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990-PF

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

OMB No 154<u>5</u>-0052

		nt of the Treasury	Note. The foundation ma	T v be able	reated as a Priva	te Foundation	on Stisfy state rei	portina requirements	2011
	-		or tax year beginning	y be abit	04/		, and endin		12/31, 20 11
_		of foundation	or non-year augmining					A Employeridentifi	
	ROB	ERT & GLADYS	S HARRIS CHAR T	UA CO	NS			45-	6256444
_			box number if mail is not del			· · · · · · · · · · · · · · · · · · ·	Room/suite		
							!	·	
	РΟ	BOX 32760						() -
		r town, state, and Z	IP code						
								C If exemption applica	tion is
	LOU	ISVILLE, KY	40232-2760					pending, check here	
		ck all that apply:	X Initial return		Initial return	of a former p	ublic charit	V D	>
			Final return	F	Amended ret			Y D 1 Foreign organizat 2 Foreign organizat	
			Address change	Ī	Name change			85% test, check h	ere and attach
Н	Che	ck type of organiz	ation: X Section 50					computation -	
ſ		_	onexempt charitable trust		Other taxable pr		ion	E If private foundation under section 507(b	
ī		market value of a	· · · · · · · · · · · · · · · · · · ·		g method. X C		rual	1	n a 60-month termination
	of v	ear (from Part II, c			specify)			l l)(1)(B), check here .
					nn (d) must be o	n cash basıs ,	,	-	
;	art I		enue and Expenses (T	he .					(d) Disbursements
		total of amounts in	n columns (b), (c), and (d) ly equal the amounts in	Į (ā	Revenue and expenses per	(b) Net inve	I .	(c) Adjusted net income	for charitable
		column (a) (see in:			books	micon	ie	income	purposes (cash basis only)
_	1		ts, etc., received (attach schedule)		1,629,634.				, , , , , , , , , , , , , , , , , , , ,
	2	Charle I if the	e foundation is not required to	,	· ·				
	3	anac	d temporary cash investment	-					
	4	=	rest from securities		29,404.	2	9,404.		
	5 a								
	l		(loss)	· [·-··	
•	l		n sale of assets not on line 10		104,176.			*****************	
ž		Gross sales price for a assets on line 6a							
Revenue	7		come (from Part IV, line 2)			10	04,176.		
č	8	, -	tal gain		··				
	9		ins · · · · · · · · · ·						
	10 a	Gross sales less returnand allowances	18		<u> </u>				
	ь	Less Cost of goods so	1						
	c	Gross profit or (loss	s) (attach schedule)						
	11		ch schedule)						
_	12		through 11	- 1	1,763,214.	13	3,580.		
	13	Compensation of office	cers, directors, trustees, etc		11,126.	1	1,126.		
	14		laries and wages						
ses	15	Pension plans, emp		§ ()					
ě	16a	Legal fees (attach	schedulet CENTE		271.				271
Expense	ь	Accounting fees (a)				
	С		fees (attach schedule) ? (92 le	n∖\				
ij	17		101. MAY. 8.7.						
stra	18	Taxes (attach schedul	e (instructions)		185.		185.		
Ē	19		h schedule and depletion	سلول					
and Administrative	20	Occupancy	1 0000						
ďρ	21	Travel, conferences	, and meetings						
a	22	Printing and public	ations						
	23		tach schedule)						
Operating	24	Total operating an	d administrative expense	s.					
per			gh 23		11,582.	1	1,311.		273
0	25		, grants paid		38,733.				38,733
_	26		oursements Add lines 24 and 2		50,315.	1	1,311.		39,004
	27	Subtract line 26 fro							
		Excess of revenue over	expenses and disbursements .		1,712,899.				
	l .		come (if negative, enter -0			12	22,269.		

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

For Paperwork Reduction Act Notice, see instructions.

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Form 990-PF (2011)

P	art II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	f year •
_	ar ()	- Dalatice Officets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-beari	ng			
	2		cash investments		183,190.	183,190
	3	Accounts receivable >		· · · · · · · · · · · · · · · · · · ·		*****
		Less allowance for doub	otful accounts >			
	4	Pledges receivable				
		Less allowance for doub	otful accounts ►			
	5		· · · · · · · · · · · · · · · · · · ·			
	6		officers, directors, trustees, and other			-
	Ü		· · · · · · · · · · · · · · · · · · ·			
	-		ach schedule) (see instructions)	····		
	7		eceivable (attach schedule)			
			otful accounts			
ts	8	Inventories for sale or us	se			
Assets	9		eferred charges			
ď	10 a	Investments - U S and state	government obligations (attach schedule)			
			stock (attach schedule) . STMT .1		1,012,116.	1,085,767
	С	Investments - corporate	bonds (attach schedule). STMT .3.		517,255.	537,435
	11	Investments - land, building and equipment basis Less accumulated deprecia (attach schedule)				
	12	· ·	loans			
	13	Investments - other (atta	ich schedule)			
	14	Land, buildings, and				
		Less accumulated deprecia	otion CTMT 4			
	15	Other assets (describe	► STMT 4)		334.	9,645
	16		completed by all filers - see the			3/013
			age 1, item 1)		1,712,895.	1,816,037
_	17		ccrued expenses		1,712,093.	1,010,037
	18					
Liabilities	19					
Ĕ	20		rs, trustees, and other disqualified persons .			
į	21		ites payable (attach schedule)			
_	22	Other liabilities (describe	• ▶}}			
_	23		es 17 through 22)			
			low SFAS 117, check here ► 24 through 26 and lines 30 and 31			
es	24	Unrestricted				
alances	25	Temporarily restricted				
Bal	26					
Fund 1		Foundations that do	not follow SFAS 117, plete lines 27 through 31. ► X			
5	27		cipal, or current funds		1,712,895.	
			r land, bldg , and equipment fund		2//20/0551	
set	28 29 30 31		lated income, endowment, or other funds			
As	20		d balances (see instructions)		1,712,895.	
let	31		net assets/fund balances (see		1,112,093.	
~	٥.				1 712 005	
D	art II		anges in Net Assets or Fund	Ralances	1,712,895.	
			palances at beginning of year - Part		/	
1						
_			on prior year's return)			1 710 000
		r amount from Part I, I				1,712,899.
4	Add	lines 1, 2, and 3	line 2 (itemize) ► SEE STA	<u> </u>	4	1,712,899.
5	Decr	eases not included in	line 2 (itemize) ► SEE STA	LEMENT 5	5	4.
<u>6</u>	Tota	net assets or fund ba	lances at end of year (line 4 minus lii	ne 5) - Part II, column (b), line 30 6	1,712,895.
						Form 990-PF (2011)

P	art IV Capital Gains	and Losses for Tax on Inv	estment Income			
		describe the kind(s) of property sold ick warehouse, or common stock, 200	-	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a	DIWLICKY WALDED			D-Donacion		
b						
С						
_d						
_ <u>e</u>	···-		· · · · · · · · · · · · · · · · · · ·		<u> </u>	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
a	603,667.		499,491.		1(04,176.
_b						
C						
_d					_ 	
_е						
	Complete only for assets s	howing gain in column (h) and owned	T'		Gains (Col (h) ga	
	(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	col	(k), but not less t Losses (from co	
_a					10	04,176.
_b						
_c						
_d						
_e				ļ		
2	Capital gain net income or		f gain, also enter in Part I, line 7 } f (loss), enter -0- in Part I, line 7	2		104,176.
3	Net short-term capital gain	or (loss) as defined in sections 12	,		<u> </u>	
	If gain, also enter in Par	t I, line 8, column (c) (see ins	structions) If (loss), enter -0- in $\}$			
_	Part I, line 8		<u> </u>	3		
P	art V Qualification U	nder Section 4940(e) for Rec	duced Tax on Net Investment I	ncome	N	/A
(Fe	or optional use by domestic	private foundations subject to the	e section 4940(a) tax on net investr	nent inco	me)	
if:	section 4940(d)(2) applies,	leave this part blank				
147	aa kha farradakaa bahla farr	sh 4040 A Ab - d			-a	
		the section 4942 tax on the distri not qualify under section 4940(e)	butable amount of any year in the b	ase perio	۵٬	_ Yes No
1			, see the instructions before making	any entr	100	
<u> </u>	(a)	(b)	(c)	dily chir	(d)	
,	Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ration (col. (b) divided by	
_	2010			<u> </u>	(601 (6) (411) (64 6)	(0)
_	2009			 		
_	2008	······································				
_	2007					
_	2006	·-·				
_				 		
2	Total of line 1, column (d)			2		
3			e the total on line 2 by 5, or by the		······································	
	~		s than 5 years	3		
	•		,			
4	Enter the net value of non	charitable-use assets for 2011 fro	om Part X, line 5	4		
5	Multiply line 4 by line 3			5		
					·	
6	Enter 1% of net investmer	nt income (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7		
8	Enter qualifying distribution	one from Part XII June 4		8		
0			in Part VI, line 1b, and complete		using a 1% ta	x rate See the

Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in:	struc	tions) '
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		2,4	45.
	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			
3	Add lines 1 and 2		2,4	45.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			ONE
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		2,4	45.
6	Credits/Payments			
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a			
b	Exempt foreign organizations - tax withheld at source			
c	Tax paid with application for extension of time to file (Form 8868) 6c NONE			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		N	ONE
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		2,4	<u>45.</u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2012 estimated tax ▶ Refunded ▶ 11			
	VII-A Statements Regarding Activities	—		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate		Yes	No.
	or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the			37
	instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	1		
	distributed by the foundation in connection with the activities			v
	Did the foundation file Form 1120-POL for this year?	1c		X
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
_	(1) On the foundation > \$			
е	on foundation managers \$	- 1		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
2	If "Yes," attach a detailed description of the activities	-		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	1		
•	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
•	If "Yes," attach the statement required by General Instruction T		•	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
_	By language in the governing instrument, or	İ		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	Ì		
	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	Χ	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) KY			
ь	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 ² If "No," attach explanation	8b		
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			
	Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			
	and addresses	10	X	

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

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3NONE

All other program-related investments. See instructions

Total. Add lines 1 through 3.

Pa	art X Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	reign foundat	ions,
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	1,826,619.
b	Average of monthly cash balances	1b	NONE
C	Fair market value of all other assets (see instructions)	1c	NONE
d	d Total (add lines 1a, b, and c)	1d	1,826,619.
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	Subtract line 2 from line 1d	3	1,826,619.
4	Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
		4	27,399.
5	Instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,799,220.
6	Minimum investment return. Enter 5% of line 5	. 6	61,371.
Pa	art 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 the second of the seco	•	
1	Minimum investment return from Part X, line 6		61,371.
2a			
	b Income tax for 2011. (This does not include the tax from Part VI.)		
C			2,445.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	58,926.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4		58,926.
6	Deduction from distributable amount (see instructions)		NONE
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		NONE
	line 1 · · · · · · · · · · · · · · · · · ·	7	58,926.
		• • • •	30,320.
	art XII Qualifying Distributions (see instructions)	- 4	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a		. 1a	39,004.
b		. 1b	
2	, , , , , , , , , , , , , , , , , , , ,		NONE
3	Amounts set aside for specific charitable projects that satisfy the:	• • •	NONE
а		3a	NONE
ь		1 1	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		39,004.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment incom		37,004.
-	Enter 1% of Part I, line 27b (see instructions)		
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	39,004.
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when	calculating :::	
	qualifies for the section 4940(e) reduction of tax in those years	calculating Wi	remer the foundation

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	rt XIII Undistributed Income (see instruct	(a)	(b)	(c)	(d)
1	Distributable amount for 2011 from Part XI,	Corpus	Years prior to 2010	2010	2011 58,926.
2	Undistributed income, if any, as of the end of 2011				30,720.
_	Enter amount for 2010 only			NONE	
	Total for prior years. 20, 20, 20		NONE	1,01,2	· · · · · · · · · · · · · · · · · · ·
3	Excess distributions carryover, if any, to 2011		110112		
a	From 2006 NONE				
h	From 2007 NONE				
	From 2008 NONE				
	From 2009 NONE				
	From 2010 NONE				
	Total of lines 3a through e	NONE			
4	Qualifying distributions for 2011 from Part XII,	1,01,12			
•	line 4 ▶ \$ 39,004.				
	Applied to 2010, but not more than line 2a			NONE	
	· · · · · · · · · · · · · · · · · · ·			NONE	
b	Applied to undistributed income of prior years (Election required - see instructions)		NONE		
С	Treated as distributions out of corpus (Election				
	required - see instructions)	NONB			
d	Applied to 2011 distributable amount				39,004.
е	Remaining amount distributed out of corpus	NONB			
5	Excess distributions carryover applied to 2011	NONE			NONE
6	(If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	NONE	1		
b	Prior years' undistributed income Subtract line 4b from line 2b	-	NONE		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		NONE		
ч	Subtract line 6c from line 6b Taxable				
-	amount - see instructions		NONE		
е	Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount - see instructions			NONE	
f	Undistributed income for 2011 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012				19,922.
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 applied on line 5 or line 7 (see instructions)	NONE			
9	Excess distributions carryover to 2012.	-			
	Subtract lines 7 and 8 from line 6a	NONE			
10	Analysis of line 9				
а	Excess from 2007 NONE				
	Excess from 2008 NONE				
	Excess from 2009 NONE				
	Excess from 2010 NONE		•		
	Excess from 2011 NONE				

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Pai	rt XIV Private Oper	ating Foundations (see instructions and	I Part VII-A, question	9)	NOT APPLICABLE
1 a	If the foundation has foundation, and the ruling	_			ting ·	
b	Check box to indicate who				4942(j)	(3) or 4942(j)(5)
		Tax year	private operating realists	Prior 3 years	[[10.14()	
2a	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 •					
d	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 a	Complete 3a, b, or c for the alternative test relied upon "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	<u></u>				
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)	1				
	(3) Largest amount of sup- port from an exempt organization					
	(4) Gross investment income,			<u> </u>		<u> </u>
Pa		ary Information (Co during the year - see		only if the founda	ation had \$5,000	or more in assets
1	Information Regarding	Foundation Manager	rs:			
а	List any managers of before the close of any					ed by the foundation
	N/A					
b	List any managers of ownership of a partner					large portion of the
	N/A					
2	Information Regarding	Contribution, Grant,	Gift, Loan, Scholarsh	ip, etc., Programs:	7	
	Check here ► X if t unsolicited requests for other conditions, comp	or funds. If the found	ation makes gifts, gra			
а	The name, address, an	d telephone number o	of the person to whom	applications should b	e addressed	
b	The form in which app	lications should be sul	bmitted and information	on and materials they	should include	
С	Any submission deadle	ines:				
d	Any restrictions or lifactors	imitations on awards	, such as by geogra	aphical areas, charita	ble fields, kinds of	institutions, or other

3 Gents and Contributions Paid During the Year or Approved for Future Payment Recipient Name and address flome or business) a Paid during the year SEE STATEMENT 7 Total Total Approved for future payment	Form 990-PF (2011)	(agetierred)			Page 11
Recipient Frace Frace			awad for E	estura Davesant	
a Pad during the year SEE STATEMENT 7 Total		If recipient is an individual,			
a Pad during the year SEE STATEMENT 7 Total		show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
SEE STATEMENT 7 Total b Approved for future payment 38,733.		or substantial contributor	recipient		
Total 3a 38,733. b Approved for future payment	a raid during the year				
Total 3a 38,733. b Approved for future payment	ՉԵԵ ՀՊ Խ ՊԵМԵМՄ 7				
b Approved for future payment	DEE STATEMENT /				
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b Approved for future payment	Total	- 		▶ 3a	38.733
Total	.,				
Total		1			
Total					
	Total		-l		-

i		ited business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
Dragon and an arrange	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income
rogram service revenue		7 initiality	Exclusion code	74110474	(See instructions)
			_	1	
					
Fees and contracts from government agencies					
Membership dues and assessments					
nterest on savings and temporary cash investments				-	
Dividends and interest from securities			14	29,404.	
let rental income or (loss) from real estate			-		
Debt-financed property					
Not debt-financed property					
let rental income or (loss) from personal property .					
Other investment income					
Gain or (loss) from sales of assets other than inventory			18	104,176.	
let income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue a					
•					
1					
e					
Subtotal Add columns (b), (d), and (e)				133,580.	
me No. Explain below how each activit accomplishment of the foundation					•
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		NOT APPLICAE	OLE .		
		NOT APPLICAE	LE		
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		NOT APPLICAE	ELE		
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		NOT APPLICAE	3LE		

Part X	(VII	Information R Exempt Organ		ransfers To a	nd Transacti	ions and	d Relationships With Non	charita	ble
ın	section	organization direct	ly or indirect			-	y other organization described ection 527, relating to political	Y	es No
	-	rs from the reporting	g foundation	to a noncharitable	exempt organ	ızatıon of:			1
			_					1a(1)	X
								1a(2)	X
b O	ther tr	ansactions:							
(1	i) Sale	es of assets to a non	charitable exi	empt organization				1b(1)	X
(2	2) Purc	chases of assets from	m a noncharit	able exempt orga	nization	· • • • •		1b(2)	X_
(3	3) Reni	tal of facilities, equip	pment, or oth	er assets				1b(3)	<u>X</u>
								1b(4)	<u>X</u>
(5) Loar	ns or loan guarantee	es			· · · · ·	• • • • • • • • • • • • • • • • • • • •	1b(5)	X
							• • • • • • • • • • • • • • • • • • • •	1b(6)	X
							Salvana (EV abouted about a bar	1c	
							Column (b) should always show If the foundation received less		
		_		•			of the goods, other assets, or s		
(a) Line		(b) Amount involved		of noncharitable exemp		1	cription of transfers, transactions, and share		
								3 3	
	-			· · · · · · · · · · · · · · · · · · ·					
									
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de	escribe		of the Code	other than section			e tax-exempt organizations	Yes	X No
	100,	(a) Name of organizatio			e of organization		(c) Description of relation	ship	
	<u> </u>								
				- 					
			 -						
	Under	penalties of perjury, I decla	re that I have exa	amined this return includ	ting accompanying s	chedules and	statements, and to the best of my knowledge	ge and belie	ef, it is true,
Sign	correct,	and complete Declaration of	f preparer (other tha	in taxpayer) is based on all	I information of which	preparer has a	· · ·		
Here		Yesin X	exte	05/14	1/2012		May the IRS with the pr	3 discuss : eparer sho	
	Signa	ature of officer of trustee		Date		Title	(see instruction	77	es No
	<u> </u>	Print/Tune proparar's	00000	Proporor's au	- noturo		These These	OTIAL	
Paid		Print/Type preparer's		Preparer's sig	gnature C - \			PTIN	
Prepa	rer	BETH SCHROED	·	THE CITY) S Chris	بيطدم		P00472	
Use C		Firm's name ► MA Firm's address ► 11	RSHALL &	ILSLEY TRUS	T COMPANY	NA	Firm's EIN ► 39-	118626	<u>) /</u>
	,		LWAUKEE,	PARK PLACE WI	52	224	Phone no		
			<u>, 1111) (1111) </u>	71 1		<u> </u>		orm 990-	PF (2011)
							Г	J. III J J J J	

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

20**11**

Employer identification number Name of the organization ROBERT & GLADYS HARRIS CHAR TUA CONS 45-6256444 Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 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 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 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

vame or organization										
ROBERT	&	GLADYS	HARRIS	CHAR	TUA	CON				

Employer identification number 45-6256444

Part I	Contributors	(see instructions).	Use duplicate	copies of Part I	if additional space	is needed.
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(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$ <u>58,454.</u>	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
2_	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$20,655.	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
3_	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$89,794	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
		· · · · · · · · · · · · · · · · · · ·	
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	• • • • • • • • • • • • • • • • • • • •		
No.	Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B PO BOX 32760	Total contributions	Person Payroll Noncash (Complete Part II if there is
No4	Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760 (b)	\$32,914	Person Payroll Noncash (Complete Part II of there is a noncash contribution)
(a) No.	Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760 (b) Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B PO BOX 32760	\$32,914 (c) Total contributions	Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Employer identification number 45 - 6256444

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7_	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$ <u>100</u> _874	Person Payroll Noncash (Complete Part II if there is
	(b)	(c)	a noncash contribution) (d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
8_	ROBERT O HARRIS JR TUA FUND B		Person Payroll
	PO BOX 32760	\$99,515	Noncash X
	LOUISVILLE, KY 40232-2760		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9_	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$19,750.	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
10_	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$30,520.	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
11	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$7,356.	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
12_	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$20,610.	Person Payroli Noncash (Complete Part II if there is a noncash contribution)

Employer identification number 45-6256444

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$43,727.	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
14	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$14,665	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
15	PO BOX 32760 LOUISVILLE, KY 40232-2760	\$25,010.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
	Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760		
	ROBERT O HARRIS JR TUA FUND B PO BOX 32760	Total contributions	Person Payroll Noncash (Complete Part II if there is
16	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760 (b)	\$ 25,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
16_ (a) No.	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760 (b) Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B PO BOX 32760	\$25,000.	Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution Person Payroll Noncash (Complete Part II if there is

Employer identification number 45-6256444

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19_	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$5,176.	Person Payroli 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
20	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$67,963.	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
21	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$117,304.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
	(1.3		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	• •		
No.	Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B PO BOX 32760	Total contributions	Person Payroll Noncash (Complete Part II if there is
No	Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760 (b)	*44760	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
No22 (a) No.	Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760 (b) Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B PO BOX 32760	\$44,760.	Person Payroll Noncash (Complete Part II if there is a noncash contribution.) (d) Type of contribution Person Payroll Noncash (Complete Part II if there is

Employer identification number 45-6256444

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	ROBERT O HARRIS JR TUA FUND B		Person
	PO BOX 32760	\$25,006.	Payroll Noncash X
	LOUISVILLE, KY 40232-2760		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
26	ROBERT O HARRIS JR TUA FUND B		Person
	PO BOX 32760	\$10,011.	Payroli Noncash X
	LOUISVILLE, KY 40232-2760		(Complete Part II if there is a noncash contribution)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
27_	ROBERT O HARRIS JR TUA FUND B		Person
	PO BOX 32760	\$25,000.	Payroll Noncash X
	LOUISVILLE, KY 40232-2760		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
28	ROBERT O HARRIS JR TUA FUND B		Person
	PO BOX 32760	\$25,213	Payroll X
	LOUISVILLE, KY 40232-2760		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
29_			'''
22-	ROBERT O HARRIS JR TUA FUND B		Person
22-	ROBERT O HARRIS JR TUA FUND B PO BOX 32760	\$29,100.	
		\$29,100.	Person Payroll
(a) No.	PO BOX 32760	\$29,100. (c) Total contributions	Person Payroll Noncash (Complete Part II if there is
(a)	PO BOX 32760 LOUISVILLE, KY 40232-2760 (b)	(c)	Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution
(a) No.	PO BOX 32760 LOUISVILLE, KY 40232-2760 (b) Name, address, and ZIP + 4	(c)	Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution

Employer identification number 45-6256444

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$25,000.	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
32	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$32,191	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
33	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$24,900.	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
34	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$24,920.	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
35_	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$40,275.	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
36_	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$21,360.	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Employer identification number 45-6256444

(a) <u>No</u> .	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37	ROBERT O HARRIS JR TUA FUND B		Person Payroll
	PO_BOX_32760	\$18,859	Noncash
	LOUISVILLE, KY 40232-2760		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
38_	ROBERT O HARRIS JR TUA FUND B	,	Person
	PO BOX 32760	\$28,800.	Payroll Noncash X
	LOUISVILLE, KY 40232-2760		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
39_	ROBERT O HARRIS JR TUA FUND B		Person
	PO BOX 32760	\$17,395.	Payroll X
	LOUISVILLE, KY 40232-2760		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	· · · · · · · · · · · · · · · · · · ·		
No.	Name, address, and ZIP + 4		Type of contribution
No.	Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B	Total contributions	Person Payroll
No.	Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B PO BOX 32760	Total contributions	Person Payroll Noncash (Complete Part II if there is
No	Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760 (b)	\$25,018	Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution
(a)	Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760 (b) Name, address, and ZIP + 4	\$25,018	Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution
(a)	Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760 (b) Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B	\$25,018.	Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution Person Payroll
(a)	Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760 (b) Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B PO BOX 32760	\$25,018.	Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution Person Payroll Noncash (Complete Part II if there is
(a) No	Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760 (b) Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760 (b)	\$25,018	Person Payroll Noncash (Complete Part II if there is a noncash contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution
(a) No.	Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760 Name, address, and ZIP + 4 ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760 (b) Name, address, and ZIP + 4	\$25,018	Person Payroll Noncash (Complete Part II if there is a noncash contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution) (d) Type of contribution

Employer identification number 45 - 6256444

(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
43	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$12,851	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
44	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$41,954.	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
45_	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$5,537.	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
46_	PO BOX 32760 LOUISVILLE, KY 40232-2760	\$32,100.	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
47_	PO BOX 32760 LOUISVILLE, KY 40232-2760	\$9,152.	Person Payroli Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
48	ROBERT O HARRIS JR TUA FUND B PO BOX 32760 LOUISVILLE, KY 40232-2760	\$17,301	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization	Employer identification number
ROBERT & GLADYS HARRIS CHAR TUA CONS	45-6256444

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution __49_ ROBERT O HARRIS JR TUA FUND B Person **Payroll** PO BOX 32760 11,865. Noncash (Complete Part II if there is LOUISVILLE, KY 40232-2760 a noncash contribution) (a) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroli** Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Pavroll** Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization

ROBERT & GLADYS HARRIS CHAR TUA CONS

Employer identification number

45-6256444

(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
2	452 SHARS OF ALLERGAN INC COM			
		\$_	37,005.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
3	90000 BALLARD CNTY KY PUB PTTYS CORP REV RF MTG CT FAC PROJ 3.625%			
		\$_	90,565.	05/04/2011
(a) No from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
4_	700 SHARES BERSHIRE HATHAWAY INC DEL CL B N			
		\$_	57,106.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
5_	350 SHARES BROWN FORMAN CORP CL B			
		\$_	24,777.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
6	750 SHARES CVS CAREMARK CORP COM			
		\$_	27,090.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
	100000 CAMPBELL & KENTON CNTYS KY SANT DIST			
7	RFDG SER A 4.00%	1	l	

Name of organization

Employer identification number

ROBERT & GLADYS HARRIS CHAR TUA CONS

45-6256444

CILCUI	Troncasti Froperty (see instructions). Ose auplicate copies of Fe	31 L H 1	additional space is fiee	ucu.
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
8	100000 CHRISTIAN CNTY KY PUB COURTHOUSE COR REV RFDG CT FAC PROJ		102 057	05/04/2011
		\$	102,857.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
9	1000 SHARES CISCO SYS INC COM			
		\$_	17,470.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
10	1500 SHARES COMCAST CORP CL A			
		\$_	38,940.	05/04/2011
(a) No from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
	300 SHARES DISNEY WALT CO COM			
		\$_	12,786.	05/04/2011
(a) No from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
12	300 SHARES EXXON CORP COM			
		\$_	25,443.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
13	1425 SHARES OF GENERAL ELEC CO COM			
		\$_	28,888.	05/04/2011

ROBERT & GLADYS HARRIS CHAR TUA CONS

Employer identification number

45-6256444

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.
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(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
14	633.765 SHARES GOLDMAN SACHS MID CAP VALUE			
		\$_	24,463.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
15_	25000 GRANT CNTY KY SCH DIST FIN CORP SCH B SER A 3.50%			
		\$_	25,010.	_05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
16_	25000 HARDIN CNTY KY SCH DIST FIN CORP SCH 3.15% DTD 02/01/2005			
		\$_	25,049.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
17	200 SHARES HARLEY DAVIDSON INC COM			
		\$_	7,354.	05/04/2011
(a) No from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
18	1500 SHARES HOME DEPOT INC COM			 , ,
		\$_	55,785.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
1.0	50 SHARES INTERNATIONAL BUSINESS MACHS CORP		-	
19				

Name of organization

ROBERT & GLADYS HARRIS CHAR TUA CONS

Employer identification number

45-6256444

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	rt II	f additional space is nee	ded.
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
20_	1100 SHARES ISHARES TR MSCI EAFE INDEX FD			
		\$_	69,091.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
21	1125 SHARES ISHARES TR BARCLAYS 1-3 YR CR B			
		\$_	117,878.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
22	1100 SHARES JPMORGAN CHASE & CO COM			
		\$_	50,050.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
23_	900 SHARES JOHNSON & JOHNSON COM			
		\$_	59,103.	05/04/2011
(a) No from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
24	100000 KENTON CNTY KY PUB PPTYS CORP REV RF MTG COURT FACS PROJ			
		\$_	107,394.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
25_	25000 KENTUCKY ASSET/LIABILITY COM GEN RCPT KENTUCKY PROJ NTS SER			
		\$_	25,237.	05/04/2011

Name of organization

ROBERT & GLADYS HARRIS CHAR TUA CONS

Employer identification number

45-6256444

(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
26_	10000 KENTUCKY HSG CORP HSG REV SER E AMT 4 10/24/2002 DUE 07/01/2017			
		\$_	10,049.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
27	25000 KENTUCKY HSG CORP HSG REV BDS 2009B 3 10/01/2009			
:		\$_	25,405.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
28	25000 KENTUCKY INTERLOCAL SCH TRANSN COPS 3 01/01/2009 DUE 03/01/2017			
		\$_	25,412.	_05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
29	1000 SHARES KRAFT FOODS INC CL A			
		\$_	33,850.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
	5000 LOUISVILLE KY WTR REV RFDG 6.125% DUE			
30_				
30		\$_	5,381.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given	\$_	5,381. (c) FMV (or estimate) (see instructions)	05/04/2011 (d) Date received
(a) No. from		\$_	(c) FMV (or estimate)	(d)

ROBERT & GLADYS HARRIS CHAR TUA CONS

Employer identification number

45-6256444

Part II	Noncash Property	(see instructions). Use	duplicate copies	of Part II if addition	nal space is nee	ded.
/a) Nia						

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
32_	1450 SHARES MATTEL INC COM		
		\$\$.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
33_	25000 MEADE CNTY KY SCH DIST FIN CORP SCH B 3.60% DTD 01/01/2005		
		\$ 26,503.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
34	25000 MERCER CNTY KY SCH DIST FIN CORP SCH RFDG 3.00% DTD 03/01/2008		
		\$ 26,270.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
35	1500 SHARES MICROSOFT CORP COM		
		\$39,090.	05/04/2011
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
36	400 SHARES NORTHERN TR CORP COM		
		\$19,664.	_05/04/2011
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	600 SHARES OMNICOM GROUP INC COM		
<u>37</u>	GOO SHARES OF THE COFF		•

Name of organization

ROBERT & GLADYS HARRIS CHAR TUA CONS

Employer identification number

45-6256444

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(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
38_	600 SHARES PEPSICO INC COM		
		\$	05/04/2011
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
39_	985 SHARES PFIZER INC COM		
		\$ 20,330.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
40	25000 PIKE CNTY KY SCH DIST FIN CORP SCH BL 02/01/2005		
		\$ 25,751.	_05/04/2011
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
41	900 SHARES PROCTER & GAMBLE CO COM		
		\$59,823.	_05/04/2011
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
42	1400 SHARES PROGRESSIVE CORP OH COM		
		\$30,590.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
43	450 SHARES TJX COS INC NEW COM		
			ľ

Name of organization

Employer identification number

ROBERT & GLADYS HARRIS CHAR TUA CONS

45-6256444

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
44	1500 SHARES US BANCORP DEL COM NEW			
		\$_	38,310.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
45_	125 SHARES VANGUARD INDEX FDS VANGUARD MID-			
		\$_	10,123.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
46	500 SHARES VANGUARD INDEX FDS VANGUARD SMAL			
		\$_	39,305.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
47	400 SHARES WATERS CORP COM			-
		\$_	38,748.	05/04/2011
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
48	500 SHARES TE CONECTIVITY LTD REG SHS			
		\$_	17,805.	05/04/2011
(a) No from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
	300 SHARES TYCO INTERNATIONAL LTD SHS			
49				

ROBERT & GLADYS HARRIS CHAR TUA CONS

FORM 990PF, PART II - CORPORATE STOCK

END ING FMV 	28,958. 27,815. 20,498. 34,928. 31,275. 31,711. 31,734. 31,525. 32,488. 32,488. 332,460. 24,302. 24,404.
ENDING BOOK VALUE	25,903. 16,762. 22,611. 22,883. 117,000. 117,000. 22,345. 22,345. 22,345. 22,345. 22,345. 22,345. 22,345. 22,345. 22,345. 22,345. 22,345. 22,442. 22,640. 22,442. 22,442. 22,432. 22,311. 22,311.
DESCRIPTION	ABBOTT LABORATORIES COM AUTOMATIC DATA PROCESSING INC BLACKROCK INC COM DISNEY WALT CO COM EMERSON ELEC CO COM EXXON MOBIL CORP COM GENERAL ELEC CO COM GOLDMAN SACHS MID CAP VALUE HARRIS ASSOC INVT TR OAKMARK HOME DEPOT INC ILLINOIS TOOL WKS INC ILLINOIS TOOL WKS INC ILLINOIS TOOL WKS INC ILLINOIS TOOL WCS INC INTEL CORP COM ISHARES TR BARCLAYS 1-3 YR ISHARES TR MSCI BAFE INDEX JOHNSON & JOHNSON COM JPHORSON CHASE & CO COM KRAFT FOODS INC CL A MATTEL INC COM MICROSOFT CORP COM NORTHERN TR CORP COM NORTHERN TR CORP COM PROCEDE & GAMBLE CO COM PROCEDE & GAMBLE CO COM SYSCO CORP COM SYSCO CORP COM TE CONNECTIVITY LID REG TYCO INTERNATIONAL LTD SHS

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ROBERT	FORM 990PF,	

DESCRIPTION	ENDING BOOK VALUE
	; ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! ! !
US BANCORP DEL COM	30,438.
VANGUARD INDEX FDS SMALL CAP	32,100.
VANGUARD INDEX MID CAP	5,537.
VERIZON COMMUNICATIONS INC	22,561.
WAL MART STORES INC COM	28,812.
WELLS FARGO & CO NEW COM	31,259.
3M CO COM	22,285.

ENDING FMV

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,43	500	81	1,25	2,28	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1,012,116.	

TOTALS

STATEMENT

CONS	BONDS	
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ROBERT & GLADIS I	, PART	
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DESCRIPTION	ENDING BOOK VALUE	ENDING FMV
CAMPBELL & KENTON CNTYS KY CHRISTIAN CNTY KY PUB GRANT CNTY KY SCH DIST FIN KENTON CNTY KY PU PPTYS KENTUCKY HSG CORP HSG REV KENTUCKY INTERLOCAL SCH KENTUCKY RURAL WTR FIN CORP LOUISVILLE KY WTR REV MARION CNTY KY PUB MEADE CNTY KY SCH DIST PIKE CNTY KY SCH DIST	100,707. 99,515. 25,005. 100,768. 25,000. 26,037. 26,037. 24,900. 24,920.	105,267 101,493 25,109 106,227 25,863 10,064 25,981 26,868 27,343 26,283 26,283
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537,435.

TOTALS

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ROBERT & GLADYS HARRIS CHAR TUA CONS

DESCRIPTION	!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	

ACCRUALS

TOTALS

ENDING	FMV	1 1 1
ENDING	BOOK VALUE	1 1 1 1 1

64	9,645.	
334.	334.	

FORM 990PF,	PART	III	_	OTHER	DECREASES	IN	NET	WORTH	OR	FUND	BALANCES	
											======	
DESCRIPTION											AMOUNT	
ROUNDING												4.
					TOT	$^{ m AL}$						4.
											========	===

ROBERT	&	GLADYS	HARRIS	CHAR	TUA	CONS

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

OFFICER NAME:

HILLIARD LYONS TRUST COMPANY

ADDRESS:

500 WEST JEFFERSON STREET

LOUISVILLE, KY 40202

TITLE:

TRUSTEE

AVERAGE HOURS PER WEEK DEVOTED TO POSITION: 15

TOTAL COMPENSATION:

11,126.

==========

ROBERT & GLADYS HARRIS CHAR TUA CONS FORM 990PF, PART XV, LINE 3 - CONTRIBUTIONS, GIFTS, GRANTS PA ====================================	AID	256444
RECIPIENT NAME: NATIONAL MULTIPLE SCLEROSIS SOCIETY ADDRESS: ATTN: STACY FUNK LOUISVILLE, KY 40206 PURPOSE OF GRANT: FOR GENERAL CHARITABLE PURPOSES AMOUNT OF GRANT PAID		12,911.
RECIPIENT NAME: KOSAIR CHARITIES ADDRESS: ATTN: TOM O'BRYAN LOUISVILLE, KY 40223 AMOUNT OF GRANT PAID		12,911.
RECIPIENT NAME: EPWORTH UNITED METHODIST CHURCH ADDRESS: ATTN: REV GARY E MAGUFFEE LOUISVILLE, KY 40214 AMOUNT OF GRANT PAID		12,911.
TOTAL GRANTS PAID:	=====:	38,733. =======

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service **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

2011

Name of estate or trust Employer identification number ROBERT & GLADYS HARRIS CHAR TUA CONS 45-6256444 Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less Part I (f) Gain or (loss) for (a) Description of property (b) Date acquired (e) Cost or other basis (c) Date sold (d) Sales price (Example 100 shares 7% preferred of "Z" Co) (mo , day, yr) (mo, day, yr) (see instructions) Subtract (e) from (d) 1a **b** Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b -1,2672 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 Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2010 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f). Enter here and on line 13, column (3) on the back . . . Long-Term Capital Gains and Losses - Assets Held More Than One Year (f) Gain or (loss) for (a) Description of property (b) Date acquired (e) Cost or other basis (c) Date sold (d) Sales price the entire year Subtract (e) from (d) (Example 100 shares 7% preferred of "Z" Co) 6a b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b.............. 105,443. Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 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 11 Net long-term gain or (loss) Combine lines 6a through 11 in column (f) Enter here and on line 14a, For Paperwork Reduction Act Notice, see the Instructions for Form 1041 Schedule D (Form 1041) 2011

chedule D (Form 1041) 2011		T	1=1 -	Page 2
Part III Summary of Parts I and II Caution: Read the instructions before completing this p	ort.	(1) Beneficiaries' (see instr.)	(2) Estate ^e or trust's	l (3) Total
3 Net short-term gain or (loss)	13	(See man)		-1,267.
4 Net long-term gain or (loss):	1.5			1,207.
	14a			105,443.
	14b		· ·-· ·	2,07,110.
·	14c			
5 Total net gain or (loss). Combine lines 13 and 14a	15			104,176.
ote: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (6 ains, go to Part V, and do not complete Part IV If line 15, column (3), is a net loss, cor				
art IV Capital Loss Limitation				· <u> </u>
Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Pai	rt I, lu	ne 4c, if a trust), the sn	naller of	
a The loss on line 15, column (3) or b \$3,000 ote: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page				6 (
ote: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page irryover Worksheet in the instructions to figure your capital loss carryover.	1, lin	e 22 (or Form 990-T, li	ne 34), is a loss	s, complete the Capital Loss
art V Tax Computation Using Maximum Capital Gains Rates				
orm 1041 filers. Complete this part only if both lines 14a and 15 in colum		l are gains or an am	ount is enters	ad in Part I ar Part II and
ere is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more			iount is entere	ed in rait ror rait ir and
aution. Skip this part and complete the Schedule D Tax Worksheet in the in				
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				
orm 990-T trusts. Complete this part only if both lines 14a and 15 are				
Form 990-T, and Form 990-T, line 34, is more than zero. Skip this part an either line 14b, col. (2) or line 14c, col. (2) is more than zero.	d co	mplete the Schedule	D Tax Works	sheet in the instructions
			· · ·	
Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34		17		
B Enter the smaller of line 14a or 15 in column (2)				
but not less than zero			1	
9 Enter the estate's or trust's qualified dividends				
from Form 1041, line 2b(2) (or enter the qualified		1 1		
dividends included in income in Part I of Form 990-T) 19				
0 Add lines 18 and 19				
1 If the estate or trust is filing Form 4952, enter the				
amount from line 4g, otherwise, enter -0 ▶ 21		- 		
2 Subtract line 21 from line 20 If zero or less, enter -0	-			
3 Subtract line 22 from line 17 If zero or less, enter -0		23		
A 5				
4 Enter the smaller of the amount on line 17 or \$2,300		24		
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				
Subtract line 25 from line 24		26		
7 Are the amounts on lines 22 and 26 the same?		07		
Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line	22	27		
B Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
Enter the amount nom me 20 th me 20 is blank, enter 07	• •	20		
9 Subtract line 28 from line 27		29		
0 Multiply line 29 by 15% (15)			3(
1 Figure the tax on the amount on line 23 Use the 2011 Tax Rate				*
(see the Schedule G instructions in the instructions for Form 1041)				1
(222 1.13 Contradict Structure in the mediations for Form 1041)	• •		· · · · · · *	·
2 Add lines 30 and 31				2
3 Figure the tax on the amount on line 17 Use the 2011 Tax Rate				
(see the Schedule G instructions in the instructions for Form 1041)			l l	3
4 Tax on all taxable income Enter the smaller of line 32 or line 33 h				

SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D (Form 1041)

▶ See instructions for Schedule D (Form 1041). ▶ Attach to Schedule D to list additional transactions for lines 1a and 6a. OMB No 1545-0092

Department of the Treasury Internal Revenue Service Name of estate or trust

Employer identification number

ROBERT & GLADYS HARRIS CHAR	45-6256444				
Part I Short-Term Capital Gains and		10 0000111			
(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)
1a 345. CVS CAREMARK CORP COM		09/26/2011	11,757.00	11,494.00	263.00
1000. CISCO SYS INC COM	12/09/2010	09/26/2011	15,620.00	19,750.00	-4,130.00
700. CISCO SYS INC COM	07/15/2011	09/26/2011	10,934.00		14.00
395. ROYAL DUTCH SHELL PLC ADR REPSTG A SHS	09/26/2011	10/12/2011	26,551.00		2,586.00
ADA REFUTO A UNO	03/20/2011	10/12/2011	20,331.00	23,303.00	2,300.00
					
		:			
	· · · · · · · · · · · · · · · · · · ·		1		

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b

Schedule D-1 (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 **Employer identification number** ROBERT & GLADYS HARRIS CHAR TUA CONS 45-6256444 Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (b) Date (e) Cost or other basis (f) Gain or (loss) Subtract (e) from (d) (c) Date sold (d) Sales price acquired (mo , day, yr) (mo , day, yr) 6a 25000. HARDIN CNTY KY SCH 02/18/2005 CORP SCH BLDG REV RFDG 3.15 07/01/2011 25,000.00 25,000.00 152. ALLERGAN INC COM 06/05/2009 07/15/2011 12,572.00 6,946.00 5,626.00 200. BERKSHIRE HATHAWAY IN 04/28/2003 9,404.00 NEW 07/15/2011 15,018.00 5,614.00 250. COMCAST CORP CL A 05/01/2006 5,998.00 5,087.00 07/15/2011 911.00 275. HOME DEPOT INC COM 01/16/2008 07/15/2011 9,785.00 7,229.00 2,556.00 150. MATTEL INC COM 08/08/2007 07/15/2011 4,089.00 3,441.00 648.00 100. PEPSICO INC COM 11/28/2003 07/15/2011 6,819.00 4,800.00 2,019.00 225. PROCTER & GAMBLE CO C 01/10/2003 07/15/2011 14,550.00 9,652.00 4,898.00 100. PROGRESSIVE CORP OH C 01/16/2008 07/15/2011 1,986.00 1,867.00 119.00 200. WATERS CORP COM 04/25/2003 07/15/2011 18,657.00 4,576.00 14,081.00 90000. BALLARD CNTY KY PUB REV RFDG FIRST MTG CT FAC P 02/14/2007 09/01/2011 90,000.00 89,794.00 206.00 300. ALLERGAN INC COM 06/05/2009 09/26/2011 13,709.00 10,709.00 24,418.00 500. BERKSHIRE HATHAWAY IN NEW 04/28/2003 09/26/2011 35,480.00 23,510.00 11,970.00 350. BROWN FORMAN CORP CL 07/23/2009 09/26/2011 23,359.00 15,228.00 8,131.00 405. CVS CAREMARK CORP COM 02/02/2009 09/26/2011 13,802.00 10,834.00 2,968.00 1250. COMCAST CORP CL A 05/01/2006 09/26/2011 26,814.00 25,433.00 1,381.00 200. HARLEY DAVIDSON INC C 11/28/2003 09/26/2011 6,746.00 9,429.00 -2,683.00 375. HOME DEPOT INC COM 01/16/2008 09/26/2011 12,383.00 9,858.00 2,525.00 50. INTERNATIONAL BUSINESS 04/22/2009 09/26/2011 8,533.00 5,176.00 3,357.00 75. JPMORGAN CHASE & CO CO 05/01/2006 09/26/2011 2,274.00 3,404.00 -1,130.00 420. JOHNSON & JOHNSON COM 11/28/2003 09/26/2011 26,225.00 20,738.00 5,487.00 350. KRAFT FOODS INC CL A 06/26/2008 09/26/2011 11,879.00 10,185.00 1,694.00 275. MATTEL INC COM 08/08/2007 09/26/2011 7,052.00 6,308.00 744.00 375. MICROSOFT CORP COM 11/07/2005 09/26/2011 9,349.00 10,069.00 -720.00 140. OMNICOM GROUP INC COM 04/29/2003 09/26/2011 5,186.00 4,401.00 785.00

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6b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 6b

ROBERT & GLADYS HARRIS CHA		Malal Barra The	O V	45-62564	14
Part II Long-Term Capital Gains and (a) Description of property (Example	Losses - Assets (b) Date	(c) Date sold		(e) Cost or other basis	(f) Gain or (loss)
100 sh 7% preferred of "Z" Co)	acquired (mo , day, yr)	(mo , day, yr)	(d) Sales price	(see instructions)	Subtract (e) from (d)
6a 70. PEPSICO INC COM	11/28/2003	09/26/2011	4,297.00	3,360.00	937.00
225. PROCTER & GAMBLE CO C	01/10/2003	09/26/2011	13,977.00	9,652.00	4,325.00
1300. PROGRESSIVE CORP OH	01/16/2008	09/26/2011	22,428.00	24,271.00	-1,843.00
450. TJX COS INC NEW COM	08/08/2007	09/26/2011	25,674.00	12,851.00	12,823.00
400. US BANCORP DEL COM NE		09/26/2011	9,420.00	11,516.00	-2,096.00
200. WATERS CORP COM	04/25/2003	09/26/2011	14,955.00	4,576.00	10,379.00
145. TE CONNECTIVITY LTD R		09/26/2011	4,016.00		-1,053.00
25. TYCO INTERNATIONAL LTD					
25000. KENTUCKY ASSET / LI		09/26/2011	1,064.00	989.00	75.00
COMMN GEN RCPTS REV UNIV KE	11/09/2007	10/01/2011	25,000.00	25,000.00	
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6b Total Combine the amounts in column	(f) Enter here and	on Schedule D, lin	ne 6b		105,443.00 0-1 (Form 1041) 2011