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

OMB No. 1545-0052

2011

Ξ					2011		-		
		endar year 2011 or tax year beginnin			, 2011,	, and endin	ıg _		, 20
		of foundation MARJORIE HARRIS		DS FDN			- 14	A Employer identif	ication number
ERIC & JANNA ODDLEIFSON, TRUSTEES								04-	-6820699
	ERIC & JANNA ODDLEIFSON, TRUSTEES Number and street (or P O box number if mail is not delivered to street address) Room/suite						e i	B Telephone numb	
C/O ATLANTIC TRUST CO 100 FEDERAL ST, 37TH							(617) 357-9600		
		r town, state, and ZIP code							
	-						ا	If exemption applica	ntion is
	BOS'	TON, MA 02110						pending, check here	
G	Che	ck all that apply: Initial return		Initial return	of a former p	ublic chari	y r) 1 Foreign organizat	trons chack here
		Final return	ſ	Amended ret	urn		` `	2 Foreign organizat	
		Address chang	أم	Name change	•			85% test, check h	nere and attach
Н	Cho	ck type of organization. X Section 5					\dashv	computation •	• • • • • • • • • • • • • • • • • • • •
ï							E	If private foundation	status was terminated
		ection 4947(a)(1) nonexempt charitable trus		Other taxable pri				under section 507(b	o)(1)(A), check here . >
i			٦ .	g method: X Ca	esh Acc	ruai	F		in a 60-month termination
		ear (from Part II, col (c), line		specify)			_	under section 507(b	o)(1)(B), check here . >
_				mn (d) must be oi	n cash basis.)				
G	art I	Analysis of Revenue and Expenses	The) Revenue and					(d) Disbursements
		total of amounts in columns (b), (c), and (d, may not necessarily equal the amounts in		expenses per	(b) Net inve		(c)	Adjusted net income	for charitable
		column (a) (see instructions))	1	books	nicon	ie .		income	purposes (cash basis only)
_	1		. —	50,000.				***	(Casir basis offiy)
		Contributions, gifts, grants, etc., received (attach schedule		50,000.					
	2	Check Lattach Sch B	· ·						
	3	Interest on savings and temporary cash investmen	its						
	4	Dividends and interest from securities	· ·	53,164.	5	3,164.			STMT 1
	5a	Gross rents							
	ь	Net rental income or (loss)							
es.	6a	Net gain or (loss) from sale of assets not on line 1	o	37,661.					,
Ē	Ь	Gross sales price for all assets on line 6a 208, 81	9.		,				
Revenue	7	Capital gain net income (from Part IV, line 2			3	7,661.			· -
æ	8	Net short-term capital gain				.,		· · ·	3 V
		Income modifications							· · · · · · · · · · · · · · · · · · ·
					,				
		and allowances · · · ·							
	1	Less Cost of goods sold .							, , , , , , , , , , , , , , , , , , ,
	С	Gross profit or (loss) (attach schedule)							·
	11	Other income (attach schedule)		1,592.		2,260.			STMT 2
_	12	Total. Add lines 1 through 11		142,417.	9	3,085.			
	13	Compensation of officers, directors, trustees, etc							
	14	Other employee salaries and wages	L						
nses	15	Pension plans, employee benefits							
3ns		Legal fees (attach schedule)							
Expe	•	Accounting fees-(attach schedule)	· ·						
		Other professional fees (attach school)	; · ├──	14,001.	1	0,500.			3,500
Operating and Administrative		Interest	· -	11,001.		0,300.	_		3,300
trai	17		;	9,694.		519.			
nis.	18	Taxes (attach schedule) (see instructions) STMT. Depreciation (attach schedule) and depletic	* · 	3,034.		217.			
Ē	19		n .						<u> </u>
Adi	20	Occupancy	· ·		 		_		
ğ	21	Travel, conferences, and meetings	.∙.						
a	22	Printing and publications		_					
В	23	Other expenses (attach schedule) STMT.	5		,	3,047.			
ati	24	Total operating and administrative expens	es.						
ber		Add lines 13 through 23	- 1	23,695.	1	4,066.			3,500
ō	25	Contributions, gifts, grants paid		122,750.		7.55			122,750
	26	Total expenses and disbursements Add lines 24 and	·.:	146,445.	1	4,066.		, -	126,250
_			23	170,443.	<u>†</u>	7,000.			140,430
	27	Subtract line 26 from line 12		4 000					
	I	Excess of revenue over expenses and disbursements	: :	-4,028.	<u>=</u>	0.05.5			
	Į.	Net investment income (if negative, enter			<u> </u>	9,019.			
_	C	Adjusted net income (if negative, enter -0-)							
Fo	or Pap	erwork Reduction Act Notice, see instruct	ons.			JSA			Form 990-PF (2011)

For Paperwork Reduction Act Notice, see instructions.

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Part	II Ralanca Shoots	Attached schedules and amounts in the description column should be for end-of year	Beginning of year	End	of year '	
	Datance Offices	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
1	Cash - non-interest-bear	ring				
2	•	cash investments	40,486.	102,213	102,213	
3	Accounts receivable					
	Less allowance for dou	ıbtful accounts ▶				
4	Pledges receivable				, , , ,	
	Less allowance for dou	ibtful accounts			, -	
5				-	-	
6		officers, directors, trustees, and other		<u> </u>		
	disqualified persons (at	tach schedule) (see instructions)				
7		receivable (attach schedule)				
1		ibtful accounts		•	-	
8		ise				
<u>د</u> ا						
Assets 10		deferred charges		· · · · · · · · · · · · · · · · · · ·		
ا ا		te government obligations (attach schedule)	1 111 005	1 040 020	1 166 240	
		e stock (attach schedule) STMT 6	1,111,805.	1,048,030		
11	Investments - land, buildin and equipment basis Less accumulated deprec		251,239.	251,685	5. 251,280	
1.2	(attach schedule)					
12 13 14	Investments - other (att	e loans	300,000.	300,000	276,645	
	Less accumulated deprec	lation >			<i>'</i>	
15	(attach schedule) Other assets (describe)	► STMT 9)	2,699.	271	2,371	
16		completed by all filers - see the	2/33.		2/3/1	
.0		page 1, item I)	1,706,229.	1,702,199	1,798,857	
17		accrued expenses		1,702,172	1,750,857	
18		F			- -}	
- 1					\dashv	
န္မ 19						
20 21 21	·	ors, trustees, and other disqualified persons			┥ , , ~^,	
물 21		otes payable (attach schedule)				
- 22	Other liabilities (describ	pe ▶)				
					~ ,	
23		es 17 through 22)			-	
	and complete lines	llow SFAS 117, check here ► 24 through 26 and lines 30 and 31.				
24 25 26					⊣ , '	
[25	• •				_	
മുമാ	Permanently restricted				4 5.20	
Fund		o not follow SFAS 117,				
	check here and con	nplete lines 27 through 31. $\blacktriangleright X$				
් 27	Capital stock, trust prin	ncipal, or current funds	1,706,229.	1,702,199	9.	
Assets 29	Paid-in or capital surplus,	or land, bldg , and equipment fund				
S 29	Retained earnings, accumi	ulated income, endowment, or other funds				
∑ 30	Total net assets or fur	nd balances (see instructions)	1,706,229.	1,702,199	.	
2 30 31		d net assets/fund balances (see				
	instructions)		1,706,229.	1,702,199		
Part		nanges in Net Assets or Fund		_,,,		
		balances at beginning of year - Part		nust agree with		
				-	1,706,229.	
	iter amount from Part I,				1 100	
						
		n line 2 (itemize) SEE STAT	PEMENT 10			
				luna 20		
ا ب	rai liet assets of Ialia D	alances at end of year (line 4 minus lir	ie 3) - raijuu, column (D),	line 30 6	1,702,199.	

(a) List and	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)
1a PUBLICLY TRADED	SECURITIES		ļ		
<u>b</u>					
<u>c</u>			 		
<u>d</u>					
<u>e</u>	(6) Degravation allowed	(g) Cost or other basis		# \ C \ #	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus expense of sale	1	(h) Gain or (lo (e) plus (f) min	
a 189,739.		171,158.	 		18,581.
b				··	20/301.
С			·		
d					· · · · · · · · · · · · · · · · · · ·
е					
Complete only for assets s	showing gain in column (h) and own	ed by the foundation on 12/31/69	(1)	Gains (Col (h) g	aın minus
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		(k), but not less Losses (from co	than -0-) or
а					18,581.
b					
С	<u></u>				
d	L				
e	L.,		ļ		
2 Capital gain net income or	(net capital loss)	If gain, also enter in Part I, line 7			
	or (loss) as defined in sections	If (loss), enter -0- in Part I, line 7	2	·	37,661.
If gain, also enter in Par Part I, line 8	rt I, line 8, column (c) (see in	nstructions) If (loss), enter -0- in $\}$	3	-·	
	·	tributable amount of any year in the b	ase perio	d?	Yes X No
		ar, see the instructions before making	any ontr		
(a)			any entr	(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	-	Distribution ra	
2010	118,663	. 1,761,921.	 	(cor (b) divided by	0.067349
2009	139,686		 		0.088837
2008	136,000				0.067673
2007	163,348				0.068388
2006	105,958				0.048929
				_	
2 Total of line 1, column (d))		2		0.341176
3 Average distribution ratio	for the 5-year base period - divide	de the total on line 2 by 5, or by the			
number of years the found	dation has been in existence if le	ess than 5 years	3		0.068235
4 Enter the net value of non	ncharitable-use assets for 2011	from Part X, line 5	4	:	1,878,420
			5		128,174
)			790
				<u></u>	1 711
7 Add lines 5 and 6					
		ox in Part VI, line 1b, and complete			128,964

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

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Х

X

Χ

and addresses .

	<u> </u>
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise
	at any time during the year?
b	If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the
	foundation had excess business holdings in 2011)

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

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 2011? .

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4a

2b

X

Χ

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

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "	NONE "
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "I (a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
(a) Type of Service	(c) compensation
NONE	NONE
NOINE	NONE
Total number of others receiving over \$50,000 for professional services	. ► NON
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 numb organizations and other beneficiaries served, conferences convened, research papers produced, etc.	er of Expenses
1NONE	
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
1NONE	
2	
All other program-related investments. See instructions	
, .	
3 NONE	
3 NONE	
3 NONE	

Pai	rt X Minimum Investment Return (All domestic foundations must complete this part. Foreig see instructions.)	n found	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	1,907,025.
b	Average of monthly cash balances	1b	NONE
C	Fair market value of all other assets (see instructions)	1c	NONE
d	Total (add lines 1a, b, and c)	1d	1,907,025.
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	and the state of t	3	1,907,025.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	28,605.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,878,420.
6	Minimum investment return. Enter 5% of line 5	6	93,921.
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ and do not complete this p	art)	
1	Minimum investment return from Part X, line 6	1	93,921.
2a	Tax on investment income for 2011 from Part VI, line 5		
b		,	
	Add lines 2a and 2b	2c	1,580.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	92,341.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	92,341.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	92,341.
Pa	rt XII Qualifying Distributions (see 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	126,250.
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	2	NONE
3	purposes Amounts set aside for specific charitable projects that satisfy the:	2	NONE
э a		3a	NONE
b		3b	NONE
4	Cash distribution test (attach the required schedule) Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	NONE 126 250
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	*	126,250.
J		5	N/A
6	Enter 1% of Part I, line 27b (see instructions) Adjusted qualifying distributions. Subtract line 5 from line 4	6	126,250.
J	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calc		
	qualifies for the section 4940(e) reduction of tax in those years	uiating	whether the foundation

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_	1 990-PF (2011) 1 XIII Undistributed Income (see instru	ctions)			Page 9
	Charles and the control of the contr	(a)	(b)	(c)	(d)
1	Distributable amount for 2011 from Part XI,	Corpus	Years prior to 2010	2010	2011
	line 7	÷, ,	·	,	92,341.
2	Undistributed income, if any, as of the end of 2011	,			
а	Enter amount for 2010 only			NONE	
b	Total for prior years 20 09 , 20, 20		NONE		
3	Excess distributions carryover, if any, to 2011	· · · · · · · · · · · · · · · · · · ·		. ,	
а	From 2006				
b	From 2007				
C	From 2008				
d	From 2009	,			
е	From 2010	,			
f	Total of lines 3a through e	189,847.			
4	Qualifying distributions for 2011 from Part XII,				
	line 4 ▶ \$ 126,250.				
а	Applied to 2010, but not more than line 2a			NONE NONE	
b	Applied to undistributed income of prior years			•	
	(Election required - see instructions)	1	NONE		
С	Treated as distributions out of corpus (Election				
	required - see instructions)	NONE			
đ	Applied to 2011 distributable amount				92,341.
e	Remaining amount distributed out of corpus	33,909.			·
5	Excess distributions carryover applied to 2011	NONE			NON!
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	223,756.		, ,	
b	Prior years' undistributed income Subtract	,	NONE		-
c	line 4b from line 2b		INOINE		
٠	income for which a notice of deficiency has been			~	
	issued, or on which the section 4942(a) tax has		NONE		
	been previously assessed		NOIVE	, , , -	
d	Subtract line 6c from line 6b Taxable		NONE		•
e	amount - see instructions		NONE	<u> </u>	<u></u>
	4a from line 2a Taxable amount - see			NONE	
	instructions	_		, NONE	
f	Undistributed income for 2011 Subtract lines				
	4d and 5 from line 1 This amount must be distributed in 2012		, i		NONE
,					NOM
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)	NONE			
8	Excess distributions carryover from 2006 not				
٥	applied on line 5 or line 7 (see instructions)	5,411.			
9	Excess distributions carryover to 2012				
3	Subtract lines 7 and 8 from line 6a	218,345.			
10	Analysis of line 9				
	Excess from 2007				
	Excess from 2008				
	Excess from 2009				
	Excess from 2010				
	Excess from 2011				

Pai	t XIV Private Oper	ating Foundations	see instructions and	d Part VII-A, question	າ 9)	NOT APPLICABL		
1 a	If the foundation has	received a ruling or d	etermination letter tha	t it is a private opera	ating			
	foundation, and the ruling	is effective for 2011, en	ter the date of the ruling		. ▶			
b	Check box to indicate who		private operating founda		49420	j)(3) or 4942(j)(5)		
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	Υ	(e) Total		
	justed net income from Part I or the minimum investment	(a) 2011	(ы) 2010	(c) 2009	(d) 2008	ļ		
	return from Part X for each year listed							
ь	85% of line 2a							
c	Qualifying distributions from Part							
d	XII line 4 for each year listed . Amounts included in line 2c not							
Ū	used directly for active conduct of exempt activities							
е	Qualifying distributions made							
	directly for active conduct of exempt activities Subtract line 2d from line 2c							
3	Complete 3a, b, or c for the					· · · · · · · · · · · · · · · · · · ·		
а	"Assets" alternative test - enter							
_	(1) Value of all assets							
	(2) Value of assets qualifying							
	under section 4942(j)(3)(B)(i)				ļ			
b	"Endowment" alternative test-							
	enter 2/3 of minimum invest-							
	ment return shown in Part X, line 6 for each year listed							
С	"Support" alternative test - enter	· · · · · · · · · · · · · · · · · · ·						
	(1) Total support other than					1		
	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)							
	port from an exempt				1			
	organization							
Pa		ary Information (C	omplete this part	only if the founda	ation had \$5.000	or more in assets		
		during the year - see		•	,			
1	Information Regarding							
а	List any managers of before the close of any							
	NONE							
b	List any managers of			•	•	y large portion of the		
	ownership of a partner	ship or other entity) o	f which the foundation	n has a 10% or greater	ınterest.			
	NONE							
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarsh	ip, etc., Programs:				
	Check here ► X if t unsolicited requests for other conditions, comp	or funds If the found	ation makes gifts, gra	to preselected charit ints, etc (see instruct	able organizations a ions) to individuals o	and does not accept or organizations under		
a	The name, address, and telephone number of the person to whom applications should be addressed:							
	The form in which app	lications should be su	bmitted and informati	on and materials they	should include.			
С	Any submission deadli	nes·						
d	Any restrictions or li factors:	mitations on awards	, such as by geogra	aphical areas, charita	ble fields, kinds of	institutions, or other		

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid Duri Recipient	If recipient is an individual.	oved for F	uture Payment	
	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
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
		1		
SEE STATEMENT 18				
		1		
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	<u> </u>			
Total	· · · · · · · · · · · · · · · · · · ·		▶ 3a	122,750
b Approved for future payment		1		
		-		
		1		
			}	
	_ L	<u> </u>	<u> </u>	
Total	<u> </u>		▶ 3b	

er gross amounts unless otherwise indicated	Unrela	ted business income	Excluded by so	ection 512, 513, or 514	(e) Related or exempt
В.	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income
Program service revenue			Exclusion code	7,11100.11	(See instructions)
			 		
d					
e					
					•
-					
Membership dues and assessments			+		
nterest on savings and temporary cash investments			 		
Dividends and interest from securities			14	53,164.	
Net rental income or (loss) from real estate				1 /3	• , ,
Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income					
	1		18	37,661.	
Gain or (loss) from sales of assets other than inventory				31,001.	
Net income or (loss) from special events	ļ				
Gross profit or (loss) from sales of inventory					
Other revenue a					
·					
d					
eSubtotal Add columns (b), (d), and (e)	, ,		٠ .	90,825.	
■ Explain below how each activit accomplishment of the foundation	-	-			
		NOT APPLICAE	BLE		
		<u> </u>			
				<u> </u>	·

Form 99	0-PF (20						4-6820699				ge 1:
Part 2	XVII	Information R Exempt Organ		ansfers To and	Transact	ions and	Relationships Wi	th None	harit	able	;
in o a T () b () () () () () c S d II	n section reganizations for the section (1) Casion (2) Other to (1) Sale (2) Puro (3) Ren (4) Reir (5) Loan (6) Perf (5) Charing (5) the section (1) Casion	on 501(c) of the Continues of the reporting of the report	de (other than g foundation to charitable exer m a noncharital ment, or other ements s or membersh nent, mailing lis te above is "Ye	section 501(c)(3) a noncharitable exampt organization ble exempt organization assets up or fundraising so	xempt organization xempt organization xation collicitations paid emplo following s	ns) or in se	other organization dection 527, relating to	political			
			sharing arran		column (d)		of the goods, other ass				
c	describ		of the Code (d	other than section!			e tax-exempt organizat 5277		Ye	es []	No
	res,	(a) Name of organizatio			forganization		(c) Description	of relations	hip		
Sign	correct		are that I have exant foreparer tother than	nined this return, including	g accompanying ormation of which		statements, and to the best of ty knowledge	my knowledg May the IRS with the pre see instruction	e and b	s this	return
Paid Prepa Use (BETH SCHROED	ER ARSHALL &	ILSLEY TRUST	Sch	oeden NA	08/16/2012 self-e	mployed]			18_

53224

Form 990-PF (2011)

Phone no 414-815-3500

MILWAUKEE, WI

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2011

Name of the organization		Employer identification number							
MARJORIE HARRIS REYNO	MARJORIE HARRIS REYNOLDS FDN . 04-6820699								
Organization type (check one):	IDO IDO	1 04 0020033							
Filers of:	Section:								
riicis oi.	Section.								
Form 990 or 990-EZ	501(c)() (enter number) organization								
	4947(a)(1) nonexempt charitable trust not treated as a private four	ndation							
	527 political organization								
Form 990-PF	X 501(c)(3) exempt private foundation								
	4947(a)(1) nonexempt charitable trust treated as a private foundat	ion							
	501(c)(3) taxable private foundation								
Note Only a section 501(c)(7), (instructions.	ered by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a S	Special Rule. See							
General Rule									
	ing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 o e contributor Complete Parts I and II	r more (in money or							
Special Rules									
For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % 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, total 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 <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> 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 during the year									
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 Part I, 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) (2011)

Name of organization									
MARJORIE	HARRIS	REYNOLDS	FDN						

Employer identification number

MARJOR	RIE HARRIS REYNOLDS FDN .		04-6820699
Part I	Contributors (see instructions). Use duplicate copies of Pa	art I if additional space is need	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	GMO RENEWABLE RESOURCES LLC	\$ <u>50,000.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total 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) Total 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) Total 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) Total 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) Total contributions	- (d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

DESCRIPTION	REVENUE AND EXPENSES PER BOOKS	NET INVESTMENT INCOME
O DISCIPLINED EQUITY FIRE HATHAWAY FIN CORP	$\sigma \sigma_{0}$	4,099. 694.
EMERGING MARKETS DEBT LOCAL	− σ	~ o
ОД	788. 2,563.	788. 2,563.
STRATEGIES FUND CLASS I		. 4 ~
SACHS GROUP INC 5.125% DTI	, 28	, 28
N CHASE & CO ALERIAN MLP INDEX	$H \circ$	$H \circ$
LAZAKD EMEKGING MARKETS EQUITY PORT - IN MAINSTAY EPOCH GLOBAL EQUITY YIELD FUND	, o o o	, o o o
PACIFIC TIGER FD CL I	9	46
NCOME FUND	4	4
/ REALRETUR	4	
RIDGEWORTH CLASSIC SEIX FLOATING RATE HI		3,066.
RT TE	. 88	.88
SURY NOTE 4.7	713.	713.
VALUE FD INSTITUTIC	186.	186.
		1
TOTAL	53,164.	53,164.
	#	

N

STATEMENT

FORM 990PF, PART I - OTHER INCOME

REVENUE	AND	EXPENSES	PER BOOKS	1 1 1 1 1 1
			DESCRIPTION	5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

NET INVESTMENT INCOME

2,260.	2,260.	
1,592.	1,592.	

TOTALS

HATTERAS K-1

FORM 990PF, PART I - OTHER PROFESSIONAL FEES

CHARITABLE PURPOSES	3,500.
NET INVESTMENT INCOME	10,500.
REVENUE AND EXPENSES PER BOOKS	14,001.
DESCRIPTION	TRUSTEE/EXECUTOR FEES-PRINCIPA TOTALS

24

STATEMENT

FORM 990PF, PART I - TAXES

NET INVESTMENT INCOME	35. 417. 67.	519.
REVENUE AND EXPENSES PER BOOKS	35. 7,759. 1,416. 417.	9,694.
DESCRIPTION	STATE INCOME TAXES - PRINCIPAL FEDERAL TAX PAYMENT - PRIOR YE FEDERAL ESTIMATES - INCOME FOREIGN TAXES ON QUALIFIED FOR FOREIGN TAXES ON NONQUALIFIED	TOTALS

ACR174 976M 08/16/2012 19:44:12

REVENUE AND EXPENSES PER BOOKS

FORM 990PF, PART I - OTHER EXPENSES

MARJORIE HARRIS REYNOLDS FDN

04-6820699

NET INVESTMENT INCOME

HATTERAS

DESCRIPTION

3,047.

TOTALS

3,047.

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MARJORIE HARRIS REYNOLDS FDN

FORM 990PF, PART II - CORPORATE STOCK

ENDING FMV	97,660. 26,962. 24,502. 110,858. 88,334. 67,526. 92,877. 482,357. 61,767. 57,869. 55,636.	
ENDING BOOK VALUE	94,867. 22,707. 26,544. 114,687. 71,711. 61,235. 108,558. 391,343. 47,883. 56,000. 52,495.	
BEGINNING BOOK VALUE	94,000. 22,062. 30,255. 146,675. 107,795. 73,057. 59,797. 80,669. 393,612. 47,883. 56,000.	
DESCRIPTION	ABSOLUTE STRATEGIES FUND CLASS BOSTON TRUST SMALL CAP FUND CRM MID CAP VALUE FD INSTITUTI HARBOR FD INTL FD INST LAZARD EMERGING MARKEST PORTFO MANAGERS AMG FUNDS - TIMESSQUA MATTHEWS PACIFIC TIGER FD CL I PIMCO COMMODITY REALRETURN STR INVESCO DISCIPLINED EQUITY FD JPMORGAN CHASE & CO ALERIAN ML MAINSTAY EPOCH GLOBAL EQUITY Y NEUBERGER BERMAN EQUITY INCOME	

9

FORM 990PF, PART II - CORPORATE BONDS

DESCRIPTION	BEGINNING BOOK VALUE	ENDING BOOK VALUE	ENDING FMV
DREYFUS EMERGING MARKETS DEBT FEDERAL HOME LN MTG 5.125 GOLDMAN SACHS GROUP INC 5.125% US TREASURY NOTE 4.750% VODAFONE AIRTOUCH PLC NT 7.75% BERKSHIRF HATHAMAN FIN COPD SE	53,417. 51,464. 24,432. 15,422.	53,863. 51,464. 24,432. 15,422.	52,422. 51,356. 25,553. 16,570.
DENTALLINGUES & CONTOUR SET OF	16,51	10,30	17,52
TOTALS	251,239	251,685.	251,280.

^

ω

	ENDING FMV	t 1 1	276,645.	276,645.
	ENDING BOOK VALUE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	300,000.	300,000.
	BEGINNING BOOK VALUE	1 1 2 4 2 5 7 1 2 1 1	300,000.	300,000.
FORM 990PF, PART II - OTHER INVESTMENTS		1 1 1 1 1 1 1	HATTERAS MULTI-STRATEGY TEI C	TOTALS
FORM 990PF,	SCRIPTIO	1 1 1 1 1 1 1 1	HATTERAS MUL	

04-6820699

MARJORIE HARRIS REYNOLDS FDN

MARJORIE HARRIS REYNOLDS FDN

FORM 990PF, PART II - OTHER ASSETS

ENDING FMV	2,371.
ENDING BOOK VALUE	271.
BEGINNING BOOK VALUE	2,699.
	TOTALS
DESCRIPTION	ACCRUED INCOME

σ

FORM 990PF,	PART	III	-	OTHER	DECREASES	IN	NET	WORTH	OR	FUND	BALANCES	
						===	====:	=====	====	====:	=======	
DESCRIPTION											AMOUNT	
ROUNDING												2.
					mom:							
					TOTA	ΑL						2.
											=========	====

990PF, PART VII-B LINE 2b - SECTION 4942a2 EXPLANATION STATEMENT

N/A

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

OFFICER NAME:
ERIC ODDLEIFSON
ADDRESS:

25 RIVER ROAD COHASSET, MA 02025

TITLE:

CO-TRUSTEE, AS REQUIRED

OFFICER NAME:
JANNA ODDLEIFSON
ADDRESS:
25 RIVER ROAD
COHASSET, MA 02025
TITLE:
CO-TRUSTEE, AS REQUIRED

RECIPIENT NAME: ROCHESTER INSTITUTE OF TECHNOLOGY RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE PURPOSES FOUNDATION STATUS OF RECIPIENT: N/A AMOUNT OF GRANT PAID 1,000. RECIPIENT NAME: THE CHILDREN'S AGENDA RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE FOUNDATION STATUS OF RECIPIENT: N/A 1,000. AMOUNT OF GRANT PAID RECIPIENT NAME: HILLSIDE WORK SCHOLARSHIP CONN. RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE PURPOSES 1,000. AMOUNT OF GRANT PAID RECIPIENT NAME: ANN ARBOR YMCA **RELATIONSHIP:** NONE PURPOSE OF GRANT: CHARITABLE PURPOSES FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID

2,500.

MARJORIE HARRIS REYNOLDS FDN 04-6820699 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: OZONE HOUSE RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE PURPOSE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 2,500. RECIPIENT NAME: SOUTH SHORE ART CENTER RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE PURPOSES FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: EASTER SEALS **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL CHARITABLE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 25,500. RECIPIENT NAME: VENDANTA CENTER RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE FOUNDATION STATUS OF RECIPIENT: N/A

AMOUNT OF GRANT PAID

4,500.

MARJORIE HARRIS REYNOLDS FDN 04-6820699 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: THE THOMAS CRANE PUBLIC LIBRARY RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 5,000. RECIPIENT NAME: SOUTH SHORE HOSPITAL RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 11,000. RECIPIENT NAME: WELLSPRING MULTI-SERVICE CENTER RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE FOUNDATION STATUS OF RECIPIENT: N/A AMOUNT OF GRANT PAID 10,000. RECIPIENT NAME: THE CORNER HEALTHCARE CENTER RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE

AMOUNT OF GRANT PAID

N/A

FOUNDATION STATUS OF RECIPIENT:

1,500.

04-6820699 MARJORIE HARRIS REYNOLDS FDN FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: ARTS/LEARNING INC. RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 20,000. RECIPIENT NAME: ANN ARBOR COMMUNITY FOUNDATION **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL CHARITABLE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 8,750. RECIPIENT NAME: MAKE A WISH FOUNDATION RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL CHARITABLE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 1,500. RECIPIENT NAME: PIHI HOOPS TIP OFF CLUB **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL CHARITABLE FOUNDATION STATUS OF RECIPIENT: N/A AMOUNT OF GRANT PAID 2,000. MARJORIĖ HARRIS REYNOLDS FDN 04-6820699 FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PAID RECIPIENT NAME: VRINDAVANA PRESERVATION SOCIETY RELATIONSHIP: NONE PURPOSE OF GRANT: CHARITABLE FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 500. TOTAL GRANTS PAID: 122,750.

STATEMENT 18

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

Name of estate or trust						Employer identification number			
$\overline{}$	ARJORIE HARRIS REYNOLDS FDN				04-682	2069	9		
	: Form 5227 filers need to complete only Pa								
Part	Short-Term Capital Gains and Lo	sses - Assets	Held One Ye	ar 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, yr)	(d) Sales price	(e) Cost or other (see instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)		
1a									
b	Enter the short-term gain or (loss), if any, fr	om Schedule D-	1. line 1b		<u> </u>	1b	-9,262		
2	Short-term capital gain or (loss) from Forms					. 2	37202		
3 4	Net short-term gain or (loss) from partnersh Short-term capital loss carryover Enter					3			
	Carryover Worksheet					4	()		
5	Net short-term gain or (loss). Combine						0.262		
Part	column (3) on the back	ses - Assets I	Held More Th	nan One Year	· · · · · · · <u>P</u>	5	-9,262		
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(e) Cost or other (see instruction		(f) Gain or (loss) for the entire year Subtract (e) from (d)		
6a I	ONG-TERM CAPITAL GAIN DIVIDE	NDS					19,080		
							1		
b	Enter the long-term gain or (loss), if any, fro	om Schedule D-1	I. line 6b		<u></u>	6b	27,843		
7	b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b						2.7013		
·									
8	Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts								
9	Capital gain distributions					9			
10	Gain from Form 4797, Part I					10			
11	Long-term capital loss carryover Enter	the amount, if	any, from lin	e 14 of the 2010	Capital Loss				
12	Carryover Worksheet	nes 6a through	11 in column	n (f) Enter here and	l on line 14a,	11	1		
	column (3) on the back aperwork Reduction Act Notice, see the Instruc	 		<u></u> .		12	46,923		
	anerwork Reduction Act Notice can the instruc	tions for Form 10	41		C^	204.10	D (Form 1041) 2011		

schedule D (Form 1041) 2011								Page 2
Part III Summary	of Parts I and II			(1) Bene	ficiaries'	(2) Est	ate's	
Caution: /	Read the instructions before (completing this p	part.	(see ı		or tru		(3) Total
3 Net short-term gain	n or (loss)		13	•			•	-9,262.
4 Net long-term gain								
a Total for year			14a		-			46,923.
	on 1250 gain (see line 18 of the		14b					
c 28% rate gain			14c	·				
	oss). Combine lines 13 and 14a							37,661.
Note: If line 15, column (3	3), is a net gain, enter the gain on i	Form 1041, line 4 (or Form	n 990-T, Pa	rt I, line 4a) If lines 1	4a and	15. column (2), are net
ains, go to Part V, and do n	ot complete Part IV If line 15, colum	n (3), is a net loss, co	mplete	Part IV and	the Capital	Loss Carryo	ver Wor	ksheet, as necessary.
Part IV Capital Lo	ss Limitation							
6 Enter here and ente	er as a (loss) on Form 1041, line	4 (or Form 990-T, Pa	art I, line	e 4c, if a tru	ist), the sm	aller of		
							16 ()
Note: If the loss on line 15,	, column (3) or b \$3,000 . column (3), is more than \$3,000, o	r if Form 1041, page	1, line	22 (or For	m 990-T, lir	ne 34), is a	oss, con	nplete the Capital Loss
	nstructions to figure your capital loss							· · · · · · · · · · · · · · · · · · ·
	outation Using Maximum Cap							5
	lete this part only if both lines 1 i 1041, line 2b(2), <mark>and</mark> Form 104				, or an am	ount is en	ered in	Part I or Part II and
	nd complete the Schedule D Tax							ţ
- · · · · · · · · · · · · · · · · · · ·	or line 14c, col. (2) is more than		1011 001	.0				
Both Form 1041, line	2b(1), and Form 4952 , line $4g$ ar	e more than zero.						
orm 990-T trusts. Con	aplete this part only if both line	es 14a and 15 are	gains	s, or quali	fied divide	nds are in	cluded	in income in Part 1
of Form 990-T, and Form	n 990-T, line 34, is more than zei	ro. Skip this part a	nd com	nplete the	Schedule	D Tax Wo	rksheet	in the instructions
f either line 14b, col. (2)	or line 14c, col (2) is more than	zero						
7 Enter taxable incom	ne from Form 1041, line 22 (or f	Form 990-T, line 3	4)	17				
18 Enter the smaller of	of line 14a or 15 in column (2)							
but not less than ze	ro	18						
	or trust's qualified dividends							
from Form 1041,	line 2b(2) (or enter the qualified							
	income in Part I of Form 990-T)	19						
	9	20		7				
	t is filing Form 4952, enter the							
amount from line 4	g; otherwise, enter -0	21						
22 Subtract line 21 fro	om line 20. If zero or less, enter -	0		. 22				
23 Subtract line 22 fro	om line 17. If zero or less, enter -	0		23				
24 Enter the smaller o	f the amount on line 17 or \$2,30	00		24				
	ne 23 equal to or more than the		7	•		· · -		
	s 25 and 26; go to line 27 and c							
No. Enter the	amount from line 23			25				
	om line 24							
27 Are the amounts or	n lines 22 and 26 the same?							
Yes. Skip lines 27	thru 30, go to line 31 No. Enter	the smaller of line 17 or line	e 22	27				
					1			
28 Enter the amount for	rom line 26 (If line 26 ıs blank, e	nter -0-)		28			1	
				•				
29 Subtract line 28 fro	om line 27			. 29				
Multiply line 29 by							30	
• • •	the amount on line 23 Use the					d Trusts		·····
	Ginstructions in the instructions						31	
32 Add lines 30 and 3	1						32	
33 Figure the tax on	the amount on line 17 Use ti	he 2011 Tax Rate	Sche	dule for l	states an	d Trusts		
	Ginstructions in the instructions						33	
	income. Enter the smaller of li							
G line 1a for Form				2 2 31.	, C	,	34	

JSA 1F1220 2 000 Schedule D (Form 1041) 2011

SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D (Form 1041)

OM8 No. 1545-0092

Department of the Treasury Internal Revenue Service

▶ See instructions for Schedule D (Form 1041). ▶ Attach to Schedule D to list additional transactions for lines 1a and 6a.

Name of estate or trust Employer identification number MARJORIE HARRIS REYNOLDS FDN 04-6820699 Short-Term Capital Gains and Losses - Assets Held One Year or Less (b) Date (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (c) Date sold (mo , day, yr) (e) Cost or other basis (see instructions) (f) Gain or (loss) Subtract (e) from (d) acquired (mo , day, yr.) (d) Sales price 1a 949.37 HARBOR FD INTL FD I 09/28/2011 48,200.00 VAR 57,462.00 -9,262.00 1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b -9,262.00

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

Schedule D-1 (Form 1041) 2011

ame of estate or trust as shown on Form 1041 Do not MARJORIE HARRIS REYNOLDS F	Employer identification				
Part Long-Term Capital Gains and		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)
a 1800.18 INVESCO DISCIPLINE CL Y #8542	08/21/2009	04/29/2011	20,000.00	15,068.00	4,932.0
138.793 BOSTON TRUST SMALL	08/21/2009	04/29/2011	2,000.00	1,362.00	638.0
207.654 HARBOR FD INTL FD	03/30/2010	04/29/2011	14,000.00	11,409.00	2,591.0
389.105 MANAGERS AMG FUNDS TIMESSQUARE MID CAP GROWTH	08/21/2009	04/29/2011	6,000.00	4,156.00	1,844.0
126.103 CRM MID CAP VALUE					
INSTITUTIONAL 1551.143 HARBOR FD INTL FD	03/09/2007	04/29/2011	4,000.00	3,897.00	103.0
	VAR	08/12/2011	87,500.00	72,774.00	14,726.0
158.341 HARBOR FD INTL FD	02/27/2009	09/28/2011	8,039.00	5,030.00	3,009.0
				I.	
					· · · · · · · · · · · · · · · · · · ·
			·		
					
					
b Total. Combine the amounts in column	(f). Enter here and	on Schedule D, lin	e 6b		27,843.0

Schedule D-1 (Form 1041) 2011