

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



Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Open to Public

Department of the Treasury

(HTA)

		ue Service	▶The organization may have to use a copy of this return to satisfy	y state re	eporting re	equirements		Inspection	
A	For the	e 2010 cal	endar year, or tax year beginning 2/1/2010	, and e	nding	1/31/	2011		
В	Check if	applicable	C Name of organization SUSAN H. & WILBUR H. MARCY TRUS	ST		D Employer id	dentification	number	
	Address	change	Doing Business As		5	9-1932547			
	Name ch	nange	Number and street (or P O box if mail is not delivered to street address) Room	m/suite	1	E Telephone n	umber		
	Initial reti	urn	P.O. BOX 1328		(-	407) 644-98	01		
	Terminat	ted	City or town, state or country, and ZIP + 4		T i				
	Amended	d return	WINTER PARK FL :	32790		G Gross receip	ots \$	463,941	
同	Application	on pending	F Name and address of principal officer		H(a) Is the	s a group return	for affiliates	⁷ Yes X No	
			Kenneth F. Murrah P. O. Box 1328, Winter Park, FL 32790		H(b) Are	all affiliates inclu	uded?	Yes No	
1	Tax-exem	npt status	X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or	527	If "N	o," attach a list	(see instruct	uons)	
	Website								
				<u> </u>		p exemption nu	T		
		organization	Corporation X Trust Association Other ►	L Yea	r of format	ion 1979	M State of	legal domicile FL	
	Part I		nmary		 				
	1		escribe the organization's mission or most significant activities:			a supporting	organizat	ion	
a.	į		Inited Methodist Church and churches and other institutions affil						
ğ			heastern U.S. The Trust used its net income in the current year						
Activities & Governance	ł		United Methodist Church of Winter Park, FL, and Emory Univer						
, გ	2		if the organization discontinued its operations or disposed of	f more tha	ın 25% of i	its net assets	1		
85	3		of voting members of the governing body (Part VI, line 1a)			·	3	3	
ities	4		of independent voting members of the governing body (Part VI,			-	4	1	
ફું	5		mber of individuals employed in calendar year 2010 (Part V, line	e 2a) .		· -	5	0	
∢	-		mber of volunteers (estimate if necessary)			· -	6	0	
	7a		related business revenue from Part VIII, column (C), tine-12		•	<u> </u>	7a 7b	0	
_	+ -	Netuille				Prior Year	/ b	Current Year	
Revenue	8	Contribi	itions and grants (Part VIII, line 1h) .	135		TIOI TEAT	0	0	
	9		is service revenue (Part VIII, line 2g)	01			0	0	
ever	10		ent income (Part VIII, column (A), lines 3, 4, and 7d)		278,2	218	453,024		
ď	11		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 40c (and 1)1e).	또[0		
	12		enue—add lines 8 through 11 (must equal Part VIII, column (A), line-12			278,2	218	453,024	
	13		and similar amounts paid (Part IX, column (A), lines 1–3).			172,8		147,675	
	14	Benefits	paid to or for members (Part IX, column (A), line 4)				0		
, ø	15	Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5-1	10)		96,	572	104,387	
Expenses	16a	Professi	onal fundraising fees (Part IX, column (A), line 11e)				0	†*************************************	
XDE	· b	Total fur	ndraising expenses (Part IX, column (D), line 25) ▶	0					
, m	17		cpenses (Part IX, column (A), lines 11a-11d, 11f-24f)				045	12,306	
>	18		penses. Add lines 13–17 (must equal Part IX, column (A), line 2	5)		271,4		264,368	
	19 ₆	Revenue	e less expenses. Subtract line 18 from line 12 .				721	<u> 188,656</u>	
Net Assets or	20	T-4-1	(D		Beginnir	g of Current Y		End of Year	
\sse	20		sets (Part X, line 16)			9,115,4		10,669,816	
det /	21		bilities (Part X, line 26)......................... ets or fund balances. Subtract line 21 from line 20	٠		-24,		2,435	
	art II		nature Block	•	-	9,139,	ווסכ	10,667,381	
			y, I declare that I have examined this return, including accompanying schedules and	1 statemen	its, and to t	he hest of my k	nowledge		
			ct, and complete Declaration of preparer (other than officer) is based on all informa						
Çi.	gn		Tenneth F. munch			Ju	4e 8, 8	2011	
	ere		Signature of officer			Date			
110			Kenneth F. Murrah	Co-T	rustee				
			Type or print name and title						
_		Print	Type preparer's name Preparer's signature		Date	Che	eck I if	PTIN	
Pa		. Brue	ce M. Wigle, III		6∽	X - / / /	employed		
	eparer	· 5	's name ► Murrah, Doyle & Wigle, P.A.		, ,	irm's EIN ▶		·	
US	e Only	у —	's address ► 800 W. Morse Blvd., Suite 1, Winter Park, FL 32789				407) 644-9	 2801	
						Phone no (4	1011044-8		
	<u> </u>		s this return with the preparer shown above? (see instructions)	• •	•	• •		X Yes No	
Fo	r Paper	work Redu	action Act Notice, see the separate instructions.					Form 990 (2010)	

Form 9	90 (2010)	SUSAN H. & WILBUR H. MARCY TRUST	59-1932547	Page
Pa	rt III	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III		
1	The Tru	escribe the organization's mission: st is a supporting organization for the United Methodist Chuch and churches and stitutions affilitated with it in the southeastern states of the U.S.		
2		organization undertake any significant program services during the year which were not listed or	Yes	X No
3	If "Yes,"	describe these new services on Schedule O. organization cease conducting, or make significant changes in how it conducts, any program	_	
	services	describe these changes on Schedule O.	. Yes	X No
4	Section	e the exempt purpose achievements for each of the organization's three largest program service 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the anns to others, the total expenses, and revenue, if any, for each program service reported.		nd
4a	Grant to H. Marc Georgia) (Expenses \$ 36,000 including grants of \$ 36,000) (Revenue Emory University, Atlanta, Georgia, in the amount of \$19,100.00 for the 2011-2012 Susan y Scholarship at the Candler School of Theology; and grant to Emory University, Atlanta, in the amount of \$16,900.00 for the 2011-2012 Susan H. Marcy Fellows Program for s of the Florida Annual Conference of the United Methodist Church		
4b	Grant to) (Expenses \$ 111,675 including grants of \$ 111,675) (Revenue the First United Methodist Church of Winter Park, Florida, in the amount of \$75,000.00 of 11 Operating Budget Challenge Grant; and grant to the First United Methodist Church of Park, Florida, in the amount of \$36,675.00 for the 2011 Marcy Music Scholarships.		
4c	(Code:) (Expenses \$0 including grants of \$0) (Revenue	ue \$	<u>0</u> _)

(Expenses \$ 0 including grants of \$ 0) (Revenue \$ 0)

4e Total program service expenses ► 147,675

4d Other program services. (Describe in Schedule O.)

Part IV Checklist of Required Schedules

			_Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? (see instructions)	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	 -		
-	candidates for public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			_^
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
6	Part III	5_		
U	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		_^
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes,"	-		
·	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part	<u> </u>		
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
_	VII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		X
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u>X</u>
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	l		
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
T	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			.,
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		_ <u>X</u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40-		v
L	Schedule D, Parts XI, XII, and XIII	12a		X
D	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.	425		v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b	\dashv	X
14a		13 14a		^
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	140		
-	business, and program service activities outside the United States? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	1		
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		_X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	j	Χ
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		_X
	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some			
	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions) . N/A	20b		

Form §	990 (2010) SUSAN H. & WILBUR H. MARCY TRUST 59	-1932547	F	Page 4
Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	. 21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25	. 24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . N/A	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
_	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? N/A	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	200		<u> </u>
_	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			 ^-
20	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part			x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	" 20	-	 ^
21	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	. 27		x
20	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	-^
28	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
_				ت ا
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
D	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete</i>	001		
	Schedule L, Part IV	28b	-	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV .	. 28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	. 29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			١.,
	conservation contributions? If "Yes," complete Schedule M	. 30		<u> </u>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			١
	Part I	. 31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?			
	If "Yes," complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,	:		
	III, IV, and V, line 1	34	X	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	X	ļ
а	Did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,			
	Part V, line 2	No		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	. 36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			

38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and

19? Note. All Form 990 filers are required to complete Schedule O.

	Check if Schedule O contains a response to any question in this Part V		[
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable]		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		j	
	gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		ĺ	
	Statements, filed for the calendar year ending with or within the year covered by this return 0]	- [
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? N/A	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)		.	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		_X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O N/A	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶		1	
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? .	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
_	organization solicit any contributions that were not tax deductible?	6a		<u> X</u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	١ ا		
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		ŀ	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		-	
b	and services provided to the payor?	7a 7b		X
b c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	"		
·	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year N/A 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		·X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? N/A	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-IN/A	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring		l	
	organization, have excess business holdings at any time during the year?	8		X
9	Sponsoring organizations maintaining donor advised funds.	_	.	_
а	Did the organization make any taxable distributions under section 4966?	9a		_ <u>X</u>
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		Х
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a	-		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . N/A 10b	- I		
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders	∤		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
120	against amounts due or received from them)	12a	- 1	
12a	If "Yes," enter the amount of tax-exempt interest received or accrued during the year. N/A 12b	120		—
b 13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	Note. See the instructions for additional information the organization must report on Schedule O.	.54		
b	Enter the amount of reserves the organization is required to maintain by the states in which		.	
_	the organization is licensed to issue qualified health plans N/A 13b			
С	Enter the amount of reserves on hand	1 1		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Χ
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . N/A	14b		

X

Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sect	ion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
_	any other officer, director, trustee, or key employee?	2		_X_
3	Did the organization delegate control over management duties customarily performed by or under the direct			v
	supervision of officers, directors or trustees, or key employees to a management company or other person?	3		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		<u>X</u>
6	Does the organization have members or stockholders?	6		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	_		
	of the governing body?	7a		<u>X</u>
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	5,	*	
_	the year by the following:	.		
a	The governing body?	8a	_ <u>X</u> _	
b	Each committee with authority to act on behalf of the governing body?	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
04	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	9	X	
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co	pae.)	. 1	
40-	Describe assessmentian have local aboutons because as officers?	40-	Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		X
D	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization? N/A	406		
44-	·	10b		
па	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	44.		
L		11a	X	· · · · ·
120	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	420		X
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	-	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	426		
_	rise to conflicts?	12b		
С		120		
13	Does the organization have a written whistleblower policy?	12c		X
14	Does the organization have a written document retention and destruction policy?	14		$\hat{\mathbf{x}}$
	Did the process for determining compensation of the following persons include a review and approval by	14		^
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		1	
_		 15a	ł	V
a h	Other officers or key employees of the organization	15a 15b		X
D	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)	130		
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement	Î		
iva	with a taxable entity during the year?	16a		Х
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	104	\longrightarrow	
D	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard			
		16b		
Soct	the organization's exempt status with respect to such arrangements? N/A ion C. Disclosure	TOD	1	
<u> 17</u>	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s online	 v)		
10	available for public inspection. Indicate how you make these available. Check all that apply.	y <i>j</i>		
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interes	+		
13	policy, and financial statements available to the public.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the			
	organization: Kenneth F. Murrah (407) 644-98			
	800 W Morse Blvd Suite 1 Winter Park FL 32789-3735	۷۱		 -

Form 990 (2010)	SUSAN H. & WILBUR H. MARCY TRUST
1 01111 000 (2010)	SOSAITI. & WIEDOKTI. MAKCT TKOST

Section A.

59-1932547

Page 7

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Check if Schedule O contains a response to any question in this Part VII

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees, officers; key employees; highest compensated employees, and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B)	(C) Position (check all that apply)						(D)	(E)	(F)
Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director		Officer	Key employee			Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(1) Kenneth F. Murrah Trustee		х						104,387	0	0
(2) Gregory Zechman Trustee		x						. 0	0	0
(3) Milton E. Wilson Trustee		х						0	0	0
(4)										
(6)										
(7)										
(8)										
(9)										
(10)										
(11)								·		-
(12)									,,,,	
(13)										
(14)										
(15)										
(16)										

Р	Section A. Officers, Directors, Tr	ustees, Key Eı	mplo	yee	s, a	ınd	High	est	Compensated	Employees (c	ontınu	ed)	
	(A)	(B)	(C) Position (check all that ap						(D)	(E)		(F)	
	Name and title	Average hours per week (describe hours for related organizations in Schedule	Individual trustee or director		Officer	a Key employee	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	con f orç ar	stimated mount of other opensated from the ganizated anizated	of ion ion ed
		0)		ē			sated						
(17)													
(18)													
(19)													
(20)													
<u>(21)</u>													
(22)													
(23)													
(24)													
(25)													
(26)				-									
(27)													
(28)													
1b					I	1		•	104,387	C	_		(
C	Total from continuation sheets to Part VII,				٠	٠	•	. •	104,387		_		(
<u>d</u>	Total (add lines 1b and 1c) Total number of individuals (including but not	limited to those			ove	 e) w	ho re		<u> </u>		<u>'</u> 1		
	reportable compensation from the organizatio				1								
_										.1	_	Yes	No
3	Did the organization list any former officer, die employee on line 1a? <i>If</i> "Yes," complete Sche					yee	, or n	ıgne	est compensate		3		X
4	For any individual listed on line 1a, is the sum					n an	d oth	er o	compensation from	om		٠	<u> </u>
	the organization and related organizations gre										<i>i</i> :		*
_	IndividualDid any person listed on line 1a receive or acceive.										4		_X
5	for services rendered to the organization? If "	•							-		5	-	X
	tion B. Independent Contractors				4-		41-	-4 -	:	\$400,000 -6			
1	Complete this table for your five highest comp compensation from the organization	ensated indepe	enaer	it cc	ontra	acto	ors tn	at re	eceived more in	an \$100,000 of			
	(A) Name and business add	ress							(B) Description of ser	vices	(C Comper	-	
													(
													(
													_
								Ļ					(
2	Total number of independent contractors (incl more than \$100,000 in compensation from the		nited	to t	nos	e lis	sted a	ode	ve) who receive				

59-1932547 Page **9**

Par	t VIII	Statement of Revenue						
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
at st	1a	Federated campaigns	12	0				
gifts, grants lar amounts	b	Membership dues .	. 1t	0]			
S, g	С	Fundraising events	10	: 0	1			
ar a	d		10	0				
ons, gif similar	е	Government grants (contributio	ns) 1e	0	1			
ion	f	All other contributions, gifts, gra			1			
ributio		similar amounts not included at		:	1			
d di	a	Noncash contributions included in		0	1			
Contributions, and other simi	h	Total. Add lines 1a-1f		▶	0			
				Business Code				
Program Service Revenue	2a				0	***************************************		# 800 5
Se.	b				0			
<u>e</u>	С				0			
Š	d				0			
E	e				0			
gra	f	All other program service reven	ue		0			
9	a	Total. Add lines 2a-2f		•	0		¥	
	3	Investment income (including d						
		other similar amounts) .			290,923			290,923
	4	Income from investment of tax-		-	250,525			230,323
	5	Royalties	exempt bond pi	D				
	"	rtoyantos	(ı) Real	(II) Personal		2 46.		Y.,%a
	6a	Gross Rents	(1) 1 10 21	()			. 15	· 🔊
	Ь	Less rental expenses						* · · · · · · · · · · · · · · · · · · ·
	C	Rental income or (loss)						*
	ď	Net rental income or (loss)		<u> </u>				
	_	Gross amount from sales of	(i) Securities	(II) Other CGD				\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	'a	assets other than inventory.	149,22	+		7	115.00	, s
	١,	Less: cost or other basis	145,22	23,190				**
		and sales expenses .	10,91	7		ž.	, ,, ,	•
	ြင	Gain or (loss)	138,30					٠
	d	Net gain or (loss)	130,30	23,790	162,101	1 mm - 2 mm		
	l u	ivet gain or (ioss)			102,101	**		, ,
ne	Ra.	Gross income from fundraising				*		**
Other Revenue	""	events (not including \$	0			* * *	* .	*
ě		of contributions reported on line			1 26 3			¥.
ř		See Part IV, line 18	•	۱ ،	₩	 5	1 1	ŧ
ŧ	h	Less direct expenses			d *. : `	~ [*]	• 1	* ***
0		Net income or (loss) from fundr			1			
		Gross income from gaming acti	_		<u> </u>			
	""	See Part IV, line 19			, ·			
	b	Less: direct expenses			-			
		Net income or (loss) from gamil		•	1			
		Gross sales of inventory, less						
	'	returns and allowances .	. а		,			
	Ь	Less: cost of goods sold	-					
		Net income or (loss) from sales			1			
	<u> </u>	Miscellaneous Revenue	or inventory.	Business Code	 		1	
	11a				1 0			
	b				0		†	
	C				0			
	ď	All other revenue			0			
	l e			▶	0			
	12	Total revenue. See instructions			453,024		0	290,923
			- 			, 0		200,923

59-1932547

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)

	All other organizations must complete column (A				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		, ,		
	organizations in the U S. See Part IV, line 21	147,675	147,675		
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22	0			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors,		•		
	trustees, and key employees	104,387		104,387	
6	Compensation not included above, to disqualified		<u>-</u> -		
	persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan contributions (include section 401(k)		-		
-	and section 403(b) employer contributions)	o			
9	Other employee benefits	0			
10	Payroll taxes	0			
11	Fees for services (non-employees):				
''a	Management	o			
b	Legal.	0	· ·		
C	Accounting	0			
d	Lobbying	0			
e	Professional fundraising services. See Part IV, line 17	0			·
f	Investment management fees	0			
	Other	0			
g 12	Advertising and promotion	0			
13	Office expenses	39		39	
14	Information technology	0		39	
15	Royalties	0		+	
16	Occupancy	0			
17	Travel	0			
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials	0			
40		0			
19 20	Conferences, conventions, and meetings	0			
		0		_	
21	Payments to affiliates	0	0	0	
22 23		0	9	U	
23 24	Other expenses. Itemize expenses not covered	U			
44	above (List miscellaneous expenses in line 24f. If		1		
	line 24f amount exceeds 10% of line 25, column				
	(A) amount, list line 24f expenses on Schedule O.)				
_	Bruce Wigle, tax preparation	1,950	-	1,950	
a b	Morgan Stanley, account fees	1,950	-	1,850	
C	Orange County, Florida, real estate taxes	9,814		9,814	
d	Misc. expenses related to mortgage foreclosure	503		503	
e	inios, expenses related to mongage foreclosure	0	+		
f	All other expenses	0			
		264,368	147,675	116,693	
25	TOTAL TUNCTIONAL EXPENSES AND HIPS THE OUTPUT 745 TO	207,000	177,073	110,000	
25	Total functional expenses. Add lines 1 through 24f.	ĺ		1	
25 26	Joint costs. Check here ▶ if following				
	Joint costs. Check here ▶ if following SOP 98-2 (ASC 958-720). Complete this line			į	
	Joint costs. Check here ▶ if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column				
	Joint costs. Check here ▶ if following SOP 98-2 (ASC 958-720). Complete this line				

59-1932547 **Balance Sheet** Part X (Fair Market Value) (Fair Market Value (A) Beginning of year End of year 1 Cash—non-interest-bearing. 2 2 Savings and temporary cash investments . 781.186 904.039 0 3 3 Pledges and grants receivable, net 4 Accounts receivable, net . . 0 0 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). 747,957 7 7 726.52 8 Inventories for sale or use . . . 8 9 9 Prepaid expenses and deferred charges . . . 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a b Less accumulated depreciation 10b 10c 11 Investments—publicly traded securities . . . 7,586,298 11 12 12 Investments—other securities. See Part IV, line 11 0 ol 13 13 Investments—program-related See Part IV, line 11 ol 14 14 0 15 Other assets. See Part IV, line 11 . 15 0 16 Total assets. Add lines 1 through 15 (must equal line 34) 9,115,441 16 10,669,816 17 17 -24,120 18 18 2,435 19 19 Deferred revenue 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D. . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties . 24 Unsecured notes and loans payable to unrelated third parties 0 24 0 25 Other liabilities Complete Part X of Schedule D. 0 25 26 Total liabilities. Add lines 17 through 25. -24,120 26 2,435 Organizations that follow SFAS 117, check here or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 27 Unrestricted net assets 28 28 Temporarily restricted net assets 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ X and complete lines 30 through 34. Net Assets Capital stock or trust principal, or current funds 9,139,561 30 10,667,381 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund. 32 Retained earnings, endowment, accumulated income, or other funds 32 33 Total net assets or fund balances. 9,139,561 33 10.667.381 Total liabilities and net assets/fund balances. 9,115,441 10,669,816

Par	Reconciliation of Net Assets					_
	Check if Schedule O contains a response to any question in this Part XI				•	X
1	Total revenue (must equal Part VIII, column (A), line 12)	1 l			453	3,024
2	Total expenses (must equal Part IX, column (A), line 25)	2				,368
3	Revenue less expenses. Subtract line 2 from line 1	3				3,656
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		9		,561
5	Other changes in net assets or fund balances (explain in Schedule O)	5				,164
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,					
	column (B))	6		10	0,667	7,381
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII.					
					Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other					1
	If the organization changed its method of accounting from a prior year or checked "Other," explain in					
	Schedule O.		[_]		, ,
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
b	Were the organization's financial statements audited by an independent accountant?			2b		X
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	. N	I/A	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in				ŧ.	1
	Schedule O.			[3	, i
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		i		·	% 1 %
	issued on a separate basis, consolidated basis, or both					, ;
	Separate basis Consolidated basis Both consolidated and separate basis	N	I/A			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in					
	the Single Audit Act and OMB Circular A-133?			3a		_X_
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	N	I/A	3b		
				Eorm	aan	(2010)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Name of the organization

► See separate instructions.

► Attach to Form 990 or Form 990-EZ. Employer identification number 59-1932547 SUSAN H. & WILBUR H. MARCY TRUST Reason for Public Charity Status (All organizations must complete this part.) See instructions.

	3	IXCUSOII	TOL I GDIIC OIL	arity otatus (Air org	anizations must o	dilibioto tilio part		<u> </u>		
he d	rgar		•	ation because it is: (Fo	•	•	•			-
1	Ш	A church, co	nvention of chur	ches, or association o	of churches describe	ed in section 170(b)(1)(A)(i).			
2		A school des	cribed in sectio	n 170(b)(1)(A)(ii). (At	tach Schedule E.)					
3		A hospital or	a cooperative h	ospital service organiz	zation described in	section 170(b)(1)	(A)(iii).			
4		A medical re	search organiza	tion operated in conju	nction with a hospit	al described in se	ction 170(b)(1)(A)	(iii). En	ter the)
		hospital's na	me, city, and sta	ite:						
5		_	•	the benefit of a colleg (Complete Part II.)	ge or university own	ed or operated by	a governmental u	nit desc	ribed	
6		A federal, sta	ate, or local gove	ernment or governmer	ntal unit described i	n section 170(b)(I)(A)(v).			
7		-		y receives a substantia (1)(A)(vi). (Complete F	•	from a governme	ntal unit or from th	e gener	al pub	lic
8		A community	trust described	in section 170(b)(1)(A)(vi). (Complete P	art II.)				
9				y receives: (1) more th						
				d to its exempt function						s
				nt income and unrelat				busines	ses	
_			•	after June 30, 1975.	• •		•			
0	\square	•	•	nd operated exclusive	•	•				
1	[X]	•	•	nd operated exclusive	•	•		•		
			•	olicly supported organi It describes the type o					Secu	OH
		a X Type	_	Type II c		tionally integrated		ype III-	_Other	-
_	X			y that the organization		•	_	• •		ı
е	\Box			on managers and othe		-	•			ıon
		•	section 509(a)(2	•		pasitory capported	organizatione doc			.0
f				y written determination	from the IRS that i	t is a Type I, Type	II, or Type III supp	orting		
		-	check this box							. [
g		_		the organization acce	pted any gift or cont	ribution from any	of the			
		following per						ı	1	·
		• • •	•	or indirectly controls, e		•	described in (ii)	44=43	Yes	No
		•		erning body of the sup person described in (i)		1f	•	11g(ı) 11g(ıı)		X
		• •	•	y of a person describe				11g(iii)		$\frac{\hat{x}}{x}$
h				ation about the suppor	., , ,		, ,	· · · 3(···/		
		e of supported anization	(iı) EIN	(iii) Type of organization (described on lines 1–9	(iv) Is the organization in col (i) listed in your	(v) Did you notify the organization in	(vi) is the organization in col	, ,	Amount support	t of
	•			above or IRC section	governing document?	col (i) of your	(i) organized in the		.,	

(see instructions)) support? Yes Yes No Yes No No (A) See 58-0566256 Below Х **Emory University** 36,000 (B) 59-0674257 Х First United Meth. Ch. 111,675 (C) (D) Emory University is a permissable donee of the Trust since it is a public charitable organization affiliated with the United Methodist Chuch in the S.E. states of the U.S. (E) 0

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under N/A Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2006 (b) 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 0 The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 from line 4. 0 Section B. Total Support (a) 2006 (b) 2007 (c) 2008 (d) 2009 Calendar year (or fiscal year beginning in) (e) 2010 (f) Total 0 0 ol 0 0 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 0 Net income from unrelated business activities, whether or not the business is regularly carried on 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) . . . 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) 14 0.00% 15 Public support percentage from 2009 Schedule A, Part II, line 14 15 0.00% 33 1/3% support test-2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 33 1/3% support test-2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 17a 10%-facts-and-circumstances test-2010. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization. . b 10%-facts-and-circumstances test-2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

20

Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. N/A If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	0.					0
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose	o					0
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0					0
5	The value of services or facilities furnished by a governmental unit to the organization without charge	0					0
6	Total. Add lines 1 through 5	0	0	0	0	0	0
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						0
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
С	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from line 6)						0
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6 .	0	0	0	0	0	0
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						0
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975		+44		*		0
С	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	0					0
13	Total support. (Add lines 9, 10c, 11,			_			•
14	and 12) First five years. If the Form 990 is for the organization, check this box and stop here	0] ation's first, seco	nd, third, fourth,	or fifth tax year a	0 s a section 501(c)(3)	0
Sec	tion C. Computation of Public Support	Percentage					
15 16	Public support percentage for 2010 (line 8, column Public support percentage from 2009 Schedule A,	(f) divided by line	e 13, column (f))	,		15 16	0.00% 0.00%
	tion D. Computation of Investment Inco		ige				0.0076
17 18	Investment income percentage for 2010 (line 10c, Investment income percentage from 2009 Schedul	column (f) dıvıde	d by line 13, colu	ımn (f))	-	17 18	0 00% 0 00%
19a b	33 1/3% support tests-2010. If the organization of not more than 33 1/3%, check this box and stop h 33 1/3% support tests-2009. If the organization of	id not check the ere. The organizated and not check a bo	box on line 14, a ation qualifies as ox on line 14 or l	a publicly suppo ine 19a, and line	orted organization 16 is more than	n 33 1/3% and	▶ □
20	line 18 is not more than 33 1/3%, check this box at Private foundation . If the organization did not che	-		•		•	►□ ►□

SCHEDULEI (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

OMB No 1545-0047 Open to Publ

Employer identification number

▶ Attach to Form 990.

2 X Yes 59-1932547 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and une serection when a used to award une grants or assistance?.

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. the selection criteria used to award the grants or assistance? . General Information on Grants and Assistance SUSAN H. & WILBUR H. MARCY TRUST Part I

Yes" to ,,000. Part II ▶	(h) Purpose of grant or assistance	
Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed.	(g) Description of non-cash assistance	
tes. Complete if the org ox if no one recipient re	(f) Method of valuation (book, FMV, appraisal, other)	
n the United States 300. Check this box	(e) Amount of non- cash assistance	
od Organizations ir eived more than \$5,0	(d) Amount of cash grant	
Sovernments are recipient that recipient that recipient that recipient that recipient is needed.	(c) IRC section if applicable	
Assistance to ine 21, for any additional spi	(p) EIN	
Form 990, Part IV, line 21, for any recipient that can be duplicated if additional space is needed.	1 (a) Name and address of organization or government	

כמון על מעטוניטומן אמתוניטומן אמכל וא ווככעכע .	additional spa	ce is needed					
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Emory University 201 Dowman Drive	58-0566256	501(c)(3)	36,000	0			See 990, page 2
(2) Atlanta, GA 30322			0	0			
(3) First United Methodist Church 125 N. Interlachen Avenue	59-0674257	501(c)(3)	111,675	0			See 990, page 2
(4) Winter Park, FL 32789			0	0			
(5)			0	0			
(9)			0	0			
(Δ)			0	0			
(8)			0	0			
(6)			0	0			
(10)			0	0			
(11)			0	0			
(12)			0	0			
2 Enter total number of section 501(c)(3) and government organizations.	on 501(c)(3) and	government organ	izations				2

For Paperwork Reduction Act Notice, see the Instructions for Form 990. 3 Enter total number of other organizations

Schedule I (Form 990) (2010)

Part III can be duplicated if additional spaces in the United States, Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional spaces in seeded Part III can be duplicated if additional spaces in seeded Part III can be duplicated if additional spaces in seeded Part III can be duplicated if additional spaces in seeded Part III can be duplicated if additional spaces in seeded Part III can be duplicated if additional spaces in seeded Part III can be duplicated if additional spaces in seeded Part III can be duplicated if additional spaces in seeded Part III can be duplicated in Complete this part to provide the information required in Part I, line 2, and any other additional information.	Schedule 1 (I	SUSAN H. & WILBUR H. MARCY TRUST Schedule I (Form 990) (2010)					03-1502-041
(f) Description of non-cash assistance	Part III	Grants and Other Assistance to In	ndividuals in the l	United States. Cor	mplete if the organiza	ation answered "Yes" to	
1		(a) Type of grant or assistance	(b) Number of recipients		(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	
2	1		0)	:		
4 0	2		0)			
S	_ ო		O				
For IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Written confirmation is received from Emory University and the First Methodist Church of Winter Park, Florida as to the application of the funds.	4						
6 6 7 7 7 Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Written confirmation is received from Emory University and the First Methodist Church of Winter Park, Florida as to the application of the funds.	,						
7 Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Written confirmation is received from Emory University and the First Methodist Church of Winter Park, Florida as to the application of the funds.	5		0				
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Written confirmation is received from Emory University and the First Methodist Church of Winter Park, Florida as to the application of the funds.	9		0)			
Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. Written confirmation is received from Emory University and the First Methodist Church of Winter Park, Florida as to the application of the funds.	7		0				
Written confirmation is received from Emory University and the First Methodist Church of Winter Park, Florida as to the application of the funds.	Part IV	Supplemental Information. Comple		ride the information	required in Part I, lin	ne 2, and any other addit	lonal information.
	Written	onfirmation is received from Emory Universi	ity and the First Metl	hodist Church of Wir	nter Park, Florida as to	the application of the func	Js.
					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2010

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Name of the organization

SUSAN H. & WILBUR H. MARCY TRUST

59-1932547

Form 990 Part VI, Section A, Line 8a and 8b:

Form 990 Part VI, Section A, Line 8a and 8b:
Since the Trust has a small number of trustees (3), formal meetings are not held, and consensus for actions is developed over
the telephone or through correspondence, and then confirmed in writing by the Trustees. There are no committees.
Form 990 Part VI, Section A, Line 9:
The Trust's address is the office of the trustee, Kenneth F. Murrah. The addresses of the other two trustees are as follows.
Gregory Zechman, 1921 Old Colony Lane, Maitland, FL 32751
Milton E Wilson, P. O. Box 3767, Lakeland, FL 33802
Form 990 Part VI, Section B, Line 11b:
Copies of the 2010 Form 990 and the 2010 Annual Accounting were furnished to the trustees five days (or more)
before the Form 990 was filed.
Form 990 Part VI, Section B, Line 15:
The method for determining the compensation of the trustee, Kenneth F. Murrah, is set forth in the terms of the Trust
which is found in the probated Last Will and Testament of Susan H. Marcy. The other two trustees do not receive
compensation.
Form 990 Part VI, Section C, Line 19:
The organization's governing documents and financial statements are available to the public at 800 W. Morse Blvd., Suite 1,
Winter Park, FL 32789, upon request made to Kenneth F. Murrah.
Form 990 Part XI, Line 5:
The increase in the net assets during the fiscal year is due to the appreciation (net unrealized capital gain) in the value
of the investment assets.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Related Organizations and Unrelated Partnerships

Open to Publi

OMB No 1545-0047

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

▶ Attach to Form 990.

Employer identification number

▼ See separate instructions.

(g) Section 512(b)(13) controlled ž (f) Direct controlling × × Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had Yes (f)
Direct controlling
entity 59-1932547 0 0 (e) End-of-year assets ۲ ٤ (e)
Public charity status
(if section 501(c)(3)) Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) (d) Total income (d) Exempt Code section (c)
Legal domicile (state
or foreign country) 501(c)(3) 501(c)(3) (c)
Legal domicile (state
or foreign country) (b) Pnmary activity g 교 one or more related tax-exempt organizations during the tax year.) Primary activity Educational Religious (a)Name, address, and EIN of disregarded entity Name, address, and EIN of related organization 125 N. Interlachen Ave., Winter Park, FL 32789 (2) First United Methodist Church 59-0674257 SUSAN H. & WILBUR H. MARCY TRUST 201 Dowman Dr., Atlanta, GA 30322 (1) Emory University 58-0566256 Partl Part II 25 (5) 4 (2) 9 £1 €

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

2

45

(5)

9

Schedule R (Form 990) 2010

Page 2

Ϋ́

59-1932547

SUSAN H. & WILBUR H. MARCY TRUST

Schedule R (Form 990) 2010

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34

because it had one or more related organizations treated as a partnership during the tax year.)

(k) . Percentage ownership % 8 % % % % % ۷ N Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV. Intended one or more related organizations treated as a corporation or trust during the tax year.) ŝ (i) General or managing partner? Yes amount in box 20 of Schedule K-1 (Form 1065) Code V—UBI (h)
Disproportionate
allocations? å Yes 0 (g) Share of end-of-year 0 0 0 0 0 (f) Share of total income excluded from tax under sections 512-514) (e)
Predominant
income (related, unrelated, (d)
| Direct controlling | (c) Legal domicile (state or foreign country) Primary activity (6) (4) (a) Name, address, and EIN related organization (3) (5) (1) (2) Part IV 2

4/2	(h) Percentage ownership	%	%	%	%	%	%	%
	(g) Share of end-of-year assets	0	0	Ó	0	0	0	0
tax year.)	(f) Share of total income	0	0	0	0	0	0	0
ust auring t <u>ne</u>	(e) Type of entity (C corp, S corp, or trust)							
rporation or tr	(d) Direct controlling entity							
eated as a co	(c) Legal domicile (state or foreign country)							
organizations ti	(b) Primary activity							
IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	(a) Name, address, and EIN of related organization	(1)	(2)	(3)	(4)	(5)	(9)	(7)

Schedule R (Form 990) 2010

Page 3

Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.) Part V

				-	İ
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	No.
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	ed organizations liste	d in Parts II–IV?			-
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity.			1a		×
			16	×	
			7		×
c Gill, glant, or capital contribution forms of gainzaron(s)			2		; ;
d Loans or loan guarantees to or for other organization(s)			19		×
e Loans or loan quarantees by other organization(s)	•				×
f Sala of assats to other organization(s)			#	i. F	×
			,	+	: ,
g Purchase of assets from other organization(s)			50 -	†	<
h Exchange of assets			ŧ	-	×
i Lease of facilities, equipment, or other assets to other organization(s).	•		1;		×
					-
i I ease of facilities, equipment, or other assets from other organization(s)			=	-	×
k Performance of services or membership or fundraising solicitations for other organization(s)			*		×
1 Derformance of services or membership or fundraising solicitations by other organization(s)			=		×
Sharas of facilities assument mailing lists or other associate					(×
_	•			Ì	< :
n Sharing of paid employees		•	Ę		×
o Reimbursement paid to other organization for expenses			10		×
			10		×
			•		:
			7	1	· >
			5 ,		;
r Other transfer of cash or property from other organization(s)		٠	-	-	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line,		including covered relationships and transaction thresholds	nsaction thr	resholo	ds.
(a)	(q)	(၁))	(p)	
Name of other organization	Transaction type (a−r)	Amount involved	Method of determining amount involved	thod of determini amount involved	guir.
(1) Emory University (See Form 990, page 2)	q	36,000	36,000 Cash distribution	bution	
(2) First United Methodist Church (See Form 990, page 2)	q	111,675	111,675 Cash distribution	Ibution	_
					Ì
(3)		0			
(4)		0			
(4)		C			
(9)	;	0	_		
		Schec	Schedule R (Form 990) 2010	n 990)	2010

Page 4

Part VI

Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, Inne 37.)

A/X

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) (c) (d) (e) Primary activity Legal domicile Are all partners Share (state or foreign section end-of-country) 501(c)(3) asset	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?	ners Share of end-of-year end-of-year () assets	(f) Disproportionate allocations?	(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(h) General or managing partner?	ral or iging ier?
			Yes	No	Yes No		Yes	٩
(1)					0	0		
(2)					- 0	0		
(3)					-			
(4)					-			
(9)					0			
(9)					0	0		
(I)					0	0		
(8)					0	0		
(6)					0	0		
(10)					-	0		
(11)					0	0		
(12)					0	0		
(13)						O		
(14)					0	0		
(15)					0	0		
(16)					0	0		
						Schedule R (Form 990) 2010	orm 990)	2010

Divdends (total from below)	254,442.89
Interest (total from below)	36,480 18
Total Investment Income:	290,923 07

Dividends:	
Altria Group	1,898.00
American Funds - Fundamental Investors	6,110.26
AT&T	8,640.24
Burlington Northern Santa Fe Corp.	411.00
CBS Corporation Class B	105.40
CenterPoint Energy, Inc.	497.64
CenturyLink, Inc.	3,221.92
Chevron Corporation	22,425.15
Comcast Corporation	295.60
Consolidated Edison Company	1,627.92
Corn Products International, Inc.	1,088 64
Darden Restaurants Inc.	6,997.32
Delaware Corporate Bond Fund - A	2,454.05
Devon Energy Corporation	248.32
Dominion Resources, Inc.	5,490.00
Dow Chemical Company	495.60
DTE Energy Company	3,270.00
Duke Energy Corp.	1,455.00
E. I. duPont DeNemours & Compay	2,853.60
Eaton Vance Balanced Fund - A	540.12
Exxon Mobil Corporation	29,287.68
Fidelity Fund	1,154.45
Fortune Brands, Inc.	2,614 40
Frontier Commuications Corp.	109.14
GATX Corporation	1,276.80
General Mills, Inc.	17,186.40
Honeywell International	4,752.88
J. M. Smucker Company	167.40
J. P. Morgan Chase & Co.	183.60
KBW Bank ETF	796.67
Kraft Foods, Inc., CI A	1,042.84
Massachusetts Investors Trust - A	544.49
Morgan Stanley U. S. Govt. Securities Trust - B	1,047.42
National Retail Properties I	11,079.46
Newmont Mining Corporation	380.00
NextEra Energy, Inc.	4,000.00
Norfolk Southern Corporation	3,024.00
Occidental Petroleum Corp.	4,410.00
Philip Morris International Inc.	3,172.00

Pioneer Bond Fund, Class Y	2,364.62
PowerShares Preferred	782.00
Praxair, Incorporated	1,846.80
Proctor and Gamble Company	20,452.83
Progress Energy, Inc.	3,794.40
Qwest Communications Int'l Inc.	195.20
Southern Co.	2,703.75
Spectra Energy Corporation	750.00
Suburban Propane Partners, LP	12,469.00
Teco Energy Inc.	2,445.00
Templeton Global Income Fund, Inc.	22,500.66
Travelers Companies, Inc.	219.96
United Technologies Corporation	4,460.80
Vanguard Wellington Fund	883.34
Ventas, Inc.	3,198.84
Verizon Communications	2,325.60
Viacom, Inc.	237.15
Virtus Tactical Allocation Fund - A	1,322.04
Vodafone Group Plc	954.48
Wells Fargo	99.40
Williams Companies, Inc.	12.61
Windstream Corporation	14,069.00
	254,442.89
Interest: 1st Commercial Bank of Florida CD #473130 1st Commercial Bank of Florida CD #487040	2,153.43 1,032.62
Bank of America Checking Account	3.42
Carol J. Roberts Mortgage	1,811.58
Cimmie L. Boyer, Jr., Clark St 2002	640.00
Estate of Priscilla Cindy Duke Mortgage	4,606.59
Florida United Methodist Foundation, Inc.	14,207.64
James and Ann Saurman, Osceola Mortgage	6,500.04
John H. Allen Mortgage	5,435.21
Morgan Stanley Brokerage Account	89.65
Morgan Starley Brokerage / toodank	36,480.18
	30,480.18
Form 990, Part VIII, Line 7c(ii), Capital Gain Distributions:	
Delaware Corporate Bond Fund	2,061.44
National Retail Properties I	13.04
Ventas, Inc.	225.16
Virtus Strategic Growth Fund	21,496.52
- ··· •	23,796.16
	20,100.10

GAINS AND LOSSES ON SALES OR OTHER DISPOSITIONS

SUSAN H. AND WILBUR H. MARCY TRUST For Period 02/01/2010 Through 01/31/2011

			Ga	iin	Loss
07/22/2010 Frontier Communications Corp., cash in lieu of share issued in Verizon spin-off	of frac	ctional	-		
0.8883 Units					
Net Proceeds Fiduciary Acquisition Value	\$	6.38			
Net Gain			\$	4 68	
01/03/2011 Termination of Mirant Corporation Series A West (worthless)	/arrar	nts at			
Net Proceeds Fiduciary Acquisition Value	\$	(8,883.88)			
Net Loss					\$ 8,883.88
01/06/2011 Proceeds from sale of 1,581 shares of Burling Northern Santa Fe Corp., received as a resul acquisition by R Acquisition Co. (Berkshire Hall,581 Units	of	vay)			
Net Proceeds Fiduciary Acquisition Value	\$	158,100.00 10,915.58			
Net Gain			14	7,184.42	
Total Gains and Losses			14	7,189.10	8,883.88
Less Loss			(8,883.88)	
Net Gain			\$ 13	8,305.22	

As of 01/31/2011

	Current Value	Carrying Value
Checking Accounts Bank of America Checking Account	\$12,456.39	\$12,456.39
Brokerage Account Deposits Morgan Stanley Brokerage Account (Discover Bank)	0.30	0.30
Savings Accounts Florida United Methodist Foundation, Inc.	869,104.09	869,104.09
Common Stocks ACCO Brands Corporation 808 Units	6,633.68	2,118.86
Alcatel-Lucent Corp. 217 Units	718.27	2,791.55
Altria Group 1,300 Units	30,563.00	5,893.87
AT&T, Inc. (New) (formerly SBC Comm.) 5,143 Units	141,535.36	19,793.36
CBS Corporation Class B 527 Units	10,450.41	1,780.52
CenterPoint Energy, Inc. 638 Units	10,303.70	9,100.27
CenturyLink, Inc. 1,111 Units	48,039.64	4,667.80
Chevron Corporation 7,896.1856 Units	749,584.90	158,967.08
Citigroup, Inc. 2,760 Units	13,303.20	6,119.13
Comcast Corporation 782 Units	17,790.50	4,635.52
Consolidated Edison Company 684 Units	34,138.44	4,124.52
Corn Products International, Inc. 1,944 Units	89,676.72	3,808.03
Darden Restaurants, Inc. 6,138 Units	289,161.18	4,089.40

	Current Value	Carrying Value
Devon Energy Corporation 388 Units	\$ 34,411.72	\$ 8,698.07
Directv, Class A 246 Units	10,427.94	1,677.81
Dominion Resources, Inc. (New) 3,000 Units	130,620.00	87,555.83
Dow Chemical Company 826 Units	29,306.48	2,795.68
DTE Energy Company 1,500 Units	69,390.00	51,350.46
Duke Energy Corp. 1,500 Units	26,820.00	15,076.16
E. I. duPont DeNemours & Company 1,740 Units	88,183 20	11,599.97
Exxon Mobil Corporation 16,832 Units	1,358,005.76	120,979.89
FairPoint Communications, Inc 21 Units	507.57	38.24
Fortune Brands, Inc. 3,440 Units	212,179 20	33,099.41
Frontier Communications Corporation 291 Units	2,668 47	555.15
GATX Corporation 1,140 Units	37,905.00	23,583.29
General Mills, Inc. 16,368 Units	569,279.04	19,480.60
General Motors Corporation 526 Units	19,193.74	10,487.90
GenOn Energy, Inc. (formerly RRI Energy, formerly Reliant) 503 Units	2,082.42	1,752.46
Honeywell International 3,928 Units	220,007.28	4,480.87

	Current Value	Carrying Value
J. M. Smucker Company 108 Units	\$ 6,713.28	\$ 198.95
J. P. Morgan Chase & Co. 918 Units	41,254.92	8,355.68
KBW Bank ETF□□ 6,000 Units	157,920.00	198,822.45
Kraft Foods, Inc., CI A 899 Units	27,482.43	6,044.71
National Retail Properties I 9,600 Units	238,560.00	197,375.19
NCR Corporation 107.626 Units	1,765.07	283.86
Newmont Mining Corporation 760 Units	41,853.20	11,570.45
NextEra Energy, Inc. (formerly FPL Group) 2,000 Units	106,920.00	27,625.00
Norfolk Southern Corporation 2,160 Units	132,170.40	5,968.80
Occidental Petroleum Corp. 3,000 Units	290,040.00	23,103.20
Philip Morris International Inc. 1,300 Units	74,412.00	13,430.32
PowerShares Preferred Financial Portfolio 4,450 Units	62,700 50	63,859.50
Praxair, Incorporated 1,026 Units	95,459 04	3,925.18
Proctor and Gamble Company 10,848 Units	684,834.24	24,780.12
Progress Energy, Inc. 1,530 Units	68,727.60	35,483.12
Qwest Communications Int'l Inc. 610 Units	4,349.30	2,503.01

	Current Value	Carrying Value	
Southern Co. 1,500 Units	\$ 56,430.00	\$ 26,181.73	
Spectra Energy Corporation 750 Units	19,672.50	10,868 01	
Sprint Nextel Corporation 16,225 Units	73,337.00	45,872.08	
Suburban Propane Partners, LP 3,700 Units	210,308.00	151,388.53	
Teco Energy Inc. 3,000 Units	55,230.00	52,937.65	
Teradata Corporation 107.626 Units	4,626.84	312.11	
Travelers Companies, Inc. (The) 156 Units	8,776.56	407.01	
United Technologies Corporation 2,624 Units	213,331.20	6,724.00	
Ventas, Inc. 1,600 Units	88,736.00	73,001.25	
Verizon Communications 1,216 Units	43,313.92	8,423.10	
Viacom, Inc. (New) Class B 527 Units	21,896.85	2,712.34	
Vodafone Group Plc 752 Units	21,326.72	1,458.83	
Wells Fargo & Co. (fomerly Wachovia Corp.) 497 Units	16,112.74	83,269.54	
Williams Companies, Inc. 26 Units	701.74	471.98	
Windstream Corporation 14,069 Units	180,223.89	161,817.10	

	Current Value	Carrying Value
Mutual Funds American Funds - Fundamental Investors 10,719.788 Units	\$ 402,420.84	\$191,383.80
Delaware Corporate Bond Fund - A 7,606.787 Units	44,575.77	51,503.23
Eaton Vance Balanced Fund - A 5,458.293 Units	38,426.38	40,325.41
Fidelity Fund 3,953.629 Units	130,232.54	92,670.61
Massachusetts Investors Trust - A 4,128.123 Units	80,828.65	61,928.87
Morgan Stanley U. S. Govt. Securities Trust - B 3,995.28 Units	34,239.55	37,681 56
Pioneer Bond Fund, Class Y 5,453.018 Units	51,858.20	60,160.42
Templeton Global Income Fund, Inc. 25,001 6978 Units	266,268.08	211,224.13
Vanguard Wellington Fund 1,037.987 Units	32,924.95	20,586.83
Virtus Strategic Growth Fund - A 61,154.551 Units	568,737.32	648,089.76
Virtus Tactical Allocation Fund - A 9,792.908 Units	86,667.24	61,009.43
Certificates of Deposit 1st Commercial Bank of Florida CD # 487040	22,478.14	22,478.14
Notes and Mortgages Carol J. Roberts Mortgage Climmie L. Boyer, Jr, Clark St 2002 Clyde Walker Mortgage, Penn Ave. Refinance Clyde Walker, Jr., 3 Parcel Transaction Clyde Walker, Mortgage, 754 W. Comstock Ave. Clyde Walker, Multi-parcel Mortgage Estate of Priscilla Cindy Duke Mortgage James and Ann Saurman, Osceola Mortgage	23,812 02 25,694.09 155,791.20 18,667.00 183,571.50 58,295.63 62,623.86 100,000.00	23,812.02 25,694.09 155,791.20 18,667.00 183,571.50 58,295.63 62,623.86 100,000.00
James and Ann Saurman, Osceola Mongage John H Allen, Mortgage, dated 8/05/2009	98,069.40	98,069.40

	Current Value	Carrying Value
Less: Income balance on hand	\$10,669,815.90 2,434.77	\$4,977,404.17 2,434.77
PRINCIPAL BALANCE ON HAND	\$10,667,381 13	\$4,974,969.40