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Form 990-PF

Department of the Treasury

Internal Revenue Service

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

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No. 1545-0052

Open to Public inspection

For calendar year 2012 or tax year beginning 2012, and ending Name of foundation CHRISTMAS VALLEY FOUNDATION A Employer identification number aka JOHN A VIRANT, TRUSTEE 45-6558348 Number and street (or P.O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 8000 MARYLAND AVENUE 380 (314)727 - 3421City or town, state, and ZIP code C If exemption application is pending, check here CLAYTON, MO 63105-3906 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here . Amended return Final return 2. Foreign organizations meeting the 85% test, Address change Name change check here and attach computation . . . |X| Section 501(c)(3) exempt private foundation H Check type of organization: If private foundation status was terminated under Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation section 507(b)(1)(A), check here Fair market value of all assets at X Cash J Accounting method: Accrual If the foundation is in a 60-month termination end of year (from Part II, col. (c), Other (specify) under section 507(b)(1)(B), check here line 16) ▶ \$ 1,005,870 (Part I, column (d) must be on cash basis.) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and for charitable (b) Net investment amounts in columns (b), (c), and (d) may not necessarily equal expenses per (c) Adjusted net purposes income books income the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 1,000,000 2 if the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 4 3,993 3,993 5a Net rental income or (loss) 7,913 6а Net gain or (loss) from sale of assets not on line 10 . STM139 ender Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances Less: Cost of goods sold h 11 (732 Other income (attach schedule) STM106 (732 12 1,011,174 3,261 13 Compensation of officers, directors, trustees, etc 14 15 16a Accounting fees (attach schedule) Administrative Other professional fees (attach schedule) 574109 4,764 4,764 4,764 17 Taxes (attach schedule) (seelinstructions)? FIELD), MO 63017 18 19 Depreciation (attach schedule) and depletion ... 20 21 Travel, conferences, and meetings 22 Printing and publications 4 Other expenses (attach schedule) . . • 23 Total operating and administrative expenses 24 4,768 Add lines 13 through 23 4,768 4.768 25 32,050 32,050 26 Total expenses and disbursements. Add lines 24 and 25 36,818 4,768 36,818 Subtract line 26 from line 12: 974,356 Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)

15.	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	En	d of year
1.50	I & OI	should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		26,56	26,569
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶		***************************************	
		Less: allowance for doubtful accounts			
	4	Pledges receivable ▶	;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	in in in	
		Less: allowance for doubtful accounts		•	
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			<u> </u>
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less: allowance for doubtful accounts		, ,,,	" "
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
ď	10a	Investments - U.S. and state government obligations (attach schedule)			-
	ь	Investments - corporate stock (attach schedule) STM137		596,06	3 619,471
	C	Investments - corporate bonds (attach schedule)		0.00	325,312
	11	Investments - land, buildings, and equipment, basis	» : >>	*** *:	
		Less accumulated depreciation (attach schedule)	*	. ,	* ***** ; ****; **
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule) STM118		356,71	3 359,830
	14	Land, buildings, and equipment: basis		~ (minimum)	
	1-7	Less: accumulated depreciation (attach schedule)	/ ·'	Milmmund:	minim min \$ minim ~
	15	Other assets (describe >			
	16	Total assets (to be completed by all filers - see the			
	.0	instructions. Also, see page 1, item l)		070 241	1 005 070
	17		0	979,34	Tanana a a angamban
		Accounts payable and accrued expenses		4,76	•
ş	18	Grants payable			
Liabilities	19	Deferred revenue			
豆	20	Loans from officers, directors, trustees, and other disqualified persons			
Ë	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe >)		*****	
	23	Total liabilities (add lines 17 through 22)	0	4,76	I min bilanda
		Foundations that follow SFAS 117, check here X			
Ses		and complete lines 24 through 26 and lines 30 and 31.			flagger a sign
alances	24	Unrestricted		974,58	
	25	Temporarily restricted			
D D	26	Permanently restricted			
Fund		Foundations that do not follow SFAS 117, check here ▶ ☐			Junior Ville Stranger
느		and complete lines 27 through 31.			8 0000 S 3
8	27	Capital stock, trust principal, or current funds			
Assets or	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
ş	29	Retained earnings, accumulated income, endowment, or other funds		······	
Net/	30	Total net assets or fund balances (see instructions)	0	974,58	
ž	31	Total liabilities and net assets/fund balances (see			
	_	instructions)	0	979,34	5 / / /////////////////////////////////
P	rt II		ices		
		net assets or fund balances at beginning of year - Part II, column (a), line	_		
		of-year figure reported on prior year's return)			·
2	Enter	amount from Part I, line 27a			974,356
3	Othe	r increases not included in line 2 (itemize) > STM115			4,989
4	Add i	ines 1, 2, and 3			979,345
5	Decre	eases not included in line 2 (itemize)			5
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	column (b), line 30		979,345
EEA					Form 990-PF (2012)

7 W 7 7 1 W 1	ISTMAS VALLEY FOUNDATION			45-65	58348 Pag
	and Losses for Tax on Inv		(b) How acquired		
	oe the kind(s) of property sold (e.g., real ehouse; or common stock, 200 shs. MLC		P-Purchase D-Donation	(c) Date acquired (yr., mo., day)	(d) Date sold (yr , mo , day)
1a					
b					
<u>c</u>					
<u>d</u>		_			
(1) O 1 1					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or o			ın or (loss) (f) minus (g)
a					
b					
<u>c</u>					
<u>d</u>					
e				<u> </u>	· · · · · · · · · · · · · · · · · · ·
Complete only for assets show	ving gain in column (h) and owned b	ì		(I) Gains (C	ol (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess over col (COI. (K), DUT NO Losses (1	t less than -0-) or from col (h))
a					· · · · · · · · · · · · · · · · · · ·
b					
c					
d					
е					
2 Capital gain net income or (ne	t capital loss)	ilso enter in Part I, lind enter -0- in Part I, lind	>	2	
3 Net short-term capital gain or ((loss) as defined in sections 1222(5	•	}		
	8, column (c) (see instructions). If				
	· · · · · · · · · · · · · · · · · · ·	•	}	3	
Part V Qualification U	nder Section 4940(e) for F	Reduced Tax on	Net Investme	ent Income	
For optional use by domestic priva	ate foundations subject to the section	on 4940(a) tax on net	investment incom	e.)	_
section 4940(d)(2) applies, leave	e this part blank.				
					— . —.
	ection 4942 tax on the distributable	• •	the base period?	•	∐ Yes ∐ N
	ualify under section 4940(e). Do no in each column for each year; see t		making any entris		
(a)		TO ITISTI GOLIOTIS DETOTE			(d)
Base period years Calendar year (or tax year beginnir	(b) Adjusted qualifying distribution	ons Net value of r	(c) noncharitable-use as		tribution ratio divided by col (c))
2011					
2010					
2009					
2008					
				- } ,	
2 Total of line 1 column (d)					
2 Total of line 1, column (d)3 Average distribution ratio for the	ne 5-year base period - divide the to	ital on line 2 by 5 or h	······································	· · 2	
-	n has been in existence if less than	• •		3	
	Door in cristianing in load tituli	-,			
4	itable-use assets for 2012 from Par	4 V 11 E		4	

5 Multiply line 4 by line 3	5	0
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	0
8 Enter qualifying distributions from Part XII, line 4	8	

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

	990-PF (2012) · CHRISTMAS VALLEY FOUNDATION		558348		Page 4
Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	- see	instru	ctions	5)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	1.	· · · · · · · · · · · · · · · · · · ·	7.72	1111
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		Α	, §]	- (A)
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			0
	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			0
3	Add lines 1 and 2	3			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5			0
6	Credits/Payments:		:	• ;	111
а	2012 estimated tax payments and 2011 overpayment credited to 2012 6a	12.			J 48.
b	Exempt foreign organizations - tax withheld at source	1, :::1	~	`\\	*
C	Tax paid with application for extension of time to file (Form 8868) 6c	1 1		٤.	A 178
d	Backup withholding erroneously withheld 6d	1 * 1		٠ . ا	. 8
7	Total credits and payments. Add lines 6a through 6d	7 7 1	•		
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
11	Enter the amount of line 10 to be: Credited to 2013 estimated tax ▶ Refunded ▶	11			
Par	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			Ye	es No
	participate or intervene in any political campaign?		🗔	1a	Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19				
	of the 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			TT 1.	
	published or distributed by the foundation in connection with the activities.		1.	. 1	
С	Did the foundation file Form 1120-POL for this year?			1c	` x "
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			XX	
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		<u></u>	, Ar	
	on foundation managers. > \$		<u> </u>	J	¥
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	ĺχ
	If "Yes," attach a detailed description of the activities.			7	~~~
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of		·	, j''	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		.	3	x
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a	X
b	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	X
-	If "Yes," attach the statement required by General Instruction T.				3 7
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		500		
•	By language in the governing instrument, or		1	* 1	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		- 10	,, ·	
	conflict with the state law remain in the governing instrument?		1.	· 1	x
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 Par	XV	``⊢		x –
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	•	· ·	- 1	
ou	Elias de sales de miles de locales de la martin de logistico (see medicales)				11 **
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		— I.	[漢]	. []
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		. ;	.∵∦	* X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		· . F		<u> </u>
•	4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes,"			.1,.	11 \
	complete Part XIV			9	х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		⊢	- +	+*
10				10 2	y
	names and addresses	· · ·	· · <u>1</u>	- 200 !	- (OO40)

	1990-PF (2012) CHRISTMAS VALLEY FOUNDATION	45-655834	8	F	age 5
Pa	rt VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the				
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified				
	person had advisory privileges? If "Yes," attach statement (see instructions)		12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application		13	X	
	Website address ▶ N/A				·
14	The books are in care of > JOHN A VIRANT, TRUSTEE Telephone no.	▶ 314-727	7-34	21	
	Located at ► 8000 MARYLAND AVENUE SAINT LOUIS, MO ZIP+4	▶ 63105			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041-Check here	, ,			<u>▶ </u>
	and enter the amount of tax-exempt interest received or accrued during the year ▶	_15			
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority		ŀ	Yes	No
	over a bank, securities, or other financial account in a foreign country?	· · · · · L	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of			•:	
ranno	the foreign country				<u></u>
Pai	A VILE Statements Regarding Activities for Which Form 4720 May Be Required		********		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	L.		Yes	No
1a	During the year did the foundation (either directly or indirectly):	_	~;«∤	· ;	i uni
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	X No	* !	: \ 🛛	200
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		`\.	% :#	79 %
	disqualified person? Yes		Ĩ		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		.	M.)]	¥.;
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	X No	×	13.	··· ·
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		",∦		
	the benefit or use of a disqualified person)?	X No	ŧ		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		1	٠	
	foundation agreed to make a grant to or to employ the official for a period after	₩.	*		3.77
_	termination of government service, if terminating within 90 days.)				1.
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	í	<u>.</u>	•	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	· — · · · · · · · · · · · · · · · · · ·	1b		
	Organizations relying on a current notice regarding disaster assistance check here	`	`> !	1.37	12
С	were not corrected before the first day of the tax year beginning in 2012?	ı	1c	• •	х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		16		
-	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	₩.	**]		
a	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and				Z
u	6e, Part XIII) for tax year(s) beginning before 2012? X Yes	□ No □			
	If "Yes," list the years ▶ 2012 .	□•	4		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		\$	15	"···
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	<u> </u>	₩ f	~~~	~~~;
	all years listed, answer "No" and attach statement - see instructions.)	[2b Î		X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			- 88	77.9
	•				r i
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		3		
	at any time during the year?	X No	ŢĴ	W.	11.00
b	If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or				
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the	1	1		
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of		. 🛊	``	F
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	<i>\</i>	<u> </u>	. 4	(K)
	foundation had excess business holdings in 2012.)		3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	Γ,		•>	* *:
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	? [4b		Х

Form	990-PF (2012) CHRISTMAS VALLEY FOR	NDATI	ON				'4	5-655	348	Page 6
Par	t VII-B Statements Regarding Activitie	s for \	Which Forr	n 4720	May Be	Requi	red (co	ntinued)	
5a	During the year did the foundation pay or incur any an	ount to:							T	12 11 11 11
	(1) Carry on propaganda, or otherwise attempt to influ	ience leg	gislation (section	n 4945(e))?	[Yes	X No		
	(2) Influence the outcome of any specific public election	on (see :	section 4955);	or to car	Ty on,	·		_	γ.	
	directly or indirectly, any voter registration drive?				•	[Yes	X No	2000	
	(3) Provide a grant to an individual for travel, study, o					· · · · · · · · · · · · · · · · · · ·	Yes	X No	. ::	
	(4) Provide a grant to an organization other than a ch									
	section 509(a)(1), (2), or (3), or section 4940(d)(2	-				[Yes	X No		
	(5) Provide for any purpose other than religious, char		•						J	₽I∴
	purposes, or for the prevention of cruelty to childre			=		[Yes	X No	_ [``_	.
b	If any answer is "Yes" to 5a(1)-(5), did any of the trans									
_	Regulations section 53.4945 or in a current notice reg								5b	
	Organizations relying on a current notice regarding dis	_							100	
С	If the answer is "Yes" to question 5a(4), does the foun							- 1	h.,	1
·	because it maintained expenditure responsibility for th					ſ	Yes	□No	. **-	
	If "Yes," attach the statement required by Regulations	-				1		□ ''•		F J. I
6a	Did the foundation, during the year, receive any funds			nav pre	miume				[·	
va	on a personal benefit contract?			pay pre	aniuins	Ī	Yes	X No	" "	
b	Did the foundation, during the year, pay premiums, dir				l bonoft con	[1 es	X No	eb.	X
		ecuy or i	nuirecuy, on a	persona	i benelit con	ractr			6b	
7a	If "Yes" to 6b, file Form 8870. At any time during the tax year, was the foundation a	antu ta c	a probibited tow	oboltor i	transcation?	1	7 ٧	X No		
b	If yes, did the foundation receive any proceeds or hav					· [NO NO	7b	1 4
	Types, and the foundation receive any processes of have						e High	ly Paid		lovees
1.00	and Contractors	ciors,	, IIustees,	round	Jation Ma	ııaycı	s, mgn	ily Faid	СШР	loyees,
4 1	ist all officers, directors, trustees, foundation mana	AGORE 20	d their compo	neation	/coo instru	otione\				
			e, and average		mpensation		Contribution	ons to	(a) Evr	pense account,
900	990 OFOV (a) Name and address	hou	rs per week	`(lf n	ot paid,	empl	oyee benef	fit plans	other	allowances
	N A VIRANT	TRUST	ed to position	O n	nter -0-)	and de	ferred com	pensauon		
	S BROADWAY AVE BARTOW, FL 33830	I KUSI.	1		0			0		0
	Y ANN VIRANT	TRUST				<u> </u>				
	S BROADWAY AVE BARTOW, FL 33830	I KODI.	0		0			0		0
	L A VIRANT	TRUST								
	S MADISON ST, IL 60521-4363		0		0			0		0
	PHEN J VIRANT	TRUST	-						_	<u>-</u> _
	S BROADWAY AVE BARTOW, FL 33830		0		0			0		0
	Compensation of five highest-paid employees (other	than th	ose included	on line	1 - see instr	uctions	. If none.	enter		
	NONE."						,,	,		
			T				(d) Contr	butions to	l	
	(a) Name and address of each employee paid more than \$50	,000	(b) Title, and a hours per v		(c) Comper	nsation	employe	e benefit d deferred		ense account, allowances
			devoted to po		1-7 7			nsation	Outer	allowalloca
NON	3				-					
							ł			
							<u> </u>			
Tota	number of other employees paid over \$50,000					<u> </u>		▶		0
EEA									Form 9	90-PF (2012)

Form 990-PF (2012) CHRISTMAS VALLEY FOUNDATION	45-	655 <u>8348</u> Page 7
Information About Officers, Directors, Trustees, Foundat and Contractors (continued)	ion Managers, Highly i	Paid Employees,
3 Five highest-paid independent contractors for professional services (see instruction	ons). If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		
	-	
Total number of others receiving over \$50,000 for professional services	<u> </u>	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical	information such as the number of	
organizations and other beneficiaries served, conferences convened, research papers produced, etc		Expenses
1		
2		
3	· 	
· · · · · · · · · · · · · · · · · · ·		
4		
Part IX-B Summary of Program-Related Investments (see instruction	ine)	
Describe the two largest program-related investments made by the foundation during the tax year on lines		Amount
1		741104111
2		
All other program related investments. See naturations		
All other program-related investments. See instructions.		

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Form 990-PF (2012)

12	Minimum Investment Return (All domestic foundations must complete this part. Foreign	n foundat	ions,
	see instructions.)		
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	127,866
b	Average of monthly cash balances	1b	321,193
C	Fair market value of all other assets (see instructions)	1c	131,698
đ	Total (add lines 1a, b, and c)	1d	580,757
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	0
3	Subtract line 2 from line 1d	3	580,757
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	580,757
6	Minimum investment return. Enter 5% of line 5	6	29,038
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating		
	foundations and certain foreign organizations check here ▶ and do not complete this	part.)	
1	Minimum investment return from Part X, line 6	1	29,038
2a	Tax on investment income for 2012 from Part VI, line 5 2a		
b	Income tax for 2012. (This does not include the tax from Part VI.)].	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	29,038
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	29,038
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	29,038
D ₃	rt XII Qualifying Distributions (see instructions)		
	A state 3 Additional See instructions (See instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	36,818
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 .	4	36,818
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	36,818
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	foundation	n
	qualifies for the section 4940(e) reduction of tax in those years.		

	· · · · · · · · · · · · · · · · · · ·	(a)	(b)	(2)	441
1	Distributable amount for 2012 from Part XI,	Corpus	(b) Years pnor to 2011	(c) 2011	(d) 2012
	line 7	8260000 000	1		29,038
2	Undistributed income, if any, as of the end of 2012:			77 X 1822: N	
а	Enter amount for 2011 only			. ****	
b	Total for prior years:	3//////////////////////////////////////	* * * * * * * * * * * * * * * * * * * *	<u> </u>	
3	Excess distributions carryover, if any, to 2012:			**************************************	••••••••••••••••••••••••••••••••••••••
а	From 2007			14 July 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	. 13. 25".
b	From 2008		13.		
С	From 2009			11 1 C C C C C C C C C C C C C C C C C	
d	From 2010				1 23 3 4 3 3 4 4 4
е	From 2011				1 Say 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
f	Total of lines 3a through e	1			
4	Qualifying distributions for 2012 from Part XII,	4 11 4807 108	3 3 3	3 2	
	line 4: ▶\$ 36,818				
а	Applied to 2011, but not more than line 2a				
b	Applied to undistributed income of prior years	**************************************		2.738	<u> </u>
_	(Election required - see instructions)			<i>*</i> ***********************************	
С	Treated as distributions out of corpus (Election		**************************************		Öller open Saladi
•	required - see instructions)				Propins in Ma
d	Applied to 2012 distributable amount				29,038
	Remaining amount distributed out of corpus	7,780	·····		29,036
5	Excess distributions carryover applied to 2012 .	7,700	**************************************	(155 }	<u> </u>
•	(If an amount appears in column (d), the same	**************************************		* * * * * * * * * * * * * * * * * * * *	103 27
	amount must be shown in column (a).)	[1998] AM			
6	Enter the net total of each column as	1777			
•	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 .	7,780			
b	Prior years' undistributed income. Subtract	77,700		· ^	
-	line 4b from line 2b	1. 1900 M. Lat. 11			
c	Enter the amount of prior years' undistributed			aliantana kan mining 3	
•	income for which a notice of deficiency has	1 X 14 Jan. 34.			
	been issued, or on which the section 4942(a)	The Marine			
	tax has been previously assessed		•		
d	Subtract line 6c from line 6b. Taxable				
ŭ	amount - see instructions				
	Undistributed income for 2011. Subtract line		30		
•	4a from line 2a. Taxable amount - see				ľv, "′;`à⊵′
	instructions	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	are essential and the		
f	Undistributed income for 2012. Subtract lines				\$ 500 \$0.500.000.000
•	4d and 5 from line 1. This amount must be				
	distributed in 2013				0
7	Amounts treated as distributions out of corpus		Maria de la companya della companya della companya della companya de la companya della companya		
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see instructions)		[\$4,~4},]		Sec. 1973.
8	Excess distributions carryover from 2007 not			(4) (3) (4)	
J	applied on line 5 or line 7 (see instructions)		Mario Jan	, 50 m , 500 m , 500 m	t Santa Sala
9	Excess distributions carryover to 2013.			 	
3	Subtract lines 7 and 8 from line 6a	7,780	1 (") " () () () () () ()		
10	Analysis of line 9:	× , , , , , , , , , , , , , , , , , , ,			
	Excess from 2008		! *		t i man gazini
a	Excess from 2009)
D	Excess from 2009				
C					
d	Excess from 2011				
<u>e</u>	Excess from 2012	'F'	1 194	1% / /	Form 990-PF (2012)
EEA					TUITE 330-PF (2012)

Part	XIV Private Operating Fou	ndations (see ins	tructions and Part	VII-A, question 9)	•	
1a	If the foundation has received a ruling or	determination letter the	at it is a private operatir	ng		
	foundation, and the ruling is effective for	2012, enter the date of	f the ruling		.	
· b	Check box to indicate whether the found	ation is a private opera	iting foundation describ	ed in section	4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	1 .0 .20/(0/ 0.]	10.120)(0)
	income from Part I or the minimum		(h) 0044			(e) Total
	investment return from Part X for	(a) 2012	(b) 2011	(c) 2010	(d) 2009	
	each year listed					
b	85% of line 2a					
C	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	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test - enter: (1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test - enter:		-			
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties) (2) Support from general public					
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
~~~	(4) Gross investment income					
Part	XV Supplementary Informa	ition (Complete t	his part only if th	ne foundation had	d \$5,000 or more	in assets at
	any time during the yea	ır - see instructio	ns.)			
1	Information Regarding Foundation N	lanagers:				
а	List any managers of the foundation wh before the close of any tax year (but on	o have contributed mor	re than 2% of the total of	contributions received b	y the foundation	
	before the close of any tax year (but on	y ii triey have contribut	teu more tran \$5,000).	(See section 507(0)(2)	.)	
b	List any managers of the foundation wh				portion of the	
	ownership of a partnership or other enti	ty) of which the founda	uo iiilasa 10% or grea	ioi iiileiesi.		
	· · · · · · · · · · · · · · · · · · ·			-·· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
2	Information Regarding Contribution,					
	Check here ▶ X if the foundation onl	y makes contributions	to preselected charitab	le organizations and do	es not accept	
	unsolicited requests for funds. If the fou	ndation makes gifts, gr	ants, etc. (see instructi	ions) to individuals or o	rganizations under	
	other conditions, complete items 2a, b,	c, and d.				
а	The name, address, and telephone num	nber or e-mail of the pe	rson to whom application	ons should be addresse	ed:	
b	The form in which applications should b	e submitted and inform	nation and materials the	ey should include:		<u> </u>
С	Any submission deadlines:					
d	Any restrictions or limitations on awards factors:	s, such as by geograph	nical areas, charitable fi	elds, kinds of institution	s, or other	

Part XV Supplementary Information (continued)

Recipi	ent		If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (I	r business)	any foundation manager or substantial contributor	recipient	Contribution	, and an	
a Paid during the year	· -					
BARNES JEWISH HOSPI:	ral.				CHARITABLE	
1001 HIGHLANDS PLAZZ	A WEST	DR			CONTRIBUTION	
SAINT LOUIS	MO	63110	NONE	EXEMPT		7,00
CHAMINADE COLLEGE					CHARITABLE	
425 S LINDBERG BLVD					CONTIBUTION	
SAINT LOUIS	MO	63131	NONE	EXEMPT	CONTENTED	50
CHILDRENS HOSPITAL 1	FOIINID &	TTON			CHARITABLE	
ONE CHILDRENS PLAZA	CONDA	.11014			CONTRIBUTION	
SAINT LOUIS	МО	63110	NONE	EXEMPT	CONTRIBUTION	1,00
HOPE MINISTRIES					CHARITABLE	
107 HANCOCK STREET					CONTRIBUTIONS	
WASHINGTON	МО	63090	NONE	EXEMPT		500
ST VINCENTS CHURCH					CHARITABLE	
1408 S 10TH STREET				1	CONTRIBUTION	
SAINT LOUIS	MO	63104	NONE	EXEMPT		1,20
ST LOUIS CATHOLIC AC	CADEMY				CHARITABLE	
99 LARKIN WILLIAMS	IND CT			ļ	CONTRIBUTION	
FENTON	MO	63026	NONE	EXEMPT		1,100
LITTLE SHELTER					CHARITABLE	
33 WARNER RD				İ	CONTRIBUTION	
HUNTINGTON	NY	11743	NONE	EXEMPT		3,000
CHRIST CHURCH CATHEI	DRAL			[	CHARITABLE	
1210 LOCUST STREET				1	CONTRIBUTION	
SAINT LOUIS	MO	63103	NONE	EXEMPT		1,000
<b>-</b>						
b Approved for future payme					<u></u>	
			1			

Part XV Supplementary Information (continued)

Recipient  Name and address (home or business)			If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
			or substantial contributor	recipient		
<ul> <li>Paid during the year</li> </ul>						
SUPPORT DOGS INC					CHARITABLE	
11645 LILBURN PARK	RD				CONTRIBUTION	
SAINT LOUIS	MO	63146	NONE	EXEMPT		11,45
MICDS ANNUAL FUND			.		CHARITABLE	
101 NORTH WATSON RD					CONTRIBUTION	
SAINT LOUIS	MO	63124	NONE	EXEMPT		50
MARLIN PERKINS SOCI	ETY				CHARITABLE	
1402 SLEIGH RUN					CONTRIBUTION	
CHESTERFIELD	МО	63005	NONE	EXEMPT		1,00
ST PATRICK CENTER					CHARITABLE	
800 NORTH TUCKER					CONTRIBUTION	
SAINT LOUIS	MO	63101	NONE	EXEMPT		1,00
THE LITTLE BIT FOUN	DATION				CHARITABLE	
1325 N WARSON			j		CONTRIBUTION	
SAINT LOUIS	MO	63132	NONE	EXEMPT		10
NAZARETH LIVING CEN	TER				CHARITABLE	
2 NAZARETH LIVING C	ENTER				CONTRIBUTIONS	
SAINT LOUIS	MO	63129	NONE	EXEMPT		25
CENTRAL CATHOLIC SC	HOOL				CHARITABLE	
1106 N JEFFERSON					CONTRIBUTION	
SAINT LOUIS	MO	63106	NONE	EXEMPT		25
ST AUGUSTINE CHURCH					CHARITABLE	
1371 HAMILTON					CONTRIBUTION	
SAINT LOUIS	MO	63112	NONE	EXEMPT		1,00
					▶ 3a	
<b>b</b> Approved for future payme	ent					
					,	
					L	

Part XV | Supplementary Information (continued)

3 Grants and Contribution		ald During the	If recipient is an individual.			
Recipier			show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (ho	me c	r business)	or substantial contributor	Тестрісті		
a Paid during the year KATHY LAND TRUST					CHARITABLE	
4383 CAPPELN OSAGE RD					CONTRIBUTION	
AUGUSTA	MO	63332	NONE	EXEMPT		1,000
ROARING FORK CONSERVA 200 BASALT CENTER CIR					CHARITABLE CONTRIBUTION	
BASALT	CO	81621	NONE	EXEMPT	CONTRIBUTION	200
						•
					•	
						,
Total				· · · · · · · · · ·		32,050
b Approved for future payment				, ,		
						ı
Total					▶ 3b	

4	array in Analysis of income-Producing	Activities		_		
En	ter gross amounts unless otherwise indicated.	Unrelate	d business income	Excluded by se	ction 512, 513, or 514	(e)
1	Program service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
•	a	Code			<del></del>	<del></del>
	b					<del> </del>
	e					
	d					-
	•					
	f					-
	g Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments .					
4	Dividends and interest from securities			14	3,993	-
5	Net rental income or (loss) from real estate:	3 / 1	198		y.** 8:	
	a Debt-financed property					
	<b>b</b> Not debt-financed property			·		
6	Net rental income or (loss) from personal property					
7	Other investment income			41	(732	)
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue: a			-		
	b				-	
	C					<del>"</del> 
	d					
	8	_				
12	Subtotal. Add columns (b), (d), and (e)	, · · · · · · · · · · · · · · · · · · ·		(8)	3,261	
13	Total. Add line 12, columns (b), (d), and (e)				13	3,261
(Se	ee worksheet in line 13 instructions to verify calculations.)					
P	art XVI-B Relationship of Activities to the					<del></del>
ı	ine No. Explain below how each activity for which inc	-	• •			
	accomplishment of the foundation's exempt p	urposes (oth	er than by providing	funds for such p	urposes). (See instruc	tions.)
	•					
					<del>.</del>	
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#### Form 990-PF (2012). CHRISTMAS VALLEY FOUNDATION 45-6558348 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described Yes No in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? Transfers from the reporting foundation to a noncharitable exempt organization of: 1a(2) Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) 1b(3) 1b(4) X 1b(5) (6) Performance of services or membership or fundraising solicitations Sharing of facilities, equipment, mailing lists, other assets, or paid employees If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship s of perjury/ideclare that have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, including a property of the property o Sign May the IRS discuss this return TRUSTEE Here with the preparer shown below ▼ Yes □ Signa ire of officer or Title Date Print/Type preparer's name PTIN Check

**Use Only** 

**Paid** L Zerjav CPA

Firm's name

Firm's address

ZERJAV & ASSOCIATES LC 1980 CONCOURSE DRIVE

ST LOUIS MO 63146

04-30-2012 self-employed Firm's EIN

P00296218

314-205-9595

#### 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

2012

Name of the organization		Employer identification number
CHRISTMAS VALLEY FO	UNDATION	45-6558348
Organization type (check on		12 333333
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private fou	undation
	527 political organization	
Form 990-PF	∑ 501(c)(3) exempt private foundation	
1 OIII 330-1 1	ES 30 (C)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundar	ition
	501(c)(3) taxable private foundation	
• •	covered by the General Rule or a Special Rule.	
Note. Only a section 501(c)(7 instructions.	), (8), or (10) organization can check boxes for both the General Rule and a	a Special Rule. See
General Rule		
	ing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or recontributor. Complete Parts I and II.	more (in money or
Special Rules		
For a section 501(c)(3	3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test	of the regulations
	)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the y	
the greater of (1) \$5,0 Complete Parts I and	000 or <b>(2)</b> 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 99 II.	O-EZ, line 1.
For a section 501(c)(7	7), (8), or (10) organization filing Form 990 or 990-EZ that received from any	v one contributor.
	contributions of more than \$1,000 for use exclusively for religious, charitable	
or educational purpos	es, or the prevention of cruelty to children or animals. Complete Parts I, II, a	and III.
For a section 501(c)(7	7), (8), or (10) organization filing Form 990 or 990-EZ that received from any	y one contributor,
• •	ibutions for use exclusively for religious, charitable, etc., purposes, but thes	
	\$1,000. If this box is checked, enter here the total contributions that were re	
•	y religious, charitable, etc., purpose. Do not complete any of the parts unles ation because it received nonexclusively religious, charitable, etc., contribu	
more during the year		
Caution. An organization that	is not covered by the General Rule and/or the Special Rules does not file S	Schedule B (Form 990,
• • • • • • • • • • • • • • • • • • • •	st answer "No" on Part IV, line 2 of its Form 990; or check the box on line H	
Dort I line 2 of ite Form 000 D	E to cortify that it does not most the filing requirements of Schodule B /For	m 000 000 E7 or 000 DE\

990B Schedule B (Form 990, 990-EZ, or 990-PF) (2012) Page 2 Name of organization **Employer identification number** CHRISTMAS VALLEY FOUNDATION 45-6558348 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 Person 1 MMV TRUST DTD MAY 1998 **Pavroll** 8000 MARYLAND AVENUE SUITE 380 1,000,000 Noncash (Complete Part II if there is **SAINT LOUIS, MO 63105-3906** a noncash contribution.) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person ī **Pavroll** П Noncash (Complete Part II if there is a noncash contribution.) (b) (a) (c) (d) Total contributions Νo. Name, address, and ZiP + 4 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.) (h) (c) (d) (a)

No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

990B Schedule B (Form 990, 990-EZ, or 990-PF) (2012) Page 3 Name of organization **Employer identification number** CHRISTMAS VALLEY FOUNDATION 45-6558348 Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) NONE 1 (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions)

		(222 monetone)	
_			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  \$	
EA .		Schedule B	Form 990, 990-EZ, or 990-PF) (2012

Form 990_OfOv (2012)

List of Officers, Directors, Trustees, and Key Employees

List all Officers, directors, trustees, and key en	inproyees for the	year even in they wer			<del>_</del>
(a) Name and title		(b) Average hours per week devoted to position	(c) Reportable compensation (Form W-2/1099-MISC) (If not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
THOMAS S VIRANT T	RUSTEE				
549 SUNSET DRVIE, NC 28804-2861		o	o	o	0
· · · · · · · · · · · · · · · · · · ·	D.114EEE		· · · · · · · · · · · · · · · · · · ·		<u> </u>
JOHN A VIRANT III T 10 LAKE FOREST DRIVE, MO 63117	RUSTEE	o	0	0	0
· · · · · · · · · · · · · · · · · · ·	RUSTEE			0	
	KUSIBB				
5375 S CLARKSON STREET, CO 80121		0	0	0	0
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	<b>Federal Supporting Statements</b>	20	<b>12</b> PG 01
lame(s) as shown on return		FEIN	
CHRISTMAS VALLEY FOUN	DATION		45-6558348
	RM 990PF, PART III, LINE 3 OTHER INCREASES SCHEDULE		STATEMENT #115
NET ADJUSTMENTS, BOOK VALUES		4,989	
TOTAL		4,989	
118			
FO	RM 990PF, PART II, LINE 13		PG 01 STATEMENT #118
	NVESTMENTS: OTHER SCHEDULE		SIRIEMENI WIIO
CATEGORY	BOOK VALUE (BOY) BOOK	VALUE (EOY	) FMV (EOY)
ARKWEST ENERGY PTNR LP		10,262	10,20
P D R SP 500 ETF TR		281,746	284,82
PDR GOLD TRUST		64,705	64,80
OTAL		356,713	359,8
127			
137			
137			
	W GGODE DARW II IIWE 10/	D)	PG 01
FOR	M 990PF, PART II, LINE 10( ENTS: CORPORATE STOCK SCHE	•	PG 01 STATEMENT #137
FOR <u>INVESTM</u>	ENTS: CORPORATE STOCK SCHE	•	STATEMENT #137
FOR <u>INVESTM</u> CATEGORY	ENTS: CORPORATE STOCK SCHE	DULE	STATEMENT #137  EOY FM
FOR INVESTM CATEGORY CORPORATE STOCK	ENTS: CORPORATE STOCK SCHE	DULE BOOK VALUE	
FOR INVESTM CATEGORY CORPORATE STOCK	ENTS: CORPORATE STOCK SCHE	BOOK VALUE 596,063	STATEMENT #137  EOY FM
FOR INVESTM CATEGORY CORPORATE STOCK	ENTS: CORPORATE STOCK SCHE	BOOK VALUE 596,063	STATEMENT #137  EOY FM
FOR INVESTM CATEGORY CORPORATE STOCK	ENTS: CORPORATE STOCK SCHE	BOOK VALUE 596,063	STATEMENT #137  EOY FM  619,4
FOR INVESTM CATEGORY CORPORATE STOCK	ENTS: CORPORATE STOCK SCHE	BOOK VALUE 596,063	STATEMENT #137  EOY FM  619,4
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FOR INVESTM ATEGORY ORPORATE STOCK	ENTS: CORPORATE STOCK SCHE	BOOK VALUE 596,063	STATEMENT #137  EOY FM  619,4
FOR	ENTS: CORPORATE STOCK SCHE	BOOK VALUE 596,063	STATEMENT #137  EOY FN  619,4

• 1		P '
	Federal Supporting Statements	2012 PG 01
Name(s) as shown on return	· · · · · · · · · · · · · · · · · · ·	FEIN
CHRISTMAS V	ALLEY FOUNDATION	45-6558348

## FORM 990PF, PART I, LINE 6(A) GAIN(LOSS) FROM SALE OF OTHER ASSETS SCHEDULE

STATEMENT #139

NAME	RE	ZA.	LI	ZEI	: כ	STGAIN/CHARLES	SCHWAB
DATE ACQUIRED	20	1	2 -	05			
HOW ACQUIRED	PU	JR	CH	ASE	3		
DATE SOLD	20	1	2 -	12			
PURCHASER							
GROSS SALES	\$		14	10,	45	2	
BASIS	\$		13	32,	77	7	
ACCUMULATED DEPRECIATION	\$						
SALES EXPENSE	\$						
TOTAL NET	\$	•	7,	675	5		
NAME	RE	A.	LI	ZEL	י כ	STGAIN/CHARLES	SCHWAB
DATE ACQUIRED	20	1	2 -	02			
HOW ACQUIRED	PU	JR	CH	ASE	2		
DATE SOLD	20	1	2 -	11			
PURCHASER							
GROSS SALES	\$		12	, 68	В9		
BASIS	\$		12	, 45	51		
ACCUMULATED DEPRECIATION	\$						
SALES EXPENSE	\$						
TOTAL NET	\$	2	38	}			

REVENUE   RETENUE   RETE		Federal Supporting Statements		2012 Pg 01
FORM 990PF, PART 1, LINE 11 - OTHER INCOME SCHEDULE  REVERUE  REVERUE  REVERUE  REVENUE  REVENUE  REVENUE  REVERUE  REVENUE  REVE	Name(s) as shown on return CHRISTMAS VALLEY FOUNDATION		Your Social Secur 45-6558348	Secunty Number 348
AND EXPENSES INVESTMENT NET INCOME  (732) (732) (732) 0  (732) (732) 0  (732) (732) 0  ENRIPHINE INVESTMENT NET INCOME PURPORTINATION INCOME PURPORTINATIO		FORM 990PF, PART I, LINE 11 - OTHER INCOME SCHEDULE	STATEMENT #106	NT #106
FORM 990PF, PART 1, LINE 16(C) - OTHER PROFESSIONAL FEES SCHEDULE  REVENUE NET ADJUSTED CHARITA  & ASSOCIATES LC 3,914 0 3  SHAPT APPL FILING FEES CHARITA  4,764 4,764 0 3   4,764 0 0	DESCRIPTION MARKWEST ENERGY PARTNERS	NET ADJUSTED INCOME INCOME (732)		
TION  REVENUE  REVENUE  REVENUE  REVENUE  RESOCIATES  RESOCIATES  RESOCIATES  REVENUE  REVENU	TOTALS	(732)		
REVENUE   NET   ADJUSTED CHARITA		FORM 990PF, PART I, LINE 16(C) - OTHER PROFESSIONAL FEES SCH	STATEMEI	PG 01 NT #109
<u>—————————————————————————————————————</u>	DESCRIPTION ZERJAV & ASSOCIATES LC TAX EXEMPT APPL FILING FEES	NET ADJUSTED INVESTMENT NET INCOME 3,914 0 850 0	CHARITABLE PURPOSE 3,914 850	
	TOTALS	4,764	4,764	
				,

### Form **8868**

(Rev. January 2013)

Department of the Treasury

# Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

Internal Revenue	Service					Į.	
If you are to	filing for an Automatic 3-Month Extension, con	nplete only l	Part I and check this box				▶ 🏻
	filing for an Additional (Not Automatic) 3-Mont			-			
Do not comp	plete Part II unless you have already been grant	ed an autom	atic 3-month extension on a p	reviously filed Form	8868	<b>).</b>	
a corporation 8868 to reque Return for Tra	ling (e-file). You can electronically file Form 886i required to file Form 990-T), or an additional (no set an extension of time to file any of the forms list ansfers Associated With Certain Personal Benefic For more details on the electronic filing of this forms.	t automatic) sted in Part I t Contracts,	3-month extension of time. Yo or Part II with the exception o which must be sent to the IRS	u can electronically f Form 8870, Inform in paper format (se	file F ation e	orm	
Part I							
	Automatic 3-Month Extension of T required to file Form 990-T and requesting an au						
				x and complete			
	orations (including 1120-C filers), partnerships, F			· · · · · · · · · · · · · · · · · · ·	ion of	· · · ·	• 🗀
to file income		KLIVIIOS, aliu	uusis must use Form 7004 k	request an extens	ion oi	urre	
to life il loome	ax returns.		Ente	r filer's identifying	num	har ear	a instructions
Type or	Name of exempt organization or other filer, se	e instruction		Employer identific			
print	CHRISTMAS VALLEY FOUNDATION	o mondenor		45-6558		Humber	. (EII4) OI
File by the	Number, street, and room or suite no. If a P.O.	) box see in	estructions	Social security no		(SSN)	
due date for	8000 MARYLAND AVENUE			Coolar coolarity III		(00.1)	
filing your return See	City, town or post office, state, and ZIP code.	For a foreign	n address, see instructions.				
instructions.	CLAYTON, MO 63105-3906	•	•				
Enter the Ret	um code for the return that this application is for	(file a separa	te application for each return)		• •		0 4
Application	1	Return	Application				Return
Is For		Code	is For				Code
Form 990 o	r Form 990-EZ	01	Form 990-T (corporation)				07
Form 990-E	BL .	02	Form 1041-A				08
Form 4720	(individual)	03	Form 4720				09
Form 990-F	PF	04	Form 5227	· · · · · · · · · · · · · · · · · · ·			10
Form 990-T	(sec. 401(a) or 408(a) trust)	05	Form 6069	<del></del>			11
Form 990-T	(trust other than above)	06	Form 8870				12
	are in the care of ► <u>JOHN A VIRANT TO</u> No. ► 314-727-3421		000 MARYLAND AVENUE				
=	nization does not have an office or place of busin						▶ □
_	r a Group Return, enter the organization's four di		•	. If this	s is		
	group, check this box ▶ 🗌 . If						
	names and EINs of all members the extension is						
	st an automatic 3-month (6 months for a corporate		to file Form 990-T) extension	of time			
until	08-15 , 20 13 , to file the exempt o				ension	is	
for the	organization's return for:	_	•				
▶ 🛚	calendar year 20 12 or						
▶ 🔲	tax year beginning	, 20	, and ending		20_	<u>_</u> .	
2 If the ta	x year entered in line 1 is for less than 12 month	s, check rea	son: 🛛 Initial return	Final return			
Cha	nge in accounting period						
3a If this a	pplication is for Form 990-BL, 990-PF, 990-T, 47	20, or 6069,	enter the tentative tax, less ar	ny T	_		_
nonrefu	indable credits. See instructions.				3a	\$	0
<b>b</b> If this a	pplication is for Form 990-PF, 990-T, 4720, or 60	69, enter an	y refundable credits and				
estimat	ed tax payments made. Include any prior year o	verpayment	allowed as a credit.		3b	\$	0
c Balanc	e due. Subtract line 3b from line 3a. Include you	r payment wi	th this form, if required, by usi	ng			
EFTPS	(Electronic Federal Tax Payment System). See	instructions.			3c	\$	0
Caution. If you a	are going to make an electronic fund withdrawal with this Form	8868, see Form	8453-EO and Form 8879-EO for paym	ent instructions.			