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Form	9	9	0	-	P	F
-om	_	_	•	,		

OMB No 1545-0052

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 reporting requirements
or tax year beginning.
2011, and ending Department of the Treasury Internal Revenue Service

	e of foundation C PETER AND D	EVON BRIGER	FOUNDA	ATION	II_				A Employer Identific 26-158698	
Num	ber and street (or P O	box number if mail is	not delivered	to street	address)		Room/su	te	B Telephone number	•
C/C	BCRS ASSOCI	ATES, LLC							(21	2) 440-0800
77	WATER STREET	' - 9TH FLOO	R							
City	or town, state, and ZI	P code							_	_
MEG	YORK, NY 10	1005							C If exemption applicate pending, check here	lion is
	eck all that apply.	Initial retur		\top	Initial return (of a former n	ublic char	ıtv	D 1 Foreign organizati	>
	son an mar apply.	Final return		-	Amended ret	•		.,	2 Foreign organizati	•
		Address ch			Name change			Ì	85% test, check his computation	ere and attach
L Chr	eck type of organiz							\neg	·	
_	Section 4947(a)(1) no				er taxable pr		ion	Ì	E If private foundation under section 507(b)	
	r market value of a	Il assets at end	J Account		ethod X Ca				F If the foundation is	
	ear (from Part II, co				cify)					(1)(B), check here
•		751,884.	(Part I, co	lumn (d	d) must be on	cash basis)				
	Analysis of Rev	enue and Expens								(d) Disbursements
	total of amounts in	columns (b), (c), and	d (d)		venue and nses per	(b) Net inve	1	(0) Adjusted net	for charitable
	may not necessaril column (a) (see ins	ly equal the amounts	in		ooks	incom	ie		income N/A	purposes (cash basis only)
14			a di ila)		200,000.	•				(Sastr Saste Striff
1 2		foundation is not requ	ired to							
3	Interest on savings an	h Sch B	I .		698.		698.			ATCH 1
4	Dividends and inter								-	
1	Gross rents		["							
1										
l _	Net rental income or (i		- 1	2	,218,715.					
"6	Net gain or (loss) from Gross sales price for a	2,893								
6 a	assets on line 6a Capital gain net inc	· · · · · ·				2,21	8,715.			***
									a	
8	Net short-term capi Income modification							-		· · ·
9 10 a	Gross sales less returns	s	· · · ·							
١ .	and allowances • • •							-		
1	 Less Cost of goods so Gross profit or (loss 							-		
11	Other receme (atta	ch schedule)	· · · ·			*****				
12	Other income (attac Total. Add lines 1 t	hrough 11	• • • •	2,	419,413.	2,21	9,413.		Q	
13	Compensation of offic				O					
14	Other employee sal									
15	Pension plans, emp					•				
	Legal fees (attach s								-	
	DECEME	trach schodule) ATC!	i 2 · ·	- **	4,000.		2,000.			2,0
	Other professional	fees (etrach schedul	 							
1			ا ٠٠٠							
	Interest 3. 201	e) (see in thirtings)								
₹%	Depreciation (attac		oletion							
20-	Oceanancy N . L		-							
21_	Javel conferences									
22	Printing and public					· ·				
23	Other expenses (at				334.					3:
24	Total operating an									
19 20 21 22 23 24	Add lines 13 through	•	·		4,334.		2,000.			2,3
25	Contributions, gifts				211,500.					211,5
26	Total expenses and disb	*	I		215,834.		2,000.		0	213,8
27	Subtract line 26 fro									
	Excess of revenue over e		onts	2,	203,579.					
3	Net investment inc		I			2,21	7,413.			
1 1		(0	
ì	Adjusted net incon	ne (if negative, enter	-0-) l				,		ч	

PAGE 1

Page 2

Pai	-4 П	Attached schedules and amounts in the	Beginning of year	End of	year
اعت	Щ	Balance Sheets description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	7,596.		
	2	Savings and temporary cash investments	14,223.	2,899,774.	2,899,774
		Accounts receivable			
		Less allowance for doubtful accounts ▶			
		Pledges receivable			
		Less allowance for doubtful accounts ▶			
		Grants receivable			
		Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
		Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶			
		Inventories for sale or use			
ě		Prepaid expenses and deferred charges			
%		Investments - U S and state government obligations (attach schedule).			
` `		Investments - corporate stock (attach schedule) ATCH 4		710,500.	852,110
		Investments - corporate bonds (attach schedule)	· · · · · · · · · · · · · · · · · · ·		
1	1	Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule)			
1		Investments - mortgage loans			
	3	Investments - other (attach schedule)			
- '	4	equipment basis		İ	
		equipment basis Less accumulated depreciation (attach schedule)			
1	5	Other assets (describe)			
1		Total assets (to be completed by all filers - see the		2 64 2 274	2 754 224
		instructions Also, see page 1, item I)	1,406,694.	3,610,274.	3,751,884
1	7	Accounts payable and accrued expenses			
1	8	Grants payable			
S 1	9	Deferred revenue			
<u>≅</u> 2	0	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities		Mortgages and other notes payable (attach schedule)			
၂2	2	Other liabilities (describe			
2	3	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here ▶ and complete lines 24 through 26 and lines 30 and 31.			
8 2	4	Unrestricted			
Balances	5	Temporarily restricted			
සි 2	6	Permanently restricted			
Fund		Foundations that do not follow SFAS 117,			
Z.		check here and complete lines 27 through 31. ▶ X	1 406 604	2 610 074	
Ö 2	7	Capital stock, trust principal, or current funds	1,406,694.	3,610,274.	
Net Assets	8	Paid-in or capital surplus, or land, bldg , and equipment fund			
SS 2	9	Retained earnings, accumulated income, endowment, or other funds	1 105 501	0 610 074	
₹ 3	0	Total net assets or fund balances (see instructions)	1,406,694.	3,610,274.	
ž 3	1	Total liabilities and net assets/fund balances (see		2 612 274	
		instructions)	1,406,694.	3,610,274.	
		Analysis of Changes in Net Assets or Fund			
		net assets or fund balances at beginning of year - Part			4 400 000
		of-year figure reported on prior year's return)			1,406,694
2 E	Ente	r amount from Part I, line 27a		2	2,203,579
3 (Othe	r amount from Part I, line 27a r increases not included in line 2 (itemize) ▶ATTACE	IMENT 5	3	1
4 A	Add	lines 1, 2, and 3			3,610,274
5 C	Decr	eases not included in line 2 (itemize) ▶		5	
6 T	otal	net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column (b),	ine 30 6	3,610,274

Form 990-PF (2011) Page 3 Capital Gains and Losses for Tax on Investment Income Part IV (c) Date acquired (mo, day, yr) (d) Date sold (mo, day, yr) (a) List and describe the kind(s) of property sold (e.g., real estate, àcquired P-Purchase 2-story brick warehouse, or common stock, 200 shs MLC Co) SEE PART IV SCHEDULE b d е (q) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price plus expense of sale (e) plus (f) minus (g) (or allowable) b d Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col (h) gain minus (j) Adjusted basis (k) Excess of col (i) col (k), but not less than -0-) or (i) F M V as of 12/31/69 Losses (from col (h)) over col (j), if any as of 12/31/69 ď е If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) 2,218,715. If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6). If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in 0 Part I, line 8 Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year, see the instructions before making any entries. (d) Distribution ratio Base period years Net value of noncharitable-use assets Adjusted qualifying distributions Calendar year (or tax year beginning in) (col (b) divided by col (c)) 815,285. 3,630,495. 0.224566 2010 441,870. 2,471,093. 0.178816 2009 974,472. 3,106,464. 0.313692 2008 0. 4,188,718. 0.000000 2007 0.000000 2006 0.717074 Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years (4 YEARS IN 0.179269 3,880,013. Enter the net value of noncharitable-use assets for 2011 from Part X, line 5 695,566. Multiply line 4 by line 3 22,174. Enter 1% of net investment income (1% of Part I, line 27b) 717,740. Add lines 5 and 6 213,834. Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

JSA 1E1430 1 000

Part VI instructions

orm 9	do-PF(2011) THE PETER AND DEVON BRIGER FOUNDATION II 26-158			age 4
Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	struc	ctions)
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 letter if necessary - see instructions)			
	Domestic foundations that meet the section 4940(e) requirements in Part V, check		44,3	48.
	here and enter 1% of Part I, line 27b			
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		44 5	
	Add lines 1 and 2		44,3	48.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			<u> </u>
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		44,3	48.
6	Credits/Payments:			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a			
b	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			^
	Total credits and payments Add lines 6a through 6d			0
	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached		44 2	140
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		44,3	48.
	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 2012 estimated tax ▶ Refunded ▶ 11			
	VII-A Statements Regarding Activities		I	
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate	4.	Yes	No X
	or intervene in any political campaign?	1a		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the			х
	instructions for definition)?	1b		
	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			х
	Did the foundation file Form 1120-POL for this year?	1 c		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ▶\$ 0 (2) On foundation managers ▶\$ 0		,	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers > \$0	2		х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			
_	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 incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
		4a		Х
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4b		N/A
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
5	If "Yes." attach the statement required by General Instruction T			
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
6	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	Х	
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	
, 8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	DE,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		ا پ	
	(or designate) of each state as required by General Instruction G ² If "No," attach explanation	8b	Х	
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 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete			v
	Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			Х
	and addresses	10		

charitable purpose that had not been removed from leopardy before the first day of the tax year beginning in 2011?

Form 990-PF (2011)		Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation M and Contractors (continued)	lanagers, Highly Paid Emplo	yees,
3 Five highest-paid independent contractors for professional services (see in	structions). If none, enter "NONI	E."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	NONE	0
	 	
		· -
	<u> </u>	
Total number of others receiving over \$50,000 for professional services	<u> </u>	
Part IX-A Summary of Direct Charitable Activities		
Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statisti organizations and other beneficiaries served, conferences convened, research papers produced, etc.	cal information such as the number of	Expenses
1 PLEASE NOTE, THE FOUNDATION IS NOT INVOLVED IN ANY	DIRECT	
CHARITABLE ACTIVITIES. ITS PRIMARY PURPOSE IS TO SU		
CONTRIBUTIONS, OTHER ORGANIZATIONS EXEMPT UNDER INT		0
2 REVENUE CODE SECTION 501(C)(3).		
N/A		
N/ N		
N/2	·	·
3_N/A		
27/2		
4_N/A		
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2	Amount
1 N/A		
**************************************		_
		0
2 N/A		
All other program-related investments. See instructions		
3 N/A		
Total. Add lines 1 through 3		
Total rice and I through out the transfer of t	· · · · · · · · · · · · · · · · · · ·	

6

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

qualifies for the section 4940(e) reduction of tax in those years

	n 990-PF (2011)				Page 9
Pa	rt XIII Undistributed Income (see instru	ctions)			
1	Distributable amount for 2011 from Part XI,	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
	line 7				149,653.
2	Undistributed income, if any, as of the end of 2011				
a	Enter amount for 2010 only			0.	
	Total for prior years 20,20,20		-		
3	Excess distributions carryover, if any, to 2011				
	From 2006				
b	From 2007 0 .				
c	From 2008 776, 118.				
d	From 2009 318, 315.				
e	From 2010 633,760.				
f	Total of lines 3a through e	1,728,193.			
4					
	line 4 ▶ \$ 213,834.				
a	Applied to 2010, but not more than line 2a				
	Applied to undistributed income of prior years (Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
ч	Applied to 2011 distributable amount				149,653.
	Remaining amount distributed out of corpus	64,181.			
5	Excess distributions carryover applied to 2011				
•	(If an amount appears in column (d), the same				
6	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	1,792,374.			
	Prior years' undistributed income Subtract				
С	Inne 4b from line 2b 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 amount - see instructions				
е	Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount - see instructions			0.	
f	Undistributed income for 2011 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012				0.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8	Excess distributions carryover from 2006 not			-	
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2012.	1 702 274			
	Subtract lines 7 and 8 from line 6a	1,792,374.			<u> </u>
10	, ,				
а	Excess from 2007				
b	Excess from 2008				
С	Excess from 2009 318, 315.				
d	Excess from 2010 633,760.				
е	Excess from 2011 64, 181.				

Pa	rt XIV Private Oper	rating Foundations	see instructions and	Part VII-A, question	9)	NOT APPLICABLE			
1 a	a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling								
ь	Check box to indicate wh					j)(3) or 4942(j)(5)			
		Tax year	pirtuits operating resins	Prior 3 years					
2 a	Enter the lesser of the ad- justed net income from Part I or the minimum investment return from Part X for each	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total			
	year listed								
b	85% of line 2a								
С	Qualifying distributions from Part XII, line 4 for each year listed .								
đ	Amounts included in line 2c not 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 alternative test relied upon				<u> </u>				
а	"Assets" alternative test - enter								
	(1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i)								
b	"Endowment" alternative test- enter 2/3 of minimum invest- ment return shown in Part X,								
	line 6 for each year listed								
С	"Support" alternative test - enter								
	(1) Total support other than gross investment income (Interest, dividends, rents, payments on securities loans (section 512(a)(5)),								
	or royalties) (2) Support from general	}							
	public and 5 or more exempt organizations as provided in section 4942 (j)(3)(B)(iii)								
	(3) Largest amount of support from an exempt organization								
	(4) Gross investment income.	<u> </u>		<u> </u>					
Pa	rt XV Supplementa at any time of	ary Information (C during the year - se	omplete this part e instructions.)	only if the founda	ation had \$5,000	or more in assets			
1	Information Regarding	g Foundation Manage	rs:						
а	List any managers of before the close of any	tax year (but only if th	ave contributed more ney have contributed n	e than 2% of the total nore than \$5,000) (Se	contributions receives section 507(d)(2))	red by the foundation			
	ATTACHMI		100/	the stade of a serve		· lavas aprilian of the			
D	List any managers of ownership of a partner					large portion of the			
	NONE								
2	Information Regarding	-							
	Check here ► X if t unsolicited requests for other conditions, comp	or funds. If the founds	ation makes gifts, gra						
а	The name, address, a			n applications should be	e addressed				
b	The form in which app	lications should be suf	omitted and information	on and materials they	should include.				
C	Any submission deadle	nes·							
d	Any restrictions or li factors	mitations on awards,	such as by geogra	phical areas, charital	ole fields, kinds of	institutions, or other			

Part XV Supplementary Information (continued)			
3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	ng the Year or Appr	oved for F	uture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	7
a Paid during the year				
SEE LIST ATTACHED				211,500.
				İ
		l		1
				}
		ļ		
		1		}
		}		J
		1		
				j
		1		ĺ
	<u> </u>			
Total	<u> </u>		3a	211,500.
b Approved for future payment				
NONE				
				1
		}		
		1		
	<u> </u>	<u> </u>	<u> </u>	
Total	<u></u>		<u>.</u>	<u> </u>

Page 12

Part XVI	-A Analysis of Income-Produ	icing Activ	vities			
Enter gross	amounts unless otherwise indicated	Unrel	ated business income	Excluded by	y section 512, 513, or 514	(e)
1 Program	Service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a	outries revenue					(Occ monucions)
1						
g Fees	and contracts from government agencies					
2 Member	ship dues and assessments					
	in savings and temporary cash investments			14	698.	
4 Dividend	ds and interest from securities					
5 Net rent	al income or (loss) from real estate					· <u></u>
a Debt	-financed property					
b Not o	debt-financed property					
	Income or (loss) from personal property					
7 Other in	vestment income					
8 Gain or (I	oss) from sales of assets other than inventory			18	2,218,715.	
9 Net inco	me or (loss) from special events			<u> </u>	ļ	
	rofit or (loss) from sales of inventory	<u></u> _				·····
11 Other rev	venue a					
b				J		
c		<u> </u>				
d						
e					2 210 412	
	Add columns (b), (d), and (e)		<u> </u>		2,219,413.	2,219,413.
13 Total. Ad	dd line 12, columns (b), (d), and (e)				¹³ <u>—</u> —	2,219,413.
Part XVI-	B Relationship of Activities	to the Ac	complishment of E	vemnt Burn	.000	
						
Line No.	Explain below how each activit					
▼	accomplishment of the foundation	on's exemp	t purposes (other than	n by providing	tunds for such purposes	s) (See instructions)
						· · · · · · · · · · · · · · · · · · ·

			NOT APPLICA	ABLE		
		<u> </u>		-		
						
				 –		
- 1	1					

Form 990-I			AND DEVON BRI			26-1586		13
Part X\	Exempt Orga	nizations	sfers To and Trar				naritable	_
ın s org	the organization direction 501(c) of the Canizations?	ode (other than so	ection 501(c)(3) organ	ızatıons) or ır	n section 527, relatin		Yes N	lo_
	nsfers from the reported Cash	-					a(1)	X
	Other assets							<u>x</u>
b Oth	ner transactions							
	Sales of assets to a n						15(1)	<u>X</u>
	Purchases of assets f						10(2)	$\frac{x}{x}$
	Rental of facilities, equ					I	0,0/	$\frac{X}{X}$
	Reimbursement arrange Loans or loan guarante							X
	Performance of service					-		X
c Sha	aring of facilities, equip	ment, mailing lists	, other assets, or paid	employees .		L	16	<u>X</u>
	he answer to any of t							
	ue of the goods, other ue in any transaction o							
(a) Line n			ncharitable exempt organizati		Description of transfers, tra			
(a) Line in	C (D) Allicant involves	N/A	Torrainable exempt organization	N/A			g an angement	
		·						_
								—
								—
-								—
			<u> </u>					—

					····			
de	the foundation directly scribed in section 501(c) of the Code (oth					Yes X	No
	Yes," complete the foll (a) Name of organizat		(b) Type of organi	zation	(c) Des	cription of relationsh	ııp	
		1	N/A					
	Under penalties of penury, I de	sclare that I have examin	ed this return including accomi	nanving schedules	and statements and to the	pest of my knowledge	and belief, it is	true.
Sign	correct, and complete Declaration	of preparer (otherman ta	payer) is based on all information	of which preparer I	has any knowledge	 	<u> </u>	
Here			5/11/la	2 . D.	IRECTOR		discuss this reti parer shown bel	tum slow
	Signature of officer or truste	e	Date	Title		(see instructions		No
					19.			_
Paid	Print/Type prepare		Preparer's signature	11	Date /	ICHECK III	TIN	
Prepai	rer WILLIAM RABE		TES IIC		5/11/12	self-employed F		
	Firm's name	BCRS ASSOCIA	res, LLC		Firm	s EIN ▶ 13-40	1014/	

Phone no 212-440-0800

10005

Use Only Firm's address ▶ 77 WATER STREET, 9TH FLOOR

NEW YORK,

NY

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 THE PETER AND DEVON	Employer identification number								
	26-1586986								
Organization type (check one)	Organization type (check one)								
Filers of: Section:									
Form 990 or 990-EZ									
4947(a)(1) nonexempt charitable trust not treated as a private foundation									
	527 political organization								
Form 990-PF	X 501(c)(3) exempt private foundation								
	4947(a)(1) nonexempt charitable trust treated as a private foundary	lion							
	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									
	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 one contributor. Complete Parts I and II	or more (in money or							
Special Rules									
under sections 509((3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support to a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the figure or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form the line of the amount on (ii) Form the line 1h, or (iii) Form the line 1h, or (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	e year, a contribution of							
during the year, tota	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from all contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitabses, or the prevention of cruelty to children or animals. Complete Parts I, II,	ble, scientific, literary,							
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 total 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 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).									

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

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

Employer Identification number 26-1586986

			26-1386986
Part I	Contributors (see instructions). Use duplicate copies of Par	t I if additional space is need	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	PETER L. BRIGER C/O BCRS ASSOC, LLC; 77 WATER ST-9TH FL NEW YORK, NY 10005	\$50,000.	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
2	PETER & DEVON BRIGER FOUNDATION C/O BCRS ASSOC, LLC; 77 WATER ST-9TH FL NEW YORK, NY 10005	\$150,000.	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)

Name of organization THE PETER AND DEVON BRIGER FOUNDATION II

Employer Identification number 26-1586986

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) (b) (d) from FMV (or estimate) Date received Description of noncash property given Part I (see instructions) (a) No. (c) (d) from FMV (or estimate) Description of noncash property given Date received Part 1 (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization THE PETER AND DEVON BRIGER FOUNDATION II

Employer identification number

	gamento Ind India AND Davon Bridge	N TOOMBATTON II		26-1586986	
Part III	Exclusively religious, charitable, etc., individual total more than \$1,000 for the year. C	idual contributions to	section 501(c	c)(7), (8), or (10) organizations	
	For organizations completing Part III, enter the contributions of \$1,000 or less for the year.	ne total of <i>exclusively</i> r (Enter this information	eligious, char	itable, etc.,	
(a) No.	Use duplicate copies of Part III if additional sp	bace is needed.			
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
		(e) Transfer of gift			
	Transferee's name, address, and ZIP +	4	Relationshi	p of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
		(e) Transfer of gift			
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				
			<u>.</u>		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
		(e) Transfer of gift			
	Transferee's name, address, and ZIP +	. 4	Relationshi	p of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held	
			_		
		(e) Transfer of gift			
	Transferee's name, address, and ZIP +	- 4	Relationshi	p of transferor to transferee	
					

THE PETER AND DEVON BRIGER FOUNDATION II 26-1586986

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

CAPITAL GAINS AND LOSSES FOR TAX ON INVEST			P	Date	Date sold			
			Excess of	Ď	acquired Gain			
Gross sale price less	Depreciation allowed/	Cost or other	FMV as of	Adj basis as of	FMV over		or (loss)	
expenses of sale	allowable	basis	12/31/69	12/31/69	adı basıs	+	(loss)	
		LTCG - SEE	STATEMENT A	ATTACHED		P	VARIOUS	11/11/2011
		PROPERTY TY				ľ		,,
2,893,090.	İ	674,375.					2,218,715.	
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MOMPT CATN'I	000)						2,218,715.	
TOTAL GAIN(L	oss)			• • • • • • • • • •			2,210,713.	
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THE PETER AND DEVON BRIGER FOUNDATION II

EIN: 26-1586986

SUPPLEMENTARY STATEMENTS

PART: XV

LINE: 2

SUPPLEMENTAL INFORMATION

THE ORGANIZATION'S PRIMARY ACTIVITY IS TO SUPPORT, BY CONTRIBUTIONS, OTHER ORGANIZATIONS QUALIFYING FOR EXEMPTION UNDER SECTION 501(c)(3) OF THE INTERNAL REVENUE CODE THE TRUSTEES CHOOSE THESE ORGANIZATIONS BASED UPON THEIR KNOWLEDGE OF THE ORGANIZATIONS' ACTIVITIES NO CONTRIBUTIONS, GRANTS, GIFTS, LOANS OR SCHOLARSHIPS ARE MADE TO INDIVIDUALS THE ORGANIZATION DOES NOT PRESENTLY RECEIVE APPLICATIONS OR CONDUCT PROGRAMS FOR DONATIONS IN ITS ACTIVITIES

ATTACHMENT 1

INVESTMENTS	
CASH	
ON TEMPORARY CA	
NO	
INTEREST	
i	
H	
PART	
NRM 990PF,	
F	

ADJUSTED NET INCOME		
NET INVESTMENT INCOME	.869	
REVENUE AND EXPENSES PER BOOKS	.869	
DESCRIPTION	INTEREST ON BANK DEPOSIT ACCOUNTS TOTAL	

ATTACHMENT 2

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PART	
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CHARITABLE PURPOSES	2,000.	2,000.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	2,000.	2,000.
REVENUE AND EXPENSES PER BOOKS	4,000.	4,000.
		TOTALS
DESCRIPTION	BCRS ASSOCIATES, LLC	

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CHARITABLE PURPOSES 284. 50.	334.
ADJUSTED NET INCOME	
NET INVESTMENT INCOME	
REVENUE AND EXPENSES PER BOOKS 284.	334.
	TOTALS
F STATE	
DESCRIPTION CT CORPORATION DELAWARE SECRETARY OF STATE	

ATTACHMENT 3 PAGE 21

ATTACHMENT 4

11-4.4

ATTACHMENT 4 PAGE 22

STOCK
CORPORATE
1
II
PART
990PF,
FORM

$\overline{\text{ENDING}}$	852,110.	852,110.
ENDING BOOK VALUE	710,500.	710,500.
BEGINNING BOOK VALUE	1,384,875.	1,384,875.
DESCRIPTION	SEE LONG POSITION ATTACHED	TOTALS

	2 215	DDICDD	FOUNDATION	TT

26-1586986

ATTACHMENT 5

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALAN	FORM	OPF, PART III	- OTHER	INCREASES	IN N	ET WORTH	OR	FUND	BALANCE	S
---	------	---------------	---------	-----------	------	----------	----	------	---------	---

<u>DESCRIPTION</u> <u>AMOUNT</u>

ROUNDING 1.

TOTAL 1.

ATTACHMENT 6 PAGE 24

ATTACHMENT 6	CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER BENEFIT PLANS ALLOWANCES	0	0	0 0
	COMPENSATION	0	0	0
OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	DIRECTOR/PART-TIME	DIRECTOR/PART-TIME	GRAND TOTALS
FORM 990PF, PART VIII - LIST OF OFFICERS,	NAME AND ADDRESS	PETER L. BRIGER C/O BCRS ASSOCIATES, LLC 77 WATER STREET - 9TH FLOOR NEW YORK, NY 10005	DEVON BRIGER C/O BCRS ASSOCIATES, LLC 77 WATER STREET - 9TH FLOOR NEW YORK, NY 10005	

2	۲.	- 1	5	Ω	6	a	Q	6	

THE PETER AND DEVON BRIGER FOUNDATION II

ATTACHMENT 7

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

PETER L. BRIGER; C/O BCRS ASSOCIATES, LLC 77 WATER STREET - 9TH FLOOR, NEW YORK, NY 10005

SCHEDULE D (Form 1041)

Capital Gains and Losses

▶ Attach to Form 1041, Form 5227, or Form 990-T. See the Instructions for

OMB No 1545-0092

Department of the Treasury Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable). Internal Revenue Service Name of estate or trust Employer identification number THE PETER AND DEVON BRIGER FOUNDATION II 26-1586986 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 (b) Date acquired (e) Cost or other basis the entire year Subtract (e) from (d) (d) Sales price (Example 100 shares 7% preferred of "Z" Co) (see instructions) (mo, day, yr) (mo, day, yr) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 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 2010 Capital Loss 4 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. Long-Term Capital Gains and Losses - Assets Held More Than One Year (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) 6a **b** Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b............ 2,218,715. 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 2010 Capital Loss Net long-term gain or (loss). Combine lines 6a through 11 in column (f). Enter here and on line 14a, 2,218,715. column (3) on the back.

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

Schedule D (Form 1041) 2011

Schedule D (Form 1041) 2011			Page 2
Part III Summary of Parts I and II	(1) Beneficiaries'	(2) Estate's	(O) Tetal
Caution: Read the instructions before completing this part.	(see instr)	or trust's	(3) Total
13 Net short-term gain or (loss)			
14 Net long-term gain or (loss):	_		
a Total for year			2,218,715.
b Unrecaptured section 1250 gain (see line 18 of the wrksht) 14b			
c 28% rate gain			
15 Total net gain or (loss). Combine lines 13 and 14a ▶ 15			2,218,715.
Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Fori	n 990-T, Part I, line 4a) If lines 14a and	15, column (2), are net
gains, go to Part V, and do not complete Part IV If line 15, column (3), is a net loss, complete	e Part IV and the Capital	Loss Carryover Wo	rksheet, as necessary
Part IV Capital Loss Limitation			
16 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, III	ne 4c, if a trust), the sn	naller of:	
a The loss on line 15, column (3) or b \$3,000. Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line)
Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page 1, line Carryover Worksheet in the instructions to figure your capital loss carryover	e 22 (or Form 990-T, lıı	ne 34), is a loss, co	mplete the Capital Loss
Part V Tax Computation Using Maximum Capital Gains Rates			
Form 1041 filers. Complete this part only if both lines 14a and 15 in column (2)) are gaine or an am	ount is entered i	n Part I or Part II and
here is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than		ount is entered in	i i ait i oi i ait ii aiiu
Caution: Skip this part and complete the Schedule D Tax Worksheet in the instruc			
Either line 14b, col (2) or line 14c, col (2) is more than zero, or			
 Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero 			
Form 990-T trusts. Complete this part only if both lines 14a and 15 are gain:	s, or qualified divide	nds are included	in income in Part!
of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part and cor	mplete the Schedule	D Tax Workshe	et in the instructions
f either line 14b, col. (2) or line 14c, col. (2) is more than zero			
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			
from Form 1041, line 2b(2) (or enter the qualified			
dividends included in income in Part I of Form 990-T) 19		1 1	
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			
Subtract line 21 from line 20. If zero or less, enter -0	22		
Subtract line 22 from line 17. If zero or less, enter -0	23		
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		
Subtract line 25 from line 24	26		
27 Are the amounts on 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 22	27		
			
Enter the amount from line 26 (If line 26 is blank, enter -0-)	. 28		
Subtract line 28 from line 27	29		
30 Multiply line 29 by 15% (15)		30	
31 Figure the tax on the amount on line 23 Use the 2011 Tax Rate School	edule for Estates an	d Trusts	
(see the Schedule Ginstructions in the instructions for Form 1041)			
32 Add lines 30 and 31		32	_
33 Figure the tax on the amount on line 17 Use the 2011 Tax Rate Sche	edule for Estates an	d Trusts	
(see the Schedule Ginstructions in the instructions for Form 1041)		33	
Tax on all taxable income. Enter the smaller of line 32 or line 33 here a	nd on Form 1041, S	Schedule	
G, line 1a (or Form 990-T, line 36)	<u> </u>	34	
		Sched	lule D (Form 1041) 2011

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side THE PETER AND DEVON BRIGER FOUNDATION II Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (a) Description of property (Example 100 sh 7% preferred of 27 Co) facquired (mo , day, yr) ATTACHED VARIOUS 11/11/2011 2,893,090. Employer identification number 26-1586986 (e) Cost or other basis (see instructions) Subtract (e) from Capital Gains and Losses - Assets Held More Than One Year (a) Date sold (mo , day, yr) (b) Date (mo , day, yr) (c) Date sold (mo , day, yr) (d) Sales price (e) Cost or other basis (see instructions) (a) Sales price (e) Cost or other basis (see instructions) (b) Date (mo , day, yr) (c) Date sold (mo , day, yr) (d) Sales price (e) Cost or other basis (see instructions) (a) Sales price (e) Cost or other basis (see instructions) (b) Date (mo , day, yr) (c) Date sold (mo , day, yr) (d) Sales price (e) Cost or other basis (see instructions) (a) Sales price (e) Cost or other basis (see instructions) (b) Date (mo , day, yr) (c) Date sold (mo , day, yr) (d) Sales price (e) Cost or other basis (see instructions) (a) Sales price (e) Cost or other basis (see instructions) (b) Date (mo , day, yr) (c) Date sold (mo , day, yr) (d) Sales price (e) Cost or other basis (see instructions) (e) Cost or other basis (see instructions) (f) Gain or (lot or other basis (see instructions) (g) Cost or other basis (see instructions) (g) Cost or other basis (see instructions) (g) Cost or other basis (see instructions) (g) Cost or other basis (see instructions) (g) Cost or other basis (see instructions) (g) Cost or other basis (see instructions) (g) Cost or other basis (see instructions)	Page 2
(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) (see instructions) (f) Gain or (location) Subtract (e) from	
100 sh 7% preferred of "Z" Co) 6a LTCG - SEE STATEMENT acquired (mo, day, yr) (mo day, yr) (mo day, yr) (mo day, yr) (mo day, yr)	
	39) n (d)
	715.
6b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 6b	

PETER & DEVON BRIGER FOUNDATION II CHARITABLE CONTRIBUTIONS FYE 12/31/2011

EIN: 26-1586986

DATE	CONTRIBUTION	CITY, STATE	AMOUNT
28-Jan-11	ASPHALT GREEN	NEW YORK, NY	10,000.00
29-Mar-11	PUAH INSTITUTE	BROOKLYN, NY	1,000.00
13-May-11	STARLIGHT CHILDREN'S FOUNDATION	NEW YORK, NY	500 00
30-Jun-11	HOSPITAL FOR SPECIAL SURGERY FUND INC	NEW YORK, NY	200,000 00
	TOTAL CONTRIBUTIONS	PAID *	\$ 211,500.00

^{*} ALL CONTRIBUTIONS WERE MADE TO THE GENERAL PURPOSE FUND OF PUBLIC CHARITABLE ORGANIZATIONS THAT WERE CLASSIFIED UNDER SECTION 501(c)(3) OF THE INTERNAL REVENUE CODE.

PETER & DEVON BRIGER FOUNDATION II CHARITABLE CONTRIBUTIONS FYE 12/31/2011

EIN: 26-1586986

DATE	CONTRIBUTION	CITY, STATE	AMOUNT
28-Jan-11	ASPHALT GREEN	NEW YORK, NY	10,000 00
29-Mar-11	PUAH INSTITUTE	BROOKLYN, NY	1,000 00
13-May-11	STARLIGHT CHILDREN'S FOUNDATION	NEW YORK, NY	500 00
30-Jun-11	HOSPITAL FOR SPECIAL SURGERY FUND INC	NEW YORK, NY	200,000 00
	TOTAL CONTRIBUTIONS	PAID *	\$ 211,500.00

^{*} ALL CONTRIBUTIONS WERE MADE TO THE GENERAL PURPOSE FUND OF PUBLIC CHARITABLE ORGANIZATIONS THAT WERE CLASSIFIED UNDER SECTION 501(c)(3) OF THE INTERNAL REVENUE CODE.



BRIGER PETER & DEVON FDN II. Realized Gains and Losses

Period Ended December 31, 2011

YEAR TO DATE GAINS AND LOSSES

Holding Period	17
Total Gain (Loss)	2,218,715.14
FX Gain (Loss) Market Gain (Loss) Total Gain (Loss)	0.00 2,218,715.14 2,218,715.14
Cost Basis	674,375.00
Quantity Sale Proceeds	38,760 00 2,893,090 14
Quantity	68,760 00
Date Sold or Covered	Nov 11 2011
Date Acquired or Sold Short	Dec 26 2007
	CROWN CASTLE INTL CORP COMMON STOCK

PAGE 1 OF 1



BRIGER PETER & DEVON FDN II. Holdings

Period Ended December 31, 2011

PUBLIC EQUITY

			Market Value /			Unrealized	Dividend	Estimated
	Quantity	Market Price	Market Price Accrued Income	Unit Cost	Cost Basis	Gain (Loss)	Yield	Yield Annual Income
US EQUITY								
US STOCKS					2		1	
BROOKDALE ŜENIOR LIVING, INC. CMN (BKD)	49,000 00	17 3900	852,110 00		710,500.00	141,610.00		
					Adjusted Cost / 6	Unrealized		Estimated
			Market Value		Original Cost	Gain (Loss)		Annual Income
TOTAL PORTFOLIO			852,110.00		710,500.00	141,610.00		

PAGE 1 OF 1