

#### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



#### Form 990-PF

8

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

OMB No 1545-0052

Department of the Treasury Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements Internal Revenue Service For calendar year 2011 or tax year beginning and ending A Employer identification number Name of foundation 27-2545558 VIRGINIA LEE SHIRLEY PRIVATE FOUNDATION Room/suite Number and street (or P O box number if mail is not delivered to street address) B Telephone number 312-332-5313 1700 333 W. WACKER DRIVE City or town, state, and ZIP code C If exemption application is pending, check here CHICAGO, IL 60606 D 1. Foreign organizations, check here G Check all that apply Initial return Initial return of a former public charity Final return Amended return Foreign organizations meeting the 85% test, 2. check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust \_\_\_\_\_ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method Accrual F If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here (from Part II, col. (c), line 16) 6,322,672.06 (Part I, column (d) must be on cash basis.) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements for chantable purposes (cash basis only) (c) Adjusted net (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not income ıncome expenses per books necessanly equal the amounts in column (a) ) N/A Contributions, gifts, grants, etc., received Check X If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 99,052.62 STATEMENT 99,052.62 33,830.51 33,830.51 STATEMENT Dividends and interest from securities 5a Gross rents h Net rental income or (loss) 24,039.46 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 1,591,184.2624,039.46 Net short term capital gain Income modifications NOV Gross profit of (Oss) 156,922.59 156,922.59 olal Add lines 1 through 11 0.00 0.00 0.00 sation of officers, directors, trustees, etc Other employee salaries and wages 15 Pension plans, employee benefits STMT 3 4,640.91 4,640.91 0.00 Expenses 16a Legal fees **b** Accounting fees 0.00 35,936.48 35,936.48 STMT 4 c Other professional fees and Administrative 17 Interest STMT 5 213.40 0.00 0.00 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative 0.00 40,790.79 40,577.39 expenses. Add lines 13 through 23 85,000.00 85,000.00 25 Contributions, gifts, grants paid 26 Total expenses and disbursements 85,000.00 125,790.79 40,577.39 Add lines 24 and 25 27 Subtract line 26 from line 12 31,131.80

LHA For Paperwork Reduction Act Notice, see instructions.

3 Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-)

Form 990-PF (2011)

N/A

 $116,\overline{345.20}$ 

Part IV Capital Gains	and Los	ses for Tax on In	vestment	Income		•				
(a) List and descr 2-story brick wa	ribe the kind irehouse, o	d(s) of property sold (e g r common stock, 200 shs	, real estate, MLC Co )		(b) I	How ac - Purc - Dona	quired hase ation		acquired day, yr )	(d) Date sold (mo , day, yr )
1a										
b SEE ATTACHED	STAT	EMENT			<u> </u>					
<u>c</u>										
_d						-	-		<u> </u>	
_e	(A) D		(a) Coo	t as ather been				(b) (	Sain or (loss	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
(e) Gross sales price		epreciation allowed (or allowable)		t or other basis xpense of sale					s (f) minus	
<u>a</u> b	_									
С		-								<u>.</u>
d				5.55 1.44						24 020 46
e 1,591,184.26			<u>-</u> -	567,144.	80					24,039.46
Complete only for assets showing							(	I) Gains (i	Col (h) gair not less tha	nminus n -0-) or
(ı) F M V as of 12/31/69		) Adjusted basis as of 12/31/69		cess of col (I) col (J), If any				Losses	(from col	(h))
a										_
b										
<u>c</u>										
<u>d</u>		·								24 020 46
е							r			24,039.46
2 Capital gain net income or (net ca	apital loss)	If gain, also enter If (loss), enter -0-	in Part I, line in Part I, line	7 7	}	2				24,039.46
3 Net short-term capital gain or (los	ss) as defin	•			_					
If gain, also enter in Part I, line 8,			- (-/		<b>)</b>				4-	
If (loss), enter -0- in Part I, line 8					للي	3	<u> </u>		N/A	<u> </u>
		ection 4940(e) for					nent In	come		
(For optional use by domestic private	e foundatioi	ns subject to the section 4	940(a) tax on	net investment ii	ncom	e )				
If section 4940(d)(2) applies, leave to	his part blai	nk								
										Yes X No
Was the foundation liable for the sec					LIOQ 3					Yes A No
If "Yes," the foundation does not qua  1 Enter the appropriate amount in	each colum	ection 4940(e) Do not col	mpiete this pa ictions before	making any entri	IPS					
(a)	each colum		ICCOMS BOTOTO	making any once	(c)					(d)
Base period years Calendar year (or tax year beginni	ına ın\	(b) Adjusted qualifying dist	ributions	Net value of no			-use assets	s		bution ratio vided by col. (c))
2010	ing in)		567.66		3.4	58.	062.2	26	(00. (0) 0.	.018093
2009		<u> </u>				<u> ,-</u>				
2008							<del></del>			
2007					_					
2006									_	
									T	
2 Total of line 1, column (d)								2		.018093
3 Average distribution ratio for the	5-year base	e period - divide the total o	on line 2 by 5,	or by the numbe	r of ye	ears				
the foundation has been in existe	nce if less t	than 5 years						3		.018093
4 Enter the net value of noncharitat	ble-use ass	ets for 2011 from Part X, I	ine 5					4	6,	191,802.80
										110 000 00
5 Multiply line 4 by line 3								5	ļ	112,028.29
									}	1 162 45
6 Enter 1% of net investment incor	ne (1% of F	Part I, line 27b)						6		1,163.45
<b>-</b>								,		113,191.74
7 Add lines 5 and 6								7		110,171.74
8 Enter qualifying distributions from	n Part XII, i	line 4						8		85,000.00
If line 8 is equal to or greater than	n line 7, che	eck the box in Part VI, line	1b, and comp	olete that part usii	ng a 1	% tax	rate			
See the Part VI instructions										

	300 TT (E0TT)	25455			Page 4
	· · · · · · · · · · · · · · · · · · ·	300 1113		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	13/
1a	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)		2 3	26	.90
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here   ■ and enter 1%		<u> </u>	20	• 50
	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)			Λ	.00
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  Add lines 1 and 2		2 3		.90
	7.00		2,3		.00
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2 2		.90
_	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	<del></del>	2,3	20	• 90
	Credits/Payments 2011 estimated tax payments and 2010 overpayment credited to 2011    6a   5,027.93				
	Exempt foreign organizations - tax withheld at source				
	Tax paid with application for extension of time to file (Form 8868)				
	Backup withholding erroneously withheld		E 0	. 2 7	0.2
	Total credits and payments Add lines 6a through 6d		5,0	12 /	<u>.93</u>
	Enter any penalty for underpayment of estimated tax. Check here 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		2 7	101	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		2,1		.03
	Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ 2,701.03 Refunded ▶ 11				.00
	rt VII-A Statements Regarding Activities			<b>7</b> – –	NI-
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	
	any political campaign?	<u> </u>	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see 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				.,
	Did the foundation file Form 1120-POL for this year?	<u> </u>	1c		<u>X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				į
	(1) On the foundation ► \$ 0.00 (2) On foundation managers ► \$ 0.00				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers ► \$0.00	ļ			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	<u> </u>	2		X
	If "Yes," attach a detailed description of the activities.	1			į
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	- 1			17
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	  -	3		$\frac{X}{X}$
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		<u></u>
	in too, not a most tax retain on a single-	/A	4b		v
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	<u> </u> -	5		X
	If "Yes," attach the statement required by General Instruction T				į
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	-		v	
	remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	-	7	^	
	If "Yes," complete Part II, col. (c), and Part XV.				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)  IL				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
	of each state as required by General Instruction G? If "No," attach explanation	<u> </u>	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			1	
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV	$oldsymbol{oldsymbol{oldsymbol{eta}}}$	9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		X
		Form 9	990-	PF (	2011)

Total. Add lines 1 through 3

	Minimum Investment Return (All domestic foundations must complete this part. Foreign four		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		5 101 724 50
_	Average monthly fair market value of securities	18	5,101,734.59 1,184,359.62
	Average of monthly cash balances	1b	1,104,339.02
-	Fair market value of all other assets	16	6,286,094.21
	Total (add lines 1a, b, and c)	1d	0,200,094.21
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.00	1	0.00
2	Acquisition indebtedness applicable to line 1 assets	2	0.00
3	Subtract line 2 from line 1d	3	6,286,094.21
1	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	94,291.41
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	6,191,802.80
<u>5_</u>	Minimum investment return Enter 5% of line 5	6	309,590.14
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here in and do not complete this part.)	d certair	1
1	Minimum investment return from Part X, line 6	1	309,590.14
2a	Tax on investment income for 2011 from Part VI, line 5 2, 326.90		
b	Income tax for 2011 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	2,326.90
3	Distributable amount before adjustments Subtract line 2c from line 1	3	2,326.90 307,263.24
4	Recoveries of amounts treated as qualifying distributions	4	0.00
5	Add lines 3 and 4	5	307,263.24
6	Deduction from distributable amount (see instructions)	6	0.00
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	307,263.24
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		95 000 00
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	85,000.00 0.00
þ	Program-related investments - total from Part IX-B	1b	0.00
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	05 000 00
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	85,000.00
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		2 2
	income Enter 1% of Part I, line 27b	5	0.00
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	85,000.00
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years	ualifies	for the section

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,				·
line 7				307,263.24
2 Undistributed income, if any, as of the end of 2011				· · · · · · · · · · · · · · · · · · ·
a Enter amount for 2010 only			41,664.25	
b Total for prior years	111111111111111111111111111111111111111			
		0.00		
3 Excess distributions carryover, if any, to 2011	HH			111111111111111111111111111111111111111
<b>a</b> From 2006				
b From 2007				
c From 2008				
d From 2009				
e From 2010				
f Total of lines 3a through e	0.00			
4 Qualifying distributions for 2011 from				
Part XII, line 4 ► \$ 85,000.00				
a Applied to 2010, but not more than line 2a			41,664.25	
<b>b</b> Applied to undistributed income of prior				, , , , , , , , , , , , , , , , , , , ,
years (Election required - see instructions)		0.00		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.00			
d Applied to 2011 distributable amount		·		43,335.75
e Remaining amount distributed out of corpus	0.00			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	0.00			0.00
6 Enter the net total of each column as indicated below				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.00			
b Prior years' undistributed income Subtract				······
line 4b from line 2b		0.00		
c 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		0.00		
d Subtract line 6c from line 6b Taxable				······································
amount - see instructions		0.00		
e Undistributed income for 2010 Subtract line				
4a from line 2a Taxable amount - see instr			0.00	
f Undistributed income for 2011 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2012				263,927.49
7 Amounts treated as distributions out of				•
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.00			
8 Excess distributions carryover from 2006				
not applied on line 5 or line 7	0.00			
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	0.00			······
10 Analysis of line 9			•	
a Excess from 2007	]			
b Excess from 2008	[			
c Excess from 2009				
d Excess from 2010				
e Excess from 2011				
				Form <b>990-PF</b> (2011)

27-2545558 Page 11

Recipient  Name and address (home or business)	If recipient is an individual,	1	i I	
	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
YSTIC FIBROSIS FOUNDATION 3 N. MAIN STREET	NONE	PUBLIC CHARITY	MEDICAL RESEARCH	
ANTENO, IL 60950				10,000.00
LENWOOD SCHOOL FOR BOYS AND GIRLS - OUTH CAMPUS 00 W. 187TH STREET	NONE	PUBLIC CHARITY	GENERAL PURPOSES/EDUCATION	
LENWOOD, IL 60425				5,000.00
ORNETS SLED HOCKEY 25 N. ELMWOOD AVENUE	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
AK PARK, IL 60302	-			5,000.00
ALVATION ARMY - METROPOLITAN EADQUARTERS 040 N. PULASKI ROAD	NONE	PUBLIC CHARITY	GENERAL PURPOSES	
HICAGO, IL 60630				10,000.00
T. MARY'S SCHOOL 04 S. PEORIA AVENUE IXON, IL 60121	NONE	PUBLIC CHARITY	COMPUTER'S FOR THE	40,000.00
Total SEE CO	NTINUATION SHEE	ET(S)	<b>▶</b> 3a	85,000.00
b Approved for future payment  BRAHAM LINCOLN PRESIDENTIAL LIBRARY  OUNDATION  12 N. SIXTH STREET	NONE	PUBLIC CHARITY	general purposes	
PRINGFIELD, IL 62701				25,000.00
Total		<u></u>	<b>▶</b> 3b	25,000.00

Part XV Supplementary Information **Grants and Contributions Paid During the Year (Continuation)** If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor VITAL BRIDGES CENTER ON CHRONIC CARE NONE PUBLIC CHARITY FOOD, SHELTER, COUNSELING AND THERAPY - HEARTLAND HEALTH OUTREACH 5543 N. BROADWAY AVENUE CHICAGO, IL 60640 15,000.00 15,000.00 Total from continuation sheets

#### **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated	Unrelated	business income		by section 512, 513, or 514	(e)
	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue	Business code	Amount	sion code	Amount	function income
a					
b					
C					
d	1				
е					
f					
g Fees and contracts from government agencies					····
2 Membership dues and assessments					
3 Interest on savings and temporary cash			14	99,052.62	
Investments	<del>                                     </del>		18	33,830.51	
4 Dividends and interest from securities				33,030.31	
5 Net rental income or (loss) from real estate					······································
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property	-				
7 Other investment income		\			
8 Gain or (loss) from sales of assets other than inventory			18	24,039.46	
9 Net income or (loss) from special events		<del> </del>			··-
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b		w.,			
C	_				
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0.0	00	156,922.59	
13 Total. Add line 12, columns (b), (d), and (e)				13	156,922.59
(See worksheet in line 13 instructions to verify calculations	)				<del></del>

					_
Part XVI-B	Relationship o	f Activities to	the Accomplishme	ent of Exemp	ot Purposes

<b>7</b>	the foundation's exempt purposes (oth	er than by providing funds for such purposes)	
_			
-	<del></del>		
		<del></del>	
_			

12-02-11

Form 99					PRIVATE FOO			2343336		age 13
Part	XVII	Information Re Exempt Organ		sfers To a	and Transactions a	and Relations	ships With No	ncharitabl	e	
1 Did	the org	janization directly or indi	rectly engage in any o	of the followin	g with any other organization	on described in sec	tion 501(c) of		Yes	No
the	Code (	other than section 501(c)	(3) organizations) or	r in section 52	?7, relating to political organ	nizations?				
a Tra	insfers 1	rom the reporting found	ation to a noncharitat	ole exempt or	ganization of					
(1)	Cash							1 <u>a(1)</u>	<u> </u>	X
(2)	Other	assets						1a(2)		X
<b>b</b> Otl	ner trans	sactions								
(1)	Sales	of assets to a noncharita	ble exempt organizati	ion				1b(1)	<u> </u>	X
(2)	Purch	ases of assets from a no	ncharitable exempt o	rganization				1b(2)		X
(3)	Renta	of facilities, equipment,	or other assets					1b(3)	<u></u>	Х
(4)	Reimt	oursement arrangements						1b(4)		X
(5)	Loans	or loan guarantees						1b(5)	<u> </u>	Х
(6)	Perfo	mance of services or me	mbership or fundrais	sing solicitatio	ins			1b(6)		X
c Sh	aring of	facilities, equipment, ma	ılıng lists, other asset	ts, or paid em	ployees			10		X
d Ift	he ansv	er to any of the above is	"Yes," complete the f	ollowing sche	dule Column (b) should al	ways show the fair	market value of the (	goods, other as	sets,	
or	services	given by the reporting fo	oundation. If the foun	idation receiv	ed less than fair market vali	ue in any transaction	n or sharing arrange	ment, show in		
CO	umn (d	the value of the goods,								
(a) Line /	10	(b) Amount involved	(c) Name of		exempt organization	(d) Descriptio	n of transfers, transaction	ons, and sharing a	rrangeme	ents
				N/A						
								·		
			-							
						<del></del>		<del></del>		
								<del> </del>		
<b>2a</b> Is	the four	dation directly or indirect	tly affiliated with, or r	elated to, one	or more tax-exempt organi	zations described				_
ın	section	501(c) of the Code (other	r than section 501(c)	(3)) or in sect	tion 527?			L Yes	X	No
<u>b lf'</u>	Yes," co	mplete the following sch				1				
		(a) Name of org	anization		(b) Type of organization		(c) Description of re	elationship		
		N/A								
		<del></del>	·-							
							· · · · · · · · · · · · · · · · · · ·			
						-				
	1			<del></del>						
					ig accompanying schedules and n taxpayer) is based on all inform			May the IRS return with the		
Sign		/ ///			10-26-12			shown below	v (see ins	tr )?
Here		all on				PRESI	DENT	_ X Yes	`	J No
	Sign	ature of officer or trustee		B	Date	Title	Charle 37 if	DTIN		
		Print/Type preparer's na	ime	Preparer's s	•	Date	Check X If	PTIN		
ъ.		Manu arri	TT CON	m.a	.Wes	10.26.12	self- employed	D01262	200	
Paid		MARY-ANN W						P01262 2-00775		
Prep		Firm's name ► HAR	KIPON & H	<b>съп,</b> Т	Lr		Firm's EIN ► 3	Z-UU//5	009	
Use	Unly	Firm's addrsss N 2.2	2 14 14 017	מת מש	, SUITE 1700					
			ICAGO IL		, SULTE 1/00		Dhana sa 2	12-332-	111	1
	_ :	Сп	TCVGO IT	00000			Phone no 3	<u> </u>	TIT	_

Phone no

x 24 2 5 7 1 0 2 p. 21 0 2 mo 2 mo 2 0 0 0 0 1	OF THE OFF INTOUNTION INTOUTIE				
(a) List and desc 2-story brick wa	ribe the kind(s) of property sole arehouse, or common stock, 20	d, e g , real estate, 00 shs MLC Co	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
18 GOLDMAN SACHS A/C			CAN P		06/27/11
b GOLDMAN SACHS A/C		- SEE ATTACHED	P	<del></del>	
c GOLDMAN SACHS A/C		- SEE ATTACHED - SEE ATTACHED	P		VARIOUS
			P P		VARIOUS
		- SEE ATTACHED		10/12/10	
e GOLDMAN SACHS A/O		- SEE ATTACHED	P P		VARIOUS
1 GOLDMAN SACHS A/C	2 020-60040-9	- SEE ATTACHED	P	11/09/10	11/29/11
g					<del></del>
h		<u> </u>			
1	<del></del>			ļ	<u>_</u>
k					
1	<u> </u>				
<u>m</u>					
<u>n</u>					<del></del>
0					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		) Gain or (loss) Nus (f) minus (g)	
a 275,644.80	<del></del>	240,000.00	<del></del>	3	5,644.80
b 86,408.71		104,812.83			8,404.12>
c 559,822.72	<del>-</del>	550,695.69	<del></del>		9,127.03
d 26,436.03		31,266.96			4,830.93>
e 442,872.00		440,489.32			2,382.68
f 200,000.00		199,880.00			120.00
g	_ <del></del>				
h					
1					
k				·	
I					
m	· · · · · · · · · · · · · · · · · · ·				
n				11.5	
0	·				
Complete only for assets showing gair	n in column (h) and owned by t	the foundation on 12/31/69	(I) Los	ses (from col (h))	
(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	Gains (excess o	of col (h) gain over ot less than "-0-")	col (k),
2	· · · · · · · · · · · · · · · · · · ·			3	5,644.80
<u>a</u> <u>b</u>	<del></del>				8,404.12>
					9,127.03
<u>c</u>	<del></del>				$\frac{3,127.03}{4,830.93}$
					2,382.68
f e					120.00
<u>9</u> h					
<u>"</u>	·				<del></del>
<del></del>				-	
k	·····	_			
					<del></del>
m	<del></del>				
n		-			<del></del>
0					
<u>×</u>				<del></del>	
2 Capital gain net income or (net capital le	oss) { If gain, also enter "-0	ın Part I, line 7 -" ın Part I, line 7	2	2	4,039.46
3 Net short-term capital gain or (loss) as if gain, also enter in Part I, line 8, column		d (6)			
If (loss), enter "-0-" in Part I, line 8			3	N/A	

2011

**VIRGINIA LEE SHIRLEY PRIVATE** 020-60038-3

## **REALIZED GAINS AND LOSSES**

Supplemental Information - Consult your Form 1099 for tax reporting purposes

# **REALIZED GAIN AND LOSS SUMMARY**

SHORT-TERM GAINS (LOSSES)		LONG-TERM GAINS (LOSSES)		ORDINARY GAINS (LOSSES)	
Net Covered Short-Term Gains (Losses)	(18,404 15) Net C	Net Covered Long-Term Gains (Losses)	00 0	0 00 Net Ordinary Gains (Losses)	000
Net NonCovered Short-Term Gains (Losses)	9,127 01	Net NonCovered Long-Term Gains (Losses)	(4,830 93)		
Net 1099B Non Reportable Short-Term Gains (Losses)	00 0	Net 10998 Non Reportable Long-Term Gains (Losses)	0000		
Net Miscellaneous Short-Term Gains (Losses)	00 0	Net Miscellaneous Long-Term Gains (Losses)	000	0 00 Net Miscellaneous Ordinary Gains (Losses)	000
Net Regulated Futures Contract Short-Term Gains (Losses)	00 0	Net Regulated Futures Contract Long-Term Gains (Losses)	00 0		
Total Short-Term Gains (Losses)	(9,277.14)	(9,277,14) Total Long-Term Gains (Losses)	(4,830.93)	(4.830.93) Total Ordinary Gains (Losses)	0.00

### SHORT-TERM GAINS (LOSSES)

	Date Acquired	Date Sold		;	Total Accretion		Total
Description (Product Identifier)	or Sold Short	or Covered	Quantity	Sale Proceeds	(Amortization)	Cost Basis 4	Gain (Loss)
Covered Short-Term Gains (Losses)							
GENERAL ELECTRIC CO CMIN (369604103)	01/04/2011	03/02/2011	91 00	1,853 18	00 0	1,671.56	181.62
JPMORGAN CHASE & CO CMN (46625H100)	01/04/2011	03/18/2011	57 00	2,605.23	000	2,490 75	114.48
LOWES COMPANIES INC CMN (548661107)	02/15/2011	03/18/2011	39.00	1,020 95	0.00	989.07	31.88
SOUTHWESTERN ENERGY CO. CMN (845467109)	01/20/2011	07/22/2011	288.00	14,017 35	00.0	10,978 91	3,038.44
BANK OF AMERICA CORP CMN (060505104)	01/04/2011	08/09/2011	598.00	4,142 68	000	8,472 17	(4,329 49)
BANK OF AMERICA CORP CMN (060505104)	02/15/2011	08/09/2011	991 00	6,865 22	0.00	14,730.12	(7,864 91)
BANK OF AMERICA CORP CMN (060505104)	06/28/2011	08/09/2011	1,418 00	9,823 29	0000	15,387 14	(5,563 86)
SOUTHWESTERN ENERGY CO CMN (845467109)	01/20/2011	08/30/2011	45 00	1,677 11	00 0	1,715 45	(38 35)
CONOCOPHILLIPS CMN (20825C104)	08/30/2011	12/13/2011	165 00	11,666.58	000	11,034 21	632.37
CONOCOPHILLIPS CMN (20825C104)	04/06/2011	12/13/2011	463 00	32,737.12	0.00	37,343.45	(4,606.33)
Net Covered Short-Term Gains (Losses)				86,408.71	0.00	104,812.83	(18,404.15)
NonCovered Short-Term Gains (Losses)							
AFLAC INCORPORATED CMN (001055102)	10/12/2010	01/04/2011	310 00	17,525 27	0.00	16,854 17	671.10
EMERSON ELECTRIC CO. CMN (291011104)	10/12/2010	01/04/2011	298.00	16,837 13	00 0	15,755 53	1,081 60
BAXTER INTERNATIONAL INC CMN (071813109)	10/12/2010	01/20/2011	443 00	22,342 01	00 0	21,798 04	543 97
EXXON MOBIL CORPORATION CMN (30231G102)	10/12/2010	01/20/2011	474 00	36,669.59	00 0	30,604 19	6,065 40

<sup>4</sup> Basis may have been increased by accruals of market discount and/or original issue discount in income currently and/or amortize premium currents premium currents premium currently. You should consult with your own tax advisor to determine your correct basis 5 Sale Proceeds may have been adjusted by an option premium due to an option assignment.



Realized and unrealized gains and loss values do not include securities for which cost basis is unavailable. The recognition of any loss reflected herein may be disallowed or deferred by the application of capital loss limitations, wash sale rules or other special tax rules, and you are strongly urged to consult your own outside tax and other advisors about this and all tax-related matters addressed in any way herein. All information regarding the cost basis and acquisition dates of securities that you acquired elsewhere and that were subsequently delivered into your Goldman Sachs account(s) were provided by you and/or a third party and Goldman Sachs makes no representation as to the accuracy and completeness of such information and it should not be relied upon as such

PAGE 33 of 35

Account No Tax Year

Legal Name

**VIRGINIA LEE SHIRLEY PRIVATE** 020-60038-3

2011

# **REALIZED GAINS AND LOSSES (Continued)**

Supplemental Information - Consult your Form 1099 for tax reporting purposes

### SHORT-TERM GAINS (LOSSES)

Description (Product Identifier)	Date Acquired or Sold Short	Date Sold	Outra	Cale Proceeds 5	Total Accretion	2 200	Total
NonCovered Short-Term Gains (Losses)							in the second se
FREEPORT-MCMORAN COPPER & GOLD CMN (35671D857)	10/12/2010	01/25/2011	390 00	41,122 88	00 0	36,932 69	4,190 19
CISCO SYSTEMS, INC. CMN (17275R102)	10/12/2010	02/15/2011	2,557 00	47,600 19	00 0	57,766 72	(10,166 53)
OCCIDENTAL PETROLEUM CORP CMN (674599105)	10/12/2010	03/02/2011	228 00	22,920 44	00 0	18,832 07	4,088 37
VISA INC. CMIN CLASS A (92826C839)	10/12/2010	03/02/2011	26 00	1,916 10	00 0	1,928 31	(12 21)
AFLAC INCORPORATED CMN (001055102)	10/12/2010	03/18/2011	738 00	37,441 93	0000	40,123 81	(2,681 88)
APPLE, INC. CMN (037833100)	10/12/2010	03/18/2011	3 00	995 72	0.00	891.21	104 51
MICROSOFT CORPORATION CMN (594918104)	10/12/2010	03/18/2011	29.00	725 01	00 0	718 01	7 00
QUALCOMM INC CMIN (747525103)	10/12/2010	03/18/2011	20 00	1,039 45	0.00	895 59	143.86
STAPLES, INC CMN (855030102)	10/12/2010	03/18/2011	54.00	1,067,71	00:00	1,117.76	(20.02)
BAXTER INTERNATIONAL INC CMN (071813109)	10/12/2010	04/06/2011	726 00	39,242 66	000	35,723.19	3,519 47
SCHLUMBERGER LTD CMN (806857108)	10/12/2010	04/06/2011	232 00	21,258 03	000	14,565 17	6,692.86
BIOGEN IDEC INC. CMN (09062X103)	10/12/2010	04/21/2011	276 00	59,764 90	0000	32,692 49	27,072.41
COSTCO WHOLESALE CORPORATION CMN (22160K105)	10/12/2010	06/28/2011	172 00	13,720 41	0000	10,935 76	2,784 65
THE BANK OF NY MELLON CORP CMN (064058100)	11/30/2010	06/28/2011	489 00	11,868 44	00 0	13,231 07	(1,362.64)
THE BANK OF NY MELLON CORP CMN (064058100)	10/12/2010	06/28/2011	1,091 00	26,479 48	00 0	28,943 36	(2,463.89)
EMERSON ELECTRIC CO. CMN (291011104)	10/12/2010	07/22/2011	642 00	35,372 36	0000	33,943 12	1,429.24
PEPSICO INC CMIN (713448108)	10/12/2010	07/26/2011	291 00	18,684 55	000	19,235.10	(550.55)
BANK OF AMERICA CORP CMN (060505104)	10/12/2010	08/09/2011	2,230 00	15,448 47	0000	29,854 79	(14,406 32)
STAPLES, INC. CMN (855030102)	10/12/2010	08/09/2011	2,547 00	32,229 11	000	52,720.86	(20,491 75)
SOUTHWESTERN ENERGY CO CMN (845467109)	10/13/2010	08/30/2011	733 00	27,318 23	0000	25,436.13	1,882 10
VISA INC. CMN CLASS A (92826C839)	10/12/2010	10/04/2011	124 00	10,232.65	00 0	9,196 55	1,036 10
Net NonCovered Short-Term Gains (Losses)				559,822.72	0.00	550,695.69	9,127.01



information regarding the cost basis and acquisition dates of securities that you acquired elsewhere and that were subsequently delivered into your Goldman Sachs account(s) were provided by you and/or a third party and Goldman Sachs makes no representation as to the accuracy and completeness of such information and it should not be relied upon as such Realized and unrealized gams and loss values do not include securities for which cost basis is unavailable. The recognition of any loss reflected herein may be disallowed or deferred by the application of capital loss limitations, wash sale rules or other special tax rules and you are strongly urged to consult your own outside tax and other advisors about this and all tax-related matters addressed in any way herein. All

PAGE 34 of 35

<sup>4</sup> Basis may have been increased by eccruals of market discount and/or original issue discount or decreased by premium amortization. This increase or decrease of basis assumes the investor has elected to include market discount in income currently and/or amortiza premium currently. You should consult with your own tax advisor to determine your correct basis 5 Sale Proceeds may have been adjusted by an option premium due to an option assignment.

Legal Name Account No. Tax Year

**VIRGINIA LEE SHIRLEY PRIVATE** 020-60038-3

# **REALIZED GAINS AND LOSSES (Continued)**

: , '

Supplemental Information - Consult your Form 1099 for tax reporting purposes

#### **LONG-TERM GAINS (LOSSES)**

()=)							
	Date Acquired	Date Sold			Total Accretion		Total
Description (Product Identifier)	or Sold Short	or Covered	Quantity	Sale Proceeds 5 (Amortization)	(Amortization)	Cost Basis	Gain (Loss)
NonCovered Long-Term Gains (Losses)							
CHARLES SCHWAB CORPORATION CMN (808513105)	10/12/2010	10/12/2010 12/02/2011	2,239 00	26,436 03	00 0	31,266.96	(4,830 93)
Net NonCovered Long-Term Gains (Losses)				26,436.03	0.00	31,266.96	(4,830.93)



020-60038-3\_USTR\_5692048\_2012-02 12\_11 07 06\_V120120

Realized and unrealized gains and loss values do not include securities for which cost basis is unavailable. The recognition of any loss reflected herein may be disallowed or deferred by the application of capital loss limitations, wash sale rules or other special tax rules, and you are strongly urged to consult your own outside tax and other advisors about this and all tax-related matters addressed in any way herein. All information regarding the cost basis and acquisition dates of securities that you acquired elsewhere and that were subsequently delivered into your Goldman Sachs account(s) were provided by you and/or a third party and Goldman Sachs makes no representation as to the accuracy and completeness of such information and it should not be relied upon as such

PAGE 35 of 35

<sup>4</sup> Basis may have been increased by accruals of market discount and/or original issue discount in income currently and/or amortize premium currently. You should consult with your own tax advisor to determine your correct basis.
5 Sale Proceeds may have been adjusted by an option premium due to an option assignment.

## **REALIZED GAINS AND LOSSES**

Supplemental Information - Consult your Form 1099 for tax reporting purposes

# **REALIZED GAIN AND LOSS SUMMARY**

ů.

**VIRGINIA LEE SHIRLEY PRIVATE** 

020-60040-9 Account No

Legal Name

SHORT-TERM GAINS (LOSSES)		LONG-TERM GAINS (LOSSES)		ORDINARY GAINS (LOSSES)	
Net Covered Short-Term Gains (Losses)	00 0	Net Covered Long-Term Gains (Losses)	000	0 00 Net Ordinary Gains (Losses)	0000
Net NonCovered Short-Term Gains (Losses)	2,382 68	Net NonCovered Long-Term Gains (Losses)	120 00		
Net 1099B Non Reportable Short-Term Gains (Losses)	00 0	Net 1099B Non Reportable Long-Term Gains (Losses)	0000		
Net Miscellaneous Short-Term Gains (Losses)	000	Net Miscellaneous Long-Term Gains (Losses)	0000	Net Miscellaneous Ordinary Gains (Losses)	0.00
Net Regulated Futures Contract Short-Term Gains (Losses)	00 0	Net Regulated Futures Contract Long-Term Gains (Losses)	0000		
Total Short-Term Gains (Losses)	2,382,68 Total I	Total Long-Term Gains (Losses)	120.00	Total Ordinary Gains (Losses)	0.00

### SHORT-TERM GAINS (LOSSES)

	Date Acquired	Date Sold			Total Accretion		Total
Description (Product Identifier)	or Sold Short	or Covered	Quantity	Sale Proceeds 6 (Amortization)	(Amortization)	Cost Basis *	Gain (Loss)
NonCovered Short-Term Gains (Losses)							
CAISSE D'AMORTISSEMENT DE LA D 5,25% 11/02/2016 (9LN00RHE3)	11/03/2010	08/18/2011	100,000.00	118,500 00	(2,337.01)	116,512.99	1,987.01
KONINKLIJKE PHILIPS ELECTRONIC 5 75% 03/11/2018 M-W+35 00BP	10/25/2010	08/19/2011	150,000.00	174,372 00	(2,678 67)	173,976.33	395.67
(500472AB1)							
FEDERAL FARM CREDIT BANK SYSTE (31331 JR88)	10/21/2010	10/21/2010 10/13/2011	150,000 00	150,000 00	(129.00)	150,000.00	00 0
Net NonCovered Short-Term Gains (Losses)				442,872.00	(5,144.68)	440,489.32	2,382.68

#### **LONG-TERM GAINS (LOSSES)**

	Date Acquired	Date Sold			Total Accretion		lotal
Description (Product Identifier)	or Sold Short	or Sold Short or Covered	Quantity	Sale Proceeds 1 (Amortization)	(Amortization)	Cost Basis	Gain (Loss)
NonCovered Long-Term Gains (Losses)							
IBRD CA 0 75% 11/29/2013 MIN (459058AZ6)	11/09/2010	1/09/2010 11/29/2011	200,000 00	200,000.00	00 0	199,880.00	120 00
Net NonCovered Long-Term Gains (Losses)				200,000.00	0.00	199,880.00	120.00



information regarding the cost basis and acquistion dates of securities that you acquired elsewhere and that were subsequently delivered into your Goldman Sachs account(s) were provided by you and/or a third party and Goldman Sachs makes no representation as to the accuracy and completeness of such information and it should not be relied upon as such Realized and unrealized gains and loss values do not include securities for which cost basis is unavailable. The recognition of any loss reflected herein may be disallowed or deferred by the application of capital loss limitations, wash sale rules or other special tax rules, and you are strongly urged to consult your own outside tax and other advisors about this and all tax-related matters addressed in any way herein All

PAGE 28 of 28

<sup>4</sup> Basis may have been increased by accruals of market discount and/or original issue discount or decreased by premium amorization. This increase or decrease of basis assumes the investor has elected to include market discount in income currently and/or amorize premium currently. You should consult with your own tax advisor to determine your correct basis.
5 Sale Proceeds may have been adjusted by an option premium due to an option assignment.

<sup>020-60040-9</sup>\_USTR\_5692050\_2012-02 12\_07 58.24\_V120120

FORM 990-PF INTEREST ON SAV	VINGS A	ND TEM	PORARY CA	ASH IN	NVESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
GOLDMAN SACHS 020-60038-3 GOLDMAN SACHS 020-60039-1 GOLDMAN SACHS 020-60040-9 GOLDMAN SACHS 020-60040-9 - GOLDMAN SACHS 020-60040-9 -						44 1,682 94,423 <8,004 10,906	.26 .57
TOTAL TO FORM 990-PF, PART	I, LINE	3, CO	LUMN A			99,052	.62
FORM 990-PF DIVIDED	NDS AND	INTER	EST FROM	SECUE	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A)	)
GOLDMAN SACHS 020-60037-5 GOLDMAN SACHS 020-60038-3	•		2,079.77 1,750.74		0.00	2,079 31,750	
TOTAL TO FM 990-PF, PART I,	LN 4	33	3,830.51		0.00	33,830	.51
FORM 990-PF		LEGAL	FEES			STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
HARRISON & HELD, LLP	4,	640.91	4,64	10.91		0 .	.00
TO FM 990-PF, PG 1, LN 16A	4,	640.91	4,64	10.91		0	.00
FORM 990-PF	OTHER	PROFES	SIONAL FE	EES		STATEMENT	4
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
GOLDMAN SACHS MANAGEMENT AND INVESTMENT FEES (037)		627.13	62	27.13		0.	.00
GOLDMAN SACHS MANAGEMENT AND INVESTMENT FEES (038)	21,	933.43	21,93	33.43		0	.00
GOLDMAN SACHS MANAGEMENT AND INVESTMENT FEES (039)	1 .	083.53	1 00	33.53		0	.00

VIRGINIA LEE SHIRLEY PRIVAT	TE FOUNDATION	N			27-2545558
GOLDMAN SACHS MANAGEMENT AND INVESTMENT FEES (040)	12,292.39	- 12,29	2.39		0.00
TO FORM 990-PF, PG 1, LN 16C	35,936.48	35,93	36.48		0.00
FORM 990-PF	TAX	ES	<del></del> -		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM	
FOREIGN TAXES	213.40		0.00		0.00
TO FORM 990-PF, PG 1, LN 18	213.40		0.00		0.00
FORM 990-PF	CORPORAT	E STOCK			STATEMENT 6
DESCRIPTION			вос	K VALUE	FAIR MARKET VALUE
GOLDMAN SACHS 020-60038-3 GOLDMAN SACHS 020-60037-5				47,841.70 49,469.49	1,777,934.76 129,121.40
TOTAL TO FORM 990-PF, PART II	I, LINE 10B		1,7	97,311.19	1,907,056.16
FORM 990-PF	CORPORAT	E BONDS			STATEMENT 7
DESCRIPTION			вос	K VALUE	FAIR MARKET VALUE
GOLDMAN SACHS 020-60040-9 GOLDMAN SACHS 020-60039-1			3,2	41,406.11	3,268,271.20
TOTAL TO FORM 990-PF, PART II	I, LINE 10C		3,2	41,406.11	3,268,271.20

FORM 990-PF	OTHER ASSETS		STATEMENT 8
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
EXPENSES DEDUCTED IN 2010 BUT NOT PAID UNTIL 2011	0.00	10,629.73	0.00
TO FORM 990-PF, PART II, LINE 15	0.00	10,629.73	0.00

Form 8868 (Rev. 1·2012)					Page 2
If you are filing for an Additional (Not Automatic) 3-Month E	xtension,	complete only Part II and check this	s box	•	<b>▶</b> X
Note. Only complete Part II if you have already been granted an	automatic	3-month extension on a previously f	iled Form	8868.	
If you are filing for an Automatic 3-Month Extension, comple					
Part II Additional (Not Automatic) 3-Month I	Extensio	n of Time. Only file the origin	nal (no d	copies nee	ded)
		Enter filer's	identifyi	ng number,	see instructions
Type or Name of exempt organization or other filer, see instr	uctions		Employe	r identificatio	n number (EIN) or
print					
File by the VIRGINIA LEE SHIRLEY PRIVAT	E FOU	NDATION	X	27-25	45558
Number, street, and room or suite no. If a P.O. box,	see instruc	tions.	Social se	ecurity numb	er (SSN)
etum See C/O LOUIS S. HARRISON, HARR	ISON	& HELD, LLP - 333		<u>,</u>	
City, town or post office, state, and ZIP code. For a CHICAGO, IL 60606	foreign add	fress, see instructions.			
Taken the Detries and for the votion that this application is for 15	lo o ooooro	to application for each return)			0 4
Enter the Return code for the return that this application is for (fi	ie a separa	te application for each return)		•	
Application	Return	Application			Return
s For	Code	Is For			Code
Form 990	01				
Form 990-BL	02	Form 1041-A			08
Form 990-EZ	01	Form 4720			09
Form 990-PF	04	Form 5227			10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870			12
STOP! Do not complete Part II if you were not already grante		natic 3-month extension on a prev	iously file	ed Form 886	8
LOUIS S. HARRI					_
The books are in the care of > 333 W. WACKER	DR.,		GO, I	L 6060	6
Telephone No. ► 312-332-5440		FAX No. ►			
If the organization does not have an office or place of busines					<b></b>
If this is for a Group Return, enter the organization's four digit	_				
pox ▶ If it is for part of the group, check this box ▶		ach a list with the names and EINs of	all memb	ers the exter	nsion is for.
	NOVEM.	BER 15, 2012.			
5 For calendar year $2011$ , or other tax year beginning _		, and endin			·
6 If the tax year entered in line 5 is for less than 12 months,	check reas	on: Initial return	Final	return	
Change in accounting period					
7 State in detail why you need the extension	(ID NATIO				
ADDITIONAL EXTENSION WAS NOT	GRANT.	ED			
		<del></del>	<del></del>	T	
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any		<b>s</b>	
nonrefundable credits. See instructions.				1 3	0 00
			8a	-	0.00
b If this application is for Form 990-PF, 990-T, 4720, or 6069	_		8a	_	0.00
tax payments made. Include any prior year overpayment a	_				
tax payments made. Include any prior year overpayment a previously with Form 8868.	llowed as a	a credit and any amount paid	8a 8b	\$	0.00
tax payments made. Include any prior year overpayment a previously with Form 8868.  c Balance due. Subtract line 8b from line 8a. Include your p	ayment wit	a credit and any amount paid	8b	\$	0.00
tax payments made. Include any prior year overpayment a previously with Form 8868.  c Balance due. Subtract line 8b from line 8a. Include your p EFTPS (Electronic Federal Tax Payment System). See insti	dlowed as a ayment wit	a credit and any amount paid th this form, if required, by using	8b 8c		
tax payments made. Include any prior year overpayment a previously with Form 8868.  c Balance due. Subtract line 8b from line 8a. Include your p EFTPS (Electronic Federal Tax Payment System). See instructional Signature and Verifica Under penalties of perjury, I declare that I have examined this form, inclured	ayment wit ructions. tion must	h this form, if required, by using	8b 8c	\$	0.00
tax payments made. Include any prior year overpayment a previously with Form 8868.  c Balance due. Subtract line 8b from line 8a. Include your p EFTPS (Electronic Federal Tax Payment System). See instructional Signature and Verification Signature and Verification of perjury, I declare that I have examined this form, incluit is true, correct, and complete, and that I am authorized to prepare this form.	ayment wit ructions. tion must	th this form, if required, by using st be completed for Part II coanying schedules and statements, and to	8b 8c	\$ sf my knowledg	0.00

123842 01-06-12