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Form 990-PF

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

2010

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

| Fo | r calen | dar year 2010, or tax year beginning | , 2010 | D, and ending | | , 20 |
|--------------------------------|-------------|---|---------------------------------|---------------------------------------|--|--|
| G | Check | all that apply: Initial return Initial re | eturn of a former p | ublic charity | ☐ Final return | |
| | | | dress change | Name change | | |
| N | ame of fo | | T 1: | A Employer | identification number | |
| | Jol | ha L Myormick Memorial | Tract | 1 20 | -6285678 | • |
| N | | d street (or P O box number if mail is not delivered to street address) | Room | | number (see page 10 c | |
| | | 902-3rd Ave. South | | 701- | 237-6983 | 3 |
| | ity or towi | n, state, and ZIP code | | · · · · · · · · · · · · · · · · · · · | ion application is pendir | |
| | | 7aran. ND 58103 | | | n organizations, check | |
| H | Check | type of organization: Section 501(c)(3) exempt p | rivate foundation | | n organizations meeting | |
| \Box | | n 4947(a)(1) nonexempt charitable trust | | lation check | here and attach compu | tation ► 🗌 |
| Ħ | | parket value of all assets at J Accounting method | | E if private | foundation status was | |
| | | f-year-(from-Part-II, col. (c), Other (specify) | | | 0Z(b)(1)(A), check here ndation is in a 60-mont | _ |
| | | 6) > \$3 402 9/0 (Part I, column (d) must be | on cash basis.) | under se | ction 507(b)(1)(B), checl | here ► |
| | Part I | Analysis of Revenue and Expenses (The total of | | | | (d) Disbursements |
| | | amounts in columns (b), (c), and (d) may not necessarily equal | (a) Revenue and expenses per | (b) Net investment income | (c) Adjusted net income | for chantable purposes |
| | | the amounts in column (a) (see page 11 of the instructions).) | books | moonie | ilicome | (cash basis only) |
| _ | 1 | Contributions, gifts, grants, etc., received (attach schedule) | | | 1 | ** * 9: |
| | 2 | Check ► ☐ if the foundation is not required to attach Sch. B | ٠, ,) | L. A. A. B. B. A | x' | » · .>. |
| ş | 3 | Interest on savings and temporary cash investments | 2528 | 3 538 | 2538 | |
| 를 9 년 | 4 | Dividends and interest from securities | 442110 | 44 216 | 44216 | * / * * * * * 1 |
| _ | 5a | Gross rents | 1,75-10 | 71 170 | 1.112.12 | · 1 · 10 · 10 · 10 · 10 · 10 · 10 · 10 |
| ∌ | b | Net rental income or (loss) | - A 2 3 3 | | 13. ATA 18. A | (15° 180 18' 2') |
| ٠. | 1 - | Net gain or (loss) from sale of assets not on line 10 | | | 2. 3 k k k | 2 4 |
| Revenue | b | Gross sales price for all assets on line 6a | , | , , , , | , | · |
| Ž Ž | 7 | Capital gain net income (from Part IV, line 2) | ` ; | 0 | * * 41 ° | K. * |
|) å | 8 | Net short-term capital gain | .74 🛊 3.44 | ' 🔊 🦓 🐴 ' | 2704 | |
| <u> </u> | 9 | Income modifications | | | 15. 19. 1 | - A- 1 |
| 2 | 10a | Gross sales less returns and allowances | * | * ** | | 7 |
| | ь | Less: Cost of goods sold | y ¥* | * ** , | , | / \ |
|)) | c | Gross profit or (loss) (attach schedule) | | v | | ~ '+ 4; • |
| • | 11 | Other income (attach schedule) | | | | • |
| | 12 | Total. Add lines 1 through 11 | 47,754 | 47754 | 50.458 | |
| | 13 | Compensation of officers, directors, trustees, etc. | 1 1) 10 | 7 7 | | |
| KDADSAS | 14 | Other employee salaries and wages | | | | |
| Š | 15 | Pension plans, employee benefits | | | | |
| | | Legal fees (attach schedule) | | | | |
| Ĺ | Ь | Accounting fees (attach scheele EIVED. | | | | |
| Š | С | | | | | |
| 2 | 17 | Other professional fees (attach schedule) | | | | |
| <u>. tr</u> | 18 | Taxes (attach schedule) (see page 14 of the instructions) | 986 | 986 | 986 | 986 |
| 3. | 19 | Depreciation (attach schedule) and depletion | | | | |
| Ę | 20 | Occupancy OGDEN, UT . | | | | |
| 9 | 21 | Travel, conferences, and meetings | | | | |
| Ž | 22 | Printing and publications | | | | |
| يّ و | 23 | Other expenses (attach schedule) | | | | |
| į | 24 | Total operating and administrative expenses. | | | | 2.5.4 |
| Operating and Administrative F | | Add lines 13 through 23 | 986 | 986 | 986 | 986 |
| Ž | 25 | Contributions, gifts, grants paid | 158 500 | | | 158,500 |
| _ | 26 | Total expenses and disbursements. Add lines 24 and 25 | 159,486 | 986 | 986 | 1.59'486 |
| | 27 | Subtract line 26 from line 12: | | | · | , – |
| | а | Excess of revenue over expenses and disbursements | -111,732 | | - | |
| | b | Net investment income (if negative, enter -0-) . | , | 46,768 | | |
| | С | Adjusted net income (if negative, enter -0-) | | , | 49 472 | |

| Da | rt II | Balance Sheets Attached schedules and amounts in the description column | | End o | of year |
|---------------|----------------------|--|---|---------------------------------------|---------------------------------------|
| Гс | II L III | should be for end-of-year amounts only (See instructions.) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash—non-interest-bearing | | | |
| | 2 | Savings and temporary cash investments | 474.789 | 416,615 | 4/6 6/5 |
| | 3 | Accounts receivable ▶ | | 1 / Sp | i di James y |
| | | Less: allowance for doubtful accounts ▶ | | | |
| | 4 | Pledges receivable ► | , , , , , , , , , , , , , , , , , , , | Ŝ. | Y L V |
| | | Less: allowance for doubtful accounts ▶ | | | |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | | disqualified persons (attach schedule) (see page 15 of the | | | |
| | | instructions) | | | |
| | 7 | Other notes and loans receivable (attach schedule) ▶ | | - 4 | |
| 40 | | Less: allowance for doubtful accounts ▶ | | · · · · · · · · · · · · · · · · · · · | |
| Assets | 8 | Inventories for sale or use | | | |
| SS | 9 | Prepaid expenses and deferred charges | | | |
| A | 10a | Investments—U.S. and state government obligations (attach schedule) | | | |
| | ь | Investments—corporate stock (attach schedule) | | | |
| | c | Investments—corporate bonds (attach schedule) | · | <u>.</u> | 3800 361 |
| | 11 | Investments—land, buildings, and equipment: basis ▶ | | W. W. W. W. | |
| | ' ' | Less: accumulated depreciation (attach schedule) ▶ | | <u> </u> | |
| | 12 | Investments—mortgage loans | | · · · | |
| | 13 | Investments—other (attach schedule) | 3 114 133 | 3 039,561 | 2981,351 |
| | 14 | Land, buildings, and equipment: basis ► | | - 3,03 1/3 WI | 7 (00,00) |
| | 14 | Less: accumulated depreciation (attach schedule) ▶ | | | · · · · · · · · · · · · · · · · · · · |
| | 15 | Other assets (describe > | | | |
| | 16 | Total assets (to be completed by all filers—see the | | | |
| | | instructions. Also, see page 1, item I) | 2 598 922 | 3 456 176 | 3 402 961 |
| | 17 | Accounts payable and accrued expenses | 3,300,122 | 2,426,176 | 100 100 |
| | 18 | Grants payable | | | |
| Liabilities | 19 | Deferred revenue | | | |
| II | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| abi | 21 | Mortgages and other notes payable (attach schedule) | | | |
| Ľ | 22 | , , , , , | | | |
| | 23 | Other liabilities (describe) _Total liabilities (add lines 17 through 22) | | | |
| <u> </u> | 23 | Foundations that follow SFAS 117, check here | | | |
| s | | and complete lines 24 through 26 and lines 30 and 31. | | | |
| če | 24 | 1 Immonatoriata al | | | |
| au | 25 | Temporarily restricted | | | |
| Sal | 26 | Permanently restricted | | | 1 |
| or Fund Balan | 20 | • | | | |
| Š | | Foundations that do not follow SFAS 117, check here ► □ and complete lines 27 through 31. | | | |
| Ē | 27 | Capital stock, trust principal, or current funds | 3,588 922 | 2 1151 171 | |
| õ | 27 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | 3,500,704 | -) 140 G 1 1 G | |
| ets | | Retained earnings, accumulated income, endowment, or other funds | | | |
| SS | 2 9 30 | Total net assets or fund balances (see page 17 of the | | | |
| Net Assets | 30 | · · · · · | 7 500 922 | 7 11-1 (71 | |
| Zer Je | 24 | Instructions) | 3,588,124 | 2,756,110 | |
| _ | 31 | | 2 (00 922 | 2118/17/ | |
| Do | -+ 111 | Analysis of Changes in Net Assets or Fund Balances | 1 2,588,124 | 2,736,114 | |
| 1 | rt III | I net assets or fund balances at beginning of year—Part II, colu | mn (a) line 30 (mus | t agree with | 1 |
| • | | | | · 1 | 3.588.922 |
| _ | | • • | · · · · · · · | 2 | 2,200,70 |
| 2 | | | | 3 | 1-11,13d |
| 3 | | er increases not included in line 2 (itemize) | *************************************** | | 2 1177 100 |
| 4 | | lines 1, 2, and 3 | | 4 | 2,41,190 |
| 5 | | reases not included in line 2 (itemize) ► Los a soles not I net assets or fund balances at end of year (line 4 minus line 5)— | Part II column (b) In | <u>les</u> 5 | 2 1151 171 |
| | _ rota | The assets of fully balances at end of year (line 4 minus line 5)— | Great, Column (D), III | ne 30 6 | 1 5,456, 16 |
| | | | | | Form 990-PF (2010) |

| Part | V Capital Gains and | d Losses for Tax on Investr | ment Income | | | |
|-------------------|--|--|-------------------------------|--|----------------------------------|---|
| | | he kind(s) of property sold (e g , real estatuse, or common stock, 200 shs MLC Co | | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
| 1a | Sec | | | | | |
| b | | | | | | |
| c | | | | | | |
| <u>d</u> | <u> </u> | | | | | |
| <u> e</u> | <u> </u> | | , | other basis | - | |
| | (e) Gross sales price | | in or (loss) (f) minus (g) | | | |
| <u>a</u> | · · · · · | | _ | | | |
| <u>b</u> | | | | | | |
| <u>c</u> | | | | | | |
| <u>d</u> | | | | | | |
| <u>е</u> | Complete only for assets sho | owing gain in column (h) and owned | by the foundation | on 12/21/60 | | |
| | Complete only for assets sho | | 1 | s of col (i) | | l (h) gain minus it less than -0-) or |
| | (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | | (i), if any | | from col (h)) |
| <u>a</u> | | | | 0 / | | |
| <u>b</u> | | | Vange | raid LT | | 7/160 |
| <u>c</u> | | · · · · · · · · · · · · · · · · · · · | Cop bang | DISTLI | | 1.5/3 |
| <u>d</u> | | | W/myon star | 4/1 | | 13 055 |
| <u>е</u> | | (If goin | also enter in Pa | 57 | 1 | 2/04 |
| 2 | Capital gain net income o | r ingt canital loce) (~ ~ | , enter -0- in Pai | | 2 - | 18,702 |
| 3 | | in or (loss) as defined in sections | | | | / |
| | | I, line 8, column (c) (see pages 1 | | | | 27 44 |
| _ | | , line 8 | | | 3 | 2104 |
| Part | | der Section 4940(e) for Reduivate foundations subject to the | | | | |
| Was t | | re this part blank. section 4942 tax on the distribut qualify under section 4940(e). D | | | pase period? | ☐ Yes ☐ No |
| 1 | | ount in each column for each year | • | | e hefore making | any entries |
| | (a) | | ar, see page 10 | | is before making a | (d) |
| Cale | Base period years endar year (or tax year beginning in | Adjusted qualifying distribution | s Net value of | (c) f nonchantable-use as | | tribution ratio divided by col (c)) |
| | 2009 | | | | | |
| | 2008 2007 | | _ | | | |
| | 2006 | | _ | | | |
| | 2005 | | | | | |
| 2 3 | Total of line 1, column (d) Average distribution ratio | for the 5-year base period—dividation has been in existence if le | ide the total on l | ine 2 by 5, or by | the | |
| 4 | - | chantable-use assets for 2010 f | - | | | |
| 5 | Multiply line 4 by line 3 | | | | . 5 | |
| 6 | Enter 1% of net investmen | nt income (1% of Part I, line 27b |) | | . 6 | |
| 7 | Add lines 5 and 6 | | | | . 7 | |
| 8 | | ons from Part XII, line 4 ater than line 7, check the box inge 18. | | | . 8 hat part using a 1 | % tax rate. See the |

Page 4

| Part | VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see pa | ge 18 | of the | e inst | ructio | ons) | | |
|---------|---|---------|--------|--|--|----------|--|--|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter (attach copy of letter if necessary—see instructions) | , 35 | , 82 | • 56 × ×× | ζ, , į | **· | | |
| b | Date of ruling or determination letter (attach copy of letter if necessary—see instructions) Domestic foundations that meet the section 4940(e) requirements in Part V, check | 1 | | a | 2 / | | | |
| • | here ▶ ☐ and enter 1% of Part I, line 27b | | | | | | | |
| С | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). | jo! | 1 | <u> </u> | i de la composición dela composición de la composición dela composición de la compos | اُهُـــ | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 2 | | | | | | |
| 3 | Add lines 1 and 2 | 3 | | 9: | 3.5 | | | |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 4 | | · | | | | |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 | 5 | , | 95 | 35 | | | |
| 6 | Credits/Payments: | 3.3 | S 200 | | | 30 | | |
| а | 2010 estimated tax payments and 2009 overpayment credited to 2010 6a | | Ma. | | | 13 | | |
| b | Exempt foreign organizations—tax withheld at source 6b | | | | 7 | 3 | | |
| c d | Tax paid with application for extension of time to file (Form 8868) . Backup withholding erroneously withheld | | | | , , , | | | |
| 7 | Total credits and payments. Add lines 6a through 6d | 7 | 1302 | ************************************** | | <u> </u> | | |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | 8 | | | | | | |
| 9 | Tax due. If the total of-lines 5 and 8 is more than line 7, enter amount owed | 9 | | 93 | 5 | | | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > | 10 | | | _ | | | |
| 11 | Enter the amount of line 10 to be: Credited to 2011 estimated tax ▶ Refunded ▶ | 11 | | | | | | |
| Part | VII-A Statements Regarding Activities | | | | | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation | | d it | , (TET) | Yes | No | | |
| | participate or intervene in any political campaign? | | . | 1a | | <u>~</u> | | |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see of the instructions for definition)? | | . [| 1b | _ | <u>~</u> | | |
| | If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any published or distributed by the foundation in connection with the activities. | mater | rials | Ar Ì | | | | |
| C | Did the foundation file Form 1120-POL for this year? | | . | 1c | | 1 | | |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$ | | | 4 - 2 | 1.1 | | | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax in on foundation managers. ▶ \$ | npose | ed | | | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? . | | | 2 | 0.8 | V | | |
| 3 | If "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, a property of the changes of the changes. | | | 7.14 2.14 2.14 | | | | |
| 4 | incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | · | 3 | | <u> </u> | | |
| 4a b | Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year? | • • | . - | 4a 4b | | <u>/</u> | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | • • | · | 5 | | 1/ | | |
| | If "Yes," attach the statement required by General Instruction T. | • • | · | 48.0 | - A:1 | 100 | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | | | | | |
| | By language in the governing instrument, or | | ì | | | | | |
| | • By state legislation that effectively amends the governing instrument so that no mandatory direct conflict with the state law remain in the governing instrument? | ions 1 | that | 6 | $\overline{\nu}$ | 3 | | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), an | d Part | xv | 7 | V | | | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see page 1 instructions) \blacktriangleright | 9 of | the | * | | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney (or designate) of each state as required by General Instruction G? If "No," attach explanation | Gene | eral | 8b | V | | | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 49 | | | 3 | 4 | ìi | | |
| | 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV 27)? If "Yes," complete Part XIV | | . | 9 | | V | | |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule list names and addresses | ting ti | heır | 10 | | V | | |

| | | • | | |
|-----|------|------|------|----|
| orm | 990- | PF (| (201 | 0) |

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| Part | VII-A Statements Regarding Activities (continued) | | | |
|------|---|--|---|---|
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions) | 11 | | V |
| 12 | Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? | 12 | | V |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | V | |
| 14 | | -23 105 | | 983 |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990\(^1\)PF\(\text{in lieu of Form 1041}\)—Check here and enter the amount of tax-exempt interest received or accrued during the year \(\bigs\) 15 | | ٠ | ▶ □ |
| 16 | At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? | 16 | Yes | No |
| | the name of the foreign country ▶ | | į, | 3, |
| Part | VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | . 1 | Yes | No |
| 1a | During the year did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | ****** | * | . y': |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) | , , , , , , , , , , , , , , , , , , , | | |
| b | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)? | 1b | - * ` ` | المراجعة المرجعة المرج المرجعة المرجعة |
| | Organizations relying on a current notice regarding disaster assistance check here | 2.7 | ţ | 7 |
| С | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010? | 1c | <u>, , , , , , , , , , , , , , , , , , , </u> | L |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | | | |
| а | At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? | * ************************************ | 4 5 | , , |
| b | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see page 22 of the instructions.) | 2b | | |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ▶ 20 , 20 , 20 , 20 | >4 | , , | , |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | ٠ | ٠ | |
| b | If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010.) | 3b | - | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | V |
| 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? | 4b | | V |

| Page | f |
|-------|---|
| ı aye | • |

| Part | VII-B Statements Regarding Activities | s for W | Vhich Form | 4720 l | May Be R | equire | d (contir | nued) | |
|-------|---|-----------------------|--|----------|-----------------------------------|----------|---|---------------------|---------------------------------------|
| 5a | Ouring the year did the foundation pay or incur a (1) Carry on propaganda, or otherwise attempt t (2) Influence the outcome of any specific public directly or indirectly, any voter registration directly. | to influe c electi | ence legislatio on (see secti | on 495 | | arry on, | ☐ Yes | I No I No | |
| | (3) Provide a grant to an individual for travel, study, or other similar purposes? | | | | | | | | |
| | (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? | | | | | | | | |
| b | If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53.4945 or in a current notice | | | | | | | | |
| С | Organizations relying on a current notice regarding the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility | the four | ndation claim | exem | otion from | | | ► □ □ No | |
| 6a | If "Yes," attach the statement required by Regula Did the foundation, during the year, receive any on a personal benefit contract? | funds, | | directly | to pay pre | emiums | ☐ Yes | [⊉No | |
| b | Did the foundation, during the year, pay premiur If "Yes" to 6b, file Form 8870. | ns, dire | ectly or indired | tly, on | a personal | benefit | contract | ? . | 6b V |
| | At any time during the tax year, was the foundation If "Yes," did the foundation receive any proceed | | | | | | Yes | | 7b |
| | Information About Officers, Direct and Contractors | tors, 1 | Trustees, Fo | ounda | tion Mana | agers, | Highly F | Paid E | mployees, |
| 1 | List all officers, directors, trustees, foundatio | n mana | agers and the | eir con | npensation | ı (see p | age 22 o | f the ir | structions). |
| | (a) Name and address | hou | e, and average irs per week ed to position | | npensation paid, enter -0-) | emplo | Contributions yee benefit erred compe | plans | (e) Expense account, other allowances |
| | Steve McCornick Bismarck ND | Tr | ustee .038 | | 0 | | 0 | | 0 |
| | Jom McCornick | | uster | | 0 | | 0_ | | 0 |
| | Maurile M.Cormick Fargo, N.D | TI | uster ,4 | | 0 | | 0 | | 0 |
| | | | | | D. J | | · | 00=1 | |
| 2 | Compensation of five highest-paid employed If none, enter "NONE." | es (otn | er than thos | e inciu | dea on III | ie 1—s | | | me instructions). |
| | (a) Name and address of each employee paid more than \$50,00 | 00 | (b) Title, and a hours per v devoted to pe | /eek | (c) Compe | nsation | (d) Contribution employee plans and compens | benefit deferred | (e) Expense account, other allowances |
| | | | | | | | | | |
| | Mone | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Pak-1 | number of other employees said ever \$50,000 | |] | | | | | | |
| otal | number of other employees paid over \$50,000 . | | | | | | · · · | . 🚩 | |

| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En and Contractors (continued) | nployees, |
|--|---|
| 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 |
| | |
| | |
| | |
| /V O K P | |
| | |
| | |
| | |
| | |
| Total number of others receiving over \$50,000 for professional services | |
| | . |
| 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 |
| 1 | |
| | |
| 2 | |
| <u> </u> | |
| | |
| 3 | |
| | |
| | |
| 4 | |
| | |
| Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) | 1 |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 | Amount |
| 1 | |
| | |
| 2 | |
| | |
| | |
| All other program-related investments See page 24 of the instructions | |
| 3 | |
| | |
| Total. Add lines 1 through 3 | |
| | Form 990-PF (2010) |

| Part | Minimum Investment Return (All domestic foundations must complete this part. Foreities page 24 of the instructions.) | gn fo | undations, |
|--------|--|-------|--|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes: | | |
| а | Average monthly fair market value of securities | 1a | 2739 598 |
| b | Average of monthly cash balances | 1b | 1480,000 |
| C | Fair market value of all other assets (see page 25 of the instructions) | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 3 219 598 |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | * \$ | <i>)</i> ·) |
| | 1c (attach detailed explanation) | , y | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | |
| 3 | Subtract line 2 from line 1d | 3 | 3 219 598 |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25 of | |)) |
| | the instructions) | 4 | 48, 294 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 3,171,304 |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 158,564 |
| Part | | opera | iting / |
| | foundations and certain foreign organizations check here ▶ ☐ and do not complete this part.) | | 1000 |
| 1 | Minimum investment return from Part X, line 6 | 1 | 158,5 6 4 |
| 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.) 2b | | 92 |
| C | Add lines 2a and 2b | 2c | 135 |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 157,629 |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | |
| 6 7 | Deduction from distributable amount (see page 25 of the instructions) | 6 | |
| • | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | _ | 1/7/20 |
| | | 7 | 157,629 |
| Part | 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 | 159,486 |
| b | Program-related investments – total from Part IX-B | 1b | 121, 100 |
| 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: | | |
| а | Suitability 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 | 159 486 |
| 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 | |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 159,486 |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating | whet | ther the foundation |
| | qualifies for the section 4940(e) reduction of tax in those years. | | |
| | | | - 000 DE |

| Part | XIII Undistributed Income (see page 26 | of th | ie instru | etion | s) | | | _ | | | | | |
|------|---|------------|---------------|--|--------------|--------------------------|-------------------|--|----------|---|---------------|---------------------------------------|------------------|
| 1 | Distributable amount for 2010 from Part XI, | | (a) Corpus | | Ye | (b) ars prior | to 2009 | | | e) 09 | | (d) 2010 | |
| | line 7 | | ,′, | \$ v | | | | | | <i>ζ</i> , | 1.5 | 7,6 | 29 |
| 2 | Undistributed income, if any, as of the end of 2010: | | | | | | | | | | | , | · |
| а | Enter amount for 2009 only | | <u> </u> | ٨, | | ê | | <u> </u> | | | | | , , |
| b | Total for prior years: 20,20,20 | | | | _ | | | <u> </u> | | | | | <u> </u> |
| 3 | Excess distributions carryover, if any, to 2010: | | * | , | | | مردد | ~ | | | | . 5 | , i |
| а | From 2005 | 1 | | | | | | | | | | | |
| b | From 2006 | - | | | | | 5 | 13 | | 45 S | | 4 | ~; ^ |
| С | From 2007 | - | | | | | | | | | _ | | |
| d | From 2008 | - | | , , | , | 14 2 | : | p | | j. | 5 | á. | |
| e | From 2009 | | 7 | 98 | | | * | | ? | ₹9 | | , | |
| Ţ | Total of lines 3a through e | , | <u>د۔ه</u> | <u> </u> | 1 27 | | | 1.4 | | 741 | 4 40 Es. | | ا لخرر چه |
| 4 | line 4: \triangleright \$ 159.44% | | | , | | | | ľ | | `* | | • | , |
| | Applied to 2009, but not more than line 2a. | <u> </u> | <u> </u> | | <u> </u> | | <u></u> | | | | -, | - 13 A | *) |
| | Applied to undistributed income of prior years | | ** | | ┼ | - | | ╁ | | | * | • | |
| | (Election required—see page 26 of the instructions) | ٠, | | | | | | | ~ | a' . | 3 | *** | · 181 |
| С | Treated as distributions out of corpus (Election | | | ** | | | | | | | | | |
| · | required—see page 26 of the instructions) . | | | | 4> | **(** | 7./m · | | * | S. | . 🏇 | | |
| d | Applied to 2010 distributable amount | - X | | | 1 | | | | , | | 15 | 710 | 29 |
| e | Remaining amount distributed out of corpus | <u> </u> | | | | , v * j) | 887.7 | · W | * ^ 'e, | . S. A. W | 200 1 10 | 1100 | 7 1 |
| 5 | Excess distributions carryover applied to 2010 | | 67 | 41 | | | | ļ. | | | | 674 | ŦI |
| | (If an amount appears in column (d), the same | , | A 1 194 | 7 3 3 4 | | ŗ | | 16, | ŵ. | 4 | · 3* | · · · · · · · · · · · · · · · · · · · | - 1 |
| | amount must be shown in column (a).) | | y | '\$ ` | 1 | | | | Ĩ | | | X | |
| 6 | Enter the net total of each column as | | | | وختي 🖔 | 40DC | · 🔆 . |] | | | * (.) | | |
| | indicated below: | <u> </u> | | | | *** | Ž. | ļ | , | "" ^ ~ | 3% | . ** | 8 : |
| а | Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | | | _ | | , Å ³ 6. | . 1 80 × 5 | 156 | | · * · · · · · · · · · · · · · · · · · · | | | ¥. 4 |
| b | Prior years' undistributed income. Subtract | * | | | | | | <i>}</i> | | | | | |
| | line 4b from line 2b | <i>A</i> : | <u> </u> | | ļ | | | φ <i>></i> | | | ļ | | ^ |
| С | Enter the amount of prior years' undistributed | *. | * | | | | | | | | | | 6, 6 |
| | income for which a notice of deficiency has | 8 | *** | | | | | \$× | 3 | <i>-</i> | | `* \ | |
| | been issued, or on which the section 4942(a) tax has been previously assessed | | | | | | | | | , | | | ì |
| _ | • | | | | - | | | | <u> </u> | 3 | | | |
| d | Subtract line 6c from line 6b. Taxable amount—see page 27 of the instructions . | | | | | | | | * | | | | |
| _ | Undistributed income for 2009. Subtract line | | | | ian . | 27 | * | | | ··· · · · · · · · · · · · · · · · · · | * | | * %. ! |
| е | 4a from line 2a. Taxable amount—see page | | | | | | | | | | | | , |
| | 27 of the instructions | \$ | | | | | 3 | | | | | | |
| f | Undistributed income for 2010. Subtract lines | | | | | | | \vdash | | | | | |
| • | 4d and 5 from line 1. This amount must be | 8 | | | | | | 1 | | | | | |
| | distributed in 2011 | | | | | | | İ | | | | | |
| 7 | Amounts treated as distributions out of corpus | " | | | 1 | | | | | | | | |
| - | to satisfy requirements imposed by section | | | | | | | | | | | | |
| | 170(b)(1)(F) or 4942(g)(3) (see page 27 of the | | | | | | | 1 | | | | | |
| | instructions) | | | | | | | l | | | | | |
| 8 | Excess distributions carryover from 2005 not | | | | | | _ | | | | | | |
| | applied on line 5 or line 7 (see page 27 of the | 1 | | | | | | | | | | | |
| | instructions) | L | | | | | | <u> </u> | | | <u> </u> | | į |
| 9 | Excess distributions carryover to 2011. | | 1- | 111 | | | | | | | | | |
| | Subtract lines 7 and 8 from line 6a | | 67 | <u> </u> | _ | | | | | | | | |
| 10 | Analysis of line 9: | | | | | | | | | | | | i i |
| a | Excess from 2006 | - | | | | | | | | | | | |
| b | Excess from 2007 | - | | | | | | | | | | | |
| C | Excess from 2008 | 1 | | | | | | 1 | | | | | , |
| d | Excess from 2009 | 1 | | | | | | - | | | 1 | | |
| _ | | 1 | | | 1 | | | 1 | | | | | |

| Part | art XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9) | | | | | | | |
|------|--|----------------------|---------------------|----------------------|---------------------|---------------------|--|--|
| 1a | If the foundation has received a ruling | or determination | letter that it is a | private operating | | | | |
| | foundation, and the ruling is effective fo | r 2010, enter the da | ate of the ruling . | ▶ | | | | |
| b | Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5) | | | | | | | |
| 2a | Enter the lesser of the adjusted net | Tax year | | Prior 3 years | - | (e) Total | | |
| | income from Part I or the minimum investment return from Part X for | (a) 2010 | (b) 2009 | (c) 2008 | (d) 2007 | (e) Total | | |
| | each year listed | | _ | | | | | |
| 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 alternative test relied upon: | | | | · | | | |
| а | "Assets" alternative test—enter: | | | | | | | |
| u | (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 | | | | | | | |
| С | "Support" alternative test—enter: | | | | | | | |
| | (1) Total support other than gross | | | | | | | |
| | investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | | | |
| | (2) Support from general public | | | | | | | |
| | and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | | | |
| | (3) Largest amount of support from | | | | | | | |
| | an exempt organization | | | | | | | |
| Dort | (4) Gross investment income XV Supplementary Information | n (Complete th | ic part only if the | ho foundation h | ad \$5,000 or m | are in accete at | | |
| Part | any time during the year- | | | | | | | |
| 1 | Information Regarding Foundation | | the moderation | | | | | |
| 'a | List any managers of the foundation | _ | ited more than 2% | 6 of the total conti | ributions received | by the foundation | | |
| _ | before the close of any tax year (but o | | | | | - , | | |
| | Estate of | Tohn | L MCa | mick I | 1. | | | |
| b | List any managers of the foundation | who own 10% or | more of the stoc | k of a corporation | n (or an equally la | rge portion of the | | |
| | ownership of a partnership or other en | ntity) of which the | foundation has a | 10% or greater into | erest. | | | |
| | | | Vone | | | | | |
| 2 | Information Regarding Contribution | , Grant, Gift, Loa | n, Scholarship, e | tc., Programs: | | | | |
| | Check here ▶ ☐ if the foundation | | | | | | | |
| | unsolicited requests for funds. If the | | | c. (see page 28 d | of the instructions |) to individuals or | | |
| | organizations under other conditions, | | | | | | | |
| а | The name, address, and telephone nu | mber of the perso | on to whom applic | ations should be a | ddressed: | | | |
| | Maurice M Eormick | 218 N | P Ave , Fa | 190 ND 5 | 58102 701 | -237-6983 | | |
| b | The form in which applications should | be submitted and | d information and | måterfals they sho | uld include: | · | | |
| | | Lé | the | | | | | |
| С | Any submission deadlines: | 1/ | ли г | | | | | |
| d | Any restrictions or limitations on aw | vards, such as b | y geographical ar | eas, charitable fie | elds, kinds of ins | titutions, or other | | |
| ~ | factors: | | | , | , | | | |
| | | /V 0 | on e | | | | | |

Part XV

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of Amount any foundation manager contribution Name and address (home or business) recipient or substantial contributor Paid during the year 10,000 Nokomis Abused Adult Res. Ctr. Teen Challenge 15,000 Los Amigos del Padre Juan St. Margaret Mary Church Sisters of Presentation Sts. Anne + Joachim Church St. Mary's Cathedral 20,000 5,000 10,000 Fargo Catholic Schools
Airst Choice Clinic
Life Coalition
North Bakota State M
St. Johns Prep School 15,000 10,000 10,000 5000 5000 11 За 500 Approved for future payment Total

| | r gross amounts unless otherwise indicated. | | siness income | Excluded by sect | on 512, 513, or 514 | (e) |
|----|---|---------------------------------------|------------------|-----------------------|------------------------|---|
| | | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | Related or exempt function income (See page 28 of |
| 1 | Program service revenue: | 240,11000 0040 | , unoun | | 7 11100111 | the instructions.) |
| | a | | | | | <u> </u> |
| | b | | | | | |
| | C | | | | | |
| | d | | | | | |
| | e • | | | | | |
| | - Face and another from accomment agencies | | | | | |
| 0 | g Fees and contracts from government agencies Membership dues and assessments | | | | | |
| 3 | Membership dues and assessments | | | 14 | 3.538 | |
| 4 | Dividends and interest from securities | | | 14 | <u> </u> | |
| 5 | Net rental income or (loss) from real estate: | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | ** | | |
| | a Debt-financed property | | 22 444 | (5) | · 3 8 % | Section 1 |
| | 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 | -17511 | |
| 9 | Net income or (loss) from special events | | | , , | 9-371 | _ |
| 10 | Gross profit or (loss) from sales of inventory | | | | | |
| 11 | Other revenue: a | | | | | |
| | b | | | | | |
| | c | | | | | |
| | d | | | | | |
| | е | | | | | |
| 12 | Subtotal. Add columns (b), (d), and (e) | ar e finalisa i gani vi aff | | the without the to | 30,243 | |
| | | | | | 13 ′ <u>3</u> 0 | 243 |
| | worksheet in line 13 instructions on page 29 to verify | | | | | / |
| | T XVI-B Relationship of Activities to the A | ccomplishme | ent of Exemp | t Purposes | A | |
| | Explain below how each activity for which accomplishment of the foundation's exempt purpose instructions) | ourposes (other t | han by providing | g funds for suc | h purposes) (Se | e page 29 of the |
| | inc. actions) | | | | | |
| - | | | | | | = |
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| Part | KVII | | n Regarding ganizations | Fransfe | rs To and | Transac | tions and | Relationsh | nips With Noncha | ritable |) |
|----------------------|---------------------------|--|------------------------------------|------------------------------------|--|----------------------------|---|-------------------------|---|----------------------------------|---------------------------------------|
| | in sed | ne organization o | directly or indire | | | | | | anization described relating to political | \$ 4 | Yes No |
| | (1) C | ifers from the repassh | oorting foundati | | | | organizatior | | | 1a(1) 1a(2) | V |
| b | Other (1) Sa (2) Pa | rtransactions: ales of assets to urchases of asse | ets from a nonci | narıtable | exempt org | anızatıon | | | | 1b(1) 1b(2) | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| | (4) R (5) L | ental of facilities, eimbursement a pans or loan gua erformance of se | rrangements . rantees | | | | | | | 1b(3) 1b(4) 1b(5) 1b(6) | \frac{1}{1} |
| d_ | lf-the value | -answer-to-any-of the goods, o | of-the-above-is ther assets, or | -"Yes , "-c services | complete ⁻ the | e following e reporting | g schedule. g foundation | Column (b) If the foun | should always sho dation received less of other assets, or se | s than fa | air market |
| (a) Line | no (| b) Amount involved | (c) Name of | noncharita | ble exempt org | anization | (d) Desc | nption of transf | ers, transactions, and sh | aring arran | gements |
| | | | | | | | | | | | |
| | desci | e foundation direction 5 | 01(c) of the Co | de (othe | | | | | npt organizations |] Yes | □ No |
| | | (a) Name of organ | ization | | (b) Type | of organizat | ion | | (c) Description of relation | nship | |
| Sign Here Paid | belief Si | r penalties of perjury, it is true, correct, an augmentative of officer or the print/Type preparer | d complete Declaration | tron of pre | d this return, in parer other tha eparer's signati | n taxpayer o | ompanying sch r fiduciary) is ba -/5-/ ate | ased on all infor | Check [_] if | of my kno has any k | wiedge and nowledge |
| Prepa Use C | | Firm's name ► Firm's address ► | | | | | | | self-employed Firm's EIN ▶ Phone no | om 990 | - PF (2010) |

AVERAGE COST SUMMARY

Single Category Method

Vanguard

PO BOX 2600 VALLEY FORGE, PA 19482-2600

2010 Tax Year

PAGE 1 OF 1

M G MCCORMICK, T D MCCORMICK, S D MCCORMICK TRUSTEES JOHN L MCCORMICK MEMORIAL TR UA 08-30-1988 902 3RD AVE S FARGO ND 58103-1707

1-800-345-1344 J SATTERWHITE www.vanguard.com Website

DUPLICATE COPY

This Summary is not a tax document and information is not reported to the IRS. Vanguard provides cost basis information using the Average Cost Single Category method. You may want to consult a tax advisor to determine if this method is appropriate for you. Once you select the Average Cost Single Category method, you are not permitted to change without IRS approval. See IRS Publication 564, Mutual Fund Distributions, and IRS Publication 550, Investment Income and Expenses, for more information.

| 500 INDEX | FUND ADM | | | | Fund/Account | number: 0540 | /88009649374 |
|------------|----------|-----------|------------|------------|--------------|---------------------|-----------------|
| Holding | Date | Shares | Redemption | Average | Total gain | Disallowed | Total gain or |
| period | sold | redeemed | proceeds | cost basis | or (loss) | loss amount (| Allowable loss) |
| Short-term | 03/23 | .000 | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Long-term | 03/23 | 1,500.000 | 162,900.00 | 170,152.20 | (7,252.20) | 92.51 | (7,159.69) |

For your convenience, you may also access average cost information on-line for both realized and unrealized gains and losses for your eligible Vanguard non-retirement accounts at www.vanguard.com.

0843

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3-3





2010 Form 1099-DIV

Instructions for Recipient

Recipient's identification number. For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), or adoption taxpayer identification number (ATIN). However, the issuer has reported your complete identification number to the IRS and, where applicable, to state and/or local governments

Account number. May show an account or other unique number the payer assigned to distinguish your account.

Box 1a. Shows total ordinary dividends that are taxable. Include this amount on line 9a of Form 1040 or 1040A. Also, report it on Schedule B (Form 1040) or Schedule 1 (Form 1040A), if required

The amount shown may be dividends a corporation paid directly to you as a participant (or beneficiary of a participant) in an employee stock ownership plan (ESOP) Report it as a dividend on your Form 1040/1040A but treat it as a plan distribution, not as investment income, for any other purpose

Box 1b. Shows the portion of the amount in box 1a that may be eligible for the 15% or zero capital gains rates. See the Form 1040/1040A instructions for how to determine this amount. Report the eligible amount on line 9b, Form 1040 or 1040A.

Box 2a. Shows total capital gain distributions from a regulated investment company or real estate investment trust. Report the amounts shown in box 2a on Schedule D (Form 1040), line 13. But, if no amount is shown in boxes 2c–2d and your only capital gains and losses are capital gain distributions, you may be able to report the amounts shown in box 2a on line 13 of Form 1040 (line 10 of Form 1040A) rather than Schedule D. See the Form 1040/1040A instructions.

Box 2b. Shows the portion of the amount in box 2a that is unrecaptured section 1250 gain from certain depreciable real property. Report this amount on the Unrecaptured Section 1250 Gain Worksheet-Line 19 in the Schedule D instructions (Form 1040).

Box 3. Shows the part of the distribution that is nontaxable because it is a return of your cost (or other basis). You must reduce your cost (or other basis) by this amount for figuring gain or loss when you sell your stock. But if you get back all your cost (or other basis), report future distributions as capital gains. See Pub. 550, Investment Income and Expenses.

Box 4. Shows backup withholding For example, a payer must backup withhold on certain payments at a 28% rate if you did not give your taxpayer identification number to the payer. See Form W-9, Request for Taxpayer Identification Number and Certification, for information on backup withholding include this amount on your income tax return as tax withheld.

Box 6. Shows the foreign tax that you may be able to claim as a deduction or a credit on Form 1040. See the Form 1040 instructions

Nominees. If this form includes amounts belonging to another person, you are considered a nominee recipient. You must file Form 1099-DIV with the IRS for each of the other owners to show their share of the income, and you must furnish a Form 1099-DIV to each. A husband or wife is not required to file a nominee return to show amounts owned by the other. See the 2010 General Instructions for Certain Information Returns.

2010 Form 1099-B

Instructions for Recipient

Brokers and barter exchanges must report proceeds from transactions to you and the IRS on Form 1099-B. Reporting is also required when your broker knows or has reason to know that a corporation in which you own stock has had a change in control or a substantial change in capital structure. You may be required to recognize gain from the receipt of cash, stock, or other property that was exchanged for the corporation's stock. If your broker reported this type of transaction to you, the corporation is identified in the box below your name and address on Form 1099-B.

Recipient's identification number For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN). or adoption taxpayer identification number (ATIN) However, the issuer has reported your complete identification number to the IRS and, where applicable, to state and/or local governments

Account number. May show an account or other unique number the payer assigned to distinguish your account

Box 1a. Shows the trade date of the transaction For aggregate reporting, no entry will be present

Box 1b. For broker transactions, may show the CUSIP (Committee on Uniform Security Identification Procedures) number of the item reported

Box-2. Shows the aggregate cash proceeds from transactions involving stocks, bonds, other debt obligations, commodities, or forward contracts. May show the proceeds from the disposition of your interest(s) in a widely held fixed investment trust. May also show the aggregate amount of cash and the fair market value of any stock or other property received in a change in control or substantial change in capital structure arising from the corporate transfer of property to a foreign corporation. Losses on forward contracts are shown in parentheses. This box does not include proceeds from regulated futures contracts. The broker must indicate whether gross proceeds or gross proceeds less commissions and option premiums were reported to the IRS. Report this amount on Schedule D (Form 1040), Capital Gains and Losses. But, for changes in control or substantial changes in capital structure, see box 12.

Box 4. Shows backup withholding Generally, a payer must backup withhold at a 28% rate if you did not furnish your taxpayer identification number to the payer See Form W-9, Request for Taxpayer Identification Number and Certification, for information on backup withholding Include this amount on your income tax return as tax withheld

Box 7. Shows a brief description of the item or service for which the proceeds or bartering income is being reported. For regulated futures contracts and forward contracts, "RFC" or other appropriate description may be shown

Please Note Each specific fund name, NOT simply Vanguard, must be reported along with the related tax information on Form 1040, Schedules B and D This applies to both Forms 1099-DIV and 1099-B CUSIP⁵ is a trademark of American Bankers Association

2010 Form 1099-DIV

Dividends and Distributions

Vanguard

P O. BOX 2600 · VALLEY FORGE, PA 19482-2600

PAGE 1 OF 1

1-800-345-1344 J SATTERWHITE

M G MCCORMICK, T D MCCORMICK,
S D MCCORMICK TRUSTEES
JOHN L MCCORMICK MEMORIAL TR
UA 08-30-1988
902 3RD AVE S
FARGO ND 58103-1707

RECIPIENT'S identification number 20-6285678

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

Department of the Treasury - Internal Revenue Service

| Fund | Name | PAYER'S federal identification number | Recipient Account number | | | |
|--|-----------------------------------|--|--|-----------------------------------|---|----------------------------|
| Total ordinary dividends | Box_1b: Qualified dividends | Box-2a: Total capital gain distr. | Box-2b: Unrecap. Sec. 1250 gain | Box 3: Nondividend distributions | Box 4: Federal Income lax with-eld | Box 6: Foreign tax paid |
| PRIME MONEY 258.26 | MKT FUND | 23-6607979 0.00 | 88009649374 0.00 | 0.00 | 0.00 | 0.00 |
| PRIMECAP FUN 545.71 | D INVESTOR 545.71 | 23-2311358 487.04 | 88009649374 0.00 | 0.00 | 0.00 | 0.00 |
| EQUITY INCOM 1,374.76 | 1,374.76 | 23-2491240 0.00 | 88009649374 0.00 | 0.00 | 0.00 | 0.00 |
| GROWTH AND I 486.26 | 486.26 | | | 0.00 | 0.00 | 0.00 |
| 9,337.71 | 9,337.71 | | | 0.00 | 0.00 | 0.00 |
| EQUITY INCOM 540.54 GROWTH AND I | 540.54 | 23-2491240 0.00 23-2426756 | | 0.00 | 0.00 | 0.00 |
| 635.08 SMALL-CAP GR | 635.08 | 0.00 | | 0.00 | 0.00 | 0.00 |
| 212.14 | 185.60 | | 0.00 | 0.00 | 0.00 | 0.00 |
| 618.53 | T | 0.00 | | 0.00 | 0.00 | 0.00 |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Form 1099-DIV OMB No. 1545-0110

See Instructions on Reverse Copy B For Recipient

0843

135 - 1-3

00602486

Ex A 2



2010 Form 1099-DIV

Instructions for Recipient

Recipient's identification number. For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), or adoption taxpayer identification number (ATIN). However, the issuer has reported your complete identification number to the IRS and, where applicable, to state and/or local governments

Account number. May show an account or other unique number the payer assigned to distinguish your account

Box 1a. Shows total ordinary dividends that are taxable. Include this amount on line 9a of Form 1040 or 1040A. Also, report it on Schedule B (Form 1040) or Schedule 1 (Form 1040A), if required

The amount shown may be dividends a corporation paid directly to you as a participant (or beneficiary of a participant) in an employee stock ownership plan (ESOP) Report it as a dividend on your Form 1040/1040A but treat it as a plan distribution, not as investment income, for any other purpose.

Box 1b. Shows the portion of the amount in box 1a that may be eligible for the 15% or zero capital gains rates. See the Form 1040/1040A instructions for how to determine this amount. Report the eligible amount on line 9b, Form 1040 or 1040A.

Box 2a. Shows total capital gain distributions from a regulated investment company or real estate investment trust. Report the amounts shown in box 2a on Schedule D (Form 1040), line 13. But, if no amount is shown in boxes 2c–2d and your only capital gains and losses are capital gain distributions, you may be able to report the amounts shown in box 2a on line 13 of Form 1040 (line 10 of Form 1040A) rather than Schedule D. See the Form 1040/1040A instructions.

Box 2b. Shows the portion of the amount in box 2a that is unrecaptured section 1250 gain from certain depreciable real property. Report this amount on the Unrecaptured Section 1250 Gain Worksheet–Line 19 in the Schedule D instructions (Form 1040).

Box 3. Shows the part of the distribution that is nontaxable because it is a return of your cost (or other basis). You must reduce your cost (or other basis) by this amount for figuring gain or loss when you sell your stock. But if you get back all your cost (or other basis), report future distributions as capital gains. See Pub. 550, Investment Income and Expenses.

Box 4. Shows backup withholding For example, a payer must backup withhold on certain payments at a 28% rate if you did not give your taxpayer identification number to the payer. See Form W-9, Request for Taxpayer Identification Number and Certification, for information on backup withholding Include this amount on your income tax return as tax withheld.

Box 6. Shows the foreign tax that you may be able to claim as a deduction or a credit on Form 1040. See the Form 1040 instructions

Nominees. If this form includes amounts belonging to another person, you are considered a nominee recipient. You must file Form 1099-DIV with the IRS for each of the other owners to show their share of the income, and you must furnish a Form 1099-DIV to each. A husband or wife is not required to file a nominee return to show amounts owned by the other. See the 2010 General Instructions for Certain Information Returns.

2010 Form 1099-B

Instructions for Recipient

Brokers and barter exchanges must report proceeds from transactions to you and the IRS on Form 1099-B. Reporting is also required when your broker knows or has reason to know that a corporation in which you own stock has had a change in control or a substantial change in capital structure. You may be required to recognize gain from the receipt of cash, stock, or other property that was exchanged for the corporation's stock. If your broker reported this type of transaction to you, the corporation is identified in the box below your name and address on Form 1099-B.

Recipient's identification number. For your protection, this form may show only the last four digits of your social security number (SSN), individual taxpayer identification number (ITIN), or adoption taxpayer identification number (ATIN). However, the issuer has reported your complete identification number to the IRS and, where applicable, to state and/or local governments

Account number. May show an account or other unique number the payer assigned to distinguish your account

Box 1a. Shows the trade date of the transaction For aggregate reporting, no entry will be present

Box 1b. For broker transactions, may show the CUSIP (Committee on Uniform Security Identification Procedures) number of the item reported

Box 2. Shows the aggregate cash proceeds from transactions involving stocks, bonds, other debt obligations, commodities, or forward contracts. May show the proceeds from the disposition of your interest(s) in a widely held fixed investment trust. May also show the aggregate amount of cash and the fair market value of any stock or other property received in a change in control or substantial change in capital structure arising from the corporate transfer of property to a foreign corporation. Losses on forward contracts are shown in parentheses. This box does not include proceeds from regulated futures contracts. The broker must indicate whether gross proceeds or gross proceeds less commissions and option premiums were reported to the IRS. Report this amount on Schedule D (Form 1040), Capital Gains and Losses. But, for changes in control or substantial changes in capital structure, see box 12.

Box 4. Shows backup withholding Generally, a payer must backup withhold at a 28% rate if you did not furnish your taxpayer identification number to the payer See Form W-9, Request for Taxpayer Identification Number and Certification, for information on backup withholding. Include this amount on your income tax return as tax withheld

Box 7. Shows a brief description of the item or service for which the proceeds or bartering income is being reported. For regulated futures contracts and forward contracts, "RFC" or other appropriate description may be shown

Please Note Each specific fund name, NOT simply Vanguard, must be reported along with the related tax information on Form 1040, Schedules B and D This applies to both Forms 1099-DIV and 1099-B CUSIP⁸ is a trademark of American Bankers Association

Tax Year 2010

M MCCORMICK S MCCORMICK T MCCORMICK Account Number: 176 013131 012

REALIZED GAIN/(LOSS) SUMMARY (continued)

| \$(10,351.01) | | \$384,725.53 | | | Total Short And Long Term |
|---------------|-------------|--------------|-------------------------------|--------|-------------------------------|
| \$(13,055.15) | | \$203,725.53 | | | Total Long Term |
| \$312 51 | \$12,137 67 | \$12,450 18 | ı | SMCWX | |
| \$301 89 | \$12,137.67 | \$12,439 56 | | SMCWX | AMERICAN SMALLCAP WORLD A |
| \$(1,651.66) | \$11,029.71 | \$9,378.05 | 187.000 05/21/2008 04/15/2010 | NEWFX | AMERICAN NEW WORLD A |
| \$(1,640 44) | \$11,029 71 | \$9,389.27 | 187.000 05/21/2008 04/14/2010 | NEWFX | AMERICAN NEW WORLD A |
| \$(12 56) | \$301 24 | \$288 68 | 10 668 06/13/2006 04/15/2010 | ANWPX | AMERICAN NEW PERSPECTIVE A |
| \$(17.78) | \$336.44 | \$318.66 | 11.776 12/27/2005 04/15/2010 | ANWPX | AMERICAN NEW PERSPECTIVE A |
| \$(81 51) | \$1,541 99 | \$1,460.48 | | ANWPX | AMERICAN NEW PERSPECTIVE A |
| \$(914.72) | \$11,375 68 | \$10,460.96 | 386.584 09/14/2005 04/15/2010 | ANWPX | AMERICAN NEW PERSPECTIVE A |
| \$(1,081 64) | \$13,624 31 | \$12,542 67 | | ANWPX | AMERICAN NEW PERSPECTIVE A |
| \$(2,125 52) | \$16,401 60 | \$14,276 08 | 518 000 09/14/2005 04/15/2010 | AIVSX | AMERICAN INV CO OF AMER A |
| \$(2,141 06) | \$16,401.60 | \$14,260 54 | 518 000 09/14/2005 04/14/2010 | AIVSX | AMERICAN INV CO OF AMER A |
| \$(133 00) | \$14,465.41 | \$14,332 41 | | AGTHX | AMERICAN GR FD OF AMERICA A |
| \$(142 74) | \$14,465 41 | \$14,322 67 | | AGTHX | AMERICAN GR FD OF AMERICA A |
| \$16.11 | \$12,398 37 | \$12,414.48 | | AEPGX | AMERICAN EUROPACIFIC GRW A |
| \$47 31 | \$12,398 37 | \$12,445.68 | 1 | AEPGX | AMERICAN EUROPACIFIC GRW A |
| \$(424.19) | \$12,354.79 | \$11,930 60 | | CWGIX | AMERICAN CAP WRLD GR & INC A |
| \$(410.59) | \$12,354 79 | \$11,944.20 | | CWGIX | AMERICAN CAP WRLD GR & INC A |
| \$(1,486 69) | \$16,012.96 | \$14,526.27 | 297.000 09/14/2005 04/15/2010 | CAIBX | AMERICAN CAP INC BUILDER A |
| \$(1,468.87) | \$16,012.96 | \$14,544 09 | 297.000 09/14/2005 04/14/2010 | CAIBX | AMERICAN CAP INC BUILDER A |
| GAIN/(LOSS) | ADJUSTED | PROCEEDS | Ö | SYMBOL | DESCRIPTION |
| REALIZED | ORIGINAL | | DATE DATE | | |
| | TOTAL COST | | | | |
| | | | | | Long Term |
| | | | | | |
| | | | | | |
| \$2,704.14 | | \$181,000.00 | | | Total Short Term |
| \$15 26 | \$841.22 | \$856.48 | 63.584 04/15/2010 07/01/2010 | AIBAX | AMERICAN INTM BD FD OF AMER A |
| \$209 94 | \$11,573.26 | \$11,783.20 | 874.774 04/15/2010 07/01/2010 | AIBAX | AMERICAN INTM BD FD OF AMER A |
| \$21.68 | \$1,195.12 | \$1,216.80 | 1 | AIBAX | AMERICAN INTM BD FD OF AMER A |
| \$231 63 | \$12,768.37 | \$13,000 00 | 04/15/2010 0 | AIBAX | AMERICAN INTM BD FD OF AMER A |
| GAIN/(LOSS) | ADJUSTED | PROCEEDS | QUANTITY ACQUIRED SOLD | SYMBOL | DESCRIPTION |
| REALIZED | TOTAL COST | | DATE DATE | | |
| | | | | | |

The "Total Cost" for Unit Trusts, Mortgage-Backed Securities, and Zero Coupon Bonds have been adjusted to reflect any partial return of principal or capital that may have been paid to you, or accreted interest earned, since your purchase date. In the event that the accumulated total return of principal or capital is greater than the provided original costs, the adjusted cost will be "0.00".

ExB

PERTINENT TAX MESSAGES



*** WARNING - CORRECTED TAX FORMS POSSIBLE ***

been successful in reducing their number each year. services industry and is not peculiar to Morgan Stanley Smith Barney. While the possibility of corrected tax statements cannot be completely eliminated we have If an issuer revises its tax information after February 15th, we are required to send you a corrected tax statement. This is a recurring problem in the financial we have sent it to you. For example, a mutual fund may reclassify a qualified dividend as nonqualified or a REIT may reclassify a dividend as return of capital. February 15th IRS deadline. Some mutual funds, real estate investment trusts (REITs) and unit investment trusts (UITs) may revise their tax information after Morgan Stanley Smith Barney does not always have the necessary information to provide you with a final correct Consolidated Tax Statement by the required

If you would like a list or an updated status of those securities that we have identified as consistently reallocating their distributions after February 15th, please consult your Financial Advisor or call our customer service center at 866-324-6088

addition to the 1099 information reported on page 3. We recommend that you keep the entire statement in your files for as long as you retain your tax records. This statement contains important tax information in

phone, you must be on the line with him/her. information with your tax advisor please contact your Financial Advisor to set up the advisor as an authorized party. For your advisor to receive information by For your protection Morgan Stanley Smith Barney can not provide account information to anyone other than the account owner. If you would like us to share

Form 5498 Information

and recharacterizations. It is not necessary to attach Form 5498 to your tax return. confirms all IRA contributions for the prior tax year made up until the tax filing deadline (usually April 15) and also displays incoming rollovers, Roth conversions If you have an IRA with Morgan Stanley Smith Barney, please note that your Form 5498 will be mailed to you separately by May 31, 2011. The Form 5498

concerning the translation of tax form information onto an individual tax return should be referred to a tax professional. Please note that Morgan Stanley Smith Barney is not a tax advisor. Please consult your tax advisor for the appropriate treatment of this information. Questions Page 16 of 16



Financial Management Account Forms 1099 for 2010

Page 3 of 7

Ref. 00003779 00027978

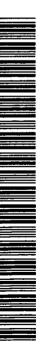
MAURICE G, THOMAS D Account Number 194-11950-16 317

Tax ID number 20-6285678

been reported. a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return,

1099-DIV Dividends and Distributions 2010

Box 3 Box 1a Nondividend distributions Total ordinary dividends \$ 7,090 62 Box 4 Box 1b Federal income tax withheld Qualified dividends \$ 7,090.62 Investment expenses Box 5 Box 2a Total capital gain distributions \$ 1,025.79 Foreign tax paid Box 6 Box 2b Unrecaptured Sec 1250 gain \$ 11.70 Box 7 Foreign country or US possession Box 2c **Various** Section 1202 gain Box 8 Cash liquidation distributions Box 2d Collectibles (28%) gain Box 9 (CMB No.1545-0110) Non cash liquidation distributions



ExB2

Ref: 00003779 00027979

2010 Year End Summary Financial Management Account

MAURICE G , THOMAS D.

Account Number 194-11950-16 317

We are pleased to provide you with this overview of activity in your account this year. This information will help you understand the performance of your investments and manage your account with the assistance of your Financial Advisor. This information is not provided to the IRS.

Value of your portfolio

| \$ 879,514.15 | Value of your account on 12/31/08 |
|---------------|-----------------------------------|
| \$ 986,458.67 | Value of your account on 12/31/10 |
| 26,490.19 | Bank deposit program - principal |
| 26,484.36 | Closed end funds |
| 48,190.12 | Preferred stocks |
| 349,888.57 | Common stocks & options |
| 535,080 45 | Mutual funds |
| \$ 324.98 | Combined account balance |
| Amount | Description |

Earnings summary 2010

totals reported on your monthly statement. Due to IRS reporting requirements, these figures may not be the same as

| \$ 11,561 11 | | \$ 11,561.11 | Totals |
|--------------|-------------|---------------------|---------------------|
| 7,090.62 | | 7,090.62 | Qualified dividends |
| 1,025.79 | | 1,025.79 | Other dividends ** |
| \$ 3,444.70 | | \$ 3,444 70 | Interest * |
| Total | 1099 Exempt | 1099 Reported | Description |

**If you received money funds earnings, capital gain distributions or of Boxes 1, 3, and 8 on Form 1099-INT This includes tax-exempt interest and dividend income. *If you received accrued interest, it is included in this amount. 1099 Reported amount is a total non-taxable distributions, they are included in this amount

Summary of miscellaneous tax withheld 2010

ZM

The following taxes have been withheld in compliance with U.S. federal, state

| | ו |
|--------------------|--------|
| Description Amount | i U |
| ın taxıpaıd | 70 |
| Total \$11 | 6 |



Financial Management Account

Page 1 of 11

Ref: 00005148 00034179

MAURICE G , THOMAS D.
STEVE D MCCORMICK, TITEES FARGO ND 58103-1707 902-3RD AVE. S. JOHN L MCCORMICK MEMORIAL TST DTD 7/8/04 U/W/O J MCCORMI L10000005148 310365AA01 IOWFOL03A

December 1 - December 31, 2010 Account number 194-11950-16 317

Morgan Stanley Smith Barney LLC. Member SIPC

8888 EAST PINNACLE Catherine H Heitel Your Financial Advisor

SCOTTSDALE AZ 85255

PEAK ROAD

Website: www.smithbarney.com

Email: catherine.h.heitel@mssb.com

480 502 6060

Branch Phone: 800 259 8946 FMA Client Services: 1-800-634-9855 TTY/TDD Deaf & Hard of hearing: 800-227-4238

Account carried by Citigroup Global Markets Inc. Member SIPC

| Account value | Last period | This period | % | Cas |
|---|---------------|---------------|-----------------|--------|
| Cash balance | \$ 0.00 | \$ 324.88 | ၀ဒ | Openi |
| Bank Deposit Program SM -principal | 25,703.53 | 26,490.19 | 2.69 | Withd |
| Common stocks & options | 331,017.05 | 349,888.57 | 35.47 | Divide |
| Exchange traded & closed end funds | 23,377.60 | 26,484 36 | 2.68 | Bank |
| Preferred stocks | 46,360.11 | 48,190.12 | 4.89 | Closir |
| Mutual funds | 504,866.29 | 535,080.45 | 54.24 | A free |
| Total value | \$ 931.324.58 | \$ 986,458.67 | 100.00 00.00 | Althou |

| business purposes. | ay be used for | Although properly accounted for, these funds m | 8 |
|--------------------|----------------|--|------|
| you on demand. | nay be paid to | A free credit balance in any securities account i | 4.24 |
| | \$ 26,815.17 | Closing balance | 4.89 |
| | .68 | Bank Deposit Program SM interest reinvested | 2.68 |
| - | 1,110.96 | Dividends credited | 5.47 |
| 000 | 000 | Withdrawals | 2.69 |
| | \$ 25,703.53 | 03 Opening balance \$ 25,703.53 | ය |
| This year | This period | Cash, money fund, bank deposits | % |

| | | \$ 0.00 | \$ 11,561 11 | \$ 0.00 | \$ 1,111.64 | |
|---------------|--|-------------|--------------|-------------|-------------|----|
| \$ 55,134.09 | Change in value | 0.00 | 13 46 | 0.00 | .68 | l≅ |
| \$ 986,458.67 | Total value as of 12/31/2010 (excl. accr int.) | 0.00 | 2,097.45 | 0.00 | 907.35 | |
| 831,324 58 | Beginning value net of deposits/withdrawals | 0.00 | 6,018 96 | 0.00 | 203.61 | |
| 0.00 | Net cash deposits/withdrawals | \$ 0 00 | \$ 3,431.24 | \$ 0.00 | \$ 0.00 | |
| 0.00 | Net security deposits/withdrawals | Non-taxable | Taxable | Non-taxable | Taxable | |
| \$ 831 324 58 | Beginning total value (excl. accr. int.) | This year | This | This period | | |
| Till's period | r or trong autilitial y | | ļ | | | |

\$ 106,944.52 \$ 986,458 67

879,514 15

0.00

\$ 879,514.15

This year

Earnings summary

FRGN tax withheld

Additional summary information

This period \$ 0 00

This year \$ 11.70

Total

Bank Deposit Program interes

Other dividends Qualified dividends



Ref. 00005148 00034180

Financial Management Account

December 1 - December 31, 2010

MAURICE G , THOMAS D.

Account number 194-11950-16 317

Unrealized gain or-(loss) to date Gain/loss summary (\$ 9,457 43) This period This year

PORTFOLIO DETAILS

www.smithbarney.com. in some cases CGMI's sources are unable to provide timely information. To see the date of the most recent price update, please view your account online at Your holdings are valued using the most current prices available to Citigroup Global Markets Inc. (CGMI). In most cases, these values are as of 12/31/10, but

the "Unsettled Purchases/Sales" section for more information. Dividend yield is the estimated annual income, assuming the current dividend, divided by the security's market price at the end of Securities purchased or sold are included or excluded in this section as of the trade-date. This section may include securities that have not settled as of this statement closing date. Please see

Please Note: unrealized gain/(loss) is being shown for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor the statement period. We do not guarantee the accuracy of the prices reflected on the statement nor do these prices represent levels at which securities can be bought or sold

Bank Deposit Program^{s™}

applies certain limits to the maximum deposit amount permitted in certain banks, which may be below the maximum FDIC insurance limits for certain types of accounts. In those instances where an account type exceeds the maximum FDIC insurance limits, those deposits will be uninsured. Balances maintained in Deposit Accounts at each Affiliated Program Bank are not protected by the Securities Investor Protection Corporation ("SIPC") or any excess-SIPC coverage provided by Citigroup Global Markets Inc For complete details please refer to the "Bank Deposit Program Disclosure Statement" The Federal Deposit Insurance Corporation (FDIC) provides insurance on deposits up to \$250,000 per account owner, per bank. However, the Smith Barney Bank Deposit Program (BDP)

| Total Bank Deposit Program | BANK DEPOSIT PROGRAM | 26,490.19 CITIBANK NA SOUTH DAKOTA | Principal Description | |
|----------------------------|----------------------|------------------------------------|---------------------------------|--|
| | ROGRAM | ITH DAKOTA | | |
| \$ 26,480.19 | | \$ 26,490 19 | Current value | |
| \$ 0,00 | - | - | Accrued Interest | |
| .03% | | .03% | Annualized % | |
| \$7.94 | | \$ 7.94 | Anticipated income (annualized) | |



CLIENT STATEMENT | For the Period December 1-31, 2010

MorganStanley SmithBarney

Active Assets Account 176-013131-012

M MCCORMICK S MCCORMICK T MCCORMICK CO-TTEES JOHN L MCCORMICK MEMORIAL

Account Summary

| BALANCE SHEET | | | CASH FLOW |
|--|------------------------------|---------------------------------|------------------------|
| | Last Period (as of 11/30/10) | This Period (as of 12/31/10) | |
| TOTAL VALUE (incl. accr. int.) | \$1,210,138.49 | \$1,272,046.07 | OPENING CASH BALANCE |
| ASSETS | \$1,210,138.49 | \$1,272,046.07 | NET CREDITS/DEBITS |
| Cash, Deposits, MMFs | 82,489.47 | 82,623 66 | CREDITS |
| Stocks | | I | Checks Denosited |
| Municipal Bonds | 1 | t | Electronic Transfers |
| Corporate Fixed Income | ! | 1 | Other Credits |
| Government Securities | ! | ļ | DEDITO |
| Certificates of Deposit | 1 | 1 | DEBILS |
| Mutual Funds | 1,127,649.02 | 1,189,422.41 | World Card |
| Unit Investment Trusts | - | 1 | ATM/Cash Advances |
| Annuities & Insurance | 1 | 1 | Checks Written |
| Other | 1 | I | Automated Payments |
| | | | Electronic Transfers |
| LIABILITIES (Outstanding Balance) | | | Interest Charged |
| There are no liabilities for this account. | | | Tax Withholdings |
| | | | Other Debits |
| | _ | | NET CASH FROM |
| | | | INVESTMENTS |
| | _ | | Income |
| | | | Dividend Reinvestments |
| | | | Purchases |
| | _ | | Sales/Redemptions |
| | | | CLOSING CASH BALANCE |

| \$82,623.66 | \$82,623.66 | CLOSING CASH BALANCE | |
|--------------------------------|-----------------------------|------------------------|-------|
| i | 384,725.53 | Sales/Redemptions | |
| l | (459,725 53) | Purchases | |
| (11,362.53) | (20,553.52) | Dividend Reinvestments | |
| 11,496.72 | 22,158.62 | Income | |
| \$134.19 | \$(73,394.90) | INVESTMENTS | |
| | | NET CASH FROM | |
| ı | ł | Other Debits | |
| ſ | 1 | Tax Withholdings | |
| i | 1 | Interest Charged | |
| 1 | 1 | Electronic Transfers | |
| 1 | 1 | Automated Payments | • |
| 1 | 1 | Checks Written | • |
| I | 1 | ATM/Cash Advances | · |
| 1 | 1 | World Card | .41 |
| 1 | 1 | DEBITS | |
| 1 | 1 | Other Credits | • |
| 1 | I | Electronic Transfers | |
| 1 | | Checks Deposited | · |
| I | ļ | CREDITS | 66 |
| | | NET CREDITS/DEBITS | .07 |
| \$82,489.47 | \$156,018.56 | OPENING CASH BALANCE | .07 |
| This Period (12/1/10-12/31/10) | This Year (1/1/10-12/31/10) | | eriod |



BUSINESS ACCOUNTS

Page 3 of 28

CLIENT STATEMENT | For the Period December 1-31, 2010

Account Summary

Active Assets Account 176-013131-012

MorganStanley SmithBarney

M MCCORMICK S MCCORMICK T MCCORMICK CO-TTEES JOHN L MCCORMICK MEMORIAL

INCOME SUMMARY

| | This Year (1/1/10-12/31/10) | This Period (12/1/10-12/31/10) |
|----------------------------|--------------------------------|-----------------------------------|
| TOTAL INCOME | \$22,158.22 | \$11,496.72 |
| TAXABLE INCOME | 22,158.22 | 11,496.72 |
| Dividends | 22,065.37 | 11,491.55 |
| Capital Gain Distributions | l | 1 |
| Interest | 92.85 | 5.17 |
| Other Income | 1 | J |
| TAX-EXEMPT INCOME | -1 | I |
| Dividends | 1 | ŀ |
| Interest | 1 | I |
| | | |

taxable status of the account. Taxable and tax exempt income classifications are based on the characteristics of the underlying securities and not the

GAIN/(LOSS) SUMMARY

| (52,992.53) | (489.08) | (Loss) |
|---------------|-------------|--------------------------------|
| 20,145.68 | 38,148.94 | Gain |
| \$(32,846.85) | \$37,659.86 | NET UNREALIZED (12/31/10) |
| 1 | ı | (Loss) |
| 1 | ı | Gain |
| ŀ | l | NET REALIZED |
| Long-Term | Short-Term | This Period (12/1/10-12/31/10) |
| (13,732 97) | 1 | (Loss) |
| 677.82 | 2,704 14 | Gain |
| \$(13,055.15) | \$2,704.14 | NET REALIZED |
| Long-Term | Short-Term | This Year (1/1/10-12/31/10) |

Gain / loss and income information are provided for informational purposes only and should not be used for tax preparation. Gain / loss summary information may change due to basis adjustments.

Please refer to the gain I loss section of the disclosures for additional information.

MSSB_STMT (REV 07/10)



Jason C. Satterwhite, Registered Representative > 800-345-1344 > ext 7318

www.vanguard.com

Vanguard FLAGSHIP Services®

December 31, 2010, year-to-date statement

Statement overview as a second
Value on 12/31/2010

M. G. Mccormick, T. D. Mccormick,

John L. McCormick Memorial Tr S. D. McCormick Trustees

UA 08-30-1988 **Trust Account**

Asset mix The Character.

The second second

Value on 12/31/2009

\$1,144,461.48

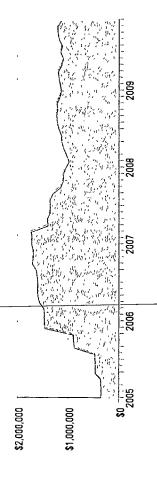
\$1,176,075.08

| % of | % of Portfolio | Value on 12/31/2010 |
|------|---------------------------|------------------------|
| | 26.8% Short-term reserves | \$307,17581 |
| | 0.0% Bonds | 00 0 |
| | 73.2% Stocks | 837,285 67 |
| 独, | 0.0% Other | 00 0 |
| | | \$1,144,461.48 |

To view allocations for your accounts, log on to www vanguard.com

中国各种公司 軍事不会不必

Balance trend



Investment return summary

Your investment return since December 31, 2005 is \$169,319 70



Vanguard FLAGSHIP Services®

December 31, 2010, year-to-date statement

www.vanguard.com

Jason C Satterwhite, Registered Representative, ext. 7318

Flagship Services > 800-345-1344

S D MCCORMICK TRUSTEES JOHN L MCCORMICK MEMORIAL TR 902 3RD AVE S FARGO ND 58103-1707 M G MCCORMICK T D MCCORMICK

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