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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
on may be able to use a copy of this return to satisfy state reporting requirements. Note. The foundation may be

OMB No 1545-0052

2010

For calendar	year 2010, or	tax year beginning	07,	/Ul , <b>2010</b> ,	and ending	<u></u>	06/30, 2011
G Check all th	nat apply:	Initial return	Initial return	of a former p	ublic ch <u>arity</u>		Final return
		Amended return	Addre	ss change		Name change	
Name of founda	ition					A Employer identifi	cation number
ROBERT H.	MCKEE AN	D MARY ELLEN					
		AMILY FOUNDATI				43-	-1799994
lumber and str	eet (or PO box n	umber if mail is not delivered	d to street address)		Room/suite	B Telephone number	(see page 10 of the instructions)
		_					
	RE ESTATE						02) 381-8800
City or town, sta	ate, and ZIP code	Ð				C If exemption application pending, check here	
DUCENTY	77 05016					D 1. Foreign organizat	tions, check here . 🕨 💹
PHOENIX,		V   0     - 0.11				2. Foreign organiza 85% test, check h	
	-		c)(3) exempt private f				
		cempt charitable trust				E If private foundation	n status was terminated
	t value of all as		unting method: X C	ash Acc	rual	under section 507(b	)(1)(A), check here . 🕨 🔙
of year ( <i>froi</i> 16) ▶ \$	n Part II, col. (מ ח 1 ח		ther (specify) column (d) must be on	coch basis )			In a 60-month termination
			Columni (a) must be on	Casii basis.)		under section 507(b	)(1)(B), check here .
total of	amounts in colui	e and Expenses (The mns (b), (c), and (d)	(a) Revenue and	(b) Net inve		(c) Adjusted net	(d) Disbursements for charitable
may ne	ot necessarily eq	ual the amounts in	expenses per books	incom	e	income	purposes
T		1 of the instructions).)	152,280.				(cash basis only)
1 Contributi 2 Check	if the four	, received (attach schedule) adation is <b>not</b> required to	102,200				<del> </del>
	allacii Sci	n B	82.		82.		<del> </del>
	~	rom securities				1	
ŀ				•		RE	CFIVED
							OCIVEL)
	or (loss) from sale	of assets not on line 10	967.			18 nc	100
<b>b</b> Gross sa	les price for all	153,247.				S UL	34.2011
assets or 7 Capital		(from Part IV, line 2)		14	4,775.		18
8 Net sho		ain				L OGI	
9 Income	modifications ·	<i>,</i> [					
10 a Gross sal	es less returns vances						
b Less Co	st of goods sold .					·	
c Gross p		tach schedule)					
6 a Net gain b Gross se assets or 7 Capital 8 Net sho 9 Income 10 a Gross sal and allow b Less Co c Gross p  11 Other in	ncome (attach so	chedule)					
12 Total, A		<u>ah 11</u>	153,329.	14	4,857.	<del></del> -	
		firectors, trustees, etc				· <del>- · · · · · · · · · · · · · · · · · ·</del>	
14 Other e	-	and wages					
15 Pension		e benefits	200.	<del></del>	100.	0.	100
16a Legal fe		tule)	3,855.		1,928.	0.	100
b Accoun		schedule)	3,633.		1,920.		1,927
c Other p		(attach schedule)					
17 Interest		**	3,988.				
18 Taxes (at	• •	e page 14 of the instructions)	3,900.				·
19 Depreci	-	hedule) and depletion.					
20 Occupa	•	d meetings	· - · · · · · · · · · · · · · · · · · ·				
21 Travel, 22 Printing		s	<u>.                                 </u>			-	
22 Printing 23 Other e	•	s				·	
24 Total or		ministrative expenses.					
i I		3	8,043.		2,028.	0.	2,027
25 Contrib	-	nts paid	188,039.			1	188,039
	-	ents. Add lines 24 and 25	196,082.		2,028.	0.	190,066
	t line 26 from lir		·			_ <del></del>	
		ses and disbursements	-42,753.				
	-	(If negative, enter -0-)		14	2,829.		
i		negative, enter -0-).		-			

For Paperwork Reduction Act Notice, see page 30 of the instructions. SI4847 AllA 8/16/2011 4:10:38 PM

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2194-11

Form **990-PF** (2010) PAGE 4

Part II		Balance Sheets description column should be for end-of-year	Beginning of year	End o	of year		
4	artii	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1 .	Cash - non-interest-bearing					
	2	Savings and temporary cash investments	52,397.	10,488.	10,488.		
	3	Accounts receivable		-			
	•	Less: allowance for doubtful accounts ▶		•	-		
	4	Pledges receivable	,				
	•	Less: allowance for doubtful accounts					
	l	Grants receivable		<del></del>	<del></del>		
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see page 15 of the instructions)			<del></del>		
	7	Other notes and loans receivable (attach schedule)	-		,		
		Less: allowance for doubtful accounts ▶					
s	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
AS	10 a	Investments - U S and state government obligations (attach schedule)					
	b	Investments - corporate stock (attach schedule)					
	С	Investments - corporate bonds (attach schedule).					
	11	Investments - land, buildings, and equipment basis					
		Less accumulated depreciation					
	12	(attach schedule) Investments - mortgage loans					
	13	Investments - other (attach schedule)					
	14	Land, buildings, and			· · · · · · · · · · · · · · · · · · ·		
		equipment basis Less. accumulated depreciation (attach schedule)	`	-			
	4.5	(attach schedule) Other assets (describe					
		Total assets (to be completed by all filers - see the					
1	16	instructions. Also, see page 1, item I)	52,397.	10,488.	10,488.		
-	_		32,337.	10,400.	10,400.		
		Accounts payable and accrued expenses					
		Grants payable			V		
<u>8</u>	19	Deferred revenue	E 204	6 120	3.000.0		
abilities	20	Loans from officers, directors, trustees, and other disqualified persons .	5,284.	6,128.	ATCH 2		
jab	21	Mortgages and other notes payable (attach schedule)					
-	22	Other liabilities (describe					
	23	Total liabilities (add lines 17 through 22)	5,284.	6,128.			
		Foundations that follow SFAS 117, check here ▶					
		and complete lines 24 through 26 and lines 30 and 31.					
8	24	Unrestricted					
ă	25	Temporarily restricted					
Ba	26	Permanently restricted					
פַ	25 26 27 28 29 30	Foundations that do not follow SFAS 117,					
∄		check here and complete lines 27 through 31. ▶ X					
៦	27	Capital stock, trust principal, or current funds					
ts	28	Paid-in or capital surplus, or land, bldg , and equipment fund	2,169,284.	2,321,564.			
š	29	Retained earnings, accumulated income, endowment, or other funds	-2,122,171.	-2,317,204.			
ĕ	30	Total net assets or fund balances (see page 17 of the					
ē			47,113.	4,360.			
_		Instructions)		-,,,,,,			
			52,397.	10,488.			
_	ova II	of the instructions)		10,400.			
		Analysis of Changes in Net Assets or Fund E					
Ĭ		net assets or fund balances at beginning of year - Part I	, ,	- 1	47 110		
	end-	of-year figure reported on prior year's return)		<u>1</u>	47,113.		
2	Ente	r amount from Part I, line 27a		2	-42,753.		
3	Othe	r increases not included in line 2 (itemize) ▶		3			
1	Add I	lines 1, 2, and 3		4	4,360.		
5	Decr	eases not included in line 2 (itemize) ▶		5			
3_	Total	net assets or fund balances at end of year (line 4 minus li	ne 5) - Part II, column (b),	line 30 6	4,360.		
_							

(a) List and 2-story b	d describe the kind(s) of property sol rick warehouse; or common stock, 2	ld (e.g., real estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
. <del></del>	IDOPE			<del> </del>	
<u>b</u>		· · · · · · · · · · · · · · · · · · ·	<del> </del>		
d .			<del>                                     </del>		
e			<del>                                     </del>	-	<del></del>
(e) Gross sales price	(f) Depreciation allowed	(g) Cost or other basis	<del>                                     </del>	(h) Gain or (lo	
	(or allowable)	plus expense of sale	<u> </u>	(e) plus (f) mini	us (g)
<u>a</u>	<del> </del>		1		
<u>b</u>			<del> </del>		
<u>C</u>		<del></del>	<del> </del>	····	
<u>d</u>			ļ		
<u>e</u>	<del> </del>				
Complete only for assets	showing gain in column (h) and ow (i) Adjusted basis	(k) Excess of col. (i)		Gains (Col. (h) g	
(i) F.M.V. as of 12/31/69	COI	(k), but not less t Losses (from co			
а					
b					
С					
đ					
e					
2 Capital gain net income or	(net capital loss)	If gain, also enter in Part I, line 7			
Capital gain het income of	(Het Capital loss)	If (loss), enter -0- in Part I, line 7	2	···	144,775.
	or (loss) as defined in sections				
•	line 8, column (c) (see pages 1				
		<u></u> .	3	<del>_</del>	<u></u>
Part V Qualification L	Jnder Section 4940(e) for F	Reduced Tax on Net Investment I	ncome		·
		tributable amount of any year in the b	ase perio	d?	Yes X No
	not qualify under section 4940(e	. <u>' </u>	-6		
(a)		ear; see page 18 of the instructions b	erore mak T	ing any entries.	<del></del>
Base period years	(b) Adjusted qualifying distributions	(c)  Net value of noncharitable-use assets		Distribution ra	
Calendar year (or tax year beginning in) 2009	222,062.			(col (b) divided by	5.777448
2008	247,747.		ļ		1.766404
2007	174,154.		<del> </del>		4.303605
2006	231,514.		<del> </del>		2.710143
2005	264,055.				2.960291
2000				<del></del>	
2 Total of line 1, column (d)			2	1	7.517891
		ide the total on line 2 by 5, or by the			7.017051
•	, .	ess than 5 years	3		3.503578
namber of yours the found	ation has been in existence in a				
Enter the net value of non	charitable-use assets for 2010	from Part X, line 5	4		66,276.
Multiply line 4 by line 3			5		232,203.
Enter 1% of net investmen	nt income (1% of Part I, line 27b)	)	6		1,428.
7 Add lines 5 and 6			7		233,631.
B Enter qualifying distribution	ns from Part XII, line 4		8		190,066.
If line 8 is equal to or gre	eater than line 7, check the bo	x in Part VI, line 1b, and complete		using a 1% tax	rate. See the
Part VI instructions on pag	e 18.				

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of	he ins	tructi	ons)			
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1						
	Date of ruling or determination letter (attach copy of ruling letter if necessary - see instructions)						
þ	b Domestic foundations that meet the section 4940(e) requirements in Part V, check						
	here and enter 1% of Part I, line 27b	ı		,			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of						
	Part I, line 12, col (b).						
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			) E 7			
3	Add lines 1 and 2		_ 2,8	357.			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4		2 (	0. 357.			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			<del>557.</del>			
6	Credits/Payments: 2010 estimated tax payments and 2009 overnayment credited to 2010  6a 2, 400.						
	2010 dolimated tax payments and 2000 of orpayment of outload to 2010						
b	Exempt foreign organizations-tax withheir at source						
_	Tax paid with application for extension of time to life (Form 6666)						
_ d	Backup withholding erroneously withheld		2.4	400.			
7	Total credits and payments. Add lines 6a through 6d						
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			457.			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	_					
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  Enter the amount of line 10 to be: Credited to 2011 estimated tax    O Refunded  11						
	t VII-A Statements Regarding Activities						
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No			
ıa	participate or intervene in any political campaign?	1a		X			
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19						
-	of the instructions for definition)?	1ь		х			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials						
	published or distributed by the foundation in connection with the activities.						
c	Did the foundation file Form 1120-POL for this year?	1 c	İ	Х			
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			٠.			
_	(1) On the foundation. ▶\$(2) On foundation managers ▶\$		į				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed						
	on foundation managers. > \$		<u> </u>				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х			
	If "Yes," attach a detailed description of the activities						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	] 1	ĺ	ļ			
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3_		X			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a_	ļ'	X			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b					
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<u> </u>	X			
	If "Yes," attach the statement required by General Instruction T		.   				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
	By language in the governing instrument, or	,					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		v				
	conflict with the state law remain in the governing instrument?	6_	X				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х	<u> </u>			
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) $\blacktriangleright$ AZ, MO,						
b	if the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General						
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or						
	4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page						
	27)? If "Yes," complete Part XIV	9		X			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their						
	names and addresses	10		X			
		orm 99	0-PF	(2010)			

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . . . 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?

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?

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2b

3 b

4a

Х

X

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

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ and Contractors (continued)	yees,
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If no	one, enter "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NAME	
NONE	· · ·
	<del>-</del>
Total number of others receiving over \$50,000 for professional services	NONE
Part IX-A Summary of Direct Charitable Activities	
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 beneficianes served, conferences convened, research papers produced, etc.	Expenses
1 NONE	<u> </u>
·	
2	
3	
4	
·	
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments See page 24 of the instructions	
3 NONE	
Total. Add lines 1 through 3	

	10 17 300 11		raye o
Pa	<b>Minimum Investment Return</b> (All domestic foundations must complete this part. Foreight see page 24 of the instructions.)	gn foundat	ions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	T 7	
	purposes:	, ]	
а	Average monthly fair market value of securities	1a	2,268.
b	Average of monthly cash balances	1b	65,017.
С	Fair market value of all other assets (see page 25 of the instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	67,285.
е	Reduction claimed for blockage or other factors reported on lines 1a and		<del></del>
	1c (attach detailed explanation)	`	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	67,285.
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	1,009.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	66,276.
6		6	
Pa	Minimum investment return. Enter 5% of line 5  rt XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (J)(5) privations)	te operatino	
	foundations and certain foreign organizations check here > and do not complete this p	oart.)	,
1	Minimum investment return from Part X, line 6	1	3,314.
2a			
b	Income tax for 2010. (This does not include the tax from Part VI.) 2b	,	
	Add lines 2a and 2b	2c	2,857.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	457.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	457.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	457.
D۵	rt XII Qualifying Distributions (see page 25 of the instructions)		
Г <u>с</u>	Qualitying Distributions (see page 25 of the Instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	190,066.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.		
	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the:	.	
а	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required scriedule)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	190,066.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	190,066.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when cal qualifies for the section 4940(e) reduction of tax in those years.	culating wh	nether the foundation

Pa	rt XIII Undistributed Income (see page	e 26 of the instruction	ns)		
1	Distributable amount for 2010 from Part XI.	(a) Corpus	(b) Years prior to 2009	<b>(c)</b> 2009	( <b>d</b> ) 2010
	line 7				457.
2	Undistributed income, if any, as of the end of 2010			-	* .
a	Enter amount for 2009 only			0.	•
b	Total for prior years 20 08 ,20 07 ,20 06		0.		
3	Excess distributions carryover, if any, to 2010:	·		,	
а	From 2005 264,055.				
b	From 2006 231, 514.	-			4
С	From 2007 175, 079.		· -		
d	From 2008 244,009.		,		
е	From 2009				•
f	Total of lines 3a through e	1,139,088.			
4	Qualifying distributions for 2010 from Part XII,			1	
	line 4 ▶ \$190,066.				i
а	Applied to 2009, but not more than line 2a			0.	
b	Applied to undistributed income of prior years (Election				
	required - see page 26 of the instructions)				
C	Treated as distributions out of corpus (Election			`	
_	required - see page 26 of the instructions)	·· <del>-</del> -	· · · - · · · · · · · · · · · · · · · ·		457.
	Applied to 2010 distributable amount	189,609.			457.
е 5	Remaining amount distributed out of corpus Excess distributions carryover applied to 2010	105,005.			
6	(If an amount appears in column (d), the same amount must be shown in column (a).) Enter the net total of each column as indicated below:				.,
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,328,697.	1		•
	Prior years' undistributed income. Subtract				,
	line 4b from line 2b		0.		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d	Subtract line 6c from line 6b. Taxable		0.		
е	amount - see page 27 of the instructions Undistributed income for 2009. Subtract line				
_	4a from line 2a. Taxable amount - see page			0.	
	27 of the instructions	· · · · · · · · · · · · · · · · · · ·			<u> </u>
f	Undistributed income for 2010 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011.				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
8	instructions)	264,055.		,	
9	Excess distributions carryover to 2011.				
	Subtract lines 7 and 8 from line 6a	1,064,642.			
	Analysis of line 9:				
	Excess from 2006		į		
b	Excess from 2007				
C	Excess from 2008 244,009. Excess from 2009 224,431.		İ		
d		,			
- 6	Excess from 2010 189, 609.			*	

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see page 28 of the instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

ROBERT H. MCKEE

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

organization
(4) Gross investment income

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

a The name, address, and telephone number of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

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Supplementary information (				<u></u>
3 Grants and Contributions Paid Duri	ng the Year or Appr	oved for h	-uture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
Name and address (home or business)  a Paid during the year  ATTACHMENT 4	any foundation manager or substantial contributor	recipient	contribution	Amount
Total			▶ 3a	188,039.
<b>b</b> Approved for future payment				
Total	<del> </del>	<del></del>	▶ 3b	L

Part XVI		icing Activ	vities			······································
Enter gross	amounts unless otherwise indicated.	(a)	ated business income (b)	(c)	y section 512, 513, or 514 (d)	(e) Related or exempt function income (See page 28 of
1 Program	n service revenue:	Business code	Amount	Exclusion code	Amount	(See page 28 of the instructions.)
a		· 				
b						
c						
d						· · · · · · · · · · · · · · · · ·
е						
f				<del></del>		
-	and contracts from government agencies			<del></del>		
	rship dues and assessments			14	82.	
	on savings and temporary cash investments			+	02.	<del></del>
	ds and interest from securities					<del></del>
	tal income or (loss) from real estate.					
	t-financed property					
	al income or (loss) from personal property	<del></del>				
	ivestment income			-		····
	loss) from sales of assets other than inventory			18	967.	
•	ome or (loss) from special events					
	profit or (loss) from sales of inventory.					
-	evenue: a					
е						
12 Subtota	l. Add columns (b), (d), and (e)				1,049.	
	dd line 12, columns (b), (d), and (e)				13	1,049.
	heet in line 13 instructions on page 29					
Part XVI			<del></del>		· · · · · · · · · · · · · · · · · · ·	
Line No.	Explain below how each activit					
▼	accomplishment of the foundation instructions.)	on's exemp	or purposes (other tha	in by brovidini	y lulius for such purpose	es). (See page 29 of the
	metradionely	<del></del>	<del></del>		······································	<del> </del>
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	······································					
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Part	XVII	Information Exempt Orga		Transfers To	and Trans	actions	and Relati	ionships With	Vonc	harit	able
1 0	ed the	organization directl	ly or indirectly	engage in any	of the follow	ing with	any other org	ganization described		Yes	No
		ion 501(c) of the C	•	* -		-	-				
	_	ations?								1	
		rs from the reporting f									
		h							1a(1)		X
		er assets							1a(2)		Х
-		ansactions:									,,
		es of assets to a nonc									X
		chases of assets from									X
		ital of facilities, equipm							1	1	X
		mbursement arrangem									X
		ns or loan guarantees									X
		formance of services									X
		of facilities, equipmen									X
		answer to any of									
		of the goods, other		= *							
		n any transaction o	1								
(a) Line	no.	(b) Amount involved	(c) Name of	f noncharitable exemp	pt organization		scription of transf	fers, transactions, and sha	ring arra	ingeme	nts
		N/A			<del></del>	N/A					
			<del> </del>			<del>-  </del>					
			<del>                                     </del>								
		<del></del>			<del>.</del>		<del></del>	<del></del>			
			<u> </u>				<del></del>	·			
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		,									
			<u> </u>								
								<del></del>			
d	escrib	foundation directly ed in section 501(c) of complete the followin	the Code (other	•	•		nore tax-exem	ot organizations		es []	No
	165,	(a) Name of organizatio		(b) Typ	e of organization			(c) Description of relations	shin		
		(-,		1				· · · · · · · · · · · · · · · · · · ·			
		<del></del>					<del></del>	··		·	
		· ·		<del> </del>							
			<del></del>					· · · · · · · · · · · · · · · · · · ·		_	
		· · · · · · · · · · · · · · · · · · ·	<del> </del>					· · · · · · · · · · · · · · · · · · ·			
	Unde	r penalties of perjury, I d	leclare that I have	e examined this return	n. including accor	mpanving sch	redules and state	ments, and to the best	of my k	nowled	ge an
Sign	belief	, it is tree, correct, and con	mplete. Declaration	n of preparer (other th	nan taxpayer or fid	uciary) is bas	ed on all informat	ion of which preparer has	any kn	owledge	a
Here		/142)HM	h char		171	1-18-	11 📦	121665117614	<u>,                                     </u>		
11616	<b>₽</b> ₫	grature of officer or truste			Dat	e	Tri	tle			
	1 4	Print/Type preparer's		Preparer's si	<del></del>		Date	<del></del>	PTIN		
		, , po proparer s				$\Omega\Omega_n$	1 1	Check	•		
Paid		Olivia Cut	sallero		Libr	Whi-	-   8/24/1	self-employed	P004	6530	)9
Prepa				LLC				Firm's EIN ▶ 34-1	8841	25	
Use C	∂nly	Firm's address ▶ 31	LO1 N. CEN	TRAL AVE.,	STE 300						

Phone no. 602-264-6835

PHOENIX, AZ

85012

### Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury

Internal Revenue Service

## **Schedule of Contributors**

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

OMB No 1545-0047

**2010** 

Name of the organization **Employer Identification number** ROBERT H. MCKEE AND MARY ELLEN MCKEE CHARITABLE FAMILY FOUNDATION 43-1799994 Organization type (check one): Filers of: Section: 501(c)( ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

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

Name of organization ROBERT H. MCKEE AND MARY ELLEN
MCKEE CHARITABLE FAMILY FOUNDATION

Employer identification number 43-179994

	, , , , , , , , , , , , , , , , , , ,		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ROBERT H. MCKEE  24 BILTMORE ESTATES  PHOENIX, AZ 85016	\$27,200.	Person X Payroll X Noncash X  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2_	ROBERT H. MCKEE  24 BILTMORE ESTATES  PHOENIX, AZ 85016	\$28,780.	Person X Payroll X Noncash  (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3_	ROBERT H. MCKEE  24 BILTMORE ESTATES  PHOENIX, AZ 85016	\$96,300.	Person X Payroll X Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution.)

Page\_\_

of

of Part II

Name of organization ROBERT H. MCKEE AND MARY ELLEN
MCKEE CHARITABLE FAMILY FOUNDATION

Employer identification number 43-1799994

# Part | Noncash Property (see instructions)

Pairti	Noncash Property (see instructions)		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	\$1,000 SHARES OF WELLS FARGO & CO. NEW AT \$27.20 PER SHARE	_	
		\$	11/29/2010
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	1,000 SHARES OF WELLS FARO & CO. NEW AT \$28.78 PER SHARE	_	
		\$\$.	12/02/2010
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	3,000 SHARES OF WELLS FARGO & CO. NEW AT 32.10 PER SHARE	-	
		\$96,300.	03/14/2011
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		-   \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- - -	
a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		- \$	
<u> </u>			90. 990-EZ. or 990-PF) (2

0E1254 1 000

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

ROBERT H. MCKEE AND MARY ELLEN
FORM 990-PF - PART IV

C/	APITAL GAI	NS AND LO	SSES FOF	<u>r tax on i</u>	<b>NVESTI</b>	M	ENT INCOM	<u>IE</u>
' Kınd of F			Descr			0 D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj. basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
57,159.		2000 SHARES 3,389.	WELLS FARG				06/15/1983 53,770.	12/02/2010
96,088.		3000 SHARES 5,083.	WELLS FARG	O & CO NEW			06/15/1983 91,005.	03/10/2011
TOTAL GAIN(L	OSS)						144,775.	
							:	
			•			!		
		<b>.</b>		,				

FORM 990PF, PART I - TAXES

REVENUE AND

DESCRIPTION

EXPENSES PER BOOKS

INVESTMENT INCOME EXCISE TAX

3,988.

TOTALS

3,988.

2194-11

FORM 990PF, PART II - LOANS FROM OFFICERS, DIRECTORS, ETC	FORM	990PF,	PART	II -	- LOANS	FROM	OFFICERS,	DIRECTORS,	ETC
---	------	--------	------	------	---------	------	-----------	------------	-----

LENDER: DUE TO OFFICER

ORIGINAL AMOUNT: 8,1
INTEREST RATE: 0.000000
REPAYMENT TERMS: DEMA

8,194.

DEMAND

SECURITY PROVIDED:

NONE

PURPOSE OF LOAN:

CASH FLOW

BEGINNING BALANCE DUE .....

5,284.

ENDING BALANCE DUE .....

6,128.

TOTAL BEGINNING LOANS FROM OFFICERS, DIRECTORS, ETC.

5,284.

TOTAL ENDING LOANS FROM OFFICERS, DIRECTORS, ETC.

6,128.

PAGE 23

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FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

ROBERT H. MCKEE 24 BILTMORE ESTATES PHOENIX, AZ 85016

1.00 PRESIDENT

MARY ELLEN MCKEE

DIRECTOR

24 BILTMORE ESTATES PHOENIX, AZ 85016

2.00

1235 W. 65TH ST. KANSAS CITY, MO 64113 JAMES P. TIERNEY

1.00 DIRECTOR

GRAND TOTALS

ATTACHMENT 3

# FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		•
	AND		•
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
VALLEY PRESBYTERIAN CHURCH	NONE	UNRESTRICTED CONTRIBUTION	19,120.
8947 E. MCDONALD DR.	PUBLIC CHARITY		
PARADISE VALLEY, AZ 85253-5342			
HEARD MUSEUM	NONE	UNRESTRICTED CONTRIBUTION	5,126.
2301 N. CENTRAL AVE.	PUBLIC CHARITY		
PHOENIX, AZ 85004-1323			
TRENDS CHARITABLE FUND	NONE	UNRESTRICTED CONTRIBUTION	165.
5921 EAST INDIAN BEND ROAD	PUBLIC CHARITY		
PARADISE VALLEY, AZ 85253			
FRIENDS OF CHANNEL 8	NONE	UNRESTRICTED CONTRIBUTION	150.
P.O. BOX 29688	PUBLIC CHARITY		
PHOENIX, AZ 85038-9688			
BOYS AND GIRLS CLUB OF SCOTTSDALE	NONE	UNRESTRICTED CONTRIBUTION	105,719.
10515 E. LAKEVIEW DR.	PUBLIC CHARITY		
SCOTTSDALE, AZ 85258			
ARIZONA HUMANE SOCIETY	NONE	UNRESTRICTED CONTRIBUTION	100.
P.O. BOX 90610	PUBLIC CHARITY		
PHOENIX, AZ 85066-0610			

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43-1799994

ATTACHMENT 4 (CONT'D)

# FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		•
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
WILLIAM JEWELL COLLEGE 500 COLLEGE HILL LIBERTY, MO 64068	NONE PUBLIC CHARITY	UNRESTRICTED CONTRIBUTION	10,000.
BARROWS NEUROLOGICAL FOUNDATION 350 W. THOMAS RD. PHOENIX, AZ 85013	NONE PUBLIC CHARITY	UNRESTRICTED CONTRIBUTION	100.
DESERT CABALLEROS WESTERN MUSEUM 21 N. FRONTIER ST. WICKENBURG, AZ 85390	NONE PUBLIC CHARITY	UNRESTRICTED CONTRIBUTION	250.
HOSPICE OF THE VALLEY 1510 E. FLOWER STREET PHOENIX, AZ 85034	NONE PUBLIC CHARITY	UNRESTRICTED CONTRIBUTION	100.
MAYO CLINIC DEPT OF DEVELOPMENT 13400 E. SHEA BOULEVARD SCOTTSDALE, AZ 85259	NONE PUBLIC CHARITY	UNRESTRICTED CONTRIBUTION	10,000.
UNIVERISTY OF SAN DIEGO HUGHES ADMINISTRATION CENTER 222 5998 ALCALA PARK SAN DIEGO, CA 92110-2492	NONE PUBLIC CHARITY	UNRESTRICTED CONTRIBUTION	5,000.

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		,
	AND		•
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
BICYCLES FOR KIDS	NONE	UNRESTRICTED CONTRIBUTION	100.
2425 E. CAMELBACK, SUITE 885	PUBLIC CHARITY		
PHOENIX, AZ 85016	-		
PHOENIX ART MUSEUM	NONE	UNRESTRICTED CONTRIBUTION	1,745.
1625 N CENTRAL AVE	PUBLIC CHARITY		
PHOENIX, AZ 85004			
PHOENIX SYMPHONY	NONE	UNRESTRICTED CONTRIBUTION	810.
ONE N FIRST ST, SUITE 200	PUBLIC CHARITY		
PHOENIX, AZ 85004			
WOMEN'S BOARD OF BARROWS NEUROLOGICAL INSTITUTE	NONE	UNRESTRICTED CONTRIBUTION	25,250.
350 W THOMAS RD	PUBLIC CHARITY		
PHOENIX, AZ 85013			
FRESH START WOMEN'S FOUNDATION	NONE	UNRESTRICTED CONTRIBUTION	2,204.
1130 E. MCDOWELL ROAD	PUBLIC CHARITY		
PHOENIX, AZ 85006			
GLEN ELLYN BIBLE CHURCH	NONE	UNRESTRICTED CONTRIBUTION	500.
501 HILLSIDE AVE	PUBLIC CHARITY		
GLEN ELLYN, IL 60137			

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43-1799994

ATTACHMENT 4 (CONT'D)

# FORM 990PF. PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	0		•
KECILIENI NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
LA COSTA CANYON HIGH SCHOOL ONE MAVERICK WAY , CARLSBAD, CA 92009	NONE PUBLIC CHARITY	UNRESTRICTED CONTRIBUTION	150.
PRESCOTT HIGH SCHOOL 1050 RUTH ST. PRESCOTT, AZ 86301	NONE PUBLIC CHARITY	UNRESTRICTED CONTRIBUTION	200.
ST. JOSEPH'S FOUNDATION 350 W. THOMAS ROAD PHOENIX, AZ 85013	NONE PUBLIC CHARITY	UNRESTRICTED CONTRIBUTION	500.
TEACH FOR AMERICA 3030 N. CENTRAL AVE STE 900 PHOENIX, AZ 85012	NONE PUBLIC CHARITY	UNRESTRICTED CONTRIBUTION	500.
THE MADISON VALLEY MEDICAL CENTER FOUNDATION PO BOX 993 ENNIS, MT 59729	NONE PUBLIC CHARITY	UNRESTRICTED CONTRIBUTION	150.
VILLAGE CHURCH PO BOX 704 RANCHO SANTE FE, CA 92067	NONE PUBLIC CHARITY	UNRESTRICTED CONTRIBUTION	100.

TOTAL CONTRIBUTIONS PAID

188,039.

## SCHEDULE D (Form 1041)

**Capital Gains and Losses** 

OMB No 1545-0092

Department of the Treasury Internal Revenue Service

▶ Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable). 2010

Name	of estate or trust ROBERT H. MCKEE	AND MARY E	LLEN	<del></del>	Employer identif	ication	number
1	MCKEE CHARITABLE FAMILY FOUND	ATION			43-17999	994	
Note	e: Form 5227 filers need to complete only Pa	rts I and II.			-1		
Par	Short-Term Capital Gains and Lo	sses - Assets	Held One Ye	ear or Less			
	(a) Description of property (Example: 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, уг)	(d) Sales price	(e) Cost or other (see instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a							
					ļ		
						Γ	
	Fator the about town as in an (local) if you t	O-b4-1- D	a boodb				
D	Enter the short-term gain or (loss), if any, f	rom Schedule D	-1, line 1b	• • • • • • • • • • • •	• • • • • • • •	1b	
_	Chart town country weight of (loss) from Form	- 4004 COEO	C701 and 000	.4		١.	
2	Short-term capital gain or (loss) from Form	IS 4084, 0252,	6/81, and 882	4	• • • • • • •	2_	
3	Net short-term gain or (loss) from partners	hine S comorat	tions and other	r actatoc or tructo		3	
4	Short-term capital loss carryover. Enter the					۴,	<u> </u>
•	Carryover Worksheet	-		-		4	( )
5	Net short-term gain or (loss). Combine line	es 1a through 4	in column (f).	Enter here and on line		<u> </u>	
	column (3) on the back	•	• •		•	5	
Par		s - Assets Held	More Than Or	ne Year			<del></del>
	(a) Description of property	(b) Date acquired	(c) Date sold	(d) Colon omeo	(e) Cost or other	basis	(f) Gain or (loss) for
	(Example: 100 shares 7% preferred of "Z" Co)	(mo, day, yr)	(mo, day, yr)	(d) Sales price	(see instructio		the entire year Subtract (e) from (d)
6a							
	<del> </del>						
	<del></del>	-					
					·		
		1		· · · · · · · · · · · · · · · · · · ·	<u> </u>		· · · · · · · · · · · · · · · · · · ·
h	Enter the long-term gain or (loss), if any, fro	om Sabadula D	1 line Sh			C.L.	144,775.
b	Enter the long-term gain or (loss), if any, in	om schedule D-	i, lifte ob			6b	144,773.
7	Long-term capital gain or (loss) from Form	- 2420 4694 4	20E0 6701 or	A 0004		_	
′	Long-term capital gain or (loss) from Form	5 2439, 4004, t	0202, 0701, ai	iu 6024		7	
8	Net long-term gain or (loss) from partnersh	une S comorati	one and other	actatae or truete		۰	
o	iver long-term gain or (loss) from partners	iips, 3 corporati	ons, and other	estates or trusts	• • • • • • • •	8	
9	Capital gain distributions					9	
•	Oupitul gain distributions					- 5	
10	Gain from Form 4797, Part I					10	l
11	Long-term capital loss carryover. Enter the	amount if any		of the 2009 Capital Los		.,	·
• •	Carryover Worksheet	•		•		11	( )
12	Net long-term gain or (loss). Combine lines	6a through 11	in column (f)	Enter here and on line			
-	column (3) on the back	•			' <del>-</del>	12	144,775.
For F	aperwork Reduction Act Notice, see the Instru						e D (Form 1041) 2010

Sche	dule D (Form 1041) 2010					Page 2
Pa	Summary of Parts I and II	(1) Benefi		(2) Es		(3) Total
10	Caution: Read the instructions before completing this part.	(see in	str.)	or tru	IST'S	(0) / 5
13	Net short-term gain or (loss)					<del></del>
14	Net long-term gain or (loss):					144,775.
a h	Total for year	<u> </u>				144,773.
	28% rate gain 14c					
	Total net gain or (loss). Combine lines 13 and 14a					144,775.
Note	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990 art V, and do not complete Part IV. If line 15, column (3), is a net loss, complete Part IV.					nn (2), are net gains, go
Pa	rt IV Capital Loss Limitation	-				
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, Ii					
а	The loss on line 15, column (3) or b \$3,000				16 (	· · · · · · · · · · · · · · · · · · ·
Note Cam	The loss on line 15, column (3) or b \$3,000	ne 22 (or Form	990-T, lır	ne 34), is a	loss, co	mplete the Capital Loss
	t V Tax Computation Using Maximum Capital Gains Rates					
	n 1041 filers. Complete this part only if both lines 14a and 15 in column (2	2) are gains.	or an am	ount is er	tered ii	n Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than		o. a a	00.11.10.01		are rorrest mana
	tion: Skip this part and complete the worksheet on page 8 of the instructions	if:				
	ither line 14b, col. (2) or line 14c, col. (2) is more than zero, or					
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.					l
of F	n 990-T trusts. Complete this part only if both lines 14a and 15 are gair orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part and	is, or qualille I complete ti	ea aiviae ne works	nos are ir heet on r	iciuded	of the instructions if
	er line 14b, col. (2) or line 14c, col. (2) is more than zero.	· complete t	io womo	noot on p	ugo o	or the metraetions in
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	17				
18	Enter the smaller of line 14a or 15 in column (2)	• •				
	but not less than zero					
19	Enter the estate's or trust's qualified dividends	7				
	from Form 1041, line 2b(2) (or enter the qualified					
	dividends included in income in Part I of Form 990-T)					
20	Add lines 18 and 19					
21	If the estate or trust is filing Form 4952, enter the					
	amount from line 4g; otherwise, enter -0 ▶ 21					
22	Subtract line 21 from line 20. If zero or less, enter -0	22				
23	Subtract line 22 from line 17. If zero or less, enter -0-	23				
	<b>-</b>					
24	Enter the smaller of the amount on line 17 or \$2,300	24				
25	Is the amount on line 23 equal to or more than the amount on line 24?					
	Yes. Skip lines 25 and 26; go to line 27 and check the "No" box.  No. Enter the amount from line 23	25				
26	Subtract line 25 from line 24				Ì	
27	Are the amounts on lines 22 and 26 the same?	20				
	Yes. Skip lines 27 thru 30, go to line 31  No. Enter the smaller of line 17 or line 22	27				
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)	28				
_		•	*			
29	Subtract line 28 from line 27	29		1		
30	Multiply line 29 by 15% (.15)				30	
31	Figure the tax on the amount on line 23. Use the 2010 Tax Rate Schi	edule for Es	tates and			
	(see the Schedule Ginstructions in the instructions for Form 1041)				31	
32	Add lines 30 and 31				32	
33	Figure the tax on the amount on line 17. Use the 2010 Tax Rate Sche	edule for Es	tates and	d Trusts	}	
	(see the Schedule G instructions in the instructions for Form 1041)				33	

Schedule D (Form 1041) 2010

G, line 1a (or Form 990-T, line 36).

Tax on all taxable income. Enter the smaller of line 32 or line 33 here and on Form 1041, Schedule

lame of estate or trust as shown on Form 1041. Do no ROBERT H. MCKEE AND MARY E	LLEN			43-179999	cation number 94
Part   Long-Term Capital Gains and	d Losses - Asset	s Held More Tha			
(a) Description of property (Example 100 sh 7% preferred of "Z" Co.)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo., day, ут)	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
a 2000 SHARES WELLS FARGO & CO NEW	06/15/1983	12/02/2010	57,159.	3,389.	53,770
3000 SHARES WELLS FARGO & CO NEW	06/15/1983	03/10/2011	96,088.	5,083.	91,005
			_		
	4				
6b Total. Combine the amounts in column	<i></i>				144,775

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side