </u>	DIM WILL	<u> </u>		
		Signature of other or tru	<del></del>	~ <del></del>	Daté '		rtie			
		Print/Tỳpể prepărer's na	ıme	Preparer's s	gnature ( )	Date 1		PTIN		
				I ( I DIN )	LIV DUIN	11/2/11	self- employed			
Pá	<b>jd</b>	JEFFREY W.	BARKER	MIN	III. PULL	711011				
	epare		ON COLLII	NS MITT	HELL LLP	1	Firm's EIN ▶	-		
Us	se On	<b>ly</b> 30	3 EAST 1	7TH AVE	NUE, SUITE 6	00				
		Firm's address ▶ <b>DE</b>					Phone no. 3	03-83	30-11	20
			-					Form	990-PF	(2010)

023622 03-04-11

ONTINUATION	FOR 990-1	?F,	PART	1
0-3313453	PAGE	1	OF	

Ofbirgi gaille file for	DOCO IOI TAX ON INVESTRICIN INFOINE				
(a) List and 2-story br	describe the kind(s) of property solick warehouse; or common stock, 2	d, e.g., real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a AMERICAN CENTU	<u> </u>	· · · · · · · · · · · · · · · · · · ·	P		
b AMERICAN CENTU					01/27/10
			P		10/18/10
c ISHARES TR IBO			<u>P</u>		11/12/10
d WELLS FARGO IN			P		<u>VARIOUS</u>
e WELLS FARGO IN			P	VARIOUS	<u>VARIOUS</u>
CAPITAL GAINS	DIVIDENDS				<u> </u>
g					
h					
1	_				
_i	•				
k	<del></del>			-	
1			-		
m					
n	-		<u> </u>		
0			-	<del>                                     </del>	<del>                                     </del>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h)	) Gain or (loss) lus (f) minus (g)	<u> </u>
a 32,077.	<u> </u>	30,494.	(3/ F	.,	1,583.
b 37,591.		32,077.	<del></del> -	<del></del> _	5,514.
c 22,073.		20,292.	<del></del>	<del>.</del>	1,781.
d 136,617.		126 660			
		136,660. 86,921.			<u>&lt;43.</u> >
e 92,756. f 449.		86,921.			5,835.
	****				449.
9					
h					
	<del>-</del>				
<u> </u>					
k					
1					
m			<del></del>		
n					
0					
Complete only for assets showing	g gain in column (h) and owned by t	the foundation on 12/31/69	(I) Los	ses (from col. (h))	
(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	Gains (excess of but n	of col. (h) gain ove ot less than "-0-")	r coL (k),
a					1,583.
b					5,514.
С					1,781.
d					<43.>
e					5,835.
f				. —	449.
g					
h			_		·
1					
1					
k	·	-			
-	,				<del></del>
m			<del> </del>		<del></del>
n			<del></del>		
				<del>-</del>	
0			1		
2 Capital gain net income or (net cap	oital loss) {   If gain, also enter	ın Part I, line 7 -" ın Part I, line 7			15,119.
Net short-term canital gain or (loss	s) as defined in sections 1222(5) and	- I			
If gain, also enter in Part I, line 8, o	:0lumn (c).	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
If (loss), enter "-0-" in Part I, line 8	· · · · · · · · · · · · · · · · · · ·		<u> </u>	N/A	

FORM 990-PF INTEREST ON SAV	'INGS A	ND TEM	PORARY	CASH	INVESTMENTS	STATEMENT 1
SOURCE						AMOUNT
COMPASS BANK COMPASS BANK - CD ROYAL ALLIANCE WELLS FARGO ADVISORS						20. 1,125. 398. 7.
WELLS FARGO ADVISORS - OID						7. 44.
TOTAL TO FORM 990-PF, PART I	, LINE	3, CO	LUMN A			1,594.
FORM 990-PF DIVIDEN	DS AND	INTER	EST FRO	OM SEC	URITIES	STATEMENT 2
SOURCE		GROSS	AMOUN'		PITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
ROYAL ALLIANCE WELLS FARGO ADVISORS			4,112 11,57	2. 3.	80. 369.	4,032. 11,204.
TOTAL TO FM 990-PF, PART I,	LN 4		15,685	<u>.</u>	449.	15,236.
FORM 990-PF		LEGAL	FEES			STATEMENT 3
DESCRIPTION	EXPE	A) NSES BOOKS	(I NET II MENT I			
LEGAL FEES		82.		41	•	41.
TO FM 990-PF, PG 1, LN 16A		82.		41	•	41.
FORM 990-PF	AC	COUNTI	NG FEES	5		STATEMENT 4
DESCRIPTION	EXPE	A) NSES BOOKS	( I NET IN MENT I			
ACCOUNTING FEES		3,730.	•	1,865	•	1,865.
TO FORM 990-PF, PG 1, LN 16B		3,730.		1,865	•	1,865.

FORM 9'90-PF (	OTHER PROFES	SIONAL FEES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
INVESTMENT FEES	9,467.	4,733.		4,73	4.
TO FORM 990-PF, PG 1, LN 16C	9,467.	4,733.		4,73	4.
FORM 990-PF	TAX	ES		STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
FOREIGN TAXES FEDERAL TAXES	185. 83.	92. 41.			3.
TO FORM 990-PF, PG 1, LN 18	268.	133.		13	5.
FORM 990-PF	OTHER E	XPENSES		STATEMENT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM		
BANK CHARGES	30.	0.	· <del></del>		0.
TO FORM 990-PF, PG 1, LN 23	30.	0.		3	0.
FORM 990-PF	CORPORAT	E STOCK	<del></del>	STATEMENT	8
DESCRIPTION		во	OK VALUE	FAIR MARKET VALUE	ı
ROYAL ALLIANCE WELLS FARGO INVESTMENTS			123,207. 343,546.	127,74 413,28	
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		466,753.	541,02	9.