

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990-PF

### **Return of Private Foundation**

#### or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

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.

OMB No 1545-0052

For	caler	ndar year 2010, or tax year beginning JAN	8, 2010	, and ending	DEC 31, 2010					
G (	Check	all that apply:	Initial return of a fo	ormer public charity	Final return					
		Amended return	Address chan	ge 🔲	Name change					
Na	me of	foundation			A Employer identification	number				
i										
		WALDEMAR J. KLASING P	RIVATE FOUND	ATION	27-1831894					
Nu	nber a	und street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number					
		8000 MARYLAND AVENUE		1150	314-726-24	11				
Cıt	City or town, state, and ZIP code									
		CLAYTON, MO 63105			D 1. Foreign organizations, check here					
н	Check	type of organization: X Section 501(c)(3) ex	cempt private foundation		2 Foreign organizations me check here and attach co	eting the 85% test,				
	_		Other taxable private founda	ation		•				
l Fa		arket value of all assets at end of year   J   Accounti		Accrual	E If private foundation state under section 507(b)(1)	(A), check here				
		, I	ther (specify)		F If the foundation is in a	• •				
	\$	252,404. (Part I, colu		basis)	under section 507(b)(1)					
_	art I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements				
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)				
	1	Contributions, gifts, grants, etc., received	250,000.		N/A					
	2	Check If the foundation is not required to attach Sch. B	•							
	3	Interest on savings and temporary cash investments								
	4	Dividends and interest from securities	3,496.	3,496.		STATEMENT 1				
	5a	Gross rents	, , , , , ,							
	Ь									
	6a	Net gain or (loss) from sale of assets not on line 10								
Ę	b	Groce cales price for all			<del>-</del> - · · · · · · · · · · · · · · · · · ·					
Revenue	7	Capital gain net income (from Part IV, line 2)		0.						
æ	8	Net short-term capital gain		<u></u>						
	9	Income modifications		·· · · · · · · · · · · · · · · · · · ·	<del> </del>					
	10a	Gross sales less returns								
	'.	Less Cost of goods sold								
	l	Gross profit or (loss)								
	11	Other income								
	12	Total. Add lines 1 through 11	253,496.	3,496.						
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.				
	14	Other employee salaries and wages	,			•				
	l	Pension plans, employee benefits								
ses		Legal fees STMT 2	800.	0.		800.				
		Accounting fees	5000							
Operating and Administrative Expen	C	Other professional fees			KECEIVED	-05				
ē	17	Interest		l es						
ati	18	Taxes		i Š	MAY 17 2011	HQ1				
istr	19	Depreciation and depletion		<b>₹</b>						
듩	20	Occupancy		ÿ	OCOEN LO					
Ā	21	Travel, conferences, and meetings		<u> </u>	OGDEN, UT					
2	22	Printing and publications								
g	23	Other expenses STMT 3	326.	326.		0.				
atin	24	Total operating and administrative								
ě		expenses Add lines 13 through 23	1,126.	326.		800				
ŏ	25	Contributions, gifts, grants paid	0.	<u> </u>		0.				
		Total expenses and disbursements.		·	· · · · · · · · · · · · · · · · · · ·					
	-	Add lines 24 and 25	1,126.	326.		800.				
	27	Subtract line 26 from line 12:								
		Excess of revenue over expenses and disbursements	252,370.							
	1	Net investment income (if negative, enter -0-)		3,170.		<del></del>				
_	1	Adjusted net income (if negative, enter -0-)		- <b>, ,</b> -	N/A					

5

Form **990-PF** (2010)

LHA For Paperwork Reduction Act Notice, see the instructions.

023511 12-07-10 Form **990-PF** (2010)

252,404.

Decreases not included in line 2 (itemize)

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

Add lines 1, 2, and 3

	DEMAR J. KLAS			DAT	ION		27-	-1831	894	Page 3
(a) List and desc	cribe the kind(s) of property so arehouse; or common stock, 2	ld (e.g., real estate,		( <b>b)</b>	How acc - Purch - Dona	quired ase tion				sold y, yr.)
1a							_			
b NO	NE			ـــ						
<u>c</u>	<del> </del>			┼					<del></del>	
<u>d</u>				<del> </del>						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		ost or other basis expense of sale	1	(h) Gain or (loss) (e) plus (f) minus (g)					
a										
b										
<u>c</u>										
<u>d</u>										
Complete only for assets shown	ng gain in column (h) and own	ed by the foundation	n on 12/31/69				II) Coine (Col	/h) gain n		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) E	xcess of col. (i) r col. (j), if any			CC	(I) Gains (Col. bl. (k), but not Losses (fro	less than	-0-) or	
a										
<u>b</u>					_					
<u>c</u>			<del></del>							
<u>d</u>				-				_		
<u>e</u>	C #		. 7	$\overline{}$	1					
2 Capital gain net income or (net ca	apıtal loss) 🥤 lf (loss), e	o enter in Part I, line nter -0- in Part I, line	e 7	}	2					
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8, if (loss), enter -0- in Part I, line 8	column (c).	2(5) and (6):		}	3					
Qualification U	Inder Section 4940(e	) for Reduce	d Tax on Net	t Inv	estm	ent In	come			
(For optional use by domestic private	e foundations subject to the se	ection 4940(a) tax o	n net investment i	ncome	e.)				N/A	
If section 4940(d)(2) applies, leave t	his part blank.									
		his amount of amou		40				Г		
Was the foundation liable for the sec If "Yes," the foundation does not qua			•	riouz				L	Yes	No
1 Enter the appropriate amount in				ies.			_			
(a) Base period years Calendar year (or tax year beginni	Adjusted qualifier	)	Net value of no	(c)	rtable-u	se asset	s (co	Distribu I. (b) divid	<b>d)</b> tion ratio led by col. (	(c))
2009										
2008										
2007			ļ							
2006		<del></del>								
2005							-			
O Total of line 1 column (d)										
<ul><li>2 Total of line 1, column (d)</li><li>3 Average distribution ratio for the</li></ul>	5-year hase period - divide the	total on line 2 by 5	or by the number	r of ve	are		2			
the foundation has been in existe		, total on mid 2 by o	, or by the number	, 01 yo	uis		3			_
4 Enter the net value of noncharital	ole-use assets for 2010 from P	art X, line 5					4			
5 Multiply line 4 by line 3							5			
6 Enter 1% of net investment incor	ne (1% of Part I, line 27b)						6			_
7 Add lines 5 and 6							7		<u> </u>	
8 Enter qualifying distributions from	n Part XII, line 4						8			
If line 8 is equal to or greater that See the Part VI instructions.	n line 7, check the box in Part	VI, line 1b, and com	plete that part usir	ng a 1°	% tax ra	ite.				
023521 12-07-10								For	m <b>990-P</b>	<b>F</b> (2010)

_	ስ 990-PF		WALDEMA	AR J	J	KLAS]	ING	PRIV	ATE	FO	JNI	TAC	ION			<u> 27-</u>	183	1894	<u> </u>	Page 4
Pá	art VI	Excise T	ax Based o	n In	vest	ment l	ncom	e (Sec	tion 4	4940	(a),	4940	0(b),	4940(e)	), or 4	948	- see	instr	uctio	ns)
1a	. Exempt	t operating foun	dations describe	ed in se	ection	4940(d)(2	), check	k here 🕨		and ent	er "N/	A" on	line 1.		)					
	Date of	ruling or detern	nınatıon letter: _		_		_ (attac	ch copy of	letter	if nece	ssary	-see i	instruct	tions)						]
b	Domest	tic foundations t	that meet the se	ction 49	940(e	) requirem	ents ın	Part V, che	eck her	e 🕨		and e	enter 1°	%	}	1				63.
	of Part	l, line 27b													i		]			
C	: All othe	r domestic four	idations enter 29	% of lin	ie 27b	. Exempt f	oreign d	organizatio	ns ent	er 4% (	of Par	t I, lın	e 12, c	ol. (b). 🕠	ļ				_	
2	Tax und	der section 511	(domestic section	on 4947	7(a)(1	) trusts an	d taxab	le foundati	ons or	ıly. Oth	ers er	nter -0	)-)			2				0.
3	Add line	es 1 and 2														3_				<u>63.</u>
4	Subtitle	A (income) tax	(domestic secti	on 494	7(a)(1	l) trusts ar	nd taxab	ole foundat	ions o	nly. Oth	ers e	nter -(	0-)			4		_		0.
5	Tax bas	sed on investm	<mark>ent income</mark> . Sub	otract li	ne 4 f	rom line 3.	. If zero	or less, en	iter -0-	•						5				<u>63.</u>
6	Credits/	Payments:																		
а	2010 es	stimated tax pay	ments and 2009	overp	ayme	nt credited	to 2010	0		Ļ	6a									
b	Exempt	foreign organiz	ations - tax with	held at	sourc	e					6b	ļ								
C	Tax paid	d with application	n for extension	of time	to file	(Form 88	68)				6c	<u> </u>								
		-	oneously withhe								6d	<u> </u>								
7			ents. Add lines 6					_								7			_	<u>0.</u>
8			nderpayment of						2220 is	s attach	ed					8				
9			lines 5 and 8 is i													9				63.
10	Overpay	yment. If line 7	is more than the	total o	of lines	5 5 and 8, 6	enter th	e amount e	overpa	ıid				1		10				
			e 10 to be: Cred					<u> </u>						Refund	ed 🖊	11				
			nents Rega							<del></del>									1	
1a			the foundation	attemp	t to ın	fluence an	y nation	nal, state, o	r local	legisla	tion o	r did i	it partic	ipate or in	tervene	ın			Yes	No
_		tical campaign?																1a	<del> </del>	X
b			\$100 during the															1b	ļ	X
			" to 1a or 1b, a						tivities	s and d	copie	s of a	any ma	iterials pu	ıblıshe	d or			1	
		-	undation in coi				tivities.											<u> </u>	ļ	
			orm 1120-POL															1c_	<u> </u>	X
đ			y) of tax on polit			-									•				ĺ	
			\$							-					0.					
е			nt (if any) paid b	_		tion during	) the yea	ar for politi	ical exp	penditu	re tax	ımpo	sed on	foundatio	n					
_	_	rs. <b>&gt;</b> \$		0.	-		1	<b>.</b>			_							<u> </u>	1	<b> </b>
Z			aged in any activ			-	/iousiy t	oeen repor	tea to	tne iks	7							2		X
•			ailed description				d to the	IDC .m.da			<b></b>					_			İ	
3			de any changes,									ent, ar	rticies d	i incorpor	ation, o	r		-		7,
4-			instruments? <i>If</i> unrelated busin							_								3		X
			return on <b>Form</b>				1,000 0	i illore uui	ing un	e year r						NT.	/A	4a		
			termination, dis			-	Leontra	ction durin	ia tha s	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						14	/ A	4b 5		x
Ü			tatement requi						ig uic j	year.								1	-	$\bigcap$
ĥ			f section 508(e)						eatiefi	ed eth	or.									
ŭ			verning instrum			00110115 15	777 0110	ogn 4540)	Julion	ica citii	υι <b>.</b>									
			at effectively am			ernina ins	trumen	t so that no	n mano	datory (	firecti	ions th	hat con	flict with t	he state	law				
			ing instrument?	01100 11	go	orning inc	a dillon	t 50 that in	J 1114110	autory (		10113 (1		mot with t	iic saite	11144		6	х	
7		-	at least \$5,000	ın asse	ets at a	anv time d	urina th	ie vear?										7	X	
-			art II, col (c), a				y a	,										<u> </u>		
8a		•	h the foundation			vith which	ıt ıs ren	istered (se	e instri	uctions	) ▶									
	MO						,				, -									
b		swer is "Yes" to	line 7, has the f	oundati	ion fu	rnished a d	copy of	Form 990-	PF to 1	the Atto	rnev	Gener	ral (or o	lesignate)						
-			d by General In								,		, , •	- 3				8b	Х	
9			ng status as a p					-		of secti	on 49	)42(ı)(	(3) or 4	942(1)(5)	for cale	ndar				
			e year beginning											\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\				9		X
10			ie substantial co											d addresses	s S	TMT	5	10	Х	

	1990-PF (2010) WALDEMAR J. KLASING PRIVATE FOUNDATION 27-183	1894		Page 5
Pa	art 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 instructions)	11		x
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	х	<del>                                     </del>
	Website address ► N/A	10	21	
14	The books are in care of ► ANDREW J. WEINHAUS  Telephone no. ► 314-72	26-2	411	
•	Located at ►8000 MARYLAND AVENUE, SUITE 1150, CLAYTON, MO ZIP+4 ►6		<u> </u>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	,105		$\overline{\Box}$
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of	10		
	the foreign country			
Pa	art 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.		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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			¦
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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		ĺ	
	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)?  N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	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		X
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?		i	
	If "Yes," list the years  , , , ,			
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 instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<b>•</b>	1 1	Ì	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			i
	during the year?			
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	Ì	į	
	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.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
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		<u></u>

orm 990-PF (2010) WALDEMAR J. KLASING PRIV	ATE FOUNDATION	<u>N</u>	27-18318	<b>94</b> Page <b>6</b>
Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	nued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es 🗶 No	
(2) Influence the outcome of any specific public election (see section 4955); (	or to carry on, directly or indir	ectly,		
any voter registration drive?		Y	es 🗓 No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Yo	es 🗶 No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or	for		
the prevention of cruelty to children or animals?	, , ,		es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described			
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	•			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ined		
expenditure responsibility for the grant?			es 🗀 No	
If "Yes," attach the statement required by Regulations section 53.494		.,		
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	pay promisino on		es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	nersonal henefit contract?			6b X
If "Yes" to 6b, file Form 8870	or some benefit combact.			21
7a At any time during the tax year, was the foundation a party to a prohibited tax s	chelter transaction?		es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu		· · · ·		7b
Information About Officers, Directors, Trust		nagers Highly		
Paid Employees, and Contractors	ccs, i oundation me	inagers, riigini	,	
List all officers, directors, trustees, foundation managers and their	compensation.		· · ·	
		(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances
KATHRYN WOLFF	to position PRESIDENT	enter-0-)	compensation	anowances
351 RIDGEMEADOW DRIVE	PKESIDENI			
CHESTERFIELD, MO 63017	2.00	0.	0.	0.
MARY TOLER	SECRETARY	<del>                                     </del>	<u></u>	<u> </u>
710 TUXEDO BLVD	SECKETAKI			
	1.00	0.	0.	0
WEBSTER GROVES, MO 63119 MATTHEW A. GOBEN	TREASURER	· ·	0.	0.
	TREASURER			
S11 S. MAPLE	1 00	_		0
WEBSTER GROVES, MO 63119	1.00	0.	0.	0.
= 1 - Arts =	-			
·	-			
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "		
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	CITCI HONE.	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deterred	account, other
MONE	devoted to position		compensation	allowances
NONE	-			
	-			
****				
	-			
				<del></del>
· · · · · · · · · · · · · · · · · · ·	-			
· · · · · · · · · · · · · · · · · · ·				
		1	<u> </u>	
Total number of other employees paid over \$50,000			<b>&gt;</b>	0
			Form	<b>990-PF</b> (2010)

12-07-10

Form 990-PF (2010) WALDEMAR J. KLASING PRIVATE FOL		.831894 Page 7
Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	dation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, en		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
<del></del>		
<del></del>		
· <del></del>		<del></del>
Total number of others receiving over \$50,000 for professional services		▶ 0
Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant stanumber of organizations and other beneficiaries served, conferences convened, research papers p	itistical information such as the roduced, etc.	Expenses
1 N/A		
2		
		<del> </del>
3		
·		
4		
Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1 N/A		
2		
100.000.000 <del></del>		
All other program-related investments. See instructions.		
3		

Total. Add lines 1 through 3

	Will fill the Stiffert Neturn (All domestic foundations must complete this part. Foreign foundations	nuations, 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> 102,680.</u>
b	Average of monthly cash balances	1b	84,932.
C	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	1d_	187,612.
е	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	187,612.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	<u>2,814.</u>
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	184,798.
6	Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	<u>9,063</u> .
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations at foreign organizations check here in and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	9,063.
2a	Tax on investment income for 2010 from Part VI, line 5		
ь	Income tax for 2010. (This does not include the tax from Part VI.)		
_	Add lines 2a and 2b	2c	63.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	9,000.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	9,000.
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	9,000.
	Qualifying Distributions (see instructions)		
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		<del></del>
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	800.
b	Program-related investments - total from Part IX-B	1b	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:		
а	Suitability test (prior IRS approval required)	3a	
Ь	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	800.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		- <del></del>
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	800.
	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	
	4940(e) reduction of tax in those years.		

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,	-			
line 7				9,000.
2 Undistributed income, if any, as of the end of 2010				! -
a Enter amount for 2009 only			0.	
b Total for prior years:		_		
		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005		ļ 		
<b>b</b> From 2006				
c From 2007				
d From 2008				:
e From 2009				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from				
Part XII, line 4: ► \$ 800.		,		ļ
a Applied to 2009, but not more than line 2a			0.	<b> </b>
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)	<del></del> -	0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	-		
d Applied to 2010 distributable amount				800.
e Remaining amount distributed out of corpus	0.			
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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
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	ļ			
be distributed in 2011				8,200.
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.			<u> </u>
9 Excess distributions carryover to 2011.	_			
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:		İ		ļ
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010				

Private Operating F		G PRIVATE F			31894 Page 10
			-A, question 9)	N/A	<del></del>
1 a If the foundation has received a ruling o					
foundation, and the ruling is effective fo		-	▶ ∟_	14040(1/0)	2404.453
b Check box to indicate whether the found		ng toundation described i		4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2010	(b) 2009	Prior 3 years (c) 2008	(d) 2007	(e) Total
income from Part I or the minimum	(4) 2010	(8) 2003	(6) 2000	(4) 2007	(6) 10141
investment return from Part X for					
each year listed <b>b</b> 85% of line 2a				<del>                                     </del>	
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					
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 (interest, dividends, rents, payments on					
securities loans (section				1	
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)		· · · · ·	<del>-</del> -		
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income  Supplementary Info	mation (Comple	An Abin mant amb i	f the form detion	had &E 000 an ma	
Supplementary Info			i the foundation	i nau \$5,000 or mo	ore in assets
1 Information Regarding Foundation			<del>-</del>		<del></del>
a List any managers of the foundation who	•	than 2% of the total contr	hutions received by the	foundation before the clo	se of any tay
year (but only if they have contributed m			notione reconsor by and		oo or any aan
NONE					
b List any managers of the foundation who			or an equally large porti	on of the ownership of a p	artnership or
other entity) of which the foundation has	a 10% or greater interes	st			
NONE_					
2 Information Regarding Contributi					
Check here <b>X</b> If the foundation of the foundation makes gifts, grants, etc. (	nly makes contributions t	to preselected charitable o	organizations and does i	not accept unsolicited requ	ests for funds. If
· · · · · · · · · · · · · · · · · · ·	•			umpiete items za, u, c, and	J G.
a The name, address, and telephone number	DEL OF LITE PERSON TO WHO!	ii applications snould be a	auuressed:		
<b>b</b> The form in which applications should be	e submitted and informat	ion and materials they sh	only include.		
c Any submission deadlines:	-				
C, coomicon doudinos.					
d Any restrictions or limitations on awards	, such as by geographica	ıl areas, charıtable fields, l	kınds of institutions, or	other factors:	· · · · · · · · · · · · · · · · · · ·
		<u>_</u>			

Grants and Contributions Paid During the	e Year or Approved for Future F	Payment		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		<u></u>
Paid during the year				
NONE				
NONE				
		•		
Total		· · · · · ·	▶ 3a	
Approved for future payment				
		İ		
NONE				
	. ]			

### **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ided by section 512, 513, or 514	(e)
-	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	7 (110 ant	code	Amount	TOTION INCOME
a			<u> </u>		
b					
C					
d		-			
e					
•			† —		
g Fees and contracts from government agencies	1		<del>                                     </del>		
2 Membership dues and assessments			<del> </del>		
			<del> </del>		
3 Interest on savings and temporary cash	1				
investments	<del></del>		1	2 405	<del></del>
4 Dividends and interest from securities			14	3,496.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property	1				
6 Net rental income or (loss) from personal					
property					
7 Other investment income			t —		
	<del>                                     </del>	<del>-</del>	+-		
8 Gain or (loss) from sales of assets other	1				
than inventory	<u> </u>	<del></del>	<del> </del> -		<del></del>
9 Net income or (loss) from special events	ļ		├		
10 Gross profit or (loss) from sales of inventory	<u> </u>		ļ		
11 Other revenue:	1				
a					
b					
c					
d					
e		· · · · · · · · · · · · · · · · · · ·			
12 Subtotal. Add columns (b), (d), and (e)		0.		3 196	0.
13 Total. Add line 12, columns (b), (d), and (e)				J, ± J O • I	3,496.
(See worksheet in line 13 instructions to verify calculations.)				13_	3,430.
<del></del>		<del></del>			<del></del>
Relationship of Activities to	o the Acco	mplishment of Ex	æmp	t Purposes	
The state of the s					
Explain below how each activity for which income the foundation's exempt purposes (other than be	ne is repuried i	ii Coluitiii (e) oi Part XVI-A	CONTIL	duted importantly to the accord	ipiisiiment oi
the foundation's exempt purposes (other than t	by providing ful	ida idi addii purposes).		<del></del>	
		<del>.</del>			
		<del>_</del>			
				-	
				·	
	<del></del>	<u> </u>			<del></del>
		<u> </u>		<del>_</del>	
					<del></del>
023821 12-07-10					Form <b>990-PF</b> (2010)

### Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

1 Di	d the or	ganızatıon directly or ındır	rectly engage in any	of the followin	g with any other organization	on described in se	ction 501(c) of		Yes	No
th	e Code (	other than section 501(c)	)(3) organizations) o	r ın section 52	7, relating to political organ	ıızatıons?				Ì
a Tr	ansfers	from the reporting founda	ation to a noncharital	ble exempt or	ganızatıon of:					
(1	) Cash							1a(1)		<u>X</u>
	) Other				•			1a(2)		Х
_		sactions:								
•	•	of assets to a noncharital						1b(1)		<u>X</u>
•	•	iases of assets from a noi		rganization				1b(2)		<u>X</u>
•	•	l of facilities, equipment,						1b(3)		<u> </u>
•	•	bursement arrangements						1b(4)		<u>X</u>
•	•	s or loan guarantees						1b(5)		<u>X</u>
•	•	rmance of services or me	•	-				1b(6)		<u>X</u>
		facilities, equipment, ma						1c		<u> </u>
							r market value of the goods, of		ers,	
					eo iess than fair market vail	ie in any transacti	on or sharing arrangement, sh	iow in		
		) the value of the goods, (b) Amount involved			e exempt organization	(4) 0				
( <b>a)</b> Line (	no	(b) Amount myored	(c) Name of		Exempt organization	(u) Descripti	ion of transfers, transactions, and s	naring arra	ingeme	nts
				N/A						
	-									
	+		-							
	+									
	_									
	+									
						-				
		"								
							<del></del>	<del></del>		
2a Is	the four	idation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exempt organi	zations described				
		501(c) of the Code (other	•	-	, ,			Yes	X	No
		emplete the following sch		(0), 0 0000						
	,	(a) Name of org			(b) Type of organization		(c) Description of relationsh	ıp		
		N/A								
							the best of my knowledge and believeledge	ef, it is trui	e, correc	ct,
Sign	<b>)</b>	complete Declaration of prepa	rer (other than taxpayer)	or nouclary) is ba	ased on all information of which	preparer has any kno	~ ^ · ·			
Here	•	X Xasmun	NUEUL	<u> </u>	×511	12111	x President			
		Signature of officer of tru	ustee ))		Date /	1.	Title			
		Print/Type preparer's na	ame	Preparer's s	ignature	Date	Check If PTIN			
				m- n-	. 1\	5/11/11	self- employed			
Paid		MICHELLE H			n Horson	21,,1,,	<u> </u>			
Prep		Firm's name > AND					Fırm's EIN ▶			
Use	Only			10TH F						
		Firm's address ▶ ST	LOUIS,	MO 631	01-2298		Phone no. (314)	655	-55	00
							For	m <b>990</b> -	- <b>PF</b> (	2010)

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

OMB No 1545-0047

**2010** 

Name of the organization

Employer identification number

	ALDEMAR J. KLASING PRIVATE FOUNDATION	27-1831894			
Organization type (check one):					
Filers of:	Section:				
Form 990 or 990-EZ	501(c)( ) (enter number) organization				
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation				
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
	is covered by the <b>General Rule</b> or a <b>Special Rule.</b> )(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e See instructions			
General Rule					
For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II					
Special Rules					
509(a)(1) and 170(	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regu (b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the g (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II				
aggregate contribi	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, ocruelty to children or animals Complete Parts I, II, and III.				
contributions for u If this box is check purpose Do not c	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributes exclusively for religious, charitable, etc., purposes, but these contributions did not aggived, enter here the total contributions that were received during the year for an exclusively complete any of the parts unless the <b>General Rule</b> applies to this organization because it is, etc., contributions of \$5,000 or more during the year.	regate to more than \$1,000 y religious, charitable, etc ,			
out it <b>must</b> answer "No" on	hat is not covered by the General Rule and/or the Special Rules does not file Schedule B i Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 ing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Name of organization

Employer identification number

### WALDEMAR J. KLASING PRIVATE FOUNDATION

27-1831894

වණාව	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	WALDEMAR J. KLASING C/O ANDREW WEINHAUS, 8000 MARYLAND AVE. STE 1150 CLAYTON, MO 63105	\$\$	Person X Payroll  Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

of Part II

Name of organization

Employer identification number

## WALDEMAR J. KLASING PRIVATE FOUNDATION

27-1831894

(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	   \$	
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	<b>\$</b>	
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	(b) Description of noncash property given  (b) Description of noncash property given  (b) Description of noncash property given	(b) Description of noncash property given  (c) FMV (or estimate) (see instructions)  (b) Description of noncash property given  (c) FMV (or estimate) (see instructions)  (d) FMV (or estimate) (see instructions)  (e) FMV (or estimate) (see instructions)  (f) FMV (or estimate) (see instructions)  (ge instructions)

Schedule R (Fo	v vrm 990, 990-EZ, or 990-PF) (2010)			Para d dP dW	
Name of org		Page of of Part II Employer identification number			
WALDEM	AR J. KLASING PRIVATE  Exclusively religious, charitable, etc., in more than \$1,000 for the year. Complet Part III, enter the total of exclusively religions.	ndividual contributions to section e columns (a) through (e) and the ous, charitable, etc., contributions	e following line entry For one of		
(a) No. from Part I	\$1,000 or less for the year. (Enter this inf	(c) Use of gift (d) Desc		cription of how gift is held	
	Transferee's name, address, a	(e) Transfer of gif		nsferor to transferee	
(a) No. from Part I	(b) Purpose of gift	of gift (c) Use of gift		(d) Description of how gift is held	
	(e) Transfer of gift  Transferee's name, address, and ZIP + 4  Relationship of transferor to transferee				

(a) No. from Part I

(b) Purpose of gift

(c) Use of gift

(d) Description of how gift is held

(c) Use of gift

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee			

(a) No. from Part I

(b) Purpose of gift

(d) Description of how gift is held

FORM 990-PF DIVIDENT	DS AND	INTER	EST FROM	SECUI	RITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A	)
EDWARD JONES #15438 EDWARD JONES #15520	•		961. 2,535.		0.	2,5	61. 35.
TOTAL TO FM 990-PF, PART I, 1	LN 4		3,496.		0.	3,4	96.
FORM 990-PF		LEGAL	FEES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVI MENT INC	EST-			
LEGAL FEES	-	800.		0.		8	00.
_			_				
TO FM 990-PF, PG 1, LN 16A	<del></del>	800.		0.		<del></del>	00.
=	0		XPENSES	0.		STATEMENT	
TO FM 990-PF, PG 1, LN 16A = FORM 990-PF  DESCRIPTION	() EXPE	THER E	XPENSES  (B)  NET INVI	EST-	(C) ADJUSTED	STATEMENT (D) CHARITA	3 BLE
FORM 990-PF	() EXPE	THER EX	(B) NET INVI	EST-	ADJUSTED	STATEMENT (D) CHARITA	3 BLE
FORM 990-PF  DESCRIPTION	() EXPE	THER EXAPPLES  NSES  BOOKS	(B) NET INVI	EST-	ADJUSTED	STATEMENT (D) CHARITA	3 BLE
FORM 990-PF  DESCRIPTION  INVESTMENT EXPENSES	EXPE PER	THER EXAL A) NSES BOOKS 326.	(B) NET INVI	EST-COME	ADJUSTED	STATEMENT (D) CHARITA	3BLEES 0.
FORM 990-PF  DESCRIPTION  INVESTMENT EXPENSES  TO FORM 990-PF, PG 1, LN 23  FORM 990-PF	EXPE PER	THER EXAMPLE OF THE PROPERTY O	(B) NET INVENT INC	EST- COME 326.	ADJUSTED	STATEMENT  (D)  CHARITAI  FURPOS	3 BLE S 0.
FORM 990-PF  DESCRIPTION  INVESTMENT EXPENSES  TO FORM 990-PF, PG 1, LN 23	EXPE PER	THER EXAMPLE OF THE PROPERTY O	(B) NET INVI MENT INC	EST- COME 326.	ADJUSTED NET INCOM	STATEMENT  (D) CHARITAL E PURPOS  STATEMENT  FAIR MARKE	0. 0. 4

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	
NAME OF CONTRIBUTOR	ADDRESS		
WALDEMAR J KLASING	C/O A WEINHAUS, 8000 MARY 1150 CLAYTON, MO 63105	LAND AVE, SUITE	