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Form **990-PF**

Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.						
For calendar year 2010, or tax year beginning , and ending						····
G	Check	all that apply Initial return Amended return	Initial return of a fo	ormer public charity	Final return Name change	
	_	foundation DEUPREE FAMILY FOUNDA REGIONS -MORGAN - KEEGAN nd street (or P O box number if mail is not delivered to street	-, -TRUSTEE	0180)	A Employer identification 62-6334424 B Telephone number	number —
		1100 RIDGEWAY LOOP	-	100	901-861-76	0 0
City or town, state, and ZIP code MEMPHIS, TN 38120 H Check type of organization: X Section 501(c)(3) ex			Other taxable private founda		C if exemption application is pe D 1. Foreign organizations, 2. Foreign organizations mee check here and attach con E if private foundation state under section 507(b)(1)(check here ting the 85% test, putation
		·	ther (specify)		F If the foundation is in a 6	•
	-\$	2,768,838. (Part I, colu	mn (d) must be on cash l	pasis)	under section 507(b)(1)(E 1
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))			(a) Revenue and expenses per books	(b) Net investment income	t (c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	15,000.		N/A	
	2	Check if the foundation is not required to attach Sch. B.				
	3	Interest on savings and temporary cash investments	16,869.	16,86	α .	STATEMENT 1
	52	Dividends and interest from securities Gross rents	10,009.	10,00	9.	SIMIEMENI I
Revenue		Net rental income or (loss)				
	62	Net gain or (loss) from sale of assets not on line 10	-24,858.			
	Gross sales price for all 567,158.					
eve	7	Capital gain net income (from Bart IV, line 2)			0.	
Œ	8	Net short-term capital gain CEIVED				
	9	Income modifications Gross sales less returns				
	I	and allowances				
		Less Cost of goods sold				
	11	Other income OGDEN LIT				
	12	Total. Add lines 1 through 11	7,011.	16,86	9.	
	13	Compensation of officers, directors, trustees, etc	10,272.	5,13		5,136.
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
Ses	16a	Legal fees				
pen		Accounting fees STMT 2	150.	15	0.	0.
Ñ	1	Other professional fees				
Ę	17	Interest	904	9.0	4	
stra	18 19	Taxes STMT 3 Depreciation and depletion	894.	89	4.	0.
Ē	20	Occupancy		···		
/ and Administrative Expenses	21	Travel, conferences, and meetings	13,338.	6,66	9.	6,669.
and /	22	Printing and publications		0,00		0,005.
	1	Other expenses				
रा ६ है Operating	24	Total operating and administrative				
_ <u>a</u>		expenses. Add lines 13 through 23	24,654.	12,84	9.	11,805.
do Tranco	25	Contributions, gifts, grants paid	126,600.			126,600.
<u>.</u>	26	Total expenses and disbursements.		4.4.4.		400 10-
<u> </u>	-	Add lines 24 and 25	151,254.	12,84	9.	138,405.
Ž		Subtract line 26 from line 12:	144 242			
ζ		Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	-144,243.	4,02	0	
Č.		Adjusted net income (if negative, enter -0-)		4,02	N/A	
0235			· · ·		1 24/42	222 == //

12-07-10 LHA For Paperwork Reduction Act Notice, see the instructions.

Forr	n 99	DEUPREE FAMILY FOUNDATI O-PF(2010) REGIONS MORGAN KEEGAN,	ON (2155000180 TRUSTEE		6334424 Page 2
=			Beginning of year		of year
Pá	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
ŀ	2	Savings and temporary cash investments	7,874.	32,763.	32,763.
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts			
	4	Pledges receivable ►			
		Less; allowance for doubtful accounts ▶			
_	. 5.	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
1	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	_	Investments - U.S. and state government obligations			
		Investments - corporate stock STMT 4	2,708,177.	2 116 160.	2,310,115.
	_	Investments - corporate bonds STMT 5	0.	418,094.	
		Investments - land, buildings, and equipment basis		410,074.	423,300.
	• •				
	10	Less accumulated depreciation Investments - mortgage loans			
- 1		* *			
- 1	13	Investments - other			
	14	Land, buildings, and equipment basis			
	4-	Less accumulated depreciation			
	15	Other assets (describe			
	16	Tatal assets (to be completed by all filers)	2,716,051.	2,567,017.	2,768,838.
$\neg \neg$		Total assets (to be completed by all filers) Accounts payable and accrued expenses	8,933.	3,934.	2,700,030.
	17	·	0,333.	3,334.	
- 1	18	Grants payable			
.9≥	19	Deferred revenue			
≣	20	Loans from officers, directors, trustees, and other disqualified persons			
E	21	Mortgages and other notes payable			
	22	Other liabilities (describe >)			
	••	Total Parketter and day of African AT About the CON	0 022	2 024	
\dashv	23	Total liabilities (add lines 17 through 22)	8,933.	3,934.	
		Foundations that follow SFAS 117, check here			
တ္က		and complete lines 24 through 26 and lines 30 and 31.			
[일	24	Unrestricted			
<u>a</u>	25	Temporarily restricted			
8	26	Permanently restricted			
<u>5</u>		Foundations that do not follow SFAS 117, check here			
Net Assets or Fund Balances		and complete lines 27 through 31.	2 756 406	2 756 426	
\$	27	Capital stock, trust principal, or current funds	2,756,496.	<u>2,756,496.</u>	
SS	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
ا کٍ	29	Retained earnings, accumulated income, endowment, or other funds	-49,378.	<u>-193,413.</u>	
ž	30	Total net assets or fund balances	2,707,118.	2,563,083.	
	31	Total liabilities and net assets/fund balances	2,716,051.	2,567,017.	
	art			2,00,,027.	1
		····		· · · · · · · · · · · · · · · · · · ·	<u></u>
		net assets or fund balances at beginning of year - Part II, column (a), line	30		0 505 440
		st agree with end-of-year figure reported on prior year's return)		1	2,707,118.
		r amount from Part I, line 27a		2	-144,243.
		r increases not included in line 2 (itemize) FEDERAL TAX	KEFUND_		208.
		lines 1, 2, and 3		4	2,563,083.
5 [Jecr	eases not included in line 2 (itemize)		0.	

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2

Net Assets or Fund Balances

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

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148,114.

138,405.

Add lines 5 and 6

See the Part VI instructions.

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.

8 Enter qualifying distributions from Part XII, line 4

DEUPREE FAMILY FOUNDATION (2155000180) Form 990-PF (2010) REGIONS MORGAN KEEGAN. TRUSTEE Page 4 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here
and enter *N/A* on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) 80. b Domestic foundations that meet the section 4940(e) requirements in Part V, check here | and enter 1% of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 0. 80. 3 4 -Subtitle A (income) tax-(domestic section 4947(a)(-1) trusts and taxable foundations-only. Others enter=0=)-80. 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 6 Credits/Payments: a 2010 estimated tax payments and 2009 overpayment credited to 2010 b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 6d 7 Total credits and payments. Add lines 6a through 6d 0. 8 Enter any penalty for underpayment of estimated tax. Check here _____ if Form 2220 is attached 8 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 80. 9 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 11 Enter the amount of line 10 to be: Credited to 2011 estimated tax Refunded > 11 Part VII-A | Statements Regarding Activities No Yes 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in Х any political campaign? 1a b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b X If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. Х c Did the foundation file Form 1120-POL for this year? 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year; (1) On the foundation. > \$ 0. (2) On foundation managers. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 0. managers. > \$ Х 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 If "Yes." attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes X 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4h 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: . By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? X 7 Did the foundation have at least \$5,000 in assets at any time during the year? X 7 If "Yes," complete Part II, col. (c), and Part XV.

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X

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8a Enter the states to which the foundation reports or with which it is registered (see instructions)

of each state as required by General Instruction G? If "No," attach explanation

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

year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

	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?		ĺ	
	(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	l i		
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	1b		X
	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		<u>X</u>
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)):			
a	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?			
	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		i	
	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.	i		
	>		Ī	
3а	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	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			
	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		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
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>X</u> _
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DEUPREE FAMILY FOUNDATION (2155000180) REGIONS MORGAN KEEGAN, TRUSTEE 62-6334424 Form 990-PF (2010) Page 6 Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No -the prevention of-cruelty to children-or-animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained 🔟 Yes 🔲 No N/A expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? X b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (c) Compensation (b) Title, and average hours per week devoted to position (e) Expense account, other (If not paid, enter -0-) (a) Name and address allowances SEE STATEMENT 6 10,272 13,338. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred (e) Expense account, other (b) Title, and average (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation allowances compensation NONE

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

Part VIII Information About Officers, Directors, Trustees, Foundation Raid 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		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info number of organizations and other beneficiaries served, conferences convened, research papers produced, e	ormation such as the tc.	Expenses
1 N/A		
2		
3		
·		
4		
Dort IV P O		
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 are		Amount
1 N/A	110 Z.	Amount
1		
2		
All alls		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.
		Corr. 000 DE (0010)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see 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	2,578,054.
Ь	Average of monthly cash balances	1b	
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	2,578,054.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	_1c (attach-detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,578,054.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	38,671.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,539,383.
6	Minimum investment return. Enter 5% of line 5	6	126,969.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	ıd certain	
1	Minimum investment return from Part X, line 6	1	126,969.
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	80.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	126,889.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	126,889.
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	126,889.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	138,405.
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:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	138,405.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	138,405.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies fo	r the section
	4040(a) reduction of tay in those years		

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Part XIII Undistributed Income (see	nstructions)			
	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
Distributable amount for 2010 from Part XI, line 7				126,889.
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 44,779.	ĺ			
b From 2006 9,731.				
c From 2007 57,690.				
d From 2008 8,893.				
e From 2009 39,024.				
f Total of lines 3a through e	160,117.			
4 Qualifying distributions for 2010 from	100,117.			
Part XII, line 4: ▶\$ 138, 405.				
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount				126,889.
e Remaining amount distributed out of corpus	11,516.		- "	120,003.
5 Excess distributions carryover applied to 2010	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				<u></u>
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	171,633.			
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				

assessed d Subtract line 6c from line 6b. Taxable amount - see instructions

e Undistributed income for 2009. Subtract line 4a from line 2a. Taxable amount - see instr.

the section 4942(a) tax has been previously

f Undistributed income for 2010. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011

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	Analysi	is of	line	9:
	_			

a Excess from 2006	9,/31.
b Excess from 2007	57,690.
c Excess from 2008	8,893.
d Excess from 2009	39,024.
e Eyress from 2010	11 516

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0.

0.

44,779.

126,854.

0.

0.

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REGIONS MORGAN KEEGAN, TRUSTEE

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Part XV Supplementary Information 3 Grants and Contributions Paid During				
Recipient	If recipient is an individual.		T	
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		
a Paid during the year SEE ATTACHED SCHEDULE VARIOUS MEMPHIS, TN 381.01	NONE	501(C)(3)	CHARITABLE GRANT	126,600
38101				
		1		
	•			
Total		1	▶ 3a	126,600
b Approved for future payment		1		1207000
,				
NONE				
		<u> </u>		
Total 23811 12-07-10			▶ 3b	orm 990-PF (2010

Part XVI-A	Analysis of Income-Producing Activities
I WILKEL TO	Analysis of moonic 1 roddoing Activities

Enter gross amounts unless otherwise indicated.		business income	Excluded	by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a					
b		_			
C					
_d					
e			<u> </u>		
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	16,869.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property			 		
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	-24,858.	
9 Net income or (loss) from special events	<u> </u>				
10 Gross profit or (loss) from sales of inventory		· 			
11 Other revenue:					
8	_		 		
b					
c					
d	_ 		1		
e	_		+	T 000	
12 Subtotal. Add columns (b), (d), and (e)		0.	<u>l</u>	-7,989.	
13 Total. Add line 12, columns (b), (d), and (e)				13	-7,989
See worksheet in line 13 instructions to verify calculations.		<u> </u>			
Part XVI-B Relationship of Activities	s to the Accom	nplishment of Ex	kempt P	urposes	
Line No. Explain below how each activity for which in			contributed	d importantly to the accomp	lishment of
the foundation's exempt purposes (other th	an by providing funds	s for such purposes).			
					
					
				 	
					
					
					
					
		 		 -	······
					
					
			 		
					· · · · · · · · · · · · · · · · · · ·
					

	Exempt Organ	nizations									
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?									Yes	No	
the Co	ode (other than section 501(c	c)(3) organizations) or in	section 5	27, relating to political or	ganızatı	ions?					
a Trans	fers from the reporting found	fation to a noncharitable	exempt or	rganization of:						Ì	
(1) C	ash							1a(1)		X	
(2) 0	ther assets							1a(2)		X	
b Other	transactions:										
(-1) S	ales of assets to a noncharita	able exempt organization			-			1b(1)	_	\mathbf{X}^{-}	
(2) P	urchases of assets from a no	oncharitable exempt orga	ınızatıon					1b(2)		_X	
(3) R	ental of facilities, equipment,	, or other assets						1b(3)		X	
(4) R	eimbursement arrangements	3						1b(4)		Х	
	oans or loan guarantees							1b(5)		X	
	erformance of services or mi							1b(6)		X	
	ng of facilities, equipment, ma							1c		X	
	answer to any of the above is								ets,		
	vices given by the reporting f				value in	any transaction	on or sharing arrange	ment, show in			
	n (d) the value of the goods,					(4)					
(a) Line no	(b) Amount involved	(c) Name of not		le exempt organization	-	(0) Descripti	on of transfers, transaction	ons, and sharing ar	rangeme	nts	
		 	N/A								
	· -										
											
		 			-+	· · · · · · · · · · · · · · · · · · ·	 .				
		-									
		<u> </u>									
2a Is the	foundation directly or indirec	tly affiliated with, or relat	ed to, one	e or more tax-exempt org	anızatıo	ns described	-				
ın sec	tion 501(c) of the Code (othe	r than section 501(c)(3))) or in sec	tion 527?				Yes	X] No	
b If "Yes	," complete the following sch			1							
	(a) Name of org	ganization		(b) Type of organization			(c) Description of relationship				
	N/A_	 .		ļ <u></u> -							
.					_						
					_						
	Under penalties of perjury, I declar	re that Plays everyand this re	sturn includ	to Table To the student							
Sign	REGIONS M	THE PRINT HE PARTY STATES	HOUSE TO	pased on all information of whi	ich prepa	rer has any kno	wledge	e and belief, it is tit	іе, сопес	л,	
Here	/	ANDAY REEGAN	MUSI	12/4	//1						
	Signature of officer // Afri	ustee		Date	4-	— <u> </u>	RUSTEE Title				
<u></u>	Print/Type preparer's na		eparer's s		Dat	te.	Check If	PTIN			
Paid	DAVID B. J	1(\	1	1 K / _	- 1	~ 23 ~	self- employed	, (,,,			
Prepare		V-144		1		- 					
Use On	_ i	KINS UIBERA	ALL.	PLLC			Firm's EIN ▶				
		61 AARON BE			300			(000) -00			
			38120				1 110110 110.	JUL, 10	- 6	, 20	
-	, , , , , , , , , , , , , , , , , , , ,				·			Form 990	-PF	20101	
									(4	-5.0)	

Schedule B (Form 990, 990-EZ,

Department of the Treasury Internal Revenue Service

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

Schedule of Contributors

2010

OMB No 1545-0047

Name of the organization

DEUPREE FAMILY FOUNDATION (2155000180)

REGIONS MORGAN KEEGAN, TRUSTEE

Employer identification number

62-6334424

Organiz	ation type (check of	ney:
Filers o	f:	Section:
Form 99	0 or 990-EZ	501(c)() (enter number) organization
		4947(a)(1) nonexempt charitable trust not treated as a private foundation
		527 political organization
Form 99	0-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
	nly a section 501(c)(covered by the General Rule or a Special Rule . 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 contributor. Comple	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one ete Parts I and II.
Special	Rules	
	509(a)(1) and 170(b	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections o)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
	aggregate contribu	c)(7), (8), or (10) organization filing Form 990 or 990·EZ that received from any one contributor, during the year, tions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or ruelty to children or animals. Complete Parts I, II, and III
	contributions for us If this box is checked purpose. Do not co	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, se exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. The ed, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., amplete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions of \$5,000 or more during the year.
but it mi	ust answer "No" on	at is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), 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 ng 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

DEUPREE FAMILY FOUNDATION (2155000180)

REGIONS MORGAN KEEGAN, TRUSTEE

62-6334424

Employer identification number

Part I Contributors (see instruction

		<u> </u>	<u> </u>
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u> </u>	_REED_DEUPREE	\$ <u>15,000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Occash 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 Omnicash 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 Moncash (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 Oncash Occash (Complete Part II if there is a noncash contribution.)

of Part II

lame of organization

DEUPREE FAMILY FOUNDATION (2155000180)

REGIONS MORGAN KEEGAN, TRUSTEE

62-6334424

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. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom eart I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

EUPRE	E FAMILY FOUNDATION (2)	155000180)	Employer toenuncadon Rumber				
EGION	S MORGAN KEEGAN, TRUSTI	EE	62-6334424				
Part III	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	columns (a) through (e) and the us, charitable, etc, contribution					
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-		(e) Transfer of gif	it .				
-	Transferee's name, address, an	d 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				
	(e) Transfer of gift						
-	Transferee's name, address, an	d 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				
-		t					
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				
n) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
_ [-							
	Transferee's name, address, an	(e) Transfer of gif d ZIP + 4	Relationship of transferor to transferee				
-							

ACCT 589R 2155000180 FROM 01/01/2010 TO 12/31/2010 REGIONS BANK, TRUST DEPARTMENT STATEMENT OF CAPITAL GAINS AND LOSSES DEUPREE FAMILY POUNDATION

TRUST YEAR ENDING 12/31/2010

PAGE 18

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TAX PREPARER 6560
TRUST ADMINISTRATOR 1115
INVESTMENT OPPICER 413

LEGEND F - FEDERAL S - STATE I - INHERITED E - EXEMPT FROM STATE U - ACQ COST UNKNOWN

INVESTMENT OFFICER 413	•		E	- EXEMPT PROM STATE	U - ACQ COST UNI	
PROPERTY DESCRIPTION	SHARES	DATE	SALES PRICE	COST BASIS		
2 0000 BERKSHI SOLD	RE HATHAWAY IN	C_DELAWARE_CL_A_	084670108MI	NOR-=-50		
ACQ	2 0000	08/05/2010 05/19/2008	241900 91 241900 91			
4103 2020 DODGE &	COY INTL. STV	PD #1049 - 25620	6103 - MINOR - C	4	-5715	6 LT15
SOLD	COX INID SIX	00/06/2010	133025 82 117044 57 1950 23 596 24 2339 43	3		
ACO	3610 2580	01/20/2006	117044 57	129608 25	-12563 6	8 LT15
	60 1550	12/29/2006	1950 23	2623 96	-673 7	
	18 3910	12/29/2006	596 24	802 23	-205 9	
	72 1600	12/29/2006	2339 43	3147 63		
	156 1830	12/31/2007	5063.45	7209 39		
	42 5160	12/31/2007	5063.45 1378 37 4653 53	1962 56	-584 1	
	143.5390	12/31/2007	4653 53	1962 56 6625 77	-1972 2	
109 5290 DODGE &	COX #145 - 25	6219106 - MINOR	= 62	3323	17,2 .	
SOLD		07/22/2010	10268 24			
ACQ	109 5290	10/06/2006	10268 34	16575 02	-6306 6	8 LT15
1005 6320 LONGLEA	PARTNERS FUN	DS TRUST (FUND #	133 - 543069108 -	- MINOR = 62	3300	0 2115
SOLD		05/25/2010	24648 04			
ACQ	1005 6320	10/06/2006	24648 04 24648 04	35448 52	-10800 4	8 LT15
198 2550 LONGLEA	PARTNERS FUN	DS TRUST (FUND #	133 - 543069108 -	MINOR = 62	20000	0 2115
SOLD		06/07/2010	4938 53			
ACQ	198.2550	10/06/2006	4938 53 4938 53	6988 49	-2049 9	6 LT15
745 7120 LONGLEA	PARTNERS FUN	DS TRUST (FUND #	133 - 543069108 -	- MINOR = 62		
SOLD		10/27/2010	19917 97			
ACQ	531 1590	01/08/2001	19917 97 14187.26 5730 71	12650 28	1536 9	8 LT15
	214 5530	10/06/2006	5730 71	7562 99	-1832 2	
1954.3240 LONGLEAR	PARTNERS FUN	DS TRUST (FUND #	133 - 543069108 -	- MINOR = 62		
SOLD		10/28/2010	52336 80 52336 80			
ACQ	1954 3240	01/08/2001	52336 80	46544 90	5791 9	0 LT15
328 9470 LONGLEN	DADTWEDG ENG	TR INTERNATIONAL	L F - 543069405 -	MINOR = 64		
SOLD		12/10/2010	5006 57 5006 57			
ACQ	328 9470	02/06/2001	5006 57	4198 94	807 6	3 LT15
		TR INTERNATIONAL	L F - 543069405 -	- MINOR = 64		
SOLD		12/15/2010	24788 55			
	1626 5450	02/06/2001	24788 55	20762 52	4026 0	3 LT15
3265 8390 LONGLEAR						
SOLD			50326 58			
ACQ	3265 8390	02/06/2001	50326 58		8638 8	1 LT15
		TOTALS	567158 11	592015 89		
			=======================================	=======================================		
UMMARY OF CAPITAL GAINS						
EDERAL	SHORT TERM	LONG TERM 28%	LONG TERM 15%	ST WASH SALE		1250 GAIN
TOTAL TOTAL PROPERTY						
UBTOTAL FROM ABOVE	0 00	0 00	-24857 78	0 00	0 00	0 00*
OMMON TRUST FUND	0 00	0 00	0 00			0 00
APITAL GAIN DIVIDENDS	0 00	0 00	0 00			0 00
						•••••
	0 00	0 00	-24857 78	0.00	0 00	0 00
ATE	=========	========	2882333333		**********	=========
JBTOTAL FROM ABOVE	0.00	0.00	-24857 78	0 00	0 00	0 00*
MMON TRUST FUND	0 00	0 00	0 00			0.00
APITAL GAIN DIVIDENDS	0 00		0 00			0 00
		0 00		0 00	0 00	0 00
	******		*********	*********	=======================================	
				* - 1250 GAIN	DETAILED ON TRANS	
APITAL LOSS CARRYOVER						

CAPITAL LOSS CARRYOVER

FEDERAL 0.00

TENNESSEE N/A

0 00

N/A

102 CHA	ARITABLE DEDUCTION - CURRENT INCOME				
02/26/10	DISTRIBUTION TO BOYS & GIRLS CLUB OF GREATER MEMPHIS STEAK & BURGER DINNER PAID TO BOYS & GIRLS CLUB OF GREATER MEMPHIS	-1000 00		-1000 00	1002000005
	TR TRAN#=00000000000001 TR CD=750 REG=0 PORT=PRIN				
03/03/10	DISTRIBUTION TO BROOKS MUSEUM PER E-MAIL REQUEST 3/2/2010 PAID TO: BROOKS MUSEUM	-2600 00		-2600 00	1003000003
	TR TRAN#=00000000000000 TR CD=750 REG= PORT=PRIN				
03/30/10	DISTRIBUTION TO GIRLS INCORPORATED PER E-MAIL REQUEST 3/30/2 010 PAID TO.	-1000 00	-1000 00		1003000008
	GIRLS INCORPORATED TR TRAN#=0000000000001 TR CD=750 REG= PORT=INC				

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ACCT 589R 2155000180 PREP 6560 ADMN:1115 INV.413 REGIONS BANK, TRUST DEPARTMENT TAX TRANSACTION DETAIL

PAGE 8 RUN 02/20/2011

04 44 47 PM EDIT CODE/DATE TRANSACTIONS TAXABLE INCOME PRINCIPAL NUMBER 102 CHARITABLE DEDUCTION - CURRENT INCOME (CONTINUED)
04/01/10 DISTRIBUTION TO MEMPHIS UNIVERSITY SCHOOL PER E-MAIL REQUEST -900 00 -900.00 1004000003 4/1/2010 PAID TO. MEMPHIS UNIVERSITY SCHOOL TR TRAN#=000000000000000 TR_CD=750 _ _ REG=..._ PORT=INC - - -- --04/01/10 DISTRIBUTION TO MEMPHIS UNIVERSITY SCHOOL PER E-MAIL REQUEST -100 00 -100 00 1004000002 4/1/2010 PAID TO

MEMPHIS UNIVERSITY SCHOOL

TR CD=750 TR TRAN#=0000000000000 TR CD=750 REG= PORT=PRIN 05/26/10 DISTRIBUTION TO ARTS MEMPHIS PER CUSTOMER REQUEST 5/26/10 -5000 00 1005000005 PAID TO ARTS MEMPHIS **REVERSAL STOP** TR TRAN#=00000000000000 TR CD=750 PORT=PRIN 05/26/10 DISTRIBUTION TO ELMWOOD CEMETARY PER CUSTOMER REQUEST 5/26/1 -10000 00 -10000 00 1005000006 PAID TO. ELMWOOD CEMETARY TR TRAN#=00000000000000 TR CD=750 REG= PORT=PRIN 05/26/10 DISTRIBUTION TO BROOKS MUSEUM PER CUSTOMER REQUEST 5/26/10 -7500 00 -7500 00 1005000007 PAID TO BROOKS MUSEUM TR TRAN#=00000000000000 TR CD=750 REG= PORT=PRIN 06/07/10 DISTRIBUTION TO CYSTIC FIBROSIS FOUNDATION IN HONOR OF TYREE -500 00 -500 00 1006000001 PAID TO

CYSTIC PIBROSIS FOUNDATION
TO COMPANY TO THE COMPANY TO T REG= PORT=PRIN 07/07/10 DISTRIBUTION TO RIVER SCHOOL PER E-MAIL REQUEST 7/7/2010 -2500 00 -2500 00 1007000003 PAID TO RIVER SCHOOL TR TRAN#=00000000000001 TR CD=750 REG=0 PORT=PRIN 08/16/10 DISTRIBUTION TO AUTISM SPEAKS FBO TEAM CAYDIE BUG -2500 00 -2500 00 1008000009 PAID TO AUTISM SPEAKS TR TRAN#=00000000000000 TR CD=750 REG= PORT-INC 08/20/10 DISTRIBUTION TO MEMPHIS ZOO PER CUSTOMER REQUEST 8/20/10 -2000 00 PAID TO MEMPHIS ZOO -2000 00 1008000010 TR TRAN#=00000000000001 TR CD=750 REG= PORT=PRIN 09/01/10 DISTRIBUTION TO TELLURIDE CHAMBER MUSIC ASSOCIATION PER CUST -2500 00 -2500 00 1009000002 OMER REQUEST 9/1/10 PAID TO TELLURIDE CHAMBER MUSIC ASSOCIATION TR TRAN#=00000000000000 TR CD=750 PORT-PRIN 10/07/10 DISTRIBUTION TO MEMORIAL HEALTH FOUNDATION -2500 00 -2500 00 1010000003 PAID TO MEMORIAL HEALTH FOUNDATION TR TRAN#=00000000000000 TR CD=750 REG= PORT=PRIN 10/29/10 DISTRIBUTION TO BOCA GRANDE WOMEN'S CLUB PER CUSTOMER REQUES -5000 00 -5000 00 1010000009 10/29/2010 PAID TO BOCA GRANDE WOMEN'S CLUB TR TRAN#=00000000000000 TR CD=750 REG= PORT=INC 11/17/10 DISTRIBUTION TO BRIDGES PER CUSTOMER REQUEST 11/17/2010 -2000 00 -2000 00 1011000006 PAID TO BRIDGES TR TRAN#=00000000000001 TR CD=750 REG= PORT=PRIN 12/03/10 DISTRIBUTION TO CONSERVATION THROUGH ART 2008 SPONSORSHIP -5000 00 -5000 00 1012000003 PAID TO

CONSERVATION THROUGH ART TR TRAN#=00000000000001 TR CD=750 REG= PORT=PRIN 12/09/10 DISTRIBUTION TO CHURCH HEALTH CENTER PER CUSTOMER REQUEST 12 -3000 00 -3000.00 1012000004 /09/10 PAID TO CHURCH HEALTH CENTER TR TRAN#=00000000000000 TR CD=750 REG= PORT=PRIN 12/09/10 DISTRIBUTION TO HUTCHISON SCHOOL PLEDGE PAYMENT 1 OF 5 -2500 00 -2500 00 1012000005 PAID TO-HUTCHISON SCHOOL TR TRAN#=00000000000005 TR CD=750 REG= PORT=PRIN 12/15/10 REVERSAL - NEGATES PREVIOUS ENTRY 5000.00 1012000009 DISTRIBUTION TO ARTS MEMPHIS PER CUSTOMER REQUEST 5/26/10 [R DIFFERENCE BETWEEN POSTING DATE AND TA EVERSED 12/15/2010] **REVERSAL STOP** PAID TO:

REGIONS BANK, TRUST DEPARTMENT ACCT 589R 2155000180 PAGE 9 PREP.6560 ADMM 1115 INV 413 TAX TRANSACTION DETAIL RUN 02/20/2011 04.44 47 PM EDIT CODE/DATE TRANSACTIONS TAXABLE INCOME PRINCIPAL NUMBER CHARITABLE DEDUCTION - CURRENT INCOME (CONTINUED) ARTS MEMPHIS TR TRAN#=00000000000001 TR CD=750 REG= PORT=PRIN 12/15/10 DISTRIBUTION TO BOCA GRANDE GICIA ANNUAL FUND PAID TO:

BOCA GRANDE GICIA ANNUAL FUND

TO CT=750 F TR TRAN#=00000000000000 TR CD=750 REG= PORT=PRIN 12/15/10 DISTRIBUTION TO GICIA BIKE PATH ENDOWMENT FUND PER CUSTOMER -20000.00 -20000 00 1012000010 REQUEST 12/15/2010 PAID TO GICIA BIKE PATH ENDOWMENT FUND TR TRAN#=00000000000000 TR CD=750 REG= PORT=PRIN 12/15/10 DISTRIBUTION TO YOUTH STRIVING FOR EXCELLENCE CONTRIBUTION F -2500 00 -2500 00 1012000012 ROM DEUPREE FAMILY FOUNDATION PAID TO YOUTH STRIVING FOR EXCELLENCE TR TRAN#=00000000000000 TR CD=750 REG= PORT=PRIN 12/27/10 DISTRIBUTION TO ARTS MEMPHIS CONSERVATION THROUGH ART 2008 P -5000 00 1012000018 **REVERSAL STOP** PAID TO ARTS MEMPHIS TR TRAN#=00000000000001 TR CD=750 REG= PORT=INC 12/29/10 DISTRIBUTION TO WASHINGTON & LEE UNIVERSITY CHARITABLE CONTR IBUTION TO WASHINGTON & LEE PER EMAIL REQ FROM REED -15000 00 -15000 00 1012000024 WASHINGTON & LEE UNIVERSITY TR TRAN#=00000000000001 TR CD=750 REG= PORT=PRIN 12/29/10 DISTRIBUTION TO CHILDREN'S MUSEUM OF MEMPHIS CHARITABLE CONT -1000 00 -1000 00 1012000025 RIBUTION TO CHILDREN'S MUSEUM OF MEMPHIS PER INSTRUCTIONS RE CD 12/28/10 PAID TO CHILDREN'S MUSEUM OF MEMPHIS REG= TR TRAN#=00000000000000 TR CD=750 PORT=PRIN 12/29/10 DISTRIBUTION TO NATURE CONSERVANCY CHARITABLE CONTRIBUTION T -2500 00 -2500 00 1012000026 O NATURE CONSERVANCY PER INSTRUCTIONS RECD 12/28/10 PAID TO NATURE CONSERVANCY TR TRAN#=00000000000000 TR CD=750 12/29/10 DISTRIBUTION TO JOHANN LIBRARY CHARITABLE CONTRIBUTION TO JOHANN LIBRARY PER INSTRUCTIONS RECD 12/28/10 -1000 00 -1000 00 1012000027 PAID TO JOHANN LIBRARY TR TRAN#=00000000000000 TR CD=750 REG= PORT=PRIN 12/29/10 DISTRIBUTION TO ROYAL PALM PLAYERS CHARITABLE CONTRIBUTION T O ROYAL PALM PLAYERS PER INSTRUCTIONS RECD 12/28/10 -15000 00 -15000 00 1012000028 PAID TO ROYAL PALM PLAYERS TR TRAN#=00000000000000 TR CD=750 REG= PORT=PRIN 12/29/10 DISTRIBUTION TO TELLURIDE MEDICAL CENTER CHARITABLE CONTRIBU
TION TO TELLURIDE MEDICAL CENTER PER INSTRUCTIONS RECD 12/28 -2500 00 -2500 00 1012000029 /10 PAID TO TELLURIDE MEDICAL CENTER TR TRAN#=0000000000000 TR CD=750 REG= PORT=PRIN DISTRIBUTION TO RIVERVIEW CHARTER SCHOOL CHARITABLE CONTRIBU -1000 00 12/29/10 -1000 00 1012000030 TION TO RIVERVIEW CHARTER SCHOOL PER INSTRUCTIONS RECD 12/28 /10 PAID TO RIVERVIEW CHARTER SCHOOL TR TRAN#=00000000000000 TR CD=750 REG= PORT=PRIN 12/29/10 DISTRIBUTION TO AVE MARIA HOME CHARITABLE CONTRIBUTION TO AV -5000 00 -5000 00 1012000031 E MARIE HOME PER INSTRUCTIONS RECD 12/28/10 PAID TO AVE MARIA HOME TR TRAN#=000000000000010 TR CD=750 REG= PORT=PRIN 12/30/10 DISTRIBUTION TO BOCA GRANDE HEALTH CLINIC PER CUSTOMER REQUE -5000 00 -5000 00 1012000032 ST 12/29/10 PAID TO BOCA GRANDE HEALTH CLINIC TR TRAN#=000000000000007 TR CD=750 REG= PORT=PRIN 12/30/10 DISTRIBUTION TO BOCA GRANDE COMMUNITY CENTER PER CUSTOMER RE -1000 00 -1000 00 1012000033 QUEST 12/29/10 PAID TO BOCA GRANDE COMMUNITY CENTER TR TRAN#=00000000000000 TR CD=750 REG= PORT=PRIN 01/11/11 REVERSAL - NEGATES PREVIOUS ENTRY DISTRIBUTION TO ARTS MEMPHIS CONSERVATION THROUGH ART 2008 P DIFFERENCE BETWEEN POSTING DATE AND TA

REGIONS BANK, TRUST DEPARTMENT TAX TRANSACTION DETAIL ACCT 589R 2155000180 PREP 6560 ADMN 1115 INV.413 PAGE 10 RUN 02/20/2011 04.44 47 PM TAX CODE/DATE TRANSACTIONS INCOMB PRINCIPAL NUMBER TAXABLE CHARITABLE DEDUCTION - CURRENT INCOME (CONTINUED)
LEDGE [REVERSED 01/11/2011]
PAID TO: **REVERSAL STOP** ARTS MEMPHIS
TR TRANS-000000000000000 TR CD-750 REG-0 PORT-INC -116200 00 TOTAL CODE 102 - CHARITABLE DEDUCTION - CURRENT INCOME -14400 00 -125600 00 Jacob's Ladder Community Development Paid 2/26/2010 1,000

126,600

FORM 990-PF DIVIDEND	S AND IN	TERI	EST FROM	SECUE	RITIES	STA	TEMENT	1
SOURCE	GR	ROSS	AMOUNT		TAL GAINS		LUMN (A AMOUNT)
CORPORATE STOCK			16,869.		0.		16,8	69.
TOTAL TO FM 990-PF, PART I, L	N 4		16,869.		0.		16,8	69.
FORM 990-PF	ACCOU	JNTII	NG FEES			STA	TEMENT	2
DESCRIPTION	(A) EXPENSE PER BOO		(B) NET INVI MENT INC	EST-	(C) ADJUSTEI NET INCOM		(D) CHARITA PURPOS	
ACCOUNTING FEES	1	L50.		150.				0.
-	1	L50.		150.				0.
TO FORM 990-PF, PG 1, LN 16B		TAXI	ES .	150.		STA	TEMENT	
TO FORM 990-PF, PG 1, LN 16B = FORM 990-PF		TAXI	ES (B) NET INVE	EST-)	TEMENT (D) CHARITA PURPOS	3 BLE
TO FORM 990-PF, PG 1, LN 16B FORM 990-PF DESCRIPTION	(A) EXPENSE PER BOO	TAXI	(B) NET INV	EST-	ADJUSTEI)	(D) CHARITA	3 BLE
TO FORM 990-PF, PG 1, LN 16B FORM 990-PF DESCRIPTION FOREIGN TAXES TO FORM 990-PF, PG 1, LN 18	(A) EXPENSE PER BOO	TAXI ES OKS	(B) NET INV	EST-	ADJUSTEI)	(D) CHARITA	3 BLE ES
TO FORM 990-PF, PG 1, LN 16B FORM 990-PF DESCRIPTION FOREIGN TAXES TO FORM 990-PF, PG 1, LN 18	(A) EXPENSE PER BOO 8	TAXI ES OKS 394.	(B) NET INV	EST- COME 894.	ADJUSTEI) 4E —— —	(D) CHARITA	3 BLE ES
TO FORM 990-PF, PG 1, LN 16B FORM 990-PF DESCRIPTION FOREIGN TAXES	(A) EXPENSE PER BOO 8	TAXI ES OKS 394.	(B) NET INVI MENT INC	EST- COME 894. 894.	ADJUSTEI	O ME STA	(D) CHARITA PURPOS	3 BLE ES 0.
TO FORM 990-PF, PG 1, LN 16B FORM 990-PF DESCRIPTION FOREIGN TAXES TO FORM 990-PF, PG 1, LN 18 FORM 990-PF	(A) EXPENSE PER BOO 8	TAXI ES OKS 394.	(B) NET INVI MENT INC	894. 894.	ADJUSTEI NET INCOM	O ME STA	(D) CHARITA PURPOS TEMENT	3 BLE ES 0. 0.

FORM 990-PF C	ORPORATE BONDS		STAT	EMENT 5
DESCRIPTION		BOOK VALUI		MARKET ALUE
CORPORATE BONDS		418,09	94.	425,960.
TOTAL TO FORM 990-PF, PART II, LI	NE 10C	418,09	94.	425,960.
FORM 990-PF PART VIII - LIS TRUSTEES AND	T OF OFFICERS, FOUNDATION MAN		STAT	ement 6
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
REGIONS MORGAN KEEGAN TRUST 1100 RIDGEWAY LOOP, SUITE 100 MEMPHIS, TN 38120	SUCCESSOR TRUE	TEE 10,272.	0.	0.
WILLIAM W DEUPREE, JR 2908 NATCHEZ LANE MEMPHIS, TN 38111	TRUST ADVISOR 1.00	COMMITTEE 0.	0.	4,446.
REBECCA DEUPREE 16 GROUPER HOLE BOCA GRANDE, FL 33921	TRUST ADVISOR 1.00	COMMITTEE 0.	0.	0.
WILLIAM W DEUPREE III 505 GOODWYN MEMPHIS, TN 38111	TRUST ADVISOR 1.00	COMMITTEE 0.	0.	4,446.
REED DEUPREE 309 NORTHWAY BALTIMORE, MD 21218	TRUST ADVISOR	COMMITTEE 0.	0.	4,446.
ROBERTA DEUPREE 1314 S CHARLES STREET BALTIMORE, MD 21230	TRUST ADVISOR	COMMITTEE 0.	0.	0.
ANGELA KAYE DEUPREE 505 GOODWYN MEMPHIS, TN 38111	TRUST ADVISOR 1.00	COMMITTEE 0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	10,272.	0.	13,338.

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

NAME OF MANAGER

WILLIAM W DEUPREE III -ANGELA-KAYE-DEUPREE-