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Return of Private Foundation RIGINA
or Section 4947(a)(1) Nonexempt Charitable Tribet RIGINA
Treated as a Private Foundation
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements MB No. 1545-0052

F	ог са	lendar year 2011 or tax year beginning		3/01 <b>,2011</b> ,	and endi	ng		07/31, <b>20</b> 12
		of foundation THE MORRIS L. LICHT	ENSTEIN JR. ME	DICAL		1	A Employer identif	
_	RES	EARCH FOUNDATION					74-275730	<del></del>
	Numl	per and street (or P.O. box number if mail is not delive	ered to street address)		Room/sui	te	•	er (see instructions) 51) 884-1961
	615	NORTH UPPER BROADWAY			800		(30	01/ 004-1901
_		or town, state, and ZIP code	·			$\dashv$		
	•					-   0	of exemption application pending, check here	ation is
_	COR	PUS CHRISTI, TX 78401					pending, check here	
G	Che	ck all that apply: Initial return	Initial return	of a former p	ublic chari	ty   t	0 1 Foreign organiza	tions, check here
		Final return	Amended ref	turn			2 Foreign organiza 85% test, check l	
_		Address change	Name change					
H	_	ck type of organization: $X$ Section 501(				E	If private foundatio	n status was terminated
1		ection 4947(a)(1) nonexempt charitable trust	Other taxable pr				under section 507(b	)(1)(A), check here . F
Ĭ		<del></del>	unting method: X Ca	ash Acc	rual	F		in a 60-month termination
			ther (specify) column (d) must be on	cash hasis )			under section 507(b	)(1)(B), check here . $\blacktriangleright$ X
F		Analysis of Revenue and Expenses (The	Column (a) mast be on	Casil Dasis./	T			(d) Disbursements
Ш	aıı	total of amounts in columns (b), (c), and (d)	(a) Revenue and expenses per	(b) Net inve		(c)	Adjusted net	for charitable
		may not necessarily equal the amounts in column (a) (see instructions) )	books	incom	e		income	purposes (cash basis only)
_	1	Contributions, gifts, grants, etc., received (attach schedule) .					<del></del>	(Casil Dasis Offiy)
	2	Check X  X  X  X  X  X  X  X  X  X  X  X  X						
	3	Interest on savings and temporary cash investments		<u> </u>			<del></del>	
	4	Dividends and interest from securities	264,656.	26	3,006.			ATCH 1
	5 a	Gross rents						
	ь	Net rental income or (loss)						
ē	6a	Net gain or (loss) from sale of assets not on line 10	24,493.					
Tie.	D p	Gross sales price for all assets on line 6a 1,756,735.						
200	6 a b 7 8 8 1 1 0 a	Capital gain net income (from Part IV, line 2) .		1	7,931.			
بــــــــــــــــــــــــــــــــــــ	₹8	Net short-term capital gain						
7	9	Income modifications · · · · · · · · · · · · · · · · · · ·						
E	50 a	and allowances · · · ·						
	l b	Less Cost of goods sold .					<del></del>	
:	ξ°	Gross profit or (loss) (attach schedule)	814,525.	3	5,190.			ATCH 2
(	AN11 12	Other income (attach schedule)	1,103,674.		6,127.		<del></del> 0	
		Compensation of officers, directors, trustees, etc.	47,300.		7,300.		<del></del>	
5	13 14	Other employee salaries and wages	,		· · · · · · · · · · · · · · · · · · ·			
365	15	Pension plans, employee benefits						
ě	16a	Legal fees (attach schedule) ATCH 3	124,395.	10	4,335.			20,060
ž	•	Accounting fees (attach schedule)ATCH 4	27,070.		3,535.			13,535
Š	С	Other professional fees (attach schedule). * .	31,241.	3	1,241.			
Ŧ	17							
3	ရှုန်	Taxes (attach schedule) (see (its tuctions)	205,931.		34.			
Ĭ	99	Depreciation (attach schedule) and depletion.		<del></del>	2 004			<del></del>
B	20	Occupancy	3,084.		3,084.			
		Travel, confedences, and meetings	3,968.	······································	3,968.			
Operating and	22-	Printing and publications	519,019.		9,529.			466,870
itin	23	Other expenses (attach schedule) ATCH. 7.	319,019.		,,,,,,			400,070.
96.	24	Total operating and administrative expenses.	962,008.	25	3,026.			500,465.
ŏ	25	Add lines 13 through 23	84,806.		,			84,806
	26	Total expenses and disbursements. Add lines 24 and 25	1,046,814.	253	3,026.		0	585,271
_	27	Subtract line 26 from line 12.		**				<u>·</u>
		Excess of revenue over expenses and disbursements	56,860.				,	
		Net investment income (if negative, enter -0-)		63	3,101.			<u> </u>
		Adjusted net income (if negative, enter -0-)					d	
Fo		erwork Reduction Act Notice, see instructions.		*AT	CH 5 JSA	**	ATCH 6	Form <b>990-PF</b> (2011)

	_
D	- 7

	describe the kind(s) of property sold (ick warehouse, or common stock, 200 DULE		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, уг.)
1a SEE PART IV SCHED b c d	····	sns MLC Co )	D-Donation	(IIIO, day, yi )	(INIO, GEY, YII)
b c d					,
c d e			<del>                                     </del>		
d e			<del> </del>		
<u>e</u>					
	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
а					
b					
С					
<u>d</u>					
e		d by the ferrodeline on 40/04/00	<del> </del>		
Complete only for assets s	howing gain in column (h) and owne			Gains (Col (h) g (k), but not less t	
(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	COI	Losses (from co	
а					
b					
<u>c</u>			ļ		
d			<del> </del>		_ <del>.</del>
_e		<u> </u>			<del></del>
2 Capital gain net income or (		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		17,931.
	or (loss) as defined in sections 12				
•		ructions). If (loss), enter -0- in $\}$			
		duced Tax on Net Investment I	3		14,910.
	he section 4942 tax on the distrib	outable amount of any year in the b	ase period	d?	Yes X No
	not qualify under section 4940(e).				
	unt in each column for each year	, see the instructions before making	any entri		
(a)  Base period years  Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		(d) Distribution ra (col (b) divided by	
2010	775,313.	9,149,151.			0.084742
2009	621,519.	9,571,395.			0.064935
2008	436,923.	9,350,430.			0.046728
2007	428,821.	9,132,321.			0.046956
2006	378,539.	10,402,385.	ļ <u></u> -		0.036390
2 Total of line 1, column (d)			2		0.279751
<u> </u>	or the 5-year base period - divide	e the total on line 2 by 5, or by the s than 5 years	3	- · · · · · · · · · · · · · · · · · · ·	0.055950
hambor of yours the found				<del></del>	
		m Part X, line 5	4	10,	378,803.
4 Enter the net value of nonc	charitable-use assets for 2011 fro		]		
	charitable-use assets for 2011 fro		5		580,694.
5 Multiply line 4 by line 3			6		631.
<ul><li>Multiply line 4 by line 3</li><li>Enter 1% of net investment</li></ul>	t income (1% of Part I, line 27b)				

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Pai	t VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	ired (continued)		
5 a	During the year did the foundation pay or incur any amou	int to:				
•	(1) Carry on propaganda, or otherwise attempt to influen	nce legislation (section	1 4945(e))?	Yes X No	.	
	(2) Influence the outcome of any specific public ele	ction (see section	4955), or to carry or			ŀ
	directly or indirectly, any voter registration drive?			Yes X No	.	
	(3) Provide a grant to an individual for travel, study, or ot				,	
	(4) Provide a grant to an organization other than a	charitable, etc., org	ganization described i	n		
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (s	see instructions)		Yes X No	,	
	(5) Provide for any purpose other than religious, ch	aritable, scientific,	literary, or education	al		
	purposes, or for the prevention of cruelty to children of	r anımals?		Yes X No	,	
ь	If any answer is "Yes" to 5a(1)-(5), did any of the				,	
	Regulations section 53 4945 or in a current notice regard	ling disaster assistand	ce (see instructions)?		5b	
	Organizations relying on a current notice regarding disast	ter assistance check h	nere	<b>X</b>		
С	If the answer is "Yes" to question 5a(4), does the					
	because it maintained expenditure responsibility for the gr		•		,	
	If "Yes," attach the statement required by Regulations sec					
6a	Did the foundation, during the year, receive any fund	, ,	ectly, to pay premium	S		
	on a personal benefit contract?	•	• • • •	Yes X No	,	
b	Did the foundation, during the year, pay premiums, direct			. — —	6ь	X
	If "Yes" to 6b, file Form 8870	,,,	F			
7 a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction?	Yes X No	,	
ь	If "Yes," did the foundation receive any proceeds or have	any net income attri	butable to the transaction	- —	7b	
Par	t VIII Information About Officers, Directors	, Trustees, Foun	dation Managers,	<b>Highly Paid Emplo</b>	oyees,	·····
1	and Contractors  List all officers, directors, trustees, foundation in	nanagers and thei	r compensation (see	instructions)		
•		(b) Title, and average	(c) Compensation (If not paid, enter	(d) Contributions to	(e) Expense	account
	(a) Name and address	hours per week devoted to position	(If not paid, enter	employee benefit plans and deferred compensation	other allo	
						_
AT'	FACHMENT 13		51,500.	d		3,397.
				·		
		•				
		=.				
2	Compensation of five highest-paid employees	(other than thos	se included on line	e 1 - see instruction	ons). If no	ne, enter
	"NONE."			(d) Contributions to	<del></del>	<del></del>
(a)	Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expense other allo	
		hours per week devoted to position		compensation	Other bile	
	NONE					
		l				
Tota	number of other employees paid over \$50,000 .				<u> </u>	
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Part IX-B	Summary of Program-Related Investments (see instructions)	
Describe the tv	wo largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 NONE		
2		
All other progra	am-related investments. See Instructions.	
3 NONE		
Total. Add lin	es 1 through 3	·

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- 1	0	-	- 1
- 1	- 20	ш.	

Pa	art X Minimum Investment Return (All domestic foundations must complete this part. see instructions.)	Foreign founda	tions,
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	5,431,921.
b	Average of monthly cash balances	1b	288,958.
С	Fair market value of all other assets (see instructions)	1c	4,815,977.
d	I Total (add lines 1a, b, and c)	1d	10,536,856.
е			
	1c (attach detailed explanation) 1e 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3		1 6 1	10,536,856.
4	Subtract line 2 from line 1d	e	
	Instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line	4	158,053.
5			10,378,803.
6	Minimum investment return. Enter 5% of line 5	6	518,940.
Pa	The properties of the propert	g e this part )	
1	Minimum investment return from Part X, line 6	1	518,940.
	Tax on investment income for 2011 from Part VI, line 5		
ь			
c		2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	518,940.
4	Recoveries of amounts treated as qualifying distributions		
5	Add lines 3 and 4		518,940.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII	'   <del>  </del>	
•	line 1 · · · · · · · · · · · · · · · · · ·	1 1	518,940.
Pa	art XII Qualifying Distributions (see instructions)		
_	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
1_		1a	585,271.
a		1b	303/2711
þ	Program-related investments - total from Part IX-B  Amounts paid to acquire assets used (or held for use) directly in carrying out charitable,		
2		1 I	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	_	
a		3a 3b	
b	Cash distribution test (attach the required schedule)	30	585,271.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4		303,271.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment inc		0
	Enter 1% of Part I, line 27b (see instructions)	5	585,271.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years who qualifies for the section 4940(e) reduction of tax in those years.	en calculating Wi	iether the foundation

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Pa	art XIII Undistributed Income (see instru	uctions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2011 from Part XI,	Corpus	Years prior to 2010	2010	2011
	line 7 ,	-9.		-	518,940.
2	Undistributed income, if any, as of the end of 2011:				
a	Enter amount for 2010 only				
b	Total for pnor years 20 09 ,20 08 ,20 07				<u>-</u>
3	Excess distributions carryover, if any, to 2011		,		
	From 2006				
	From 2007				
	From 2008				
d	From 2009				
	From 2010 317,855.				
f	Total of lines 3a through e	541,482.			
4	Qualifying distributions for 2011 from Part XII, line 4. $\blacktriangleright$ \$ 585,271.				
а	Applied to 2010, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
d	Applied to 2011 distributable amount				518,940.
	Remaining amount distributed out of corpus	66,331.			
5					
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	607,813.			
	Prior years' undistributed income Subtract			-	
_	line 4b from line 2b				
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	-			
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions				
е	Undistributed income for 2010. Subtract line 4a from line 2a Taxable amount - see instructions				
£	Undistributed income for 2011 Subtract lines				
'	4d and 5 from line 1. This amount must be distributed in 2012	_			
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8					<del> </del>
8	Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	80,678.			
9	Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	527,135.			
0	Analysis of line 9				
а	Excess from 2007		i		
b	Excess from 2008				
С	Excess from 2009 142, 949.				
d	Excess from 2010 317, 855.				
е	Excess from 2011 66, 331.				

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Pa	rt XIV Private Oper	rating Foundations (	see instructions and	d Part VII-A, question	n 9)	NOT APPLICABL
1 a	If the foundation has	-		•	ating	
٠	foundation, and the ruling				. ▶	<del></del>
Ъ	Check box to indicate wh	ether the foundation is a	private operating found	ation described in section	4942(	)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	<b>,</b>	(e) Total
	justed net income from Part	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(-,
	for the minimum investment return from Part X for each					
	year listed					
b	85% of line 2a					
С	Qualifying distributions from Part					
	XII, line 4 for each year listed .					<u> </u>
ď	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					
3	2d from line 2c					
•	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying under section					
L	4942(j)(3)(B)(l).					
р	"Endowment" alternative test- enter 2/3 of minimum invest-					
	ment return shown in Part X,					
	line 6 for each year listed					
С	"Support" alternative test - enter:					
	(1) Total support other than gross Investment income					
	(interest, dividends, rents,					
	payments on securities loans (section 512(a)(5)),					
	or royalties)					
	(2) Support from general public and 5 or more					
	exempt organizations as provided in section 4942			•		
	(j)(3)(B)(III)		-,			
	<li>(3) Largest amount of sup- port from an exempt</li>					
	organization					
	(4) Gross investment income	 				
Pa		ary information (Co during the year - see		only if the founda	ation nad \$5,000	or more in assets
4	Information Regarding				<del></del>	<del></del>
1 a	List any managers of			than 2% of the tota	L contributions receiv	ed by the foundation
ŭ	before the close of any					od by the roundation
	NONE	the foundation who is	100/ or more of	the stock of a porne	retion (or an aqually	large portion of the
b	List any managers of ownership of a partner					large portion of the
	NONE	Contribution Contri	O# 1 0-1-1-1	in ata Danasa		
2	Information Regarding			-		
	Check here ► if the unsolicited requests for					
	other conditions, comp			ina, etc. (see instructi	ons) to individuals of	organizations and or
	The name, address, ar			applications should be	addressed	
-	ATTACHME	·	or the percent to union	· applications should be	o dadrossoa.	
	The form in which appl		mitted and information	n and materials they	should include:	
-			and member			
	ATTACHME: Any submission deadlir			<del> </del>		
	·	100.				
	NONE			- 1 - 1 - 1 - 1 - 1 - 1 - 1		
α	Any restrictions or lir factors:	mitations on awards,	such as by geogra	pnicai areas, charitat	ole fleias, kinds of i	กรแนนเอกร, or other
	ATTACHME	NT 17		<del></del>	·	
JSA	20 1 000					Form <b>990-PF</b> (2011)

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Part XV Supplementary Information (	(continued)		·					
3 Grants and Contributions Paid During the Year or Approved for Future Payment  Recipient   frecipient is an individual, show any relationship to any foundation manager or substantial contributor   Foundation status of recipient   Purpose of grant or contribution   Amount   Amount								
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount				
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	ļ , , , , , , , , , , , , , , , , , , ,				
a Paid during the year								
ATTACHMENT 18								
		1						
			1					
		1						
		}						
	}							
			1					
		,						
			1					
		}						
			ļ					
Total			▶ 3a	84,806.				
<b>b</b> Approved for future payment								
			1					
			ĺ					
Total	<del></del>	· · · · · ·	▶ 3b					
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r gross amounts unless otherwise indicated.	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exem function income (See instructions
	<del></del>				
Fees and contracts from government agencies					
lembership dues and assessments					
terest on savings and temporary cash investments	71 2040	1 650	1.0	262 005	
ividends and interest from securities	713940	1,650.	14	263,005.	
et rental income or (loss) from real estate	· · · · · · · · · · · · · ·	<del></del>			· · · · · · · · · · · · · · · · · · ·
Debt-financed property	· · · · · · · ·	<del></del>			<del> </del>
et rental income or (loss) from personal property					
other investment income	713940	779,336.	15	35,190.	
ain or (loss) from sales of assets other than inventory	713940	6,562.	18	17,931.	<del></del>
et income or (loss) from special events					
ross profit or (loss) from sales of inventory					
ther revenue: a					
		500 510			
ubtotal Add columns (b), (d), and (e)	lations.)				1,103,6
total. Add columns (b), (d), and (e)	to the Ac	complishment of Exe	empt Purp	oses a) of Part XVI-A contribu	ited importantly t
otal. Add columns (b), (d), and (e)	to the Ac	complishment of Exe	empt Purp	oses a) of Part XVI-A contribu	ited importantly t
total. Add columns (b), (d), and (e)  total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the columns (b).  Relationship of Activities e No.  Explain below how each activity	to the Ac	complishment of Exe	empt Purp	oses a) of Part XVI-A contribu	ited importantly t
total. Add columns (b), (d), and (e)  total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the columns (b).  Relationship of Activities e No.  Explain below how each activity	to the Ac	complishment of Exe	empt Purp	oses a) of Part XVI-A contribu	ited importantly t
total. Add columns (b), (d), and (e)	to the Ac	complishment of Exe	empt Purp	oses a) of Part XVI-A contribu	ited importantly t
otal. Add line 12, columns (b), (d), and (e)  otal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities  e No. Explain below how each activity	to the Ac	complishment of Exe	empt Purp	oses a) of Part XVI-A contribu	ited importantly t
otal. Add line 12, columns (b), (d), and (e)  otal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities  e No. Explain below how each activity	to the Ac	complishment of Exe	empt Purp	oses a) of Part XVI-A contribu	ited importantly t
total. Add columns (b), (d), and (e)	to the Ac	complishment of Exe	empt Purp	oses a) of Part XVI-A contribu	ited importantly t
ubtotal Add columns (b), (d), and (e)  otal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities  e No. Explain below how each activity	to the Ac	complishment of Exe	empt Purp	oses a) of Part XVI-A contribu	ited importantly t
ubtotal Add columns (b), (d), and (e)	to the Ac	complishment of Exe	empt Purp	oses a) of Part XVI-A contribu	ited importantly t
ubtotal Add columns (b), (d), and (e)	to the Ac	complishment of Exe	empt Purp	oses a) of Part XVI-A contribu	ited importantly t
ubtotal Add columns (b), (d), and (e)	to the Ac	complishment of Exe	empt Purp	oses a) of Part XVI-A contribu	ited importantly t
ubtotal Add columns (b), (d), and (e)	to the Ac	complishment of Exe	empt Purp	oses a) of Part XVI-A contribu	ited importantly t
ubtotal Add columns (b), (d), and (e)  otal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities  e No. Explain below how each activity	to the Ac	complishment of Exe	empt Purp	oses a) of Part XVI-A contribu	ited importantly t
otal. Add line 12, columns (b), (d), and (e)  otal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities  e No. Explain below how each activity	to the Ac	complishment of Exe	empt Purp	oses a) of Part XVI-A contribu	ited importantly t
otal. Add line 12, columns (b), (d), and (e)  otal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calcut XVI-B Relationship of Activities  e No. Explain below how each activity	to the Ac	complishment of Exe	empt Purp	oses a) of Part XVI-A contribu	ited importantly t
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total. Add columns (b), (d), and (e)	to the Ac	complishment of Exe	empt Purp	oses a) of Part XVI-A contribu	ited importantly to
total. Add columns (b), (d), and (e)  total. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculated the columns (b).  Relationship of Activities e No.  Explain below how each activity	to the Ac	complishment of Exe	empt Purp	oses a) of Part XVI-A contribu	•
total. Add columns (b), (d), and (e)	to the Ac	complishment of Exe	empt Purp	oses a) of Part XVI-A contribu	ited importantly t
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)  Worksheet in line 13 instructions to verify calculated the columns (b).  Relationship of Activities  e No. Explain below how each activity	to the Ac	complishment of Exe	empt Purp	oses a) of Part XVI-A contribu	ited importantly t

Part XVII

_		Exempt Organ	IIIZations								
		_		engage in any of the	_					Yes	No
		• •	ooe (other than	section 501(c)(3) org	anizations) (	or in section 527,	relating	to political	-		-
	_	zations?		ba-itable ava-	t	tian of					
	(-) (-)										х
	(2) Other assets										X
	Other transactions:										
											х
									1b(1)		X
									1b(2)		X
	(3) Re (4) Ba	intal of facilities, equi	ipment, or other	assets	• • • • • •		• • • • •		1b(3)		X
	(4) Re	annoursement arrange	ements		• • • • • •				1b(4)		X
	(5) LU	dis or loan guarantee	es	or fundraising police	tations				1b(5)		X
				nip or fundraising solicitists, other assets, or pai					1b(6) 1c		X
				es," complete the folio						four m	
				ices given by the rep							
				gement, show in colu							
(a) Lii		(b) Amount involved	<del>,</del>	noncharitable exempt organiz		(d) Description of tran					
(a) Li	16 110	N/A	(c) Name on	TOTICHATIABLE EXEMPLOIGANIZ		N/A	Siers, transac	Juoris, ariu sriai	ing ana	ngemei	
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	i- 4b-	£		City and a supply a							
		•	•	filiated with, or relate		· ·	_		$\neg \downarrow$	s X	٦.,,
				ther than section 501(	c)(3)) or in s	section 5277		L	YE	S LA	7 140
	ii res	," complete the follow (a) Name of organization		(b) Type of orga	nration		(a) Decerio	tion of relations	bio.		
	· · · · · · · · · · · · · · · · · · ·	(a) Name of organization	'1	(b) Type of orga	IIIZAUOII		(c) Descrip	HOIT OF TELEBOOKS	пр		
		·		<del> </del>							
				<del></del>	<del></del>						
		<del></del>				<del>-  </del>					
	Linda	r popultor of popular I doole	ro that I have over	and this satura including sees	manufac orbodu	ules and statements and	to the best	of my knowledge		obof - II	in true
Sign	correc	r penalues of penury, I decia ct, and complete Declaration of	re that I have exami preparer (other than t	ned this return, including acco axpayer) is based on all informati	mpanying schedu on of which prepa	arer has any knowledge	to the best	or my knowleag	and b	ener,- it	is true,
_		Charce d	Shows	10/21 mon	/a	Para		May the IRS	discuss	this	return
Here		• •		1 10/30	1010	RESIDENT	<u>'</u>	with the pre			below
	Sign	nature of officer or trustee		Date /	Title	9		(see instructions	;)? <u>A</u>	Yes	No
		Print/Type preparer's	name	Preparer's signature	<del></del>	Date	- I_	, , , , , , ,	TIN		
Paid		1 '' '			Loch	''	Ch	- L		0001	0
Ргер	arer	CHRISTINE SAL		Grustine	mu]	10-30	<del>,</del>	f-employed I			
	Only		ANK & SALC		1.0		Firm's El	N ► 74-27	2/60	70	
<b>-</b> 36	Unity	1		CAHUA, SUITE 3	τO	70401		261 00	, ,		
		CO	RPUS CHRIS	TI, TX		78401	Phone no	361-88	3-83	151	

74-2757309

THE MORRIS L. LICHTENSTEIN JR. MEDICAL

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

				ription	IIIVLSI	ρī	Date acquired	Date sold
Gross sale price less	Depreciation allowed/	Cost or other	FMV as of	Adi basıs as of	Excess of FMV over	P	Gain	
expenses of sale	allowable	basis	12/31/69	12/31/69	adı basis	$\sqcup$	(loss)	
		TOTAL CAPIT	'AL GAIN DIS	TRIBUTIONS			3,021.	
		1,910 SHS O			100 RUSS	Р		03/05/2012
144,942.		126,984.					17,958.	
		1,743 SHS O			2000 RUS	Р		03/05/2012
139,971.		123,422.					16,549.	
		13,898 SHS PROPERTY TY			FE FD MS	Р		05/08/2012
738,375.		747,616.					-9,241.	
		17,246 SHS PROPERTY TY			MARKETS	P	VAR	05/08/2012
733,447.		743,803.					-10,356.	
TOTAL GAIN(I	OSS)						17,931.	

THE MORRIS L. LICHTENSTEIN JR. MEDICAL RESEARCH FOUNDATION
EIN 74-2757309
FORM 990-PF
FISCAL YEAR ENDED JULY 31, 2012

# PAGE 1, LINE 23 -- DETAILS OF MEDICAL RESEARCH EXPENSES

THOMAS	16,874 1,389 1,500	60,378	462	10,550	1,800		92,953
ZIMBA	51,949 4,067		3,307 1,831	29,551	2,400	ļ	47,578 140,683
SPOHN	9,680 741	962		6,232 2,920		8,282	28,651
SPOHN NTD	29,149 2,236			5,640			37,325
SPOHN NURSE TRAINING	38,173 3,011 87,345	3,290		23,316		4,063	159,198
DCH GLUCOMON STUDY	385 30			3,005	450		3,870
GENERAL	2,785 220			1,185			4,190
TOTAL	148,995 11,694 88,845	796 63,668	3,769 1,831	6,232 76,167 300	4,200	12,345	466,870
	WAGES PAYROLL TAXES CONTRACT LABOR	DEFRECIATION SUPPLIES TDAVEL	I KAVEL CONTINUING EDUCATION INSTIBANCE	LEGAL MISCELLANEOUS EXP	SUPERVISION COSTS PUBLICATION COSTS	SOFTWARE DEVELOPMENT DEVELOPMENT AND TESTING	

### Foundation Research Projects

In 2011-12 the Foundation is directly conducting four medical research projects.

- 1. In collaboration with Medical University of South Carolina Hospital, Foundation Medical Director M. Wilson, M.D. and Principal Investigator, Paul Zimba, Ph.D., are investigating the potential utility of Euglenophycin, a naturally occurring toxin, in combating certain cancers.
- 2. In collaboration with Christus Spohn Memorial Hospital, Foundation Medical Director M. Wilson, M.D., and Principal Investigator P.L. Wakefield, M.D., conducted a prospective, randomized controlled trial of the effectiveness of a proprietary computer-based audio/visual training program in educating hospital nurses in the proper care of hospital patients who have diabetes.
- 3. In collaboration with Christus Spohn Memorial Hospital, Foundation Medical Director M. Wilson, M.D., and Principal Investigator Peter Thomas, Ph.D., are investigating the influence of a recently discovered cellular hormone receptor (mPRa) on the human vascular system.
- 4. In collaboration with Christus Spohn Memorial Hospital, Foundation Medical Director M. Wilson, M.D., and Principal Investigator Francis Forgione, R.N., Ph.D., investigated the possible correlation between infant neural tube defects and diabetes or pre-diabetes affecting the mother.

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

ADJUSTED NET INCOME		
NET INVESTMENT INCOME	27,532. 25. 235,449.	263,006.
REVENUE AND EXPENSES PER BOOKS	27,532. 25. 1,650. 235,449.	264,656.
DESCRIPTION	MORTGAGE NOTE RECEIVABLES INVESTMENT INTEREST UNRELATED BUSINESS INCOME - INTEREST MONEY MARKET DIVIDENDS	TOTAL

### **RENT AND ROYALTY INCOME**

						1dentif	ying Number 57309	
DESCRIPTION OF PROPERTY VARIOUS MINERAL	INTERESTS							
Yes No Did you a	ctively participate in th	e operation	of the a	ctivity (	during the tax year?			
TYPE OF PROPERTY:								
ROYALTY HAVING N	NO DEPLETION	1				3	5,190.	-
OTHER INCOME:								
	······································							
TOTAL GROSS INCOME	,							35,190.
OTHER EXPENSES: SEE ATTACHMENT								
		· . · · · · · · · · · · · · · · · · · ·						
	· · · · · · · · · · · · · · · · · · ·							
<del> </del>					<del></del>			
DEPRECIATION (SHOWN BELOW)					• •			
LESS: Beneficiary's Portion					• •			
AMORTIZATION								
LESS: Beneficiary's Portion .								
DEPLETION						<u> </u>		
LESS: Beneficiary's Portion					•			22 562
TOTAL EXPENSES								22,562. 12,628.
TOTAL RENT OR ROYALTY INCOME	E (LUSS)	<u></u>	<u></u>	• • •	· · · · · · · · · · · · · · · · · · ·			12,020.
Less Amount to  Rent or Royalty								
Depreciation							<del></del>	
Depletion , , ,								
Investment Interest Expense							<del></del>	
Other Expenses							<del> </del>	
Net Income (Loss) to Others							<del></del>	
Net Rent or Royalty Income (Loss)								12,628.
Deductible Rental Loss (if Applicable								<u> </u>
SCHEDULE FOR DEPRECIAT	ION CLAIMED							
(a) Description of property	(b) Cost or	(c) Date	(d) ACRS	(e) Bus	(f) Basis for	(g) Depreciation in	(h) (i) Life	(j) Depreciation
(a) Decemplian of property	unadjusted basis	acquired	des	%	depreciation	prior years	Method rate	for this year
					<u> </u>			
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### SUPPLEMENT TO RENT AND ROYALTY SCHEDULE

OTHER DEDUCTIONS

TAXES
LOE AND OTHER EXPENSES

703. 21,859. 22,562.

### RENT AND ROYALTY SUMMARY

PROPERTY	TOTAL INCOME	DEPLETION/ DEPRECIATION	OTHER EXPENSES	ALLOWABLE NET INCOME
VARIOUS MINERAL INTE	35,190.		22,562.	12,628.
TOTALS	35,190.		22,562.	12,628.

### FORM 990PF, PART I - OTHER INCOME

ADJUSTED NET INCOME		
NET INVESTMENT INCOME	35,190.	35,190.
REVENUE AND EXPENSES PER BOOKS	35,190. 779,335.	814,525.
DESCRIPTION	ROYALTY INCOME CORPUS CHRISTI ATHLETIC CLUB, INC.	TOTALS

FEES	
LEGAL	
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н	
PART	
990PF,	
FORM	

CHARITABLE PURPOSES	20,060.	20,060.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	104,335.	104,335.
REVENUE AND EXPENSES PER BOOKS	124,395.	124,395.
	GARY, THOMASSON, HALL & MARKS	TOTALS
DESCRIPTION	GARY, THOMASSO	

### FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	13,535.	13,535.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	13,535.	13,535.
REVENUE AND EXPENSES PER BOOKS	27,070.	27,070.
		TOTALS
DESCRIPTION	SWANK & SALCH, P.C.	

### PART I - OTHER PROFESSIONAL FEES FORM 990PF,

CHARITABLE PURPOSES		
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	5,000. 35. 26,206.	31,241.
REVENUE AND EXPENSES PER BOOKS	5,000. 35. 26,206.	31,241.
DESCRIPTION	WELLS FARGO TEXAS AGENT CORPORATION LARRY THOMPSON & ASSOCIATES IN	TOTALS

ATTACHMENT 5

TAXES
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990PF
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CHARITABLE PURPOSES		
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	34.	34.
REVENUE AND EXPENSES PER BOOKS	34. 205,897.	205,931.
		TOTALS
DESCRIPTION	AD VALOREM TAXES EXCISE TAX	

### FORM 990PF, PART I - OTHER EXPENSES

CHARITABLE	466,870.	466,870.
ADJUSTED NET INCOME		
NET INVESTMENT INCOME	22,562. 11,980. 14,262. 559.	49,529.
REVENUE AND EXPENSES PER BOOKS	22,562. 11,980. 14,262. 559. 2,620.	519,019.
		TOTALS
DESCRIPTION	RENT AND ROYALTY EXPENSES RENT AND ROYALTY EXPENSES INSURANCE CONTRACT LABOR OFFICE SUPPLIES MISCELLANEOUS UNRELATED BUSINESS INCOME MEDICAL RESEARCH ACTIVITES (DETAILS ON SCHEDULE A)	

- PREPAID EXPENSES AND DEFERRED CHARGES PART II FORM 990PE,

ENDING FMV ENDING BOOK VALUE DESCRIPTION

208,000. TOTALS

PREPAID EXCISE TAX

208,000.

208,000.

208,000.

DESCRIPTION

CORPUS CHRISTI ATHLETIC CLUB TENE, INC. CHARLES SCHWAB INVESTMENTS

TOTALS

IDING	VALUE
END	BOOK

ENDING FMV

5,201,841. 377,000. 5,598,087.

4,175,064. 158,106. 5,761,636.

11,176,928.

10,094,806.

	30		414.	138.	1,032.		95.	585.	朝
11	ENDING		4	F	1,0			'n	2,264
ACCUMULATED DEPRECIATION DETAIL	DISPOSALS	395.				158.			
UMULATED DEPR	ADDITIONS	74.	216.	72.	364.	35.	35.		
ACC	BEGINNING	321.	198.	. 99	. 668.	123.	.09	585.	2,021.
	ENDING BALANCE		1,082.	358.	2,550.		242.	585.	4.817.
FIXED ASSET DETAIL	DISPOSALS	1,035.				490.			
FIXED AS	ADDITIONS								
	BEGINNING	1,035.	1,082.	358.	2,550.	490.	242.	585.	6,342.
	METHOD/ CLASS	SL	SL	SI	SL	SL	SL	SLA	
	ASSET DESCRIPTION	CHAIRS	MED RES COMPUTER	PRINTER	1 KIOSK	CHAIRS	1 CHAIR	LEW CROSS TIMBERS	TOTALS

2:31:42 PM

TT TWIT / 17000 ---

DESCRIPTION

WORKING INTEREST ROYALTY INTEREST COPYRIGHT EXPENSES

ENDING BOOK VALUE

ENDING <u>FMV</u>

> 5, 685. 5, 978.

5,685. 5,978.

11,663.

12,413.

TOTALS

### FORM 990PF, PART VII-A, LINE 11A-TRANSFERS TO CONT. ENT. STATEMENT

CONTROLLED ENTITY'S NAME: CORPUS CHRISTI ATHLETIC CLUB, INC.

CONTROLLED ENTITY'S ADDRESS: P.O. BOX 8150

CITY, STATE & ZIP: CORPUS CHRISTI, TX 78468

EIN: 74-2298676

TRANSFER AMOUNT:

EXPLANATION OF TRANSFER TO CONTROLLED ENTITY:

REIMBURSEMENT OF CONTRACT LABOR AT COST

CONTROLLED ENTITY'S NAME: TENE, INC.
CONTROLLED ENTITY'S ADDRESS: P.O. BOX 2888

CITY, STATE & ZIP: CORPUS CHRISTI, TX 78403

EIN: 75-1545244

TRANSFER AMOUNT:

EXPLANATION OF TRANSFER TO CONTROLLED ENTITY:

NO TRANSFERS DURING CURRENT YEAR

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
MARCIA MARKS 226 WILSHIRE PLACE CORPUS CHRISTI, TX 78411	VICE-PRESIDENT 4.00	7,800.	0	0
CHARLES W. THOMASSON 226 ROSEBUD AVE. CORPUS CHRISTI, TX 78404	PRES / SEC / TREAS 8.00	9,150.	0	0
SAMUEL BEECROFT P.O. BOX 2643 CORPUS CHRISTI, TX 78403	TRUSTEE 2.00	6, 600.	0	0
ALLEN BORDEN 123 RAINBOW LANE CORPUS CHRISTI, TX 78411	TRUSTEE 2.00	7,800.	0	512.
MELISSA MARKS GARNER 1500 JACKSON STREET DALLAS, TX 75201	TRUSTEE 2.00	5,400.	0	1,314.
JON G. MARKS 10442 NW 60TH PLACE PARKLAND, FL 33076	TRUSTEE 2.00	6,400.	0	1,571.

AND TRUSTEES	
DIRECTORS,	
IST OF OFFICERS,	
LIST OF	
PART VIII -	
_	
FORM 990PE	

74-2757309

ATTACHMENT 13 (CONT'D)

	0	1 •11
EXPENSE ACCT AND OTHER ALLOWANCES	_	3,397.
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	0	0
COMPENSATION	8,350.	51,500.
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE 2.00	GRAND TOTALS
NAME AND ADDRESS	CAMILLE THOMASSON 210 INDIANA AVE. CORPUS CHRISTI, TX 78404	

### 990PF, PART VIII- COMPENSATION OF THE FIVE HIGHEST PAID PROFESSIONALS

	ATTACHM	ENT 14
NAME AND ADDRESS	TYPE OF SERVICE	COMPENSATION
GARY, THOMASSON, HALL & MARKS P.O. BOX 2888 CORPUS CHRISTI, TX 78403	LEGAL & MGMT	195,340.
PEGGY L. WAKEFIELD, M.D., F.A.A.P. P.O. BOX 2685 CORPUS CHRISTI, TX 78403	MEDICAL RESEARCH	90,943.
UNIVERSITY OF TEXAS- AUSTIN 1 UNIVERSITY STATION AUSTIN, TX 78712	RESEARCH SUPPORT	60,378.
TOTAL COMPENS	SATION	346,661.

### FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

CHARLES W. THOMASSON PO BOX 2888 CORPUS CHRISTI, TX 78403 361-884-1961

### 990PF, PART XV - FORM AND CONTENTS OF SUBMITTED APPLICATIONS

COMPLETE DESCRIPTION OF NEED FOR THE GRANT; COPY OF APPLICANT'S CODE SECTION 501(C)(3) DETERMINATION LETTER; WRITTEN STATEMENT THAT NOTHING HAPPENED WHICH WOULD CHANGE SUCH TAX EXEMPT STATUS.

### 990PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

MUST BE A PUBLIC CHARITY (RATHER THAN A PRIVATE FOUNDATION); PRIMARILY SOUTH TEXAS MEDICAL RESEARCH, ARTS, EDUCATIONAL, HISTORICAL LANDMARKS, CARE OF ANIMALS, AND MENTAL HEALTH.

THE MORRIS L. LICHTENSTEIN JR. MEDICAL

### FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CORPUS CHRISTI CHAMBER MUSIC SOCIETY P.O. BOX 60124 CORPUS CHRISTI, IX 78466	N/A PUBLIC CHARITY	GRANT FOR OPERATIONS	6,000.
CATHOLIC CHARITIES OF CORPUS CHRISTI 1322 COMMNCHE CORPUS CHRISTI, IX 78401	N/A PUBLIC CHARITY	FUNDING FOR OPERATIONS	1,000.
TEXAS A&M UNIVERSITY- CORPUS CHRISTI 6300 OCEAN DRIVE UNIT 5741 CORPUS CHRISTI, TX 78412	N/A NON-TAXABLE	SCHOLARSHIPS FOR SCHOOL OF BUSINESS AND MUSIC DEPARTMANT	52,000.
WOMEN'S SHELTER OF SOUTH TEXAS P.O. BOX 3368 CORPUS CHRISTI, IX 78463-3368	N/A NON-TAXABLE	FUNDING FOR OPERATIONS	10,000.
COASTAL BEND COMMUNIY FOUNDATION 600 LEOPARD SUITE 1716 CORFUS CHRISTI, IX 78473	N/A NON-TAXABLE	FOUNDATION'S DAY OF GIVING	15,000.
ANTONIO E. GARCIA ARTS & EDUCATION CENTER 2021 AGNES CORPUS CHRISTI, TX 78405	N/A Non-trxable	FOR PROGRAM OPERATIONS	320.

ATTACHMENT 18 (CONT'D)

84,806.

TOTAL CONTRIBUTIONS PAID

## FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	AND ADDRESS FOUNDATION STATUS OF RECIPIENT PURPOSE OF GRANT OR CONTRIBUTION AMOUNT	Y HEALTH CENTER N/A FOR PROGRAM OPERATIONS 320.  IN 78404	ES OF CORPUS CHRISTI N/A FOR PROGRAM OPERATIONS 166.  TX 78401
	RECIPIENT NAME AND ADDRESS	AMISTAD COMMUNITY HEALTH CENTER 1533 BROWNLEE CORPUS CHRISTI, IX 78404	CATHOLIC CHARITIES OF CORPUS CHRISTI 1322 COMANCHE CORPUS CHRISTI, IX 78401

### SCHEDULE D (Form 1041)

**Capital Gains and Losses** 

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

OMB No. 1545-0092

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

RESEARCH FOUNDATION

THE MORRIS L. LICHTENSTEIN JR. MEDICAL

Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable). Employer identification number

Schedule D (Form 1041) 2011

74-2757309

	: Form 5227 filers need to complete only Part Short-Term Capital Gains and Lo		Hold One Vo	or or loop			
Par	(a) Description of property (Example: 100 shares 7% preferred of *Z* Co.)	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Sales price	(e) Cost or other (see instruction	basis ns)	(f) Gain or (loss) for the entire year Subtract (e) from (d)
1a							odbildot (b) fiolii (b)
					<del> </del>		
				,			
	Enter the short-term gain or (loss), if any, fi	rom Schedule D	-1, line 1b			1b	14,910.
2	Short-term capital gain or (loss) from Form	ns 4684, 6252,	6781, and 882	4		2	
3	Net short-term gain or (loss) from partners	hips. S corpora	tions, and other	r estates or trusts		3	
4	Short-term capital loss carryover. Enter	the amount, i	f any, from li	ine 9 of the 2010	Capital Loss		,
5	Carryover Worksheet	Ines 1a through	gh 4 in colum		on line 13,	4	,
1.5	column (3) on the back		Held More T	han One Year	<u></u> ▶	5	14,910.
Par	(a) Description of property (Example 100 shares 7% preferred of "Z" Co )	(b) Date acquired (mo., day, yr)		(d) Sales price	(e) Cost or other (see Instructio		(f) Gain or (loss) for the entire year
6 a	(California de California de La California de La California de La California de Califo	(, 22); y. y	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(		Subtract (e) from (d)
			L				
			L			-	
b	Enter the long-term gain or (loss), if any, from	om Schedule D-	1, line 6b			6b	
7	Long-term capital gain or (loss) from Form	s 2439, 4684,	6252, 6781, ar	nd 8824		7	
8	Net long-term gain or (loss) from partnersh	nips, S corporat	ons, and other	estates or trusts		8	
9	Capital gain distributions					9	3,021.
10	Gain from Form 4797, Part I					10	
11	Long-term capital loss carryover. Enter t Carryover Worksheet	he amount, if	any, from lin	e 14 of the 2010	Capital Loss	11	( )
12	Net long-term gain or (loss). Combine in column (3) on the back	nes 6a through	11 in columi	n (f) Enter here and	on line 14a,	12	3,021.

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Concadio	D (1 ditil 1041) 2011				_	1 age =
Part I	Summary of Parts I and II  Caution: Read the instructions before completing this	nart	(1) Beneficiaries' (see instr.)	(2) Esta		(3) Total
13 No	et short-term gain or (loss)	13	(000 11.011.)			14,910.
	et long-term gain or (loss):	13				
	otal for year	14a				3,021.
b Ur	precaptured section 1250 gain (see line 18 of the wrksht.)	14b				
	1% rate gain	$\overline{}$				<del></del>
15 To	otal net gain or (loss). Combine lines 13 and 14a	15				17,931.
	line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (		n 990-T, Part I, line 4	a). If lines 14	a and	15, column (2), are net
	to Part V, and <b>do not</b> complete Part IV If line 15, column (3), is a net loss, co					
Part I	Capital Loss Limitation					
	nter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, F					
a Th Note: <i>If</i> Canyove	ne loss on line 15, column (3) or b \$3,000 the loss on line 15, column (3), is more than \$3,000, or if Form 1041, page r Worksheet in the instructions to figure your capital loss carryover	e 1, lini	e 22 (or Form 990-T, II		16 ( oss, <i>cor</i>	nplete the Capital Loss
Part V						··
	041 filers. Complete this part only if both lines 14a and 15 in colu		) are gains, or an an	nount is ent	ered ir	n Part I or Part II and
	an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mor					
	: Skip this part and complete the <b>Schedule D Tax Worksheet</b> in the i	nstruc	tions if:			
	r line 14b, col. (2) or line 14c, col. (2) is more than zero, or Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.					
	<b>90-T trusts.</b> Complete this part <b>only</b> if both lines 14a and 15 are	o goin	s or qualified divide	ande ara in	ماييطمط	i in income in Part I
	990-T, and Form 990-T, line 34, is more than zero. Skip this part a					
	line 14b, col. (2) or line 14c, col. (2) is more than zero.					
17 Er	nter taxable income from Form 1041, line 22 (or Form 990-T, line 3	4)	17			
	nter the <b>smaller</b> of line 14a or 15 in column (2)	· / • ·	' •	-	•	
	ut not less than zero					
	nter the estate's or trust's qualified dividends					
fro	om Form 1041, line 2b(2) (or enter the qualified					
	vidends included in income in Part I of Form 990-T) 19					
20 A	id lines 18 and 19					
21 If	the estate or trust is filing Form 4952, enter the					
ar	nount from line 4g; otherwise, enter -0 > 21					
	ubtract line 21 from line 20 If zero or less, enter -0		. 22			
<b>23</b> Su	ubtract line 22 from line 17. If zero or less, enter -0-		. 23			
	nter the smaller of the amount on line 17 or \$2,300		. 24		-	
25 ls	the amount on line 23 equal to or more than the amount on line 24					
F	Yes. Skip lines 25 and 26; go to line 27 and check the "No" box		0.5			
_ 26 Տւ	No. Enter the amount from line 23				-	
	ubtract line 25 from line 24	• • •	.   20			
בי קר	Yes. Skip lines 27 thru 30, go to line 31. No. Enter the smaller of line 17 or lin	22	27			
L	1 es. skip lines 27 thre su, go to line 51.	8 22				
28 Er	nter the amount from line 26 (If line 26 is blank, enter -0-)		. 28			
	ubtract line 28 from line 27					
	ultiply line 29 by 15% (.15)				30	
	gure the tax on the amount on line 23. Use the 2011 Tax Rate				24	
(Se	ee the Schedule Ginstructions in the instructions for Form 1041).				31	
29 A-	id lines 30 and 31				32	
32 Ac 33 Fig	id lines 30 and 31	Sobo	adula for Estates an	od Truete	32	
	ee the Schedule Ginstructions in the instructions for Form 1041) .				33	
	x on all taxable income. Enter the smaller of line 32 or line 33 h				-	<del></del>
	in to (a. Form 000 T line 35)	icic d	na on roini 1041, v		24	

Schedule D (Form 1041) 2011

### SCHEDULE D-1 (Form 1041)

Continuation Sheet for Schedule D (Form 1041)

OMB No. 1545-0092

Department of the Treasury Internal Revenue Service

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

Name of estate or trust

Employer identification number

THE MORRIS L. LICHTENSTEIN JR. MEDICAL 74-2757309 Short-Term Capital Gains and Losses - Assets Held One Year or Less (b) Date (a) Description of property (Example: 100 sh 7% preferred of "Z" Co.) (e) Cost or other basis (f) Gain or (loss) Subtract (e) from (d) (c) Date sold (mo., day, yr.) (d) Sales price acquired (see instructions) (mo., day, yr.) 1a 1,910 SHS OF ISHARES TR RUSSELL 100 RUSSELL 1000 08/18/2011 03/05/2012 144,942. 126,984. 17,958. 1,743 SHS OF ISHARES TR RUSSELL 2000 RUSSELL 2000 08/18/2011 03/05/2012 139,971. 123,422. 16,549. 13,898 SHS OF ISHARES TR MSCI EAFE FD MSCI EAFE IN 05/08/2012 738,375. 747,616. -9,241.17,246 SHS OF VANGUARD EMERGING MARKETS 05/08/2012 733,447. 743,803. -10,356.

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

Schedule D-1 (Form 1041) 2011

14,910.