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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

2010

Departme Internal F	ent of the Treasury Revenue Service	Note The fo	oundation n	nay be able to	use a copy of the	s return to satisfy	state re	portin	g requirem	ents				
For cal	endar year 2010, or		ing	3/01	, 2010	, and ending		/28		, 2011				_
G Ch	eck all that apply	Initial return	Init	ıal Return	of a former p	ublic charity	_				Final re	eturn		
	· · · · · · · · · · · · · · · · · · ·	Amended re	turn	Address change Nar			Nar	ame change					_	
	NE EELD CMEDI	N CHARTMARI	ב שחני	TC TT				Α		er identification	n number			
	NE FELD STERN RIDGE BANK 8			JST				В		6354470 ne number (see	the rectr	uctions)	_	-
	LITTLE BLUE		11 11141						тетерио	ine number (see	- u IC 1115U	actions)		
INDE	PENDENCE, MO	64057						С	If exem	ption application	on is pen	dino check l	nere 🕨	Τ
										organizations,		-		1
H C	heck type of organiz	zation X Se	ction 50	1(c)(3 <u>)</u> exe	mpt private t	oundation			2 Foreign	organizations	meeting	the 85% test	t, check	۔ ٦
	Section 4947(a)(1				ther taxable			E		d attach comp te foundation s		terminated		J
	air market value of all ass from Part II, column (c), li		J Acc	_	ethod XC	ashAc	crual	-		ection 507(b)(▶ []
► <u>\$</u>		1,378.	(Part I	Other (speci	^{iy)} d) must be oi	n cash hasis	<u></u>	F		oundation is in ection 507(b)(on ▶ □	7
Part			(r art r	1				<u> </u>						_
	Expenses (Th	e total of amoun	ts ın		venue and s per books	(b) Net inv		nt		Adjusted net income	' '	d) Disburs for char		
	columns (b), (c), sarily equal the a	and (d) may no amounts in colun	t neces- nn (a)	'	•							purpo (cash bas)		
	(see the instruct	ions))			-							(casii bas	ols Offig)	_
		s, grants, etc, received foundn is not req to a												
		foundn is not req to a avings and tempo				<u> </u>								-
	cash investm	ents	-		62.	_		52.		N	/A			1
	4 Dividends and in 5a Gross rents	terest from securities			70,363.		70,36	3.	-					
	b Net rental income													-
R	or (loss) 6a Net gain/(loss) fro	m sale of assets not o	n line 10		55,484.									7
E. V	b Gross sales price assets on line 6a	for all	,774.											_
Ě		ncome (from Part IV, I	ne 2)			5	55,48	34.						
N	8 Net short-terr 9 Income modified													
Ε	10a Gross sales less returns and													_
	allowances h Less Cost of													-
	goods sold	<u> </u>								-	<u> </u>			
	c Gross profit/(los		۵)											_
	TI Other income	(attach schedul	.)								-			+
	12 Total. Add lin	es 1 through 11			125,909.	12	25,90]
		officers, directors, trus	tees, etc		17,049.		1,70)5.				1	5,344	<u>-</u>
	14 Other employees 15 Pension plan	alaries and wages	ofite								+			_
А	16a Legal fees (attack		CIIIS	-							+-			-
D M	b Accounting fees ((attach sch) SEE	ST 1		1,622.		1,62			· ···				_
I N	c Other prof fees (attach sch) SEE	ST 2		19,966.		7,96	59.					1,997	_
PS	17 Interest	CEE	cmu o		222									_
O I S T R A	18 Taxes (attach schedule 19 Depreciation		STM 3		777.					RECE	IVE	D		-
ÎÎ	sch) and dep	letion							<u> </u>	1\		101		
N V G E	20 Occupancy		.						127		0 20	11 191		_
	21 Travel, confe	rences, and mee	ungs						367	<u>JUL 1</u>	\$ 20	1 18		-
A E N X D P		es (attach sched	ule)											-
E N				ļ						OGD	<u>-N.</u>	<u>U'I</u>	1	_
S E	24 Total operati	ng and administ	rative ah 23		39,414.	,	21,29	96	L			1	7,341.	_
5		ts, grants paid STN		 -	80,307.	<u> </u>	,					8	0,307	-
	26 Total expens	es and disburse					1 00							
	Add lines 24 27 Subtract line			 	119,721.	4	21,29	16.				9	7,648.	<u>-</u>
	a Excess of rev	enue over expe	nses		-	ĺ								!
	and disburse	ments			6,188.									
		icome (if negative, ent				10)4,61	LJ.						-

SCANNED AUG 0 1

Parl	<u> </u>	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		or year
T all		—————	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest	-			
		Savings and tempor	-	11,873.	82,096.	82,096.
	3	Accounts receivable				
		Less allowance for	doubtful accounts			
	4	Pledges receivable				
		Less allowance for	doubtful accounts			
	5	Grants receivable				
	6	disqualified persons (atta-	cers, directors, trustees, and other ch schedule) (see the instructions)			
۸	7	•	`			
ŝ		Less allowance for				
A S E T	8					
Ţ	9	Prepaid expenses a	•			
S	10:	a Investments – U S obligations (attach s	and state government schedule) STATEMENT 5	129,415.	92,185.	89,102.
		•	stock (attach schedule) STATEMENT 6	945,682.	989,046.	1,352,267.
			bonds (attach schedule) STATEMENT 7	836,845.	766,669.	827,913.
	ı	Investments - land, equipment basis.				
		Less accumulated deprec	enation •			
	12	Investments - mort	gage loans.			
	13					
	14	Land, buildings, and e	equipment. basis			
	·	Less accumulated depred (attach schedule)	ciation	:		
	15 16	Total assets (to be	bbe SEE STATEMENT 8) completed by all filers —	1,923,815.	7. 1,930,003.	2,351,378.
	17		so, see page 1, item l)nd accrued expenses	1, 323, 613.	1,330,003.	2,331,370.
Ī	18		nd accided expenses			!
A B	19					i
Ţ	20		ctors, trustees, & other disqualified persons			
'n	21	•	s payable (attach schedule)			1
Ţ	22		• • • • • • • • • • • • • • • • • • • •			1
Ė		•				i
<u>s</u>	23	<u>`</u>	I lines 17 through 22)	0.	0.	
		and complete lines	llow SFAS 117, check here 24 through 26 and lines 30 and 31.			
N F E U	24					1
TN	25	• •			,	1
ΔD	26	Permanently restrict				
A B S A E L A		Foundations that do and complete lines	o not follow SFAS 117, check here Σ 27 through 31.			1
	27		principal, or current funds	1,923,815.	1,930,003.	
SNC	28		, or land, building, and equipment fund			
0 E	29	= :	ulated income, endowment, or other funds			
RS	30		fund balances (see the instructions) net assets/fund balances	1,923,815.	1,930,003.	İ
	31	(see the instructions		1,923,815.	1,930,003.	
Par	t III	Analysis of Char	iges in Net Assets or Fund Balanc			
1	Tota	al net assets or fund b	alances at beginning of year – Part II, colu	umn (a), line 30 (must ac	ree with	
	end	-of-year figure reporte	d on prior year's return).	, ,,	1	1,923,815.
2		er amount from Part I,			2	6,188.
3		r increases not included in li	ne 2 (itemize)		3	4 222 222
4		lines 1, 2, and 3			4	1,930,003.
5		eases not included in line 2	` '			1 020 000
6	Tota	I net assets or fund b	alances at end of year (line 4 minus line 5)) - Part II, column (b), li	ne 30 6	1,930,003.

(a) List and descriptions of the control of the con	(b) How acquire P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)		
1a SEE STATEMENT 9			D — Donation	 	
b					·
C					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale		(h) Gain or (e) plus (f) m	
a					
b					
С		<u></u>			
d					
e					
Complete only for assets sho	wing gain in column (h) and owned by	the foundation on 12/31/69		(I) Gains (Col	
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any		gain minus column (l han -0-) or Losses (fi	
a b	-				
С					
d					
е					
2 Capital gain net income or (n	2		55,484.		
3 Net short-term capital gain or	r (loss) as defined in sections 1222(5)	and (6)			
If goin, also ontor in Bart I. II.	ne 8, column (c) (see the instructions)	If (loss) onter 0			
in Part I, line 8	he a, column (c) (see the manuchons)	11 (1055), etitel -0-	3		44,962.
Part V Qualification Und	er Section 4940(e) for Reduced	Tax on Net Investme	nt Income		
If 'Yes,' the foundation does not qu	ection 4942 tax on the distributable am ialify under section 4940(e) Do not cor	nplete this part.	•	Yes	X No
	t in each column for each year, see the		any entries		
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	ets (co	(d) Distributior Dlumn (b) divided	
2009	94,776.	2,023	3,197.		0.046845
2008	121,180.		,502.		0.055702
2007	135,918.	2,566	6,677.		0.052955
2006	104,599.	2,469	,613.		0.042354
2005	123,980.	2,387	7,947.		0.051919
2 Total of line 1, column (d)			_ 2		0.249775
3 Average distribution ratio for number of years the foundati	the 5-year base period — divide the tol on has been in existence if less than 5	tal on line 2 by 5, or by the years	3		0.049955
4 Enter the net value of noncha	aritable-use assets for 2010 from Part 2	X, line 5	4		2,193,131.
5 Multiply line 4 by line 3			_ 5		109,558.
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)		6		1,046.
7 Add lines 5 and 6			7		110,604.
8 Enter qualifying distributions					
	from Part XII, line 4		8		97,648.

Form 990-PF (2010) ELAINE FELD STERN CHARITABLE TRUST		6354470		Р	age 4
Part VI Excise Tax Based on Investment Income (Section 4940(a),		the instruc	tions)		
	ter 'N/A' on line 1.				
Date of ruling or determination letter (attach copy of letter if neces	ssary – see instr.)	1 1		2 (92.
b Domestic foundations that meet the section 4940(e) requirements in Part V,		'		۷, ۱	J9Z.
check here and enter 1% of Part I, line 27b	t I line 12 column (b)				
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Par	t i, line 12, column (b)				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable		2			0.
foundations only Others enter -0-) 3 Add lines 1 and 2		3		2 (92.
	ations only Others onter (1)	4		۷, ۱	0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable found		5		2 (92.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less,	enter -U-	-		2,0	<i>J</i> 2 2 .
6 Credits/Payments	ا ما جو				
a 2010 estimated tax pmts and 2009 overpayment credited to 2010	6a 660.	-			
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	6 d	-		;	
7 Total credits and payments Add lines 6a through 6d		7			<u> 560.</u>
	n 2220 is attached	8			<u> 3.</u>
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9		1,4	<u> 135.</u>
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	1	10			
11 Enter the amount of line 10 to be: Credited to 2011 estimated tax	Refunded •	11			
Part VII-A Statements Regarding Activities			1		· · ·
1a During the tax year, did the foundation attempt to influence any national, state participate or intervene in any political campaign?	e, or local legislation or did it		1a	Yes	No X
b Did it spend more than \$100 during the year (either directly or indirectly) for p (see the instructions for definition)?	political purposes		1 b		Х
If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities or distributed by the foundation in connection with the activities	s and copies of any materials po	ublished			
c Did the foundation file Form 1120-POL for this year?			1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) impor-					
(1) On the foundation \$ 0. (2) On foundation n		0.			İ
e Enter the reimbursement (if any) paid by the foundation during the year for portion foundation managers ►\$ 0.	olitical expenditure tax imposed	on			
2 Has the foundation engaged in any activities that have not previously been re	norted to the IRS?		2		Х
If 'Yes,' attach a detailed description of the activities	ported to the into				^
3 Has the foundation made any changes, not previously reported to the IRS, in	its governing instrument, article	s			
of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a cor	.,		3		Х
4a Did the foundation have unrelated business gross income of \$1,000 or more of	during the year?		4a		Х
b If 'Yes,' has it filed a tax return on Form 990-T for this year?			4b	N	/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
If 'Yes,' attach the statement required by General Instruction T					
6 Are the requirements of section 508(e) (relating to sections 4941 through 494)	5) satisfied either		l		
 By language in the governing instrument, or 				1	İ
• By state legislation that effectively amends the governing instrument so that with the state law remain in the governing instrument?	t no mandatory directions that o	onflict	6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Par	t II, column (c), and Part XV		7	X	
8a Enter the states to which the foundation reports or with which it is registered MO	(see the instructions)				
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney (or designate) of each state as required by <i>General Instruction G? If 'No,' attach explanation</i>	General			X	
9 Is the foundation claiming status as a private operating foundation within the	meaning of section 4942(j)(3) o	r 4942(j)(5)		-	X
for calendar year 2010 or the taxable year beginning in 2010 (see instructions	ioi rait Aiv) it tes, complet	e rail XIV	9		Ι.

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

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	m 990-PF (2010) ELAINE FELD STERN CHARITABLE TRUST	43-6	354470		F	age 5
Par	t VII-A Statements Regarding Activities (Continued)					
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)			11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?			12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address N/A	ı applıcatı	on?	13	Х	
14	The books are in care of ► BLUE RIDGE BANK & TRUST Telephone	no ►	(816)	 358	-500	00
	Located at ► 4200 LITTLE BLUE PARKWAY INDEPENDENCE MO ZIP + 4 ►	6405				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			Ā/Ā		
	and enter the amount of tax-exempt interest received or accrued during the year	▶ 19	5			N/A
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other at bank, securities, or other financial account in a foreign country?	uthority ov		16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the national foreign country. ▶	ame of the	•			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required					
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.				Yes	No
1 8	a 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?	Yes	X No			ļ
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?		XNo			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	X Yes	No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes	XNo			
	(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.)	Yes [XNo			
ı	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 the instruction	ns)?	-	1b		
	Organizations relying on a current notice regarding disaster assistance check here			-		
		L				
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010?			1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))					1
í	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?	Yes	X No			
	If 'Yes,' list the years ▶ 20, 20, 20	_	_			
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942((2)(2)				1
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a			1		
	all years listed, answer 'No' and attach statement – see the instructions)		<u> </u>	2b	N	/A
(c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years h	ere				
	► 20, 20, 20					
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes [X No			
ı	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	4				
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or beguest, or	•				
	(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule Č, Form 4720, to determine if the foundation had excess business holdings in 2010.)			3ь	N	/A
Α.						
48	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		Х
_				\Box		
ŀ	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		

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4b X Form 990-PF (2010)

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Part VII-B Statements Regarding Activiti		1 4720 May Be Req	uired (continued)				
5a During the year did the foundation pay or incu							
(1) Carry on propaganda, or otherwise attemp			∐ Yes X	No			
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see sectior ition drive?	1 4955), or to carry	Yes X	No	ļ		
(3) Provide a grant to an individual for travel,	No						
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	No						
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes X							
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the excep ding disaster assistance	tions :	5 b	N/A		
Organizations relying on a current notice rega	rding disaster assistan	ce check here	▶ [
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?	•	N/A Yes	No			
If 'Yes,' attach the statement required by Regi							
6a Did the foundation, during the year, receive ar on a personal benefit contract?b Did the foundation, during the year, pay prem			Yes X	No	X		
If 'Yes' to 6b, file Form 8870	idins, directly of indirec	itiy, on a personal bene	III COITI BCL		^		
7a At any time during the tax year, was the found				No			
b If yes, did the foundation receive any proceed				7b			
Part VIII Information About Officers, D and Contractors				.mpioyees	,		
1 List all officers, directors, trustees, foundation		compensation (see inst		(a) Eypons			
(a) Name and address	(b) Title and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	enefit other allowances			
SUSAN FELD STRAUSS	TRUSTEE	4,262.	0.		0		
1035 WEST 64TH TERRACE	1.00	· ·					
KANSAS CITY, MO 64113		1.000					
_ LESLIE ANN STRAUSS	TRUSTEE	4,262.	0.	١٠			
7509 LANGLEY CANYON ROAD SALINAS, CA 93907	1.00						
DON KAHAN	TRUSTEE	4,262.	0.		0		
505 NORTH HIGHWAY 50 LEE'S SUMMIT, MO 64063	1.00	1,202.			Ü		
ROBERT J. MARGOLIN	TRUSTEE	4,263.	0.		0		
1628 RIVER RIDGE	1.00						
WILLIAMSBURG, VA 23185		luded on line 1 . see in	- atmosticmes of management	ntow INONE !			
2 Compensation of five highest-paid employee (a) Name and address of each employee	(b) Title and average		(d) Contributions to	(e) Expense	account		
paid more than \$50,000	hours per week devoted to position	(c) compensation	employee benefit plans and deferred compensation	other allo	wances		
NONE							
Total number of other employees paid over \$50,000)				0		
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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(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	1 0
-	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 <u>N/A</u>	-
	-
2	-
	-
3	-
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 <u>N/A</u>	
2	-
	-
All other program-related investments See instructions.	
3	
Total. Add lines 1 through 3	0.

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Adjusted qualifying distributions. Subtract line 5 from line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

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b Cash distribution test (attach the required schedule)

Enter 1% of Part I, line 27b (see instructions)

Form **990-PF** (2010)

97,648.

97,648.

3 b

4

5

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7				107,565.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			72,440.	
b Total for prior years 20, 20, 20		0.		<u> </u>
3 Excess distributions carryover, if any, to 2010. a From 2005				
b From 2006				
c From 2007	1		1	
d From 2008				
e From 2009				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from Part				
XII, line 4 ► \$ 97, 648.			72,440.	
a Applied to 2009, but not more than line 2a			72,440.	
 Applied to undistributed income of prior years (Election required — see instructions) 		0.		
 Treated as distributions out of corpus (Election required — see instructions) 	0.			
d Applied to 2010 distributable amount				25,208.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the	0.			0.
same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-		0.		
ed income for which a notice of deficiency				
has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2009 Subtract line 4a from				
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2010 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2011.				82,357.
7 Amounts treated as distributions out of				,
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)				
(see instructions)	0.			
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2011.	0			
Subtract lines 7 and 8 from line 6a 10 Analysis of line 9	0.	 		
a Excess from 2006				
b Excess from 2007	1			
c Excess from 2008	1			
d Excess from 2009]	[
e Excess from 2010				

Form 990-PF (2010) ELAINE FELD STER	N CHARITABLE	TRUST		43-63544/	0 Page 10
Part XIV Private Operating Foundation				^	N/A
1a If the foundation has received a ruling or our is effective for 2010, enter the date of the		that it is a private	operating foundation	n, and the ruling	
b Check box to indicate whether the foundat		rating foundation of	described in section	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for each year listed	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
b 85% of line 2a		_			
c Qualifying distributions from Part XII, line 4 for each year listed		_			
d Amounts included in line 2c not used directly for active conduct of exempt activities					
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets(2) Value of assets qualifying under					
section 4942(j)(3)(B)(i) b 'Endowment' alternative test — enter 2/3 of					
minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter					
 Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) 					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					<u> </u>
Part XV Supplementary Information assets at any time during the	(Complete this	part only if the	organization ha	d \$5,000 or mo	re in
1 Information Regarding Foundation Management	-	300000113.7			
a List any managers of the foundation who I close of any tax year (but only if they have NONE	have contributed mi	ore than 2% of the than \$5,000) (See	total contributions resection 507(d)(2))	eceived by the four	ndation before the
h Lat any manager of the foundation who	109/ az mara a	f the steel of a sec	raration (as an agui	ally loves parties of	the augustahus of
b List any managers of the foundation who a partnership or other entity) of which the NONE				ally large portion of	the ownership of
2 Information Regarding Contribution, Gran	nt Gift Loan Scho	larshin etc Progr	ams:		
Check here I if the foundation only r		• • • •		s and does not acc	ept unsolicited
requests for funds. If the foundation make complete items 2a, b, c, and d.					
a The name, address, and telephone number	er of the person to v	vhom applications	should be addressed	d	
SEE STATEMENT 10					
b The form in which applications should be	submitted and infor	mation and materia	als they should inclu	de	
SEE STATEMENT FOR LINE 2A			,	********	
c Any submission deadlines					
SEE STATEMENT FOR LINE 2A					<u></u>
d Any restrictions or limitations on awards,	such as by geograp	hical areas, charita	able fields, kinds of i	nstitutions, or other	r factors.
SEE STATEMENT FOR LINE 2A				·	
BAA	TE	EA0310L 02/16/11		-	Form 990-PF (2010)

3 Grants and Contributions Paid During the Year or Approved for Future Payment									
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount					
Name and address (home or business)	substantial contributor	recipient	Contribution						
a Paid during the year	substantial contributor	recipient							
Total b Approved for future payment	T	l	<u>► 3a</u>						
Total			► 3b						

	nter gross amounts unless otherwise indicated		business income		section 512, 513, or 514	(e)	
		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (see the instructions)	
1 Program s	service revenue			code			
		+ +		 			
č		 		 			
		1		- 	-		
e		 	· · · · · · · · · · · · · · · · · · ·				
T		+ +					
•	contracts from government agencies	 	···	-	·		
	np dues and assessments	 		14	62.		
	avings and temporary cash investments and interest from securities			14	70,363.		
		 		14	70,363.		
	income or (loss) from real estate	 +		 			
	nced property	+				<u> </u>	
	inanced property come or (loss) from personal property			+ +			
	estment income			+			
) from sales of assets other than inventory			18	55,484.		
•	e or (loss) from special events.	 		1 10	33,404.		
	fit or (loss) from sales of inventory			+			
11 Other reve				+ +			
				+ +			
		 		†			
		+		- - - - - - - - - - - - - - - - - - - 			
		<u> </u>		†			
e							
	Add columns (b), (d), and (e)		,		125,909.		
	l line 12, columns (b), (d), and (e)	<u> </u>		-	13	125,909.	
	in line 13 instructions to verify calculati	ons)					
			1				
Part XVI-B	Relationship of Activities to the	e Accompils	nment of Exem	pt Purpose	25		
Line No. Exp acc	olain below how each activity for which is omplishment of the foundation's exempt	ncome is repor t purposes (oth	ted in column (e) of er than by providing	Part XVI-A c funds for suc	ontributed important ch purposes) (See t	ly to the he instructions)	
N/A							
					 		
			<u> </u>				
		 		· · · · · · · · · · · · · · · · · · ·			
						· · ·	
							
			· · · · · · · · · · · · · · · · · · ·				
							

Form 990-PF (2010) ELAINE FELD STERN CHARITABLE TRUST 43-6354470 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

 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? a Transfers from the reporting foundation to a noncharitable exempt organization of Cash Other assets Other transactions Sales of assets to a noncharitable exempt organization Purchases of assets from a noncharitable exempt organization Rental of facilities, equipment, or other assets Reimbursement arrangements Loans or loan guarantees Performance of services or membership or fundraising solicitations Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is 'Yes,' complete the following schedule. Column (b) should always show the fair methe goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received 							t value in	Yes	X X X X X X X X	
(a) Line r			of noncharitable exempt organization				fers, transactions, and		ngement	
N/A	Amount involved	(C) Name (a nononarrable exempt organiza	20011	(u) Descrip	out of trails	iors, transactions, allu	silariny arrai	igement	<u>. </u>
14/ 21										
•									-	
						-				
										
			· · · · · · · · · · · · · · · · · · ·							
_		_								
			,			•				
			· · · · · · · · · · · · · · · · · · ·							
des	he foundation directly of cribed in section 501(c) Yes,' complete the follo) of the Códe (o	ated with, or related to, of ther than section 501(c)(one or mor 3)) or in se	re tax-exempection 527?	ot organiza	ations	Yes	X	No
	(a) Name of organiza		(b) Type of orga	nızatıon		(c)	Description of rela	ationship		
N/A										
Sign Here	Under penalties of perjury, I decorrect, and complete Declaration	on of preparer (other	ined this return, including accomplian taxpayer or fiduciary) is bas	panying sched	dules and statem rmation of which	ents, and to to preparer has	he best of my knowledg any knowledge		_	
	Print/Type preparer's i		Preparer's signature	$\mathcal{A} \mathcal{A}$	Date	1 - 1		PTIN		
	1 " '		1		// h	121111	Check ifif			
Paid	WILLIAM D (WILLIAM D O	1777		 	self-employed	N/A		
Prepar		O'FLYNN &		<i>U/U /</i>	$\overline{}$		Firm's EIN ► N/A			
Use Or	Ily Firm's address	4200 SOME		37	/_		1011	٠	.	
		PRAIRIE VI	LLAGE, KS 66208				Phone no (913			
BAA								Form 99	0-PF ((2010)

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Zυ		u

FEDERAL STATEMENTS

ELAINE FELD STERN CHARITABLE TRUST BLUE RIDGE BANK & TRUST COMPANY

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STATEMENT 1				
FORM 990-PF,	PART	1, 1	LINE	16 B
ACCOUNTING	FEES			

	_	(A) EXPENSES ER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
O'FLYNN & BIHUNIAK	TOTAL \$	1,622. 1,622.	\$ 1,622. \$ 1,622.		\$ 0.

STATEMENT 2 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BLUE RIDGE BANK	TOTAL	\$ 19,966. \$ 19,966.	\$ 17,969. \$ 17,969.		\$ 1,997. \$ 1,997.

STATEMENT 3 FORM 990-PF, PART I, LINE 18 **TAXES**

			 (A) ENSES BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
	BALANCE DUE ESTIMATES		\$ 117. 660.			
		TOTAL	\$ 777.	\$ 0.		\$ 0.

CHARITABLE

STATEMENT 4 FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS

CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

AMERICAN RED CROSS 211 WEST ARMOUR BOULEVARD KANSAS CITY, MO 64111 NONE

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

ARTS KANSAS CITY STRING QUARTET

DONEE'S NAME: DONEE'S ADDRESS:

CLASS OF ACTIVITY:

PO BOX 8133 PRAIRIE VILLAGE, KS 66208

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

NONE

2,500.

10,407.

FEDERAL STATEMENTS

ELAINE FELD STERN CHARITABLE TRUST BLUE RIDGE BANK & TRUST COMPANY

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5,000.

3,500.

2,500.

2,000.

1,000.

STATEMENT 4 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

CLASS OF ACTIVITY:

MEDICAL

TRUMAN MEDICAL CENTER

2310 HOLMES #735

KANSAS CITY, MO 64108

NONE

EDUCATION

MISSOURI COLLEGES FUND

3401 WEST TRUMAN BOULEVARD, #202

JEFFERSON CITY, MO 65109

NONE

1,000.

CHARITABLE

HARVESTERS

3801 TOPPING AVENUE KANSAS CITY, MO 64129

NONE

CHARITABLE

BOYS & GIRLS CLUB OF GREATER KANSAS CITY

6301 ROCKHILL ROAD, #303

KANASAS CITY, MO 64113

NONE

EDUCATION

WOMEN'S EMPLOYMENT NETWORK

720 OAK STREET #200 KANSAS CITY, MO 64106

NONE

CHARITABLE

PARALYZED VETERANS OF AMERICA

801 18TH STREET, NW NEW YORK, NY 20006

NONE

MEDICAL

KANSAS CITY HOSPICE & PALLIATIVE CARE

9221 WARD PARKWAY, #100 KANSAS CITY, MO 64114

NONE

ARTS

2,000.

FEDERAL STATEMENTS

ELAINE FELD STERN CHARITABLE TRUST BLUE RIDGE BANK & TRUST COMPANY

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2,000.

6,000.

STATEMENT 4 (CONTINUED) FORM 990-PF, PART I, LINE 25 **CONTRIBUTIONS, GIFTS, AND GRANTS**

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

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ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

AMOUNT GIVEN:

ORGANIZATIONAL STATUS OF DONEE:

CLASS OF ACTIVITY: DONEE'S NAME:

DVLOPMNTL & MENTAL HEALTH

THE CHILDRENS PLACE

KANSAS CITY SYMPHONY

1020 CENTRAL, #300 KANSAS CITY, MO 64105

CHARITABLE

REDEMPTORIST SOCIAL SERVICES CENTER

207 WEST LINWOOD

KANSAS CITY, MO 64111

NONE

1,000.

CHARITABLE

LEE'S SUMMIT CARES

901 NE INDEPENDENCE AVENUE

LEE'S SUMMIT, MO 64063

NONE

CHARITABLE

LEE'S SUMMIT SOCIAL SERVICES

108 SE 4TH STREET

LEE'S SUMMIT, MO 64063

NONE

6,000.

CHARITABLE

OZANAM

421 EAST 137TH STREET

KANSAS CITY, MO 64145

NONE

3,000.

SUBSTANCE ABUSE

JANUS COMMUNITY CLINIC 200 7TH AVENUE

SANTA CRUZ, CA 95062

NONE

1,000.

MOCSA

3100 BROADWAY STREET

KANSAS CITY, MO 64111

NONE

CHARITABLE

3,000.

FEDERAL STATEMENTS

ELAINE FELD STERN CHARITABLE TRUST BLUE RIDGE BANK & TRUST COMPANY

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2,000.

STATEMENT 4 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS

DONEE'S ADDRESS:

2 EAST 59TH STREET KANSAS CITY, MO 64113

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

EDUCATION JAMESTOWN-YORKTOWN FOUNDATION, INC.

PO BOX 3605

WILLIAMSBURG, VA 23187

NONE

NONE

ARTS

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

2,000.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

LIFE SKILLS DEVELOPMENT DREAM CATCHERS

7550 NE CROUCH ROAD CAMERON, MO 64429

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

2,000.

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

KEMPER MUSEUM OF CONTEMPORARY ART

4420 WARWICK BLVD KANSAS CITY, MO 64111

NONE

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

2,000.

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

CHARITABLE

JACKSON COUNTY CASA 625 EAST 26TH STREET KANSAS CITY, MO 64108

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

2,000.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

EDUCATION

JEWISH COMMUNITY CENTER

5801 WEST 115TH STREET, SUITE 101

OVERLAND PARK, KS 66211

NONE

NONE

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

1,000.

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

EDUCATION KANSAS CITY COMMUNITY GARDENS

6917 KENSINGTON AVENUE KANSAS CITY, MO 64132

NONE

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

1,500.

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

CHARITABLE

PETS FOR LIFE, INC. 7240 WORNALL ROAD

FEDERAL STATEMENTS

ELAINE FELD STERN CHARITABLE TRUST BLUE RIDGE BANK & TRUST COMPANY

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500.

1,000.

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STATEMENT 4 (CONTINUED) FORM 990-PF, PART I, LINE 25 **CONTRIBUTIONS, GIFTS, AND GRANTS**

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

KANSAS CITY, MO 64114

EDUCATION

AVILA UNIVERSITY 11901 WORNALL ROAD KANSAS CITY, MO 64145

NONE

CHARITABLE

VILLAGE SHALOM

5500 WEST 123RD STREET OVERLAND PARK, KS 66209

NONE

12,000.

CHARITABLE

MONTEREY COUNTY RAPE CRISIS CENTER

173 SARGENT COURT MONTEREY, CA 93940

NONE

2,400.

80,307. TOTAL \$

STATEMENT 5 FORM 990-PF, PART II, LINE 10A INVESTMENTS - U.S. AND STATE GOVERNMENT OBLIGATIONS

U.S. GOVERNMENT OBLIGATIONS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
GNMA II POOL #003302M FHLB STEP 3.125%	COST COST	\$ 22,185. \$ 22,185.	0.
STATE/MUNICIPAL OBLIGATIONS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
MONETT MO COPS BABS 7.00%, DUE 07/01/35	COST	<pre>70,000. \$ 70,000.</pre>	\$ 67,544.
	TOTAL	\$ 92,185.	\$ 89,102.

FEDERAL STATEMENTS

ELAINE FELD STERN CHARITABLE TRUST BLUE RIDGE BANK & TRUST COMPANY

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STATEMENT 6 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
VANGUARD EUROPE PACIFIC ETF ISHARES RUSSELL MIDCAP VALUE ISHARES RUSSELL 2000 GROWTH ISHARES RUSSELL 2000 VALUE ISHARES RUSSELL 2000 VALUE ISHARES S & P 500 INDEX/BARRA ISHARES TR RUSSELL MIDCAP GWTH INDEX SPDR S & P DIVIDEND VANGUARD HIGH DIVIDEND YIELD INDX ETF VANGUARD INDEX FDS STK MKT ETF GOLDMAN SACHS ABSOLUTE RET TRACKER I GOLDMAN SACHS BRIC INSTL GOLDMAN SACHS SATELLITE STRATEGIES GOLDMAN SACHS US EQ DIV & PREMIUM I PRUDENTIAL JENNISON NATURAL RES Z JP MORGAN ALERIAN ETF WISDOMTREE EMERGING MKTS SM CAP DIV DIVIDEND GWTH TRUST RISING DIV GR I	COST COST COST COST COST COST COST COST	\$ 94,400. 51,460. 17,010. 16,650. 0. 53,433. 61,776. 129,422. 141,339. 0. 49,615. 98,360. 0. 44,490. 119,752. 57,496. 53,843. \$ 989,046.	
	IOIAD	y 303,040.	4 1,332,201.

STATEMENT 7 FORM 990-PF, PART II, LINE 10C INVESTMENTS - CORPORATE BONDS

CORPORATE BONDS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
ISHARES BARCLAYS 1-3 YR CREDIT BOND GOLDMAN SACHS CORE FIXED-INC INSTL GOLDMAN SACHS HIGH YIELD INSTL OPPENHEIMER INTERNATIONAL BOND T ROWE PRICE EMERGING MARKETS VANGUARD GNMA	COST COST COST COST COST COST TOTAL	\$ 254,616. 168,770. 97,427. 81,338. 80,225. 84,293. \$ 766,669.	\$ 259,390. 185,516. 124,169. 84,732. 89,253. 84,853. \$ 827,913.

STATEMENT 8 FORM 990-PF, PART II, LINE 15 OTHER ASSETS

INCOME RECEIVABLE

	BOOK 1	VALUE	 MARKET LUE
\$		7.	
TOTAL 🕏		7.	\$ 0.

FEDERAL STATEMENTS

ELAINE FELD STERN CHARITABLE TRUST BLUE RIDGE BANK & TRUST COMPANY

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STATEMENT 9 FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

					(B)	HOW	(C)	DATE	(D) DAT	ľE [
ITEM		(A) DES	CRIPTION		ACQU		ACQU	JIRED _	SOLD	
1	LONG TERM C	PURCH	ASED	V.	ARIOUS	VARI	OUS			
2	SHORT TERM	CAPITAL GA	AIN DISTRIB	UTIONS	PURCH	ASED	V.	ARIOUS	VARI	OUS
3	GOLDMAN SAC				PURCH		5/0	7/2009	3/09/2	2010
4	GNMA II POO				PURCH			ARIOUS	VARI	
4 5 6 7	GOLDMAN SAC		OTV & PREMT	TJM T	PURCH			7/2009	4/30/2	
6	ISHARES BAR				PURCH			1/2009	5/06/2	
7	VANGUARD EU			DOME	PURCH			7/2009	5/21/2	
8	GOLDMAN SAC				PURCH			1/2009	6/24/2	
9	ISHARES S&E				PURCH			1/2009	7/01/2	
10	FHLB STEP 3		J/ Dinddi		PURCH	ASFD		4/2009	7/01/2	
11	VANGUARD H		מד מוקוע מו	א בייד	PURCH			7/2009	7/09/2	
12	VANGUARD II			W LII	PURCH			7/2009	7/09/2	
13	FHLB STEP 3		IN MAL EIF		PURCH			4/2009	9/30/2	
	GOLDMAN SAG		רכ סביד ידסאר	ד מישעי	PURCH			1/2009	1/06/2	
14 15	AOL TIME WA				PURCH			ARIOUS	3/05/2	
	MERRILL LY				PURCH			ARIOUS	6/22/2	2010
16	CARDINAL H			41 1	PURCH			ARIOUS	1/04/2	
17				a NT					2/24/2	
18	ENRON CORP			/IN	PURCH			ARIOUS 1/2009		
19	GOLDMAN SAG	LIS CORE F.	IVED-INC		PURCH	INSED	3/2	1/2009	6/28/2	2010
	(17)	/E)	(C)	(11)	(T)	(7)		(72)	/T \	
	(E)	(F)	(G)	(H)	(I)	(J)	7.0	(K)	(L)	,
TMDM	GROSS	DEPREC.	COST	GAIN (LOSS)	FMV	ADJ. B		EXCESS	GAIN (LOSS	
ITEM	SALES	ALLOWED	BASIS 0.	1,584.	12/31/69	12/31/	/ 0 3	(I) - (J)		84.
1	1,584. 2,330.		0.	2,330.					2 1,5	330.
2			18,403.	9,681.					9,6	
2 3 4 5 6 7	28,084. 7,230.		7,230.	0.					٥, ٥	0.
4	77,956.		60,711.	17,245.					17,2	
2	251,933.		249,515.	2,418.						118.
0			46,139.	-276.						276.
8	45,863.		28,494.	1,506.						06.
9	30,000.)55.
9 10	51,110.		46,055.	5,055.					5,0	0.
	73,684.		73,684.	0.					1 /	132.
11	10,965.		9,533.	1,432.						30.
12	5,464.		4,534.	930.						0.
13	26,316.		26,316.	0.					0 /	
14	119,328.		110,892.	8,436.					8,4	136.
15	86.		0.	86.						86.
16	99.		0.	99.					_	99.
17	221.		0.	221.						221.
18	1,521.		0.	1,521.						521.
19	50,000.		46,784.	3,216.				TO TO A T		216.
								TOTAL	\$ 55,4	184.

STATEMENT 10 FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

NAME:

CARE OF:

STREET ADDRESS: CITY, STATE, ZIP CODE:

TELEPHONE:

ELAINE FELD STERN CHARITABLE TRUST J. BRYAN ALLEE

BLUE RIDGE BANK & TRUST COMPANY

4200 LITTLE BLUE PARKWAY INDEPENDENCE, MO 64057

(816) 358-5000

FEDERAL STATEMENTS

ELAINE FELD STERN CHARITABLE TRUST BLUE RIDGE BANK & TRUST COMPANY

PAGE 8 43-6354470

STATEMENT 10 (CONTINUED) FORM 990-PF, PART XV, LINE 2A-D **APPLICATION SUBMISSION INFORMATION**

FORM AND CONTENT:

LETTER DESCRIBING THE NEED, PURPOSES AND PROGRAM OF REQUESTING ORGANIZATION, PROOF OF THE ORGANIZATION'S ELIGIBILITY FOR TAX EXEMPT CONTRIBUTIONS, THE AMOUNT SOUGHT AND TIME WHEN CONTRIBUTION IS NEEDED.

SUBMISSION DEADLINES: RESTRICTIONS ON AWARDS: NONE TRUST MAKES CONTRIBUTIONS TO SECTION 501(C)(3)

ORGANIZATIONS. GENERALLY DOES NOT FUND TAX SUPPORTED INSTITUTIONS, TRAVEL CONFERENCES, TELETHONS OR PROGRAMS WHICH DO NOT PROVIDE DIRECT SERVICES TO BENEFICIARIES.
TRUST DOES NOT MAKE CONTRIBUTIONS TO INDIVIDUALS. WHERE

SCHOLARSHIP FUNDS ARE AWARDED TO AN EDUCATIONAL INSTITUTION, INSTITUTION SELECTS RECIPIENT.

ELAINE FELD STERN CHARITABLE TRUST BLUE RIDGE BANK & TRUST COMPANY

43-6354470

Form **990-W**

(Worksheet)

Department of the Treasury Internal Revenue Service

FOR FORM 990-PF PURPOSES

Estimated Tax on Unrelated Business Taxable Income for Tax-Exempt Organizations (and on Investment Income for Private Foundations)

2011

OMB No 1545-0976

iterna	al Revenue Service (Keep for	your	records. Do not send to	the Internal Revenue	Service.)		
1	Unrelated business taxable income expe		1				
2	Tax on the amount on line 1. See Instru	uctions	for tax computation			2	
3	Alternative minimum tax (see instruction	ns)				3	
4	Total Add lines 2 and 3					4	
5	Estimated tax credits (see instructions)				ļ	5	
6	Subtract line 5 from line 4				į	6	
7	Other taxes (see instructions)					7	
8	Total Add lines 6 and 7					8	
9	Credit for federal tax paid on fuels (see	ınstru	octions)	1 1		9	
10 a	Subtract line 9 from line 8 Note. If less is not required to make estimated tax posee instructions			, 10a	2,120.		
b	Enter the tax shown on the 2010 return the tax year was for less than 12 month from line 10a on line 10c	(see ı ıs, skıp	nstructions) Caution. In this line and enter the	f zero or e amount 10 b			
•	2011 Estimated Tax. Enter the smaller center the amount from line 10a on line		10a or line 10b If the	organization is required	to skip line 10b,	10 c	2,120.
			(a)	(b)	(c)		(d)
11	Installment due dates (see instructions)	11	7/15/11	8/15/11	11/15/11		2/15/12
12	Required installments. Enter 25% of line 10c in columns (a) through (d) unless the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a 'large organization' (see instructions)	12	530.	530.	5	30.	530.
13	2010 Overpayment. (see instructions)	13	0.	0.	, ,,,	0.	0.
14	Payment due. (Subtract line 13 from line 12)	14	530.	530.	5	30.	530.
3 A A	For Danonwork Doduction Act Notice of	-00 00	marata inctructions				Earm 000 W (2011)