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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

		t of the Treasury renue Service		Freated as a Private be able to use a copy of this		rtina requirements	2010
-		dar year 2010, or tax		or the contract of the contrac	, and ending	Tang To quito monto	
G C	heck	all that apply	Initial return Amended return	Initial return of a fo	ormer public charity	Final return	
Nar	ne of	foundation				A Employer identification	number
			, SAWYER & JE			43-6771713	
Nun	nber a	•	nber if mail is not delivered to street $IANLEY\ RD$.	address)	Room/suite	B Telephone number $314-721-11$	0.4
City	orto	own, state, and ZIP coo				C If exemption application is pe	
"	0	ST. LOUI		3406		D 1. Foreign organizations	
H C	heck	type of organization	X Section 501(c)(3) ex	empt private foundation		Foreign organizations med check here and attach cor	eting the 85% test,
] Se	ction 4947(a)(1) none	xempt charitable trust		ation	 E If private foundation stat	
		rket value of all assets	· —	-	Accrual	under section 507(b)(1)	
	om F -\$	Part II, col. (c), line 1	6)	her (specify)	hada l	F If the foundation is in a 6	
	rt l				•	under section 507(b)(1)	(d) Disbursements
1.5.5	11 6 1	(The total of amounts in necessarily equal the an	e and Expenses columns (b), (c), and (d) may not mounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for chantable purposes (cash basis only)
	1	Contributions, gifts, g		67,435.		N/A	
	2		ndation is not required to attach Sch. B				
	3	Interest on savings and to cash investments	emporary	10.600	10.600		
	4	Dividends and interes	st from securities ,	19,629.	19,629.		STATEMENT 1
		Gross rents Net rental income or (loss	a.				
	_	Net gain or (loss) from sai		-36,510.	, , , , , , , , , , , , , , , , , , ,		ne - n-anhana - n-ar-ar-ar-ar-ar-ar-ar-ar-ar-ar-ar-ar-ar-
nue	b	Gross sales price for all assets on line 6a	184,757.				
Revenue	7	Capital gain net income (i	from Part IV, line 2)		0.		
Œ	8	Net short-term capita	ıl gaın				'
	9	Income modifications Gross sales less returns	S I				
	10a	and allowances			, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		11' ·
		Less Cost of goods sold Gross profit or (loss)					
	11	Other income					
	12	Total. Add lines 1 thr	rough 11	50,554.	19,629.		
	13	Compensation of officers	s, directors, trustees, etc	0.	0.		0.
	14	Other employee salar	•				
S	15	Pension plans, emplo	oyee benefits				<u> </u>
ense	10a	Legal fees Accounting fees	STMT 2	1,177.	1,177.		0.
Expenses	C	Other professional fee		2,2,7,0	2/2//		
Ne Ex	17	Interest		31.	31.		0.
DUEC NO CO and Administrative	18	Taxes	STMT 3	534.	294.		0.
iis S	19	Depreciation and dep	pletion				
ת ה ב	20	Occupancy					
$rac{1}{2}$	21 22	Travel, conferences, a Printing and publicati	-			7	/
SCANNED UEU Operating and Admi	23	Other expenses	STMT 4	37.	37.		0.
Z a	24	Total operating and	administrative				
₹ 8		expenses. Add lines		1,779. 44,121.	1,539.		0.
က္တ	25	Contributions, gifts, g	-	44,121.			44,121.
	26	Total expenses and	disbursements.	45,900.	1,539.		// 121
	27	Add lines 24 and 25 Subtract line 26 from	line 12	43,300.	1,339.	<u> </u>	44,121.
			expenses and disbursements	4,654.		,	
	l .	Net investment incom	•	<u> </u>	18,090.		**** *********************************
	C	Adjusted net income	(if negative, enter -0-)			N/A	

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	906,209.
2	Enter amount from Part 1, line 27a	2	4,654.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	910,863.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	910,863.

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

See the Part VI instructions

	HARGLOUS, SAWIER & JEAN, FOUND.							<u> </u>			Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940	(a), 4	494	10(b), 4	940(e), or 4	948	- see i	nstru	ctio	ns)
18	, Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and ent	ter "N/A	A" or	n line 1)					
	Date of ruling or determination letter (attach copy of letter if nece	essary-	-see	instructio	ons)	}					
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here					•	1		_	1	81.
	of Part I, line 27b										
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%	of Part	t I, li	ine 12, col	(b)	J					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Oth	iers en	ter -	-0-)	. ,		2	1			0.
	Add lines 1 and 2			•			3			1	81.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Otl	hers er	nter	-0-)			4			_	0.
5	Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-			•			5			1	81.
6	Credits/Payments										
	2010 estimated tax payments and 2009 overpayment credited to 2010	6a	1								
	Exempt foreign organizations - tax withheld at source	6b					1				
	Tax paid with application for extension of time to file (Form 8868)	60	1-				1				
	Backup withholding erroneously withheld	6d	1				1				
	Total credits and payments Add lines 6a through 6d	_ ou					7	ĺ			0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attact	hed					8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	iiou				•	9	 		1	81.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid						10	-			
11					Rofur	ided 🕨	11				
	art VII-A Statements Regarding Activities				THEIR	ugu P	<u> </u>	1			
	During the tax year, did the foundation attempt to influence any national, state, or local legisla	ation o	r dic	d it narticii	nate or	intervene			T	Yes	No
	any political campaign?	ution 0		o it particij	puto of		, ,,,		1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposi	ac /cas	ıne	tructions	for defi	nition\2			1b		X
•	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and					-	dor				
	distributed by the foundation in connection with the activities.	copie	3 U	i arry irra	teriais	DUDIISH	-G 01		ļ		
	Did the foundation file Form 1120-POL for this year?								10		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	VAST							10		
٠	(1) On the foundation \blacktriangleright \$ (2) On foundation managers	-				0.					
	Enter the reimbursement (if any) paid by the foundation during the year for political expendition						-				
٠	managers > \$ 0.	uie lax	C III II	hosea ou	ivuilua	lion					
2	Has the foundation engaged in any activities that have not previously been reported to the IR	62							2		х
_	If "Yes," attach a detailed description of the activities.								-		
2	Has the foundation made any changes, not previously reported to the IRS, in its governing in	ctrum	ont	articles of	finoorn	oration	or		İ		
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change		σιιι,	articies u	i ilicuit	oralion,	UI		3		х
4.	Did the foundation have unrelated business gross income of \$1,000 or more during the year								4a		X
	olf "Yes," has it filed a tax return on Form 990-T for this year?	•					N	/A	4b		
	·							/ A.	5		X
J	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.										
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eith	hor									
U		1161									
	By language in the governing instrument, or By state logicities that effectively amends the governing instrument on that so mandatons	direct		that conf	flict with	the stat	a laur				
	By state legislation that effectively amends the governing instrument so that no mandatory remain in the governing unstrument?	uneci	.10115	S that Com	ilict Witi	i lile Stat	e iaw		_	Х	1
7	remain in the governing instrument?								7	X	
′	Did the foundation have at least \$5,000 in assets at any time during the year?								 		
ρ.	If "Yes," complete Part II, col. (c), and Part XV. Forter the states to which the foundation reports or with which it is registered (see instruction	101 -									
08	Enter the states to which the foundation reports or with which it is registered (see instruction MO	15)	_								
		torac	Con	noral /c= 1	001000	·a\					
	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	tomey	uer	ם זטן וגושו	esignat	e)			0.	Х	1
n	of each state as required by General Instruction G? If "No," attach explanation	dian 4	0.40	/1\/2\ ~~ 41	040654	=\ f a= ==!	and		8b	<u> </u>	
9	Is the foundation claiming status as a private operating foundation within the meaning of sec				94Z(])(:	o) ior cal	raons				v
1 N	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," co								10		X
	TOOL AND DELSONS DECOME SUBSTANDAL COMMONDATE MITTING THE 12Y VEST / If *Vas * about a sabadul.	- 1	the!	r nomos	a add	~~~			1 111		

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Part VII-B Statements Regarding Activities for Which I	orm 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indire	ectly,	1	
any voter registration drive?		Ye	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y6	s X 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)?		Y6	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t			
the prevention of cruelty to children or animals?		Y6	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described (ın Regulations	.	
section 53 4945 or in a current notice regarding disaster assistance (see instru	ctions)?		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 for				
expenditure responsibility for the grant?		I/A 🔲 Ye	ıs 🔲 No	
If "Yes," attach the statement required by Regulations section 53.494	5-5 <i>(d</i>).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Ye	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors		nagers, Highly	/	
1 List all officers, directors, trustees, foundation managers and their			T/ 6.	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SAWYER MARGLOUS	TRUSTEE			
101 S. HANLEY ROAD				
ST LOUIS, MO 63105	2.00	0.	0.	0.
JEAN MARGLOUS	TRUSTEE			
12800 SHEFFEILD ESTATE CT.				
ST LOUIS, MO 63141	1.00	0.	0.	0.
		-		
			·	
		<u> </u>		
2 Compensation of five highest-paid employees (other than those inc	·——·—·	enter "NONE."	(d) a	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
	1			
		<u> </u>		
Total number of other employees paid over \$50,000				0

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NON	IE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	· · · ·	
		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical infinumber of organizations and other beneficiaries served, conferences convened, research papers produced,		Expenses
1 N/A		
2		
3		
4		<u></u> .
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 N/A	and 2	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
Total, Add lines 1 through 3	▶	0.

P	art X Minimum Investment Return (All domestic foundations mus	t complete this part. Fore	ign founda	tions, see in	structions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, e	tc . purposes			
а	Average monthly fair market value of securities	, pp	1:	a Ì	845,279.
	Average of monthly cash balances		11		845,279. 18,251.
	Fair market value of all other assets		10	c	
d	Total (add lines 1a, b, and c)		10	d	863,530.
	Reduction claimed for blockage or other factors reported on lines 1a and				
-	1c (attach detailed explanation)	e	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	!	0.
3	Subtract line 2 from line 1d		3		863,530.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, se	e instructions)	4		12,953.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Pa	•	5	j	850,577.
6	Minimum investment return. Enter 5% of line 5	, -	6		42,529.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (foreign organizations check here and do not complete this part)	(j)(5) private operating found	ations and co	ertain	
1	Minimum investment return from Part X, line 6		1		42,529.
2a	<u> </u>	a	181.		<u></u>
b	Income tax for 2010 (This does not include the tax from Part VI)	b			
C	Add lines 2a and 2b	····	2	c	181.
3	Distributable amount before adjustments Subtract line 2c from line 1		3	3	42,348.
4	Recoveries of amounts treated as qualifying distributions		T-4	,	0.
5	Add lines 3 and 4			<u> </u>	42,348.
6	Deduction from distributable amount (see instructions)			3	0.
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XII	I, line 1	_ 7	7	42,348.
_	art XII Qualifying Distributions (see Instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpos Expenses, contributions, gifts, etc total from Part I, column (d), line 26	562	1.	_	44 121
_				a b	44,121.
) 2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable,	ata nurnasas	—	2	
3	Amounts set aside for specific charitable projects that satisfy the	etc , purposes		-	
a			,	a	
	Cash distribution test (attach the required schedule)		3		
4	•	Dort VIII. line 4		4	44,121.
5	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Foundations that qualify under section 4940(e) for the reduced rate of tax on net investri		- '	<u>'</u>	11/1410
J	income Enter 1% of Part I, line 27b	nent	، ا	5	181.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		—	6	181. 43,940.
U	Note The amount on line 6 will be used in Part V, column (b), in subsequent years whe	n calculating whather the few			
	4940(e) reduction of tax in those years	n calculating whether the lon	повион чив	1116 S	octon

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Part XIII Undistributed Income (see instructions)

1 Distributible amount for 2010 from Part XI, line 7 2 Lindistrational for 2009 only 1		(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
2 Undestributed receive, I are y, set the east of 2010 to Enter amount of 2009 only b Total for prior years 3 Excess distributions carryover, if any, to 2010 a From 2005 b From 2006 c From 2007 d From 2008 c From 2009 c From 2009 c From 2009 d From 2009 c From 2009 d From 2009 c From 2009 d Fr	•				42,348.
3 Excess distributions carryover, if any, to 2010 3 From 2006 6 From 2007 6 From 2009 1 Total of lines 3a through e 4 Qualifying distributions for 2010 from Part XII, line 4* № \$ 44 , 12.1 3 Applied to 2009, but not more than line 2a Applied to 2009, but not more than line 2a Applied to 2009, but not more than line 2a Applied to 2009 but not more than line 2a Applied to 2000 stributions in core of prior years (Election required - see instructions) 6 Treated as distributions out of corpus (Election required - see instructions) 9 Applied to 2010 distributible amount 9 Remaining amount distributed out of corpus (Election required - see instructions) 9 C. 10 Remaining amount distributed out of corpus (Election required - see instructions) 9 C. 10 Remaining amount distributed out of corpus (Election required - see instructions) 10 C. 10 Remaining amount distributed out of corpus 10 C. 10 C. 10	2 Undistributed income, if any, as of the end of 2010	Tel-alle I the att 'i' accete-att, 'i elle	******* 'il '. !. *******	Hanki '14'!! 'aki akilamalakil'aab !!'!!	
2	a Enter amount for 2009 only			34,079.	
3 Excess distributions carryover, if any, to 2010 3 From 2005 6 From 2006 6 From 2009 1 Total to films 3 shrough e 4 Qualifying distributions for 2010 from Part XII, line 4 ► ► \$ 44, 121. 3 Applied to undistributed income of prior years (Election requiredse instructions) C Treated as distributions out of corpus (Election requiredse instructions) C Treated as distributions out of corpus (Election requiredse instructions) C Treated as distributions out of corpus (Election requiredse instructions) C Treated as distributions out of corpus (Election requiredse instructions) C Treated as distributions out of corpus (Election requiredse instructions) C Treated as distributed out of corpus C Election and 2010 distributed out of corpus C Election from the 10 to 2010 off is informating amount distributed out of corpus C Excess distributions environw special out of corpus as indicated below: 3 Corpus And lines 314, and 46 Section in the 5 Priory years' unistributed out of prior years' undistributed income for which a notice of deficiency has been assed, or on which the section 4942(a) tax has been previously assessed 9 C. Eater the amount of prior years' undistributed income for 4942(a) tax has been previously assessed 9 C. Eater the amount of prior years' 1 Undistributed income for 2010 Subtract lines 4 from line 2 Taxable amount - see instri 1 Undistributed income for 2010 Subtract lines 4 da and 5 from line 1 This amount must be distributed as 2011 7 Amounts treated as distributions carryover from 2005 not applied on line 5 or line 7 9 Excess (stributions carryover from 2005 not applied on line 5 or line 7 9 Excess from 2006 Excess from 2009	ђ Total for prior years		0		han da handisil allula as as
a From 2005 b From 2007 d From 2008 e From 2007 d From 2008 e From 2007 d From 2008 e From 2009 1 Total of lines 3a through e Cualifying distributions for 2001 from Part XII, line 4 1 ► \$ 44, 121. a Applied to 2008, but not more than line 24 Applied to 2008, but not more than line 20 (Election required - see instructions) O. c Traded as distributions out of corpus (Election required - see instructions) O. d Applied 120 Old setholatable amount B Remaining amount distributed out of corpus (Election required - see instructions) O. d Applied 120 Old setholatable amount B Remaining amount distributed out of corpus (Election required - see instructions) O. d Command to the see in the seed of	3 Excess distributions carryover, if any, to 2010		U •	······	
b From 2006	1				
E From 2007 d From 2008 e From 2008 1 Total of lines 3 through e 1 Coullying distributions for 2010 from Part XII, line 4 ► \$ 44,121, 3 Appiled to undistributed incorne of pror years (Election required - see instructions) 1 Created as distributions out of corpus (Election required - see instructions) 1 Created as distributions out of corpus (Election required - see instructions) 1 Created as distributions out of corpus (Election required - see instructions) 2 Created as distributions out of corpus (Election required - see instructions) 3 Created as distributions out of corpus (Election required - see instructions) 4 Appiled to 2010 distributions amount 8 Remaining amount distributed out of corpus 9 Created as distributions are distributed in the same encount (in the amount of intermined as a see in column (in the amount of intermined as a see in column (in the amount of intermined as a see in column (in the amount of intermined as a see in column (in the amount of intermined as a see in column (in the amount of intermined as a see instructions) 9 Created as distributed income for which a notice of deficiency has been seved, or on which the section 49(24) tax has been previously assessed 9 Created as distributions are distributed income for 2010 Subtract line 4 from line 21 Taxable amount - see instructions 9 Created as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(b)(3) 9 Created as distributions carryover for 2015 9 Created stirtibutions carryover for 2015 9 Created stores from 2006 9 Excess from 2008 9 Excess from 2008 9 Excess from 2009		1			
d From 2008					
From 2009 I Total of lines 3a through e 4 A J 21 . 3 Applied 2009 but not more than line 2a Applied 2009 but not more than line 2a Applied 2009 but not more than line 2a Applied 200 distributions out of corpus (Election required - see instructions) C Treaded as distributions out of corpus (Election required - see instructions) C Applied 200 distributials amount B Remaining amount distributed out of corpus C Election required - see instructions) C B Conses distributions carryover applied to 2010 C Compus Add imme 3t 4c, and 4e Subtract line 5 D Prior years' undistributed income in column (a) B Enter the ant total of each column as indicated below: B Corpus Add imme 3t 4c, and 4e Subtract line 5 D Prior years' undistributed income Subtract line 4b from line 2b 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 his been previously assessed C Subtract line 6c from line 6b Taxable amount - see instructions C Undistributed income for 2010 Subtract line 43 from line 2a Taxable amount - see instructions C Undistributed income for 2010 Subtract line 43 from line 2a Taxable amount - see instructions C Undistributed income for 2010 Subtract line 43 from line 2a Taxable amount - see instructions C Subtract line 6c from line 6b Taxable amount see instructions C Subtract line 6c from line 6b Taxable amount see instructions C Subtract line 6c from line 6c Taxable amount - see instructions C Subtract line 6c from line 7 C Sexess distributions carryover from 2005 not applied on line 5 or line 7 C Sexess from 2006 D Excess from 2007 C Excess from 2008 D Excess from 2009 D Excess from 2009 D Excess from 2009 D Excess from 2009					
I Total of lines 3a through a 4 Qualifying distributions for 2010 from Part XII, in al. 4 ≥ \$ 44,121. 3 Applied to 2009, but not more than line 2a b Applied to undistributed income of prior years (Feliciton required - see instructions) C Treated as distributions out of corpus (Election required - see instructions) 4 Applied to 2010 distributed amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2010 (fifth in moral applied so 2010 (fifth in moral applied				ļ	
4 Qualifying distributions for 2010 from Part XII, line 4 P S 44 121. a Applied to Quol but not more than line 2a Applied to Quol but not more than line 2a Applied to Quol but not more than line 2a Applied to Quol but not more than line 2a Applied to Quol but not more than line 2a Applied to Quol distributions carry over applied to 2010 Applied to Quol distributions out of corpus (Election required - see instructions) 4 Applied to Quol distributiable amount 8 Remaining amount distributed out of corpus 9 C. 4 Applied to Quol distributiable amount 9 C. 5 Excess distributions carry over applied to 2010 9 C. 5 Excess distributions carry over applied to 2010 10 C. 10	——————————————————————————————————————	0.1		1	
Part XII, line 4: NS 44, 121. a Appleed to 2009, but not more than line 2a Appleed to undistributed income of prior years (Election required - see instructions) C Treated as distributions out of corpus (Election required - see instructions) C Treated as distributions out of corpus (Election required - see instructions) Applied to 2010 distributible amount Bermaning amount distributed out of corpus C amount distributed out of corpus E merit amount and provided out of corpus (rien amount appears in colorini (b) the same amount result be shown in colorini (a) E factor the result of each column as indicated below: A corpus And these 3t 4s, and 4e Subtract line 5 D Prior years' undistributed income Subtract line 4b from line 2 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 3 Subtract line 6c from line 6b Taxable amount - see instructions Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount - see instructions Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount - see instructions Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount - see instructions O . 32 , 306 . 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2005 not applied on line 5 or line 7 E Excess distributions carryover from 2005 not applied on line 5 or line 7 E Excess distributions carryover from 2005 not applied on line 5 or line 7 E Excess from 2006 D Excess from 2009 E Excess from 2009 E Excess from 2009 E Excess from 2009					
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7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2005 not applied on line 5 or line 7 9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2006 b Excess from 2007 c Excess from 2008 d Excess from 2009	lines 4d and 5 from line 1. This amount must				
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8 Excess distributions carryover from 2005 not applied on line 5 or line 7 9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2006 b Excess from 2007 c Excess from 2008 d Excess from 2009	corpus to satisfy requirements imposed by				
not applied on line 5 or line 7	section 170(b)(1)(F) or 4942(g)(3)	0.			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2006 b Excess from 2007 c Excess from 2008 d Excess from 2009	8 Excess distributions carryover from 2005				
Subtract lines 7 and 8 from line 6a	-	0.			
a Excess from 2006 b Excess from 2007 c Excess from 2009 d Excess from 2009	9 Excess distributions carryover to 2011.				
a Excess from 2006 b Excess from 2007 c Excess from 2008 d Excess from 2009	Subtract lines 7 and 8 from line 6a	0.			
b Excess from 2007 c Excess from 2008 d Excess from 2009	10 Analysis of line 9				
d Excess from 2008					
d Excess from 2009					
					
e Excess from 2010					
	e Excess from 2010				

	S, SAWYER &			43-677	71713 Page 10
Part XIV Private Operating F	oundations (see Ins	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo	r 2010, enter the date of t	he ruling	▶		
b Check box to indicate whether the found	dation is a private operation	ig foundation described i	n section	4942(J)(3) or 494	(2(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed					
b 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					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c 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 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					
(4) Gross investment income		ļ <u></u>			
Part XV Supplementary Info			if the foundatior	n had \$5,000 or mo	re in assets
1 Information Regarding Foundation		· · · · · · · · · · · · · · · · · · ·			
a List any managers of the foundation why year (but only if they have contributed in the contributed in t	no have contributed more		ributions received by the	o foundation before the clos	e of any tax
SEE STATEMENT 6					
b List any managers of the foundation when other entity) of which the foundation has			(or an equally large port	on of the ownership of a pa	rtnership or
NONE					
2 Information Regarding Contribut Check here ► X if the foundation the foundation makes gifts, grants, etc	only makes contributions	to preselected charitable	organizations and does		
	· · · · · · · · · · · · · · · · · · ·			emplete items za, b, c, allu	<u> </u>
a The name, address, and telephone num	iber of the person to who	m applications should be	addressed		
b The form in which applications should	be submitted and informa	tion and materials they sl	nould include		
c Any submission deadlines			-		
d Any restrictions or limitations on award	s such as by geographic	al areas charitable fields	kinds of institutions or	other factors	
a zary restrictions of miniculations of award	o, oadii ad by googiapiilo	ai aivas, onantabio nolus,	miles of montations, of	Valid Idoloid	

3 Grants and Contributions Paid During the Y		Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year SEE STATEMENT 7	or substantial contributor	recipient		
		i	▶ 3a	44,121.
Total b Approved for future payment NONE Total			► 3a	44,121.

(a) Business code

Unrelated business income

(b) Amount Excluded by section 512, 513, or 514

(c)
Exclusion
code

Amount

(e) Related or exempt

function income

Form 990-PF (2010)

1 Program service revenue

Enter gross amounts unless otherwise indicated

Part XVI-A	Anal	vsis of	Income-Producing	Activities
. 	71141	y JiJ Ui	IIICOIIIE-FICUUCIII	ACUVILIES

<u> </u>					
b					
C					
			\neg		
					
e					
f					
g Fees and contracts from government agencies	;			•	· ·
2 Membership dues and assessments					
				-	
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	19,629.	
5 Net rental income or (loss) from real estate					
a Debt-financed property			···········	· · · · · · · · · · · · · · · · · · ·	
b Not debt-financed property				· · · · ·	
6 Net rental income or (loss) from personal		1	ĺ		
property	LL				
7 Other investment income					
8 Gain or (loss) from sales of assets other					
	i l		18	26 E10	
than inventory			10	-36,510.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			1		
11 Other revenue					
<u>a</u>					
b					
C					
d	1 1		ļ		
E					
12 Subtotal Add columns (b) (d) and (a)		0.		-16.881.	0.
12 Subtotal Add columns (b), (d), and (e)		0.		-16,881.	0.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		0.			0. -16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)	lations)	0.			0. -16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul			emp	13 _	0. -16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)			emp	13 _	0. -16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti Line No. Explain below how each activity for v	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti Line No. Explain below how each activity for v	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti Line No. Explain below how each activity for v	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti Line No. Explain below how each activity for v	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti Line No. Explain below how each activity for v	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti Line No. Explain below how each activity for v	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti Line No. Explain below how each activity for v	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti Line No. Explain below how each activity for v	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti Line No. Explain below how each activity for v	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti Line No. Explain below how each activity for v	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti Line No. Explain below how each activity for v	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti Line No. Explain below how each activity for v	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti Line No. Explain below how each activity for v	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti Line No. Explain below how each activity for v	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti Line No. Explain below how each activity for v	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti Line No. Explain below how each activity for v	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti Line No. Explain below how each activity for v	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti Line No. Explain below how each activity for v	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti Line No. Explain below how each activity for v	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti Line No. Explain below how each activity for v	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculationship of Acti Part XVI-B Relationship of Acti Line No. Explain below how each activity for verify calculationship of Activity for verify and columns (b), (d), and (e)	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculationship of Acti Part XVI-B Relationship of Acti Line No. Explain below how each activity for verify calculationship of Activity for verify and columns (b), (d), and (e)	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calcul Part XVI-B Relationship of Acti Line No. Explain below how each activity for v	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.
12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculationship of Acti Part XVI-B Relationship of Acti Line No. Explain below how each activity for verify calculationship of Activity for verify and columns (b), (d), and (e)	vities to the Accom	plishment of Exc		13 _ t Purposes	-16,881.

2a Is the	foundation directly or indirectly affiliated with, or related to, one	or more tax-exempt organiza	ations described		
ın seci	tion 501(c) of the Code (other than section 501(c)(3)) or in sec	tion 527?		Yes X No	
b If "Yes	s," complete the following schedule				
	(a) Name of organization	(b) Type of organization	(c) Description	of relationship	
	N/A				
	Under penalties of penury, I declare that I have examined this return, include and complete. Declaration of preparer (other than taxpayer or fiduciary) is be			riedge and belief, it is true, correct,	
Sign	and complete Designation of preparer (other than taxpayer or fiduciary) is b	based on all information of which pr			
Here	N N I I	V114	1201) Luster		
	Signature of office or trustee	Date ∫ The Date ∫	Title		
	Print/Type preparer's name Preparer's s	signature /	Date Check	If PTIN	
		/),	self- employed	j	
Paid	STEVEN R. WILHELM	Cillula	11.14.71		
Prepare	er Firm's name ► WILHELM & WILHELM,	Firm's name ► WILHELM & WILHELM, LLC			
Use On	nly				
	Firm's address ► 7777 BONHOMME AVE	E., #2001			
	ST. LOUIS, MO 631	AE 1046	Phone no	(314) 727-1155	

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.

MARGLOUS, SAWYER & JEAN, FOUNDATION

OMB No 1545-0047

2010

Name of the organization

Employer identification number

43-6771713

Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule [X] 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** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

MARGLOUS, SAWYER & JEAN, FOUNDATION

43-6771713

Part I	Contributors	(see instructions)
--------	--------------	--------------------

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
1	SAWYER MARGLOUS CHARITABLE TRUST		_ 🐷
	06/15/2004		Person X
	101 C HANTEY DD	7 500	Payroll Noncash
	101 S. HANLEY RD.	\\$	
	ST LOUIS, MO 63105		(Complete Part II if there
	51 E0015, MO 03103		is a noncash contribution)
(a)	(5)		4.0
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
140.	SAWYER MARGLOUS CHARITABLE TRUST	Aggregate contributions	Type of contribution
2	11/10/1999		Person X
	11/10/11//		Payroll
	101 S. HANLEY RD.	\$ 47,935.	Noncash
		4	(Complete Part II if there
	ST LOUIS, MO 63105		is a noncash contribution.)
			,
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
	SAWYER MARGLOUS CHARITABLE TRUST		
3	12/18/2003		Person X
			Payroll
	101 S. HANLEY RD.	\ \ \ \ 12,000.	Noncash
			(Complete Part II if there
	ST LOUIS, MO 63105		is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
			Person
			Payroll Noncash
		\$	
			(Complete Part II if there is a noncash contribution.)
			is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
		95. 05.10 00111100110113	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
			Person
			Payroll
		\$	Noncash
			(Complete Part II if there
			is a noncash contribution.)
			<u> </u>
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
			Person
			Payroll
		\$	Noncash
			(Complete Part II if there
			is a noncash contribution.)
023452 12-2	3-10	Schedule B (Form	990, 990-EZ, or 990-PF) (2010)

MARGLOUS, SAWYER & JEAN, FOUNDATION

43-6771713

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\ \ \\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	. 40	Pakadula D /Farm ∧	00 000 E7 a-000 DE\ (2010

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

Employer identification number

art III	US, SAWYER & JEAN, FOUI Exclusively religious, charitable, etc., in more than \$1,000 for the year. Complete Part III, enter the total of exclusively religio \$1,000 or less for the year. (Enter this info	dividual contributions to section columns (a) through (e) and the cus, charitable, etc., contributions	following line entry. For o	43-6771713 rganizations aggregating rganizations completing
) No. rom art I	(b) Purpose of gift	(c) Use of gift		ription of how gift is held
		(e) Transfer of gif		
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of tra	nsferor to transferee
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
	Transferee's name, address, ar	(e) Transfer of gif		nsferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
-		(e) Transfer of gif		
	Transferee's name, address, ar	nd ZIP + 4	Relationship of tra	nsferor to transferee
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held
-		(e) Transfer of git		
-	Transferee's name, address, a	10 ZIP + 4	Helationship of tra	nsferor to transferee

43-6771713

Part IV Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold (c) Date acquired 2-story brick warehouse, or common stock, 200 shs MLC Co (mo, day, yr) (mo, day, yr) 1a FIDELITY DIVERSIFIED 03/10/10 b SPARTAN INTL INDEX 05/17/10 c SPARTAN 500 INDEX 07/22/10 d FIDELITY FREEDOM 09/14/1009/14/10 e FIDELITY PURITAN f FIDELITY CONVERTIBLE 10/27/10 g FIDELITY SELECT 10/27/10 h 15 SHS. AMERICAN INTL GROUP INC NEW 10/21/10 1900 SHS. ABIOMED INC 11/02/10 CALL - AMERN VARIOUS k CALL -CBO HOLDINGS VARIOUS - CELGENE CORP | CALL VARIOUS m CALL - DEVON ENERGY 12/03/10 n CALL - DISNEY VARIOUS O CALL - EXCO RES VARIOUS INC (f) Depreciation allowed (h) Gain or (loss) (g) Cost or other basis (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 44,000. -2,703.46,703. a -452. 2,000.2,452. b 24,348. ,348. 22,000. ¢ 4,459. 159. 4,618. đ 2,344. -288. 2,632. е 25,000. 21,741.3,259. 32,350. 26,330. -6,020.g 544. 20,987. -20,443.h 21,319. -12,027.9,292. 763. 327. 436. 558. 412. 146. $6,\overline{205}.$ 8,033. 1,828. 2,429.1,151. -1,278.m 709. 248. 461. n 263. 432. -169.0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col (h)) Gains (excess of col (h) gain over col (k), (j) Adjusted basis (k) Excess of col (i) (i) FMV as of 12/31/69 but not less than "-0-") as of 12/31/69 over col (j), if any -2,703.-452. b -2,348.C 159. d -288.3,259. f -6,020.g -20,443.h -12,027.436. 146. 1,828. 1 -1,278.m 461. n -169.0 { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } 2 Capital gain net income or (net capital loss) 2 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If (loss), enter "-0-" in Part I, line 8

(a) List and	d describe the kind(s) of property solorick warehouse, or common stock, 20	I, e.g., real estate,		(c) Date acquired (mo, day, yr)	(d) Date sold
		OU SIIS. WILC CO	D - Donation	(IIIO, day, yi)	(mo , day, yr)
1a CALL - TEVA PH	ARM				VARIOUS
b DISCOVERY c DISCOVERY					VARIOUS
				-	VARIOUS
d EXCO RES INC		-			$\frac{11/05/10}{11/09/10}$
e CBO HOLDINGS f DEVON ENERGY C	ODD				$\frac{11/09/10}{12/02/10}$
DISNEY WALT CO					$\frac{12/03/10}{12/03/10}$
	· · · · · · · · · · · · · · · · · · ·				12/03/10
<u>h</u>					
<u> </u>				 	
1.					
<u>k</u>					
		-			
<u>m</u>					
n					
0	(f) Depresenting allowed	(a) Cost or other house	(1-)		<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(n) (e) p) Gain or (loss) ilus (f) minus (g)	
a 1,204.		339.			865.
ь 6,992.		6,655.			337.
c 3,492.		3,319.			173.
d 1,891.		1,568.			323.
e 2,385.		2,680.			-295.
f 14,596.		12,831.			1,765.
g 6,592.		6,831.			-239.
h					
I .					
1					
k					
1					
m					
n					
0					
Complete only for assets show	ng gain in column (h) and owned by t	he foundation on 12/31/69	(I) Los	ses (from col (h))	,
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	Gains (excess o but n	of col. (h) gain ove ot less than "-0-")	rcot (k),
a		(7)			865.
b				-	337.
c					173.
d					323.
8				·	-295.
f					1,765.
g					-239.
h					-
1				·	
1					
k					
1					
m			-		
n					
0					
	e 16 anin alan anta-	in Part Llina 7			
2 Capital gain net income or (net c	apital loss) . { If gain, also enter If (loss), enter "-0	" rait i, ille / " in Part I, line 7	2		-36,510.
3 Net short-term capital gain or (lo	ss) as defined in sections 1222(5) and				
If gain, also enter in Part I, line 8	, column (c)	}		_	
If (loss), enter "-0-" in Part I, line	8	J	3	N/A_	·

FORM 990-PF DIVIDEND	S AND	INTERI	EST FROM	SECUR	ITIES	STATEMENT	_1
SOURCE		GROSS	TRUOMA		TAL GAINS VIDENDS	COLUMN (A) AMOUNT	ı
AMERIPRISE FIDELITY INVESTMENTS #4280 FIDELITY INVESTMENTS #8737	-		11,406. 8,019. 204.		0. 0. 0.	11,40 8,01 20	
TOTAL TO FM 990-PF, PART I, I	. N 4		19,629.		0.	19,62	29.
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		
ACCOUNTING		1,177.	1	,177.			0.
TO FORM 990-PF, PG 1, LN 16B		1,177.	1	,177.			0.
FORM 990-PF		TAX	ES	_		STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTEI NET INCOM		
FEDERAL EXCISE TAX FOREIGN TAXES PAID		240. 294.		0. 294.			0.
TO FORM 990-PF, PG 1, LN 18		534.	=	294.			0.
						CONTRACTOR	
FORM 990-PF		THER E	XPENSES			STATEMENT	
DESCRIPTION	(EXPE	A) NSES BOOKS	(B) NET INV	EST-		(D) CHARITAI	BLE
	(EXPE	A) NSES	(B) NET INV	EST-	ADJUSTEI	(D) CHARITAI	

FORM 990-PF CORPORATE STOC	К	STATEMENT	5
DESCRIPTION	BOOK VALUE	FAIR MARKET	r
CORPORATE STOCK MUTUAL FUNDS	418,159. 496,636.	494,87 505,52	
TOTAL TO FORM 990-PF, PART II, LINE 10B	914,795.	1,000,39	99.
FORM 990-PF PART XV - LINE 1A LIST OF FOUNDATION MAN		STATEMENT	6

NAME OF MANAGER

SAWYER MARGLOUS JEAN MARGLOUS

STATEMENT

FORM 990-PF

	DURING THE YEAR	STATE	EMENT /
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
AMERICAN YOUTH FOUNDATION 6357 CLAYTON ROAD ST LOUIS, MO 63117	ANNUAL GIFT	501 (C) 3	2,000.
BRAIN INJURY ASSOCIATION 10270 PAGE AVENUE ST LOUIS, MO 63132	ANNUAL GIFT	501 (C) 3	400.
HARVEY KORNBLUM JEWISH FOOD PANTRY 10950 SCHUETZ RD ST LOUIS, MO 63146	ANNUAL GIFT	501 (C) 3	3,000.
JUVENILE DIABETES RESEARCH FDN 50 CRESTWOOD EXEC CENTER, #401 ST LOUIS, MO 63126	ANNUAL GIFT	501 (C) 3	500.
KETC CHANNEL 9 3655 OLIVE ST ST LOUIS, MO 63108	ANNUAL GIFT	501 (C) 3	2,000.
LIFE SKILLS FOUNDATION 10176 CORPORATE SQUARE DRIVE, SUITE 100 ST LOUIS, MO 63132	ANNUAL GIFT	501 (C) 3	300.
MISSOURI BOTANICAL GARDEN 4344 SHAW ST LOUIS, MO 63110	ANNUAL GIFT	501 (C) 3	2,000.
MISSOURI HISTORICAL MUSEUM 5700 LINDELL BLVD. ST LOUIS, MO 63112	ANNUAL GIFT	501 (C) 3	1,000.

GRANTS AND CONTRIBUTIONS

MARGLOUS, SAWYER & JEAN, FOUNDA	TION .		· 43-6771713
OPERATION FOOD SEARCH INC 6282 OLIVE ST ST LOUIS, MO 63130	ANNUAL GIFT	501 (C)	3 500.
PROVIDENT, INC. 2650 OLIVE ST ST LOUIS, MO 63103	ANNUAL GIFT	501 (C)	3 1,000.
SALVATION ARMY MIDLAND DIVISION 1130 HAMPTON AVENUE ST LOUIS, MO 63139	ANNUAL GIFT	501 (C)	3 250.
SHAARE EMETH CONGREGATION 11645 LADUE ROAD ST LOUIS, MO 63141	ANNUAL GIFT	501 (C)	3 97.
ST LOUIS ART MUSEUM FOUNDATION ONE FINE ARTS DRIVE FOREST PARK, MO 63110	ANNUAL GIFT	501 (C)	3 2,000.
ST LOUIS CHILDRENS HOSPITAL ONE CHILDRENS PLACE ST LOUIS, MO 63110	ANNUAL GIFT	501 (C)	3 500.
ST LOUIS SCIENCE CENTER 5050 OAKLAND AVE. ST LOUIS, MO 63110	ANNUAL GIFT	501 (C)	3 500.
ST LOUIS SOCIETY FOR THE PHYSICALLY DISABLED 1187 CORPORATE LAKE DR, #100 ST LOUIS, MO 63132	ANNUAL GIFT	501 (C)	3 250.
ST LOUIS ZOO ONE GOVERNMENT DRIVE ST LOUIS, MO 63110	ANNUAL GIFT	501 (C)	3 1,000.
ELIOT SOCIETY-WASHINGTON UNIVERSITY IN ST. LOUIS ONE BROOKINGS DRIVE ST LOUIS, MO 63130	ANNUAL GIFT	501 (C)	3 314.

MARGLOUS, SAWYER & JEAN, FOUNDATION			٠	43-6771713
SPECIAL EDUCATION FUND 10176 CORPORATE SQUARE DRIVE, ANNUAL GIFT SUITE 100 ST LOUIS, MO 63132	501	(C)	3	10.
VOLUNTEERS IN MEDICINE, INC. 162 ST. PAUL STREET BURLINGTON, ANNUAL GIFT VT 05401	501	(C)	3	21,500.
AMERICAN RED CROSS-ST. LOUIS AREA CHAPTER ANNUAL GIFT 10195 CORPORATE SQUARE DRIVE ST LOUIS, MO 63132	501	(C)	3	5,000.
TOTAL TO FORM 990-PF, PART XV, LINE 3A				44,121.

Form **8868** (Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

(Rev January 2011)
Department of the Treasury
Internal Revenue Service

File a separate application for each return.

internal ne	reflue delvice	arace appir	caudition each return.		L_		
-	are filing for an Automatic 3-Month Extension,	-	_				. ▶ 🗆
-	are filing for an Additional (Not Automatic) 3-M complete Part II unless you have already been g		· · · · · ·	•			3868.
	nic filing (e-file). You can electronically file Form						
	ation required to file Form 990-T), or an addition						
	request an extension of time to file any of the						
	for Transfers Associated With Certain Persona						
	ons) For more details on the electronic filing of the				han	ties & Non	profits.
Part I				<u> </u>	1		
-	oration required to file Form 990-T and reque	-					•
	· •						
	corporations (including 1120-C filers), partnersh come tax returns.	iips, HEIVIIC	s, and trusts must use Form 7004	to reque	est e	in extensio	on or time
Type or	 			Employe	er ide	entification	number
print	Sawyer and Jean Marglous Foundation					3-6771713	
File by the	W D O A	ox, see instr	uctions.				
due date f	1						
filing your return Sec	City town or post office state, and 7ID code Fo	r a foreign a	ddress, see instructions.				
instruction	•	J	•				
Enter the	e Return code for the return that this application i	is for (file a	separate application for each retur	n)			0 7
				_			
Applica	ation	Return	Application				Return
Is For		Code	Is For				Code
Form 9	The state of the s	01	Form 990-T (corporation)				07
Form 9		02	Form 1041-A				8
Form 9		03	Form 4720				09
Form 9		04	Form 5227				10
	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11
Form 9	90-T (trust other than above)	06	Form 8870		·- ·-		12
• The bo	ooks are in the care of ► Sawyer Marglous						
· Inc bo	ons are in the care of P					•	
Teleph	one No. ► 314 721-1104	F.	AX No. ► 314 721-5225				
•	organization does not have an office or place of b	usiness in	the United States, check this box.				. ▶ 🗆
	s for a Group Return, enter the organization's fou					. If this	is
	/hole group, check this box ▶ 🔲 . If	-		>	- [and atta	ch
	h the names and EINs of all members the extensi	-	•				
1	request an automatic 3-month (6 months for a co	orporation i	required to file Form 990-T) extensi	on of tim	е		
ι	ntil, 20, to file the exer	mpt organiz	zation return for the organization na	amed abo	ove.	The exter	nsion is
fe	or the organization's return for:		_				
•	calendar year 20 10 or						
	tax year beginning	, 20	, and ending			, 20	•
2 11	the tax year entered in line 1 is for less than 12 r	nonths, ch	eck reason: 🔲 Initial return 🔃 📙	inal retur	'n		
	Change in accounting period						
		0 T 4700	0000	· · · · · · · · · · · · · · ·			
	this application is for Form 990-BL, 990-PF, 990 onrefundable credits. See instructions.	u-1, 4 <i>1</i> 20,	or 6069, enter the tentative tax, les	- 1	3a	\$	
-	this application is for Form 990-PF, 990-T,	4720. or 6	069, enter any refundable credit		<i>-</i>	-	
	stimated tax payments made. Include any prior y	•	•		3b	\$	
	lalance due. Subtract line 3b from line 3a. Include yo						
(1	Electronic Federal Tax Payment System). See instruc	tions.		;	3c		
	. If you are going to make an electronic fund v	withdrawal	with this Form 8868, see Form 8	453-EO	and	Form 887	79-EO for
paymen	t instructions.						

Part II	Additional (Not Automatic) 3-Month		only Part I (on page 1). of Time. Only file the original (n	o copies r	needed)	
Type or	Name of exempt organization Employer ident					n number
print	Sawyer and Jean Marglous Foundation			43-6771713		
File by the	Number, street, and room or suite no. If a P.O. box, see instructions.					<u> </u>
extended	101 S. Hanley Road, Suite 1075	. DOX, GGC IIIGII	actions.			
due date for filing your	City, town or post office, state, and ZIP code. For a foreign address, see instructions.					
return See instructions	Clayton, Missouri 63105	. o. a .o.o.g., a	adross, cos mondeneros.			
	leturn code for the return that this applicatio	n is for (file a	separate application for each return	n)		0 4
Application	on .	Return	Application			Return
Is For	•••	Code	is For			Code
Form 990		01				10
Form 990-	-8I	02	Form 1041-A	CA describe on Laboration Marie Lab	Andrew Son Facilities of Children Per	08
Form 990-		03	Form 4720			09
Form 990-	· · · · · · · · · · · · · · · · · · ·	04	Form 5227			10
	T (sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)		06	Form 8870		12	
	not complete Part II if you were not already on sare in the care of ▶ Sawyer Marglous		utomatic 3-month extension on a pr	reviously fil	ed Form 8	3868.
	or a Group Return, enter the organization's i	our aigit Gro	up Exemption Number (GEN)		. If thi	IS IS
for the who list with the 4 I rec 5 For 6 If the	or a Group Return, enter the organization's role group, check this box ▶ □ . In names and EINs of all members the extens quest an additional 3-month extension of time calendar year 10 , or other tax year beging e tax year entered in line 5 is for less than 12 change in accounting period e in detail why you need the extension He	If it is for par ion is for. ie until ning 2 months, ch	November 15 , 20 , and ending eck reason: Initial return [20 11 .	and att	, 20
for the who list with the 4 I rec 5 For 6 If the 7 Stat	le group, check this box	If it is for par ion is for. ie until ning 2 months, ch	November 15 , 20 , and ending eck reason:	20 11 . Final returns any	and att	, 20
for the who list with the 4 I rec 5 For 6 If the 7 Stat 8a If the	ble group, check this box	If it is for par ion is for. ie until ning 2 months, ch alth issues ha	November 15 , 20 , and ending eck reason: Initial return ave delayed my filing of this return. or 6069, enter the tentative tax, les	20 11 . J Final returns any 8a	and att	, 20
for the who list with the 4 I red 5 For 6 If the 7 Stat 8a If the none	le group, check this box	If it is for partion is for. He until Hing The months, che is the issues has been depended in	November 15 , 20 , and ending eck reason: Initial return ave delayed my filing of this return. or 6069, enter the tentative tax, les	s any 8a s and	and att	, 20
for the who list with the 4 I red 5 For 6 If the 7 Stat 8a If the none b If the	le group, check this box	If it is for partion is for. He until Hing The months, che is the issues has been depended in	November 15 , 20 , and ending eck reason: Initial return ave delayed my filing of this return. or 6069, enter the tentative tax, les	20 11 . Final returns any 8a and diany	and att	, 20 0
for the who list with the 4 I red 5 For 6 If the 7 Stat 8a If the none b If the	le group, check this box	If it is for par ion is for. He until ning 2 months, che watch issues has 190-T, 4720, or 6 for year over	November 15 , 20 , and ending eck reason: Initial return are delayed my filing of this return. or 6069, enter the tentative tax, lesserpayment allowed as a credit and	20 11 . Final returns any s any a and d any 8b	and att	, 20
for the who list with the 4 I rec 5 For 6 If the 7 Stat 8a If the none b If the estur amo c Bala	le group, check this box	If it is for par ion is for. ie until ning 2 months, che alth issues had 190-T, 4720, or 6 rior year over your paymen	November 15 , 20 , and ending eck reason: Initial return are delayed my filing of this return. or 6069, enter the tentative tax, less are delayed as a credit and	s any a and d any BETTPS	and att	, 20
for the who list with the 4 I rec 5 For 6 If the 7 Stat 8a If the none b If the estur amo c Bala	le group, check this box	If it is for par ion is for. ie until ning 2 months, che alth issues had been seen although the seen altho	November 15 , 20 , and ending eck reason: Initial return are delayed my filing of this return. or 6069, enter the tentative tax, less are delayed as a credit and	20 11 . Final returns any s any a and d any 8b	and att	, 20 0