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990-PF

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No. 1545-0052

Depa Inter	rtment of the Treasur nal Revenue Service	^у N	ote. The foundation	n mav b	Treat e able to	ed as a Priva	ate Foundation his return to sa	on tisfy state r	eporting requirements.	2010
			r tax year begin		2 22.0 10		01 ,2010,			10/31,2011
	Check all that a		Initial return				of a former p			Final return
			Amended re	turn			ss change		Name change	_ · · · · • · · · · · · · · · · · · · ·
Nan	ne of foundation					- L	<u>.y.</u>		A Employer identifi	cation number
	JO:	HN AND	MARY JANE	LEE	CHARI'	PABLE FOU	NDATION		26-	6700047
Nur	nber and street (or P O box	number if mail is not i	delivered	l to street a	ddress)		Room/su	ite B Telephone number (see page 10 of the instructions
		<u>о. вох</u>				<u>.</u>				4) 418-2643
City	or town, state, a	and ZIP co	de						C If exemption applicate pending, check here	
									D 1 Foreign organizati	ions, check here , 🕨 🔃
			S, MO 63166						2 Foreign organizati 85% test, check hi	
ᄔ			on: X Section						computation •	
			exempt charitable t				ivate foundat		E If private foundation	status was terminated
	air market val				_		ash Acc	rual)(1)(A),check here . 🕨 🔃
	of year (from P				her (spe				F If the foundation is in	n a 60-month termination
_	16) ▶ \$				column (d) must be or	n cash basis.)		under section 507(b)(1)(B), check here
Рa	Analysis of am	of Reveni	ue and Expenses	(The		venue and	(b) Net inve	stment	(c) Adjusted net	(d) Disbursements for charitable
	may not ne	cessarily e	equal the amounts i	n		enses per oooks	Incom		income	purposes
_	column (a)	(see page	11 of the instruction	ins))						(cash basis only)
			tc., received (attach schedund) undation is not requir			222,782.				<u> </u>
	2 Check ► L	☐ attach S	Sch. B				,			
		-	emporary cash investr			04 204		4 004		
			t from securities .	Г		94,294.	9	4,294.		
							,			
			s)			0.701				
3	6a Net gain or (lo b Gross sales pr	oss) from sa rice for all	le of assets not on line	_		8,701.				1,
anica con	assets on line	6a _		01.				0 701		
			ne (from Part IV, line					<u>8,701.</u>		
			gain		<u>`</u>	_				
	9 income mod Da Gross sales le									
	and allowance			-					1	
	b Less Cost of	-								<u> </u>
١,			schedule) .							
- 1			ough 11			325,777.	10	2,995.		
1						36,345.		$\frac{2,793.}{2,711.}$		3,63
			, directors, trustees, et es and wages			20,222.		NONE	NONE	
۱۱	5 Pencionale	yee salafii	oo henefite——					NONE	NONE	
1	6a Jegal face	Tach Ch	vee benefits					HOIVE	NOINE	
1			h schedule)STMT	iit		2,500.		NONE	NONE	2,50
-			s) (ettech schedule)		· · · · ·	2,200.		740111	NONE	2,50
1	: . I IVIA	K I Z	2012 1	•••			-			
1 1 2		schedule) (e	ee page 14 of iSTMT	ا .غ. ا		1,363.		174.		
1			chedule) and deple			2/303.				
2		LYETV.								
2			nd meetings	•••		-		NONE	NONE	
2			ins					NONE	NONE	
			schedule)							
2			dministrative expe							·· ·
	-	_	23	- 1		40,208.	ત્ર	2,885.	NONE	6,13
1 2		_	ants paid			256,000.		_,,,,,,	110111	256,00
2			ements Add lines 24 a			296,208	٦	2,885.	NONE	262,13
2				0 23				-,000	NONE	
			inses and disbursement	,		29,569		Ì		
1		•	ne (if negative, ente	- ' F			Ϊ	0,110.	· ·- -	
1			,	'			'	~ 1 ± ± V ·		

For Paperwork Reduction Act Notice, see page 30 of the instructions.

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Form 990-PF (2010)

26-6700047 Page 2

Þ	art II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End c	f year
_	ert III	Balance Officers	amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beari	ng			
	2	Savings and temporary	cash investments	16,383.	45,951.	45,951
	3	Accounts receivable 📐				1 1
		Less: allowance for doub	otful accounts			
	4	Pledges receivable ▶_		,		
		Less allowance for doub	otful accounts >			
	5		 			
	6		officers, directors, trustees, and other			
	1		ach schedule) (see page 15 of the instructions)			
	7		eceivable (attach schedule)			1
			otful accounts NONE	*		
	8		se			
Assets	9		eferred charges			
155	10 a	· ·	government obligations (attach schedule)			
_			stock (attach schedule) STMT 3	2,908,273.	2,908,274.	3,008,361
	1		bonds (attach schedule)	2/300/2/31	2/300/2/11	3,000,001
	11	Investments - land, building and equipment, basis Less accumulated deprecia (attach schedule)	ls, ▶			
	12		loans			
	13	Investments - other (atta	ch schedule)			
	14	Land, buildings, and equipment basis	>		1	٠
		Less accumulated deprecia (attach schedule)	ition			
	15	Other assets (describe	▶)			
	16		completed by all filers - see the			
_		instructions. Also, see pa	age 1, item l)	2,924,656.	2,954,225.	3,054,312
	17	Accounts payable and a	ccrued expenses			ı
	18	Grants payable				, , ,
S	19					
Ξ	20	Loans from officers, directo	rs, trustees, and other disqualified persons			1
Liabilities	21	Mortgages and other no	tes payable (attach schedule)			
_	22	Other liabilities (describe	• ►) <u> </u>			, ,
			1			·
_	23		s 17 through 22)			
			ow SFAS 117, check here ▶ 4 through 26 and lines 30 and 31.			,
Balances	24	Unrestricted	<u>.</u> _			'
aŭ	25	Temporarily restricted				
Bal	26	Permanently restricted .				
Fund	1		not follow SFAS 117,			,
		check here and comp	plete lines 27 through 31. ▶ X			
ŏ	27	Capital stock, trust princ	ipal, or current funds	2,924,656.	2,954,225.	
ts	28	Paid-in or capital surplus, or	land, bldg , and equipment fund			
Net Assets	29	Retained earnings, accumul	ated income, endowment, or other funds			
t A	30	Total net assets or i	fund balances (see page 17 of the			
ž		instructions)		2,924,656.	2,954,225.	
	31	Total liabilities and ne	t assets/fund balances (see page 17			
		of the instructions)	<u> </u>	2,924,656.	2,954,225.	
Ρ	art III	Analysis of Cha	anges in Net Assets or Fund E	Balances		
			alances at beginning of year - Part I		nust agree with	
			on prior year's return)			2,924,656.
2			ine 27a			29,569.
3	Othe	r increases not include				
						2,954,225.
		eases not included in	line 2 (itemure) b		-	-,,
			lances at end of year (line 4 minus lin	e 5) - Part II, column (b),		2,954,225.
_						200 05 11111

Form 990-PF (2010)					Page 3
	s and Losses for Tax on Inve d describe the kind(s) of property sold (i		(b) How acquired	(c) Date	(d) Date sold
	prick warehouse; or common stock, 200		P-Purchase D-Donation	(mo., day, yr)	(mo , day, yr.)
1a SEE PART IV DETA	AIL				
b					
<u>c</u>				ļ	
<u>d</u>		- 	ļ		
<u>e</u>	(f) Depreciation allowed	(g) Cost or other basis	 -	(h) Gain or (lo	200)
(e) Gross sales price	(or allowable)	plus expense of sale		(e) plus (f) mini	
a					_
b					
<u>c</u>					
_d					
<u>e</u>					
Complete only for assets :	showing gain in column (h) and owned	T		Gains (Col. (h) ga (k), but not less to	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		Losses (from co	
a					<u> </u>
b					
С					
d					
<u>e</u>			ļ		
2 Capital gain net income or		gain, also enter in Part I, line 7			0 501
3. Not chart-term conital cain	fi or (loss) as defined in sections 122	(loss), enter -0- in Part I, line 7	2		8,701.
	line 8, column (c) (see pages 13 ar				
	line 8		3		
	Inder Section 4940(e) for Red		ncome		
If section 4940(d)(2) applies,	leave this part blank. the section 4942 tax on the distrib	outable amount of any year in the b	ase perio	43 <u> </u>	Yes X No
	not qualify under section 4940(e). I		ade perio		_ 165 <u>_ 7</u> 3 140
1 Enter the appropriate amo	ount in each column for each year,	see page 18 of the instructions be	fore maki	ng any entries.	
(a) Base penod years	(b)	(c)		(d) Distribution ra	atio
Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		(col (b) divided by	col (c))
2009	293,249.	2,967,468.			882128468
2008	1,429.	2,576,626.		0.000	055460125
2007					
2005					
	<u> </u>				
2 Total of line 1, column (d))		2	0.099	937588593
3 Average distribution ratio	for the 5-year base period - divide t	the total on line 2 by 5, or by the			
number of years the found	dation has been in existence if less	than 5 years	3	0.049	968794297
4 Enter the net value of non	ncharitable-use assets for 2010 fror	m Part X, line 5	4		3,152,405.
			:		
5 Multiply line 4 by line 3			5		<u> 156,637.</u>
C					701
6 Enter 1% of net investmer	nt income (1% of Part I, line 27b)	• • • • • • • • • • • • • • • • • • • •	6		701.
7 Add lines 5 and 6			7		157,338.
. roomics o and U	• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	 		101,000.
8 Enter qualifying distribution If line 8 is equal to or graph Part VI instructions on page	ons from Part XII, line 4	n Part VI, line 1b, and complete t	8 hat part	using a 1% tax	262,135. c rate. See the
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orm !	990-PF (2010) 26-6700047		F	age 4
Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the	ne ins	tructio	ns)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1 Date of ruling or determination letter:		7	01.
	here \blacktriangleright X and enter 1% of Part I, line 27b. 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	_		
3	Add lines 1 and 2			01.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4			ONE
5 6	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			01.
а	2010 estimated tax payments and 2009 overpayment credited to 2010			
b	Exempt foreign organizations-tax withheld at source			-
c	Tax paid with application for extension of time to file (Form 8868) 6c NONE			
d	Backup withholding erroneously withheld			
7	Total credits and payments, Add lines 6a through 6d		1,3	<u>41.</u>
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		6	40.
11	Enter the amount of line 10 to be: Credited to 2011 estimated tax ▶ 640 . Refunded ▶ 11			
	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	<u> 1a</u>		<u> X</u>
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			٠,
	of the instructions for definition)?	1b		<u> </u>
	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.			77
	Did the foundation file Form 1120-POL for this year?	1c		<u> </u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year¹ (1) On the foundation. ▶\$	-		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. ► \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u> X</u>
	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			7,
	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		<u> </u>
Ь	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	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	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			

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

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

8b

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charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?

Form 990-PF (2010)

rm:	990-PF (2010)		26-67				Page 6
ar	VII-B Statements Regarding Activities for	Which Form 47	20 May Be Requi	red (continued)			
5 a	During the year did the foundation pay or incur any amour (1) Carry on propaganda, or otherwise attempt to influence (2) Influence the outcome of any specific public election (directly or indirectly, any voter registration drive?	e legislation (section see section 4955); or	to carry on,				
	(3) Provide a grant to an individual for travel, study, or oth (4) Provide a grant to an organization other than a charital	er sımılar purposes?				,	
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (set (5) Provide for any purpose other than religious, charitable	ee page 22 of the ins	tructions)	Yes X No			
	purposes, or for the prevention of cruelty to children o	r anımals?				1	
ь	If any answer is "Yes" to 5a(1)-(5), did any of the transa Regulations section 53 4945 or in a current notice regardi	ng disaster assistanc	e (see page 22 of the i	nstructions)?	5ь		
c	Organizations relying on a current notice regarding disaster If the answer is "Yes" to question 5a(4), does the foundation	on claim exemption f	om the tax				
	because it maintained expenditure responsibility for the gr If "Yes," attach the statement required by Regulations section	on 53 4945-5(d)		Yes No			
	Did the foundation, during the year, receive any funds, dire on a personal benefit contract?						v
	Did the foundation, during the year, pay premiums, directly If "Yes" to 6b, file Form 8870.				6b		X
	At any time during the tax year, was the foundation a part				-	ļ	
	If "Yes," did the foundation receive any proceeds or have a					<u> </u>	L
	Information About Officers, Directors, and Contractors		_		-		
	List all officers, directors, trustees, foundation mar				ctions).		
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expen other al		
EE	STATEMENT 7		36,345.	-0-		-0-	
							_ _ _
	Compensation of five highest-paid employees (oth f none, enter "NONE."	er than those incl	uded on line 1 - see	page 23 of the inst	ructions).		
(a)	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expen other al	ise acco llowance	
ON	E		NONE	NONE	1	ONE	
			·- <u>-</u>				
					_		

Part VIII	Information About Officers, Directors, Trustees, Foundation Ma and Contractors (continued)	nagers, Highly Paid Emplo	yees,
3 Five h	ighest-paid independent contractors for professional services (see page	e 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
NONE			NONE
Total numb	er of others receiving over \$50,000 for professional services		NONE
			NONE
Part IX-A	Summary of Direct Charitable Activities		
	dation's four largest direct charitable activities during the tax year include relevant statistical and other beneficiaries served, conferences convened, research papers produced, etc.	information such as the number of	Expenses
1NONE			
INONE_			
			
2		-	
3			-
4			
			
Part IX-B	Summary of Program-Related Investments (see page 24 of the in	nstructions)	
	two largest program-related investments made by the foundation during the tax year on lines 1 a	nd 2.	Amount
1NONE_			
			
2			
All other prod	gram-related investments. See page 24 of the instructions.		
3NONE			
Total Add I	inco 1 through 2		

Page 7

Page 8

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	gn foundati	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	1	
	purposes:	.	
а	Average monthly fair market value of securities	1a	3,200,411.
Ь	Average of monthly cash balances	1b	NONE
c	Fair market value of all other assets (see page 25 of the instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	3,200,411.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	, ,	
2	Acquisition indebtedness applicable to line 1 assets	2	NONE
3		3	3,200,411.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see page 25 of	 	
	the instructions)	4	48,006.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,152,405.
6	Minimum investment return. Enter 5% of line 5	6	157,620.
Pa	The XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privation foundations and certain foreign organizations check here ▶ □ and do not complete this privation.	te operating	
1	Minimum investment return from Part X, line 6	1	157,620.
2a	Tax on investment income for 2010 from Part VI, line 5		
Ь	Income tax for 2010. (This does not include the tax from Part VI.) 2b	1	
С	Add lines 2a and 2b	2c	701.
3	Distributable amount before adjustments. Subtract line 2c from line 1		156,919.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	156,919.
6	Deduction from distributable amount (see page 25 of the instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	156,919.
Pa	rt XII Qualifying 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	262,135.
ь		1b	
2	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	NONE
3	Amounts set aside for specific charitable projects that satisfy the.		
a	Suitability test (prior IRS approval required)	3a	NONE
Ь	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	262,135.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		2021233.
_	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	701.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	261,434.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when cal	<u> </u>	
	qualifies for the section 4940(e) reduction of tax in those years.	octoring with	caid. the loanestion

Form 990-PF (2010)

		(a)	(b)	(c)	(d)
1	Distributable amount for 2010 from Part XI,	Corpus	Years prior to 2009	2009	2010 156,919.
2	Undistributed income, if any, as of the end of 2010.	,			1301313.
ے a	Enter amount for 2009 only		-	NONE	•
	Total for prior years 20 08 , 20, 20		NONE		1
3	Excess distributions carryover, if any, to 2010.				
а	From 2005 NONE		-		
ь	From 2006 NONE		. 4		
c	From 2007 NONE				
d	From 2008 NONE		'	,	
е	From 2009 25,168.			1	
f	Total of lines 3a through e	25,168.			
4	Qualifying distributions for 2010 from Part XII,				
	line 4 ▶ \$ 262,135.				
а	Applied to 2009, but not more than line 2a	` ' '		NONE	
U	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)		NONE	,	
_	Treated as distributions out of corpus (Election		1		
·	required - see page 26 of the instructions)	NONE			
d	Applied to 2010 distributable amount	,			156,919.
e	Remaining amount distributed out of corpus	105,216.	-	,	<u> </u>
5	Excess distributions carryover applied to 2010	NONE			NONE
	(If an amount appears in column (d), the same		4	·	
6	amount must be shown in column (a)) Enter the net total of each column as	,			
0	indicated below:	,			
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	130,384			
_ _	Prior years' undistributed income. Subtract	,			
٥	line 4b from line 2b		NONE	1	
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		NONE		
А	Subtract line 6c from line 6b. Taxable				
ď	amount - see page 27 of the instructions	r	NONE		•
e	Undistributed income for 2009. Subtract line				
	4a from line 2a. Taxable amount - see page 27 of the instructions		,	NONE	
f	Undistributed income for 2010. Subtract lines 4d and 5 from line 1. This amount must be	`	,		
	distributed in 2011	·			NONE
7	Amounts treated as distributions out of corpus	-			
	to satisfy requirements imposed by section		ļ		
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)	NONE	l		
8	Excess distributions carryover from 2005 not				
•	applied on line 5 or line 7 (see page 27 of the	NONE		,	-
•	instructions)	-:			
_	instructions)				
9	instructions)	130,384.			
9	Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	130,384.			
9	Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	130,384.			
9 10 a	Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a Analysis of line 9 Excess from 2006 NONE	130,384.			-
9 10 a b	Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a Analysis of line 9 Excess from 2006	130,384.			<u>-</u>
9 10 a b	Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a Analysis of line 9 Excess from 2006 NONE	130,384.			

SEE ATTACHED STATEMENT FOR LINE 2

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SEE ATTACHED STATEMENT FOR LINE 2

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c Any submission deadlines:

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

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

Page **11**

Part XV Supplementary Information (continued)	and for E	iutura Paymant	
3 Grants and Contributions Paid Durin	If recipient is an individual,			
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		
a Talo during the year				
SEE STATEMENT 12				
Total				256,000.
b Approved for future payment				
		1		
			▶ 3b	
				1

		cing Activ	11100			
-	amounts unless otherwise indicated.		ited business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
		(a)	(b)	(c)	(d)	function income
1 Program	service revenue:	Business code	Amount	Exclusion code	Amount	(See page 28 of the instructions.)
а						
b				<u>.</u>		
c						
d						
е						
f						
g Fees	and contracts from government agencies					
2 Member	ship dues and assessments					
	n savings and temporary cash investments			ļ. <u>.</u> .		
	ds and interest from securities			14	94,294.	
	al income or (loss) from real estate			ļ		
	-financed property		<u> </u>	 		
	debt-financed property			 		
	l income or (loss) from personal property .			 		
	vestment income			10	0.701	
	oss) from sales of assets other than inventory			18	8,701.	
	me or (loss) from special events	_				
	ofit or (loss) from sales of inventory					
	venue a		· · · · · · · · · · · · · · · · · · ·			
				 		
e	l. Add columns (b), (d), and (e)			1	102,995.	
	dd line 12, columns (b), (d), and (e)			'		
	leet in line 13 instructions on page 29 to					
Part XVI-				empt Purp	oses	
Line No.	Explain below how each activit accomplishment of the foundation					
	instructions.)					
						
	J.,					
			NOT ADDITION	P		
			NOT APPLICABL	E		
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			NOT APPLICABL	E		

Form 99	0-PF (2)	010)					<u> 26-67000</u>	47		Pa	aga 13
Part 2	XVII	Information Exempt Orga		ransfers To an	d Transa	ctions	and Relat	tionships With	Nonc	harit	able
1 D	nd the	organization directl	ly or indirectly e	engage in any of	the followin	g with	any other or	ganization describe	д	Yes	No
		on 501(c) of the C									
0	rganiza	itions?								1	ł
a T	ransfer	s from the reporting fo	oundation to a none	charitable exempt or	ganization of				ŀ		
(1) Casi	h				.			. 1a(1)	Ų	X
(2	2) Oth	er assets							. 1a(2)	<u> </u>	X
b 0	ther tra	ansactions							,	1	١.
		es of assets to a nonch)	X
		chases of assets from a									X
(3	3) Ren	tal of facilities, equipm	nent, or other asset	s			<i></i>		. 1b(3)	1	X
(4	4) Rein	nbursement arrangem	ents						. 1b(4)	 	X
		ns or loan guarantees									X
(6	6) Perf	ormance of services of	r membership or fu	ndraising solicitation	s				. 1b(6)	<u> </u>	X
	-	of facilities, equipmen	_							<u> L</u>	X
d If	the	answer to any of	the above is "Y	es," complete the	following s	chedule.	Column (b)	should always sh	ow the	faır	marke
		f the goods, other		= :							
_	T	n any transaction o									
(a) Line	no	(b) Amount involved	(c) Name of no	oncharitable exempt org	anization	(d) De	escription of trans	fers, transactions, and s	haring arra	angeme	ents
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	-+	· · · -									
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							· · · · · · · · · · · · · · · · · · ·				
		foundation directly d in section 501(c) of						-	\Box	es	Ψ No.
		complete the following		BIT 30011011 50 1(0)(5))	or in section	327.			L '	es [<u>교</u> 140
	163,	(a) Name of organization	~	(b) Type of o	organization			(c) Description of relat	onship		
	_	.,						.,			
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								, ,			
Sign		r penalties of perjury, I d									
Here		Oph 7	2000		10	2/20/	2011	TRUSTEE			
	Si	grature of officer or truste	ee U.S. BANK	NA	Date	-,,		îtle			
		Print/Type preparer's		Preparer's signat			Date		PTIN		
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Paid								self-employe			
Prepa	rer	Firm's name		<u> </u>				Firm's EIN ▶	1	_	
Use C	Only	Firm's address						THIT SERV		-	
								I			

Phone no.

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

Schedule of Contributors

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

OMB No 1545-0047

2010

Internal Revenue Service Name of the organization Employer identification number JOHN AND MARY JANE LEE CHARITABLE FOUNDATION 26-6700047 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 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)

	(Form 990, 990-EZ, or 990-PF) (2010)		Page of of Part
	rganization AND MARY JANE LEE CHARITABLE FOUNDATION		Employer Identification number 26-6700047
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1_	MARY J LEE TRUST AGMT # 290340B US BANK NA PO BOX 387 ST LOUIS, MO 63166	\$222,782	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.)
(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

(Complete Part II if there is a noncash contribution.)

Noncash

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Name of estate or trust

Capital Gains and Losses

► 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).

OMB No. 1545-0092

Employer identification number

2010

JOHN AND MARY JANE LEE CHARITABLE FOUNDATION 26-6700047 Note: Form 5227 filers need to complete only Parts I and II. Short-Term Capital Gains and Losses - Assets Held One Year or Less (f) Gain or (loss) for (a) Description of property (Example 100 shares 7% preferred of "Z" Co.) (b) Date acquired (c) Date sold (e) Cost or other basis (d) Sales price the entire year Subtract (e) from (d) (mo., day, yr.) (mo, day, yr.) (see instructions) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts 3 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2009 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back . . Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold (e) Cost or other basis (d) Sales price the entire year Subtract (e) from (d) (Example 100 shares 7% preferred of "Z" Co) (mo., day, yr.) (mo, day, yr) (see instructions) LONG-TERM CAPITAL GAIN DIVIDENDS STMT 1 8,692. **b** Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b............. 6b Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 Capital gain distributions Gain from Form 4797, Part I 10 10 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2009 Capital Loss Net long-term gain or (loss). Combine lines 6a through 11 in column (f). Enter here and on line 14a,

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2010

_	dule D (Form 1									Page 2
Par		ummary of Parts I and		, -		(1) Bene		(2) Es		(3) Total
		aution: Read the instru				(see i	nstr.)	or tru	ıst's	(0) 10(a)
13		term gain or (loss)			13					
14	_	erm gain or (loss):					}			
		ear								8,701.
		red section 1250 gain (se								
		gain								
		gain or (loss). Combine li								8,701.
		column (3), is a net gain, ente not complete Part IV If line 1								
Par	t IV Ca	pital Loss Limitation							· 	
16		and enter as a (loss) on F								
_ a	The loss o	n line 15, column (3) or on line 15, column (3), is mo	b \$3,000						16 ()
Carn	: If the loss	on line 15, column (3), is mo eet on page 7 of the instructi	ore than \$3,000, or	of Form 1041,	page 1, lin	e 22 (or Foi	m 990-T, li	ne 34), is a	loss, cor	mplete the Capital Loss
Par		x Computation Using								
		rs. Complete this part onl	-			l are daine	or on on	ount is or	torad ir	Doet Lor Doet II and
		on Form 1041, line 2b(2					, 01 all all	iount is er	iterea ii	raitioi raitii anu
		nis part and complete the								
	•	b, col. (2) or line 14c, col.								
 Bo 	oth Form 10	141, line 2b(1), and Form	4952, line 4g are	more than ze	ero.					
		ists. Complete this part								
		and Form 990-T, line 34			s part and	complete	the works	heet on p	age 8	of the instructions if
eithe	er line 14b,	col. (2) or line 14c, col. (2	2) is more than ze	ro.						
17	Enter taxa	ble income from Form 10	41, line 22 (or Fo	orm 990-T, lir	ne 34)	. 17				
18	Enter the s	smaller of line 14a or 15	in column (2)						1	
	but not les	s than zero		18					1 1	
19		estate's or trust's qualified								
		1041, line 2b(2) (or enter							1	
		icluded in income in Part I of		19		1 1			1 1	
20		18 and 19		20		-			1 1	
21		e or trust is filing Form 4				- 1 1				
		om line 4g, otherwise, ent		21					1 1	
22		ne 21 from line 20. If zero		- · · · · · · · · · · · · · · · · · · ·		22			-	
23		ne 21 from line 20. If zero	·			· ·			1	
23	Subtract II	he 22 from tine 17. It zero	or less, enter -0-			23			1	
24	F		l 47 40 000	_					l i	
24		smaller of the amount on				24		-	-	
25		unt on line 23 equal to or								
		Skip lines 25 and 26; go								
		inter the amount from line				25			1	
26		ne 25 from line 24				26			1	
27		nounts on lines 22 and 26				1 1				
	Yes.	Skip lines 27 thru 30, go to line 31	No. Enter the	e smaller of line 17	7 or line 22	27			!	
28	Enter the a	amount from line 26 (If lin	ie 26 is blank, ent	ter -0-)		28				
29						. 29			1	
30	Multiply lir	ne 29 by 15% (.15)							30	
31	Figure the	tax on the amount on	line 23. Use the	2010 Tax	Rate Sche	edule for E	states an	d Trusts		
	(see the So	chedule Ginstructions in	the instructions fo	or Form 104	1)	<i></i>			31	
						·	•			
		30 and 31							ı I	
32	Add lines :	o anu o i							32	
32 33		tax on the amount on			Rate Sche	 edule for E	states an	 d Trusts	32	
	Figure the	tax on the amount on chedule G instructions in	line 17. Use the	2010 Tax	Rate Sche	edule for E	states an	d Trusts	32	

Page 2

Name of estate or trust as shown on Form 1041 Do not	enter name and employ	er identification number	if shown on the other side	Employer identifi	cation number
JOHN AND MARY JANE LEE CHA	RITABLE FOUN	DATION		26-67000	47
Part Long-Term Capital Gains and	Losses - Assets	Held More Tha	n One Year		
(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo., day, yr)	(d) Sales price	(e) Cost or other basis (see instructions)	(f) Gain or (loss) Subtract (e) from (d)
6a . BANK OF AMERICA SECURITY				-	
LITIGATION		09/19/2011	9.00		9.00
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Ch. Total. Combine the emounts in column.	/f) Enter here and	an Cahadula D. lin	a Ch		م م م

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F, PART	
F, PART	
F, PART	
1 990PF, PART	
RM 990PF, PART	
1 990PF, PART	
RM 990PF, PART	

CHARITABLE	FURFUSES	2,500.
ADJUSTED NET		NONE
NET INVESTMENT	TINCOME	NONE
REVENUE AND EXPENSES	FER BOOKS	2,500.
		(NON-ALLOC TOTALS
KO THE TEST	DESCRIPTION	TAX PREPARATION FEE (NON-ALLOC

- TAXES	
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NET INVESTMENT INCOME	1 1 1 1	174.	174.
REVENUE AND EXPENSES PER BOOKS	1 1 1 1 1 1 1 1	1,189.	1,363.
			TOTALS
DESCRIPTION		FEDERAL EXCISE TAXES FOREIGN TAXES PAID	

7

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FORM 990PF, P.	

ENDING ENDING BOOK VALUE FMV
DESCRIPTION

JOHN AND MARY JANE LEE CHARITABLE FOUNDATION

POCK	====
CORPORATE ST	
- II	
PART	
_	ï

DESCRIPTION	ENDING BOOK VALUE	ENDING FMV
ISHARES DJ US REAL ESTATE ETF ISHARES MSCI EMERGING MKTS ETF ISHARES RUSSELL 1000 GROWTH FD ISHARES RUSSELL 1000 VALUE ETF MIDCAP SPDR TRUST SER 1 TECHNOLOGY SELECT SECTOR SPDR VANGUARD TOTAL STOCK MKT ETF NUVEEN INFLATION PRO SEC NUVEEN INTERMEDIATE TERM B BEAM INC	62,320. 54,507. 206,316. 234,862. 92,512. 54,828. 309,141. 100,000. 250,000. 23,583. 6,558.	57,240. 61,223. 233,040. 220,745. 104,910. 65,025. 321,400. 118,303. 268,149. 24,715. 7,265.
TOTALS	2,908,274.	3,008,361.

4

STATE(S) WHERE THE FOUNDATION IS REGISTERED MO

. JOHN AND MARY JANE LEE CHARITABLE FOUNDATION

26-6700047

FORM 990PF, PART VII-A - NEW SUBSTANTIAL CONTRIBUTORS

NAME AND ADDRESS

MARY J LEE TRUST AGMT # 290340B US BANK NA PO BOX 387 ST LOUIS, MO 63166

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

OFFICER NAME:

US BANK NA

ADDRESS:

PO BOX 387

ST LOUIS, MO 63166

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

COMPENSATION 36,345.

OFFICER NAME:

JAMES HITCHCOCK

ADDRESS:

3800 LINDELL BLVD

ST LOUIS, MO 63108

TITLE:

COMMITTEE MEMBER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

OFFICER NAME:

MICHAEL HOUSER

ADDRESS:

330 FIRST CAPITOL DRIVE STE 260

ST CHARLES, MO 63301

TITLE:

COMMITTEE MEMBER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

OFFICER NAME:

DONALD BINZ

ADDRESS:

9201 CHERRY BROCK LANE

ST LOUIS, MO 63126

TITLE:

COMMITTEE MEMBER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

JOHN AND MARY JANE LEE CHARITABLE FOUNDATION

26-6700047

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

OFFICER NAME:

GREGORY KIRSCH

ADDRESS:

826 NORTH ORANGE GROVE AVENUE

LOS ANGELES, CA 90024

TITLE:

COMMITTEE MEMBER

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 0

TOTAL COMPENSATION:

36,345.

JOHN AND MARY JANE LEE CHARITABLE FOUNDATION FORM 990PF, PART XV - LINES 2a - 2d

RECIPIENT NAME:

CAROL EAVES

ADDRESS:

US BANK NA 10 NORTH HANLEY

CLAYTON, MO 63105

RECIPIENT'S PHONE NUMBER: 314-505-8204

FORM, INFORMATION AND MATERIALS:

CONTACT THE ABOVE

SUBMISSION DEADLINES:

CONTACT THE ABOVE

RESTRICTIONS OR LIMITATIONS ON AWARDS:

CONTACT THE ABOVE

JOHN AND MARY JANE LEE CHARITABLE FOUNDATION 26-6700047 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID

RECIPIENT NAME:

ADOREMUS - SOCIETY FOR THE RENEWAL OF THE SACRED LITURGY

ADDRESS:

6549 DALE AVENUE

ST LOUIS, MO 63139

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EXEMPT PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

AMOUNT OF GRANT PAID 9,500.

RECIPIENT NAME:

BIRTHRIGHT OF ST CHARLES INC

ADDRESS:

205 NORTH 5TH STREET STE 307

ST CHARLES, MO 63301

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EXEMPT PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

BIRTHRIGHT COUNSELING ST LOUIS

ADDRESS:

2525 S BRENTWOOD STE 102

ST LOUIS, MO 63144

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EXEMPT PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

 RECIPIENT NAME:

DAUGHTERS OF ST PAUL INC

ADDRESS:

9804 WATSON ROAD

ST LOUIS, MO 63126

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EXEMPT PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

FELLOWSHIP OF CATHOLIC SCHOLARS

C/O FORDAM UNIVERSITY

ADDRESS:

441 EAST FORDAM ROAD

BRONX, NY 10458

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EXEMPT PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

RECIPIENT NAME:

NATIONAL COUNCIL OF THE US

SOCIETY OF ST VINCENT DE PAUL

ADDRESS:

58 PROGRESS PARKWAY

ST LOUIS, MO 63043-3706

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

EXEMPT PURPOSE

FOUNDATION STATUS OF RECIPIENT:

PUBLIC

 JOHN AND MARY JANE LEE CHARITABLE FOUNDATION 26-6700047 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: DIOCESE OF KANSAS CITY - ST JOSEPH ADDRESS: 300 E 36TH STREET KANSAS CITY, MO 64111 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 7,500. RECIPIENT NAME: MOTHER OF GOOD COUNSEL HOME ADDRESS: 6825 NATURAL BRIDGE ST LOUIS, MO 63121 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC AMOUNT OF GRANT PAID 100,000. RECIPIENT NAME: RELIGIOUS SISTERS OF MERCY ALMA MI ADDRESS: 1965 MICHIGAN AVENUE ALMA, MI 48801 RELATIONSHIP: NONE PURPOSE OF GRANT: EXEMPT PURPOSE FOUNDATION STATUS OF RECIPIENT: PUBLIC TOTAL GRANTS PAID: 256,000.

===========

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

Kind of F	roperty	Description				P or D	Date acquired	Date sold	
Gross sale	Depreciation	Cost or	FMV	Adj. basis	Excess of	怡	Gain		
price less	allowed/	other	as of	as of	FMV over	П	or		
expenses of sale	allowable	basis	12/31/69	12/31/69	adı basıs	Н	(loss)		
		TOTAL LONG-	TERM CAPITA	L GAIN DIV	IDENDS		8,692.		
9.00		. BANK OF AI	MERICA SECU PE: SECURIT	RITY LITIGA	ATION		9.00	09/19/2011	
3.00							9.00		
TOTAL GAIN(L	oss)						8,701.		
							========		
-									
	!								

FEDERAL CAPITAL GAIN DIVIDENDS

LONG-TERM CAPITAL GAIN DIVIDENDS

15% RATE CAPITAL GAIN DIVIDENDS

TOTAL 15% RATE CAPITAL GAIN DIVIDENDS

TOTAL LONG-TERM CAPITAL GAIN DIVIDENDS

8,692.00

8,692.00

=========
