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Form **990-PF**

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0052

2008

For	calenda	ar year 2008, or tax year beginning DE	<u>C 1, 2008</u>	, and e	nding	NOV 30, 2009)
<u>G</u> (heck a	Il that apply: Initial return	Final return	Amended ret	urn	Address change	Name change
Use	the IR	S Name of foundation				A Employer identification	n number
	abel.	L					
	erwise			<u> </u>	1	37-0196790)
	print r type.	Number and street (or P O box number if mail is not a	delivered to street address)		Room/suite	B Telephone number	cooc
	Specif	3415 N. SHERIDAN RD.			<u> </u>		-6236
	ruction	s City or town, state, and ZIP code				C if exemption application is i	
	Shaalah	PEORIA, IL 61604				D 1. Foreign organization	s, check here
X	_	/pe of organization: Section 501(c)(3) of the	exempt private foundation Other taxable private found	lation		Foreign organizations m check here and attach c	omputation
	-		ting method: Cash	X Acci	ruol	E If private foundation sta	
		·	Other (specify)	LAL ACC	luai	under section 507(b)(1	
(//		1,855,923. (Part I, col	umn (d) must be on cash	basis.)		F If the foundation is in a under section 507(b)(1	
	rt I	Analysis of Revenue and Expenses	(a) Revenue and		rvestment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	expenses per books		ome	income	for charitable purposes (cash basis only)
	1 C	contributions, gifts, grants, etc., received				N/A	
		theck X if the foundation is not required to attach Sch. B					
	3 c	nterest on savings and temporary ash investments	55,595.	5	5,595.		STATEMENT 1
	4 D	lividends and interest from securities					
	5a G	Pross rents					
	bΝ	et rental income or (loss)				*	
0		et gain or (loss) from sale of assets not on line 10)
eun	b a	iross sales price for all ssets on line 6a					
Revenue	7 C	apital gain net income (from Part IV, line 2)			0.		,
щ		let short-term capital gain					1
	9 Ir	ncome modifications		ļ			i
	_	ross sales less rePRECEIVED					
		ess Cost of goods sold					-
	44 0	iross prome 2 1 2010	410 026	22	6 700		CITA MENUENTE 2
		otal. Add lines 1 through 11	419,936. 475,531.		6,782. 2,377.		STATEMENT 2
_		compensation of officers two trustees, etc	9,000	43	9,000.	<u></u>	0.
		ther employee salaries and wages	5,000.	-	<i>J</i> ,000.		<u></u>
		rension plans, employee benefits		<u> </u>			
ses		egal fees STMT 3	12,240.	1	2,240.		0.
Expenses		ccounting fees STMT 4	5,775.		5,775.		0.
EXE	c 0	ther professional fees					
ve	17 Ir	nterest					
rat	18 T	axes STMT 5	9,569.		0.		0.
Operating and Administrative	19 D	epreciation and depletion					
Ë		ccupancy					
дĄ	i	ravel, conferences, and meetings		ļ <u> </u>			
an		rinting and publications			_	. <u></u>	
ing		ther expenses STMT 6	84.		84.		0.
erat		otal operating and administrative	2.5.5.0				
ď		xpenses. Add lines 13 through 23	36,668.	2	7,099.		0.
		ontributions, gifts, grants paid	438,863.				438,863.
		otal expenses and disbursements.	A7E E21	_	7 000		420 002
		dd lines 24 and 25 ubtract line 26 from line 12:	475,531.	 4	7,099.		438,863.
			0.				
		et investment income (if negative, enter -0-)		26	5,278.		
		djusted net income (if negative, enter -0-)		- 40	J 1 4 1 0 .	N/A	
							

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Form **990-PF** (2008)

SCANNED JUN 2 5 2010

	Part III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	1,398,706.
2	Enter amount from Part I, line 27a	2	0.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	1,398,706.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,398,706.

Part IV Capital Gains	and Lo	osses for Tax on In	vestment	Income						
.(a) List and des 2-story brick w	cribe the k varehouse;	ind(s) of property sold (e.g. or common stock, 200 shs	., real estate, s. MLC Co.)		(b) D	How acqu - Purcha - Donati	uired (ise on	c) Date a (mo., da	cquired y, yr.)	(d) Date sold (mo., day, yr.)
fa								_		
b NO	ONE				ــــــ					
<u>c</u>					├ ─					
<u>d</u>					┼—			_		
<u>e</u>	T (0)	D	4 2 0		┸			43.0-	. (1)	
(e) Gross sales price	(1)	Depreciation allowed (or allowable)		st or other basis expense of sale				(n) Ga (e) plus 	in or (loss) (f) minus (g)
<u>a</u>	 				-					
<u>b</u>	 -									
<u> </u>	 -	 .			-					
d e	 			-						
Complete only for assets show	ing gain in	column (b) and owned by t	the foundation	on 12/31/69				Saine (Co	ıl. (h) gaın	minue
		(j) Adjusted basis		cess of col. (i)			col. (k), but no	ot less that	1 -0-) or
(i) F.M.V. as of 12/31/69	l	as of 12/31/69		col. (j), if any					from col. (
a										
b	_						_			
C										
d	1									-
e	T .									
		∫ If gain, also enter	in Part I line	7	7					
Capital gain net income or (net o	capital loss		- in Part I, line	7	<u>}</u>	2				
Net short-term capital gain or (li	oss) as det									
If gain, also enter in Part I, line 8	,		(0).		<i>]</i> [
If (loss), enter -0- in Part I, line	8				لليـ	3				
Part V Qualification	under :	Section 4940(e) for	Reduced	lax on Net	t inv	<u>estme</u>	ent Inco	me		
section 4940(d)(2) applies, leave Vas the foundation liable for the se "Yes," the foundation does not qu	ction 4942 alify under	tax on the distributable am section 4940(e). Do not co	mplete this pa	ırt.				_		Yes X N
Enter the appropriate amount in	each colu	imn for each year; see instri	uctions before	making any entri	ies.					
(a) Base period years Calendar year (or tax year begini	ning in)	(b) Adjusted qualifying dist		Net value of no		ritable-us			Distrib col. (b) div	(d) oution ratio ided by col. (c))
2007			8,382.				,269.			.11535
2006			1,027.		_		,141.			.08697
2005			5,677.				,878.			.12358
2004			8,053.				,875.			.08148
2003		21	1,034.		2	<u>,788</u>	,128.	· 		.07569
Total of line 1, column (d)								2		.48308
Average distribution ratio for the	e 5-year ba	se period - divide the total o	on line 2 by 5.	or by the number	r of ve	ears				· <u></u>
the foundation has been in exist	_	•		_ ,	ju			3		.09661
		• • • •								
Enter the net value of noncharita	able-use as	ssets for 2008 from Part X, I	line 5					4		3,052,009
									-	
Multiply line 4 by line 3								5		294,879
								1 7		
Enter 1% of net investment inco	me (1% o	f Part I, line 27b)						6		2,653
Add lines 5 and 6								7		<u>297,532</u>
Enter qualifying distributions fro	m Part XII	, line 4						8		<u>438,863</u>
If line 8 is equal to or greater tha	an line 7, c	heck the box in Part VI, line	1b, and comp	olete that part usir	ng a 1	% tax rat	te.			
See the Part VI instructions.										
23521 01-02-09									F	orm 990-PF (200

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823541

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

had not been removed from jeopardy before the first day of the tax year beginning in 2008?

Part VIII Statements Regarding Activities for Which Form 4720 May Be Required (continued)	Form 990-PF (2008) PHOEBE B. BUEHLER TRUST	Form 4700 May Bo F	Doguirod (<u>37-01967</u>	90 Page 6
(1) Carry on propagated, or otherwise attempt to influence legislation (section 4945(s))? (2) Influence the outcomer of any specific public election (see section 4955); or to carry on, directly, any votar registration drive? (3) Provide a grant to an omitorial for travel, study, or other similar purposes? (4) Provide a grant to an omitorial for travel, study, or other similar purposes? (5) Provide for any purpose other than a charitable, etc., organization described in section \$509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scentilic, literary, or educational purposes, or for the prevention of cruely to children or animals? (6) Provide for any purpose other than religious, charitable, scentilic, literary, or educational purposes, or for the prevention of cruely to children or animals? (7) Provide for any purpose other "Key" to \$47(-5) day or the transactions (see instructions?) (7) Cryanizations evilying on a current notice regarding disaster assistance (see instructions?) (7) Cryanizations evilying on a current notice regarding disaster assistance (see instructions?) (7) Cryanizations evilying on a current notice regarding disaster assistance theck here (8) If the answer is "Yes" to question Sa(4), does the foundation chare extension from the tax because it maintained expenditure responsibility for this grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). (8) A life foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If year any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? (8) If year any time during the tax year, was the foundation and party to a prohibited tax sheller transaction? (9) If year any time during the year, year the regions and influence type of the party of the par		FORTH 4720 Way be F	required (contin	uea)	-
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registation drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization offer than a charitable, etc., organization described in section \$308(0), (2), or (3), or section 4940(0)(2)? (5) Provide for any purpose other than religious, charitable, scentific, literary, or educational purposes, or for the prevention of cruelty to drifter or animals? (5) If tany answer is "Set" to \$61(1)(5), did any of the transactions fall to qualify under the exceptions described in Regulations section \$3.496 for in a current notice regarding desaster assistance check here if the entire relief or the statement endoce regarding desaster assistance check here if the entire relief to the statement endoce regarding desaster assistance check here if the entire relief to the statement endoce regarding desaster assistance check here if the entire relief to the statement endoce regarding desaster assistance check here if the entire relief to the statement endoce regarding desaster assistance check here if the entire relief to the statement endoce regarding desaster assistance check here if the entire relief to the statement endoce regarding desaster assistance check here if the entire relief to the statement endoce regarding desaster assistance check here if the entire relief to the statement endoce regarding desaster assistance describe the entire relief to the statement endoce regarding desaster assistance described in the statement endoce regarding desaster assistance described in the statement endoce regarding desaster assistance described in the statement of the statement endoce regarding desaster assistance described in the statement endoce regardin	•	- 4045/-\\0		.	
any voter registration drive? 3 Provide a grant to an individual for travel, study, or other similar purposes?		* **		S LA NO	
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(4)(1), (2), or (3), or section 4940(9)(2)? (5) Provide for any purpose other than religious, charitable, etc., organization described in section 100(4)(1), (2), or section 4940(9)(2)? (6) Provide for any purpose other than religious, charitable, etc., organization described in section 100(4)(1), (2), or section 4940(9)(2)? 10) If any answer is "Yes" to Sta(1)-(5), did any of the transactions fall to qualify under the exceptions described in Regulations 10) If any answer is "Yes" to Sta(1)-(5), did any of the transactions? 11) Organizations relying on a current notice regarding desaster assistance check here 11) Organizations relying on a current notice regarding desaster assistance check here 11) Organizations relying on a current notice regarding desaster assistance check here 11) Organizations relying on a current notice regarding desaster assistance check here 11) Organizations relying on a current notice regarding desaster assistance check here 11) Organizations relying on a current notice regarding desaster assistance check here 11) Organizations relying on a current notice regarding desaster assistance check here 11) Organizations relying on a current notice regarding desaster assistance check here 11) Organizations relying on a current notice regarding desaster assistance check here 11) Organization responsibility for the grant? 12) Organization responsibility for the grant? 13) Organization responsibility for the grant? 14) Organization responsibility for the grant? 15) Organization responsibility for the grant? 16) Organization responsibility for the grant? 17) Organization responsibility for the grant? 18) Organization responsibility for the grant responsibility for the grant? 19) Organization responsibility for the grant? 10) Organization responsibility for the grant? 11) Organization responsibility for the grant? 12) Organization responsibility for the grant? 13) O	,	or to carry on, directly or indire		. الحاء	'
(4) Provide a grant to an organization other than a charitable, etc., organization described in section \$50(a)(1), (2), or (3), or section 4940(c)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? If they are served in the provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? If they are served in the provide for animals? If we answer is vest to question 5a(4), does the form dasset assistance (see instructions)? Organizations relying on a current notice regarding dissaster assistance (see instructions)? Organizations relying on a current notice regarding dissaster assistance (see instructions)? Organizations relying on a current notice regarding dissaster assistance (see instructions)? Organizations relying on a current notice regarding dissaster assistance (see instructions)? Organizations relying on a current notice regarding dissaster assistance (see instructions)? Organizations relying on a current notice regarding dissaster assistance (see instructions)? Organizations relying on a current notice regarding dissaster assistance (see instructions)? If we answer is vest to question 5a(4), does the form dassistance (see instructions)? Organization relying organization for dispassion for	•	0			
SoS(a)(1), (2), or (3), or section 4940(4)(2)? (5) Provide for any purpose the than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? b I law answer is "Yes" to \$5(1)-(5), du' any of the transactions fail to qualify under the exceptions described in Regulations section \$5.49455 or in a current notice regarding dessater assistance (see instructions)? Organizations relying on a current notice regarding dessater assistance (see instructions)? Organizations relying on a current notice regarding dessater assistance (see instructions)? Organizations relying on a current notice regarding dessater assistance betwith the statement required by Regulations section \$3.4945-5(d). 6a bid the foundation, during the year, review any funds, directly or indirectly, to pay premiums on a personal benefit contract? If you answered "Yes" to 6b, also the Form 8870. A last yims during the tax year, such the foundation a party to a prohibited tax sheller transaction? I last all officers, directors, as the foundation as any to a prohibited tax sheller transaction? I litest all officers, directors, but the foundation receive any proceeds or have any net income attributable to the transaction? (a) Name and address. Directors, Trustees, Foundation Managers, Highly I List all officers, directors, trustees, foundation managers and their compensation. (b) Iffit, and average (b) Iffit, and average (c) Compensation (f) Com	• • • • • • • • • • • • • • • • • • • •		Y6	S LAJ NO	
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of crully to children or animals? b If any answer is "Yes" to 5s(1)-(3), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 53.49, does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d). 6a Dot the foundation, during the year, receive any funds, directly or indirectly, on a personal benefit contract? If you answered "Yes" to 5d, abo the Form 8870. 7a Al any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? Party Uning the year, and Contractors 1 List all officers, directors, trustees, Directors, Trustees, Foundation Managers, Highly 1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Title, and average house party week (evolved in the party) of the party o	• •	n described in Section	₩ .		
b II any answer is "Ves" to \$6.1(1-15), did any of the transactions fail to qualify under the exceptions described in Regulations section \$5.4.945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here If the answer is "Ves" to disablo \$64, does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section \$5.4.945-5(d). 8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If you answered "Yes" to \$6, also the Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Tell stall officers, directors, trustees, foundation managers and their compensation (a) Name and address List all officers, directors, trustees, foundation managers and their compensation (fl not paid, either -0-) and the paid for the pai		or advectional avenues or f		S L NO	;
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Ciganzations relying on a current notice regarding disaster assistance check here c if the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grain? If "Yes," attach the statement required by Regulations section 53.4945-5(d). 8a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If you answered "Yes" to 6b, also the Form 8870. 7a Al any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly 1 List all officers, directors, fusitees, Trustees, Foundation managers and their compensation. (a) Name and address house rive well devoted to position (c) Compensation (f) Compensation		•	n Regulations	1.	-
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6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit conitact? If you answered "Yes" to 6b, also the Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? If you answered "Yes" to 6b, also the Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? If yes \(\frac{1}{2} \) No If you answered "Yes" to 6b, also the Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? If yes \(\frac{1}{2} \) No If you answered "Yes" to 6b, also the Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? If yes \(\frac{1}{2} \) No If yes \(\frac{1}	, , , , , , , , , , , , , , , , , , , ,		Ye	s LX No	:
a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If you answered "Yes" to 6b, also file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax sheller transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (a) Name and address (a) Name and address TRUSTEE 1. LINDER TRUSTEE 7. LINDER 7. LINDER 7. LI 61614 20.00 7. 000. 2. 000. 2. 000. 3. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.					
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If you answered "Yes" to 6b, also file Form 8870. If you answered "Yes" to 6b, also file Form 8870. If yes, did the foundation reserve any proceeds or have any net income attributable to the transaction? It is all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Title, and average hours per week devolted for position LAURA J. LINDER TRUSTEE TRUSTEE 1 Earl VIII BLATR COURT PEORIA, IL 61615 20.00 2,000.0 0.0. RICHARD L. AMBERG TRUSTEE 20.00 7,000.0 0.0. Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devolted on position (b) Title, and average hours per week devolted on the personal pe	•	pay premiums on			
If you answered "Yes" to 6b, also file Form 8870. 7a At any time during the tax year, was the foundation party to a prohibited tax shelter transaction? 1 bit yes, did the foundation receive any proceeds or have any net income attributable to the transaction? 1 List all officers, directors, trustees, foundation managers and their compensation. 1 List all officers, directors, trustees, foundation managers and their compensation. 1 List all officers, directors, trustees, foundation managers and their compensation. 1 List all officers, directors, trustees, foundation managers and their compensation. 1 List all officers, directors, trustees, foundation managers and their compensation. 1 List all officers, directors, trustees, foundation managers and their compensation. 1 List all officers, directors, trustees, foundation managers and their compensation. 1 List all officers, directors, trustees, foundation managers and their compensation. 1 List all officers, directors, trustees, foundation managers and their compensation. 1 List all officers, directors, trustees, foundation managers, Highly paid for the figure state and account, other all of their directors and direc			Ye		
7a Al any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b Il yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation ((d) Combinious to the position (If not paid, enter -8-). (d) Compensation ((d) Combinious to the position of the highest paid directors account, other allowances. (e) Expense account, other allowances. TRUSTEE 424 RAVENSWOOD PEORIA, IL 61615 20.00 7,000. 0. 0. 1111 BLAIR COURT PEORIA, IL 61614 20.00 7,000. 0. 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (b) Title, and average hours per week devoted to position of the highest past allowances. (c) Compensation of the highest paid employees account, other allowances. (e) Expense account, other allowances. (b) Title, and average hours per week devoted to position of the highest past allowances. (c) Compensation of the highest past allowances account, other allowances.		ersonal benefit contract?		<u>_</u>	6b X
bit yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII	·		_		
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (b) Title, and average hours per week devoted to position (fl not paid, enter -0-)			Ye		
1 List all officers, directors, trustees, foundation managers and their compensation. (a) Name and address (a) Name and address (a) Name and address (b) Title, and average hour per week devoted to position (ff not paid, enter-0-) (great per week devoted to position (great per very devoted to position) (gr					7b
(a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (c) Compensa	Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	/	
LAURA J. LINDER TRUSTEE 424 RAVENSWOOD PEORIA, IL 61615 20.00 2,000.0.0.0.0. RICHARD L. AMBERG 7111 BLAIR COURT PEORIA, IL 61614 20.00 7,000.0.0.0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Combebbasis of encount, other allowances account, other allowances of the position of the property exemples account, other allowances of the position of	1 List all officers, directors, trustees, foundation managers and their	compensation.			
LAURA J. LINDER TRUSTEE 424 RAVENSWOOD PEORIA, IL 61615 20.00 2,000.0.0.0.0. RICHARD L. AMBERG 7111 BLAIR COURT PEORIA, IL 61614 20.00 7,000.0.0.0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Combebbasis of encount, other allowances account, other allowances of the position of the property exemples account, other allowances of the position of		(b) Title, and average		(d) Contributions to	(e) Expense
LAURA J. LINDER 424 RAVENSWOOD PEORIA, IL 61615 20.00 2,000. 0. 0. RICHARD L. AMBERG 7111 BLAIR COURT PEORIA, IL 61614 20.00 7,000. 0. 0. Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Compensation of indefined allowances (e) Expense account, other allowances	(a) Name and address		(If not paid, enter -0-)	and deterred compensation	account, other allowances
### PEORIA TIL 61615 20.00 2,000. 0. 0. 0. ### RICHARD L. AMBERG TRUSTEE ### PEORIA TIL 61614 20.00 7,000. 0. 0. 0. ### PEORIA TIL 61614 20.00 7,000. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	LAURA J. LINDER		0	ounpunatur.	
PEORIA, IL 61615 RICHARD L. AMBERG TRUSTEE 7111 BLAIR COURT PEORIA, IL 61614 20.00 7,000. 0. 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hor week devoted to position (c) Compensation (d) Combustons to employee settli plans account, other account, other allowances					
TRUSTEE 7111 BLAIR COURT PEORIA, IL 61614 20.00 7,000. 0. 0. 0. 1. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation employee beginning account, other allowances (c) Compensation employee account, other allowances		20.00	2.000	0.1	0.
7111 BLAIR COURT PEORIA, IL 61614 20.00 7,000. 0. 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation address of each employee paid more than \$50,000 expense each devoted to position NONE			7,000		
PEORIA, IL 61614 20.00 7,000. 0. 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position NONE (c) Compensation (c) Compensation allowances (d) Compensation (e) Expense account, other allowances	· · · · · · · · · · · · · · · · · · ·				
2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Combutions to employee tentifiplans and deterted compensation (e) Expense account, other allowances		20.00	7.000	0.	0.
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benti plans account, other allowances	10001117 122 01011	20.00	7,000		<u> </u>
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benti plans account, other allowances					
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benti plans account, other allowances					
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benti plans account, other allowances					
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benti plans account, other allowances		1			
(a) Name and address of each employee paid more than \$50,000 NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benti plans account, other allowances					
(a) Name and address of each employee paid more than \$50,000 NONE (c) Compensation employee benefit plans account, other allowances	2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."		
NONE Compensation				(d) Contributions to	(e) Expense
NONE	(a) Name and address of each employee paid more than \$50,000		(c) Compensation	and deferred	
	NONE				
Total number of other employees paid over \$50,000 ▶ 0					
Total number of other employees paid over \$50,000 ▶ 0					:
Total number of other employees paid over \$50,000 ▶ 0		1			
Total number of other employees paid over \$50,000 ▶ 0					
Total number of other employees paid over \$50,000 ▶ 0		1			
Total number of other employees paid over \$50,000 ▶ 0					_
Total number of other employees paid over \$50,000 ▶ 0		1			
Total number of other employees paid over \$50,000 ▶ 0			<u> </u>		
Total number of other employees paid over \$50,000		1			
	Total number of other employees paid over \$50,000	·		<u> </u>	0

Form 990-PF (2008) PHOEBE B. BUEHLER TRUST	37-(196790 Page
Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	lation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, en		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensatio
NONE		
	 	
	 	
Total number of others receiving over \$50,000 for professional services		•
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant sta	tistical information such as the	_
number of organizations and other beneficiaries served, conferences convened, research papers p	roduced, etc.	Expenses
1N/A		
	<u></u>	
2		
		,
3		
4		. =
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1 <u>N/A</u>		
0	+	
2		
All other program-related investments. See instructions.		· · · · · · · · · · · · · · · · · · ·
3		
Total, Add lines 1 through 3	_▶	0

Р	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	. 1	
а	Average monthly fair market value of securities	_1a	0.
b	Average of monthly cash balances	1b	1,595,319.
C	Fair market value of all other assets	1c	1,503,167.
d	Total (add lines 1a, b, and c)	1d	3,098,486.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,098,486.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	46,477.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,052,009.
6	Minimum investment return. Enter 5% of line 5	6	152,600.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	152,600.
2a	Tax on investment income for 2008 from Part VI, line 5 2, 653.		
b	Income tax for 2008. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	2,653.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	149,947.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	149,947.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	149,947.
P	art XII Qualifying Distributions (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	438,863.
b	Program-related investments - total from Part IX-B	1b	0.
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:		
a		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	438,863.
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	5	2,653.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	436,210.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies for	the section

Part XIII Undistributed Income (see instructions)

,		(h)	(0)	(4)
•	(a) Corpus	(b) Years prior to 2007	(c) 2007	(d) 2008
1 Distributable amount for 2008 from Part XI,	55.745			
line 7				149,947.
2 Undistributed income, if any, as of the end of 2007				
a Enter amount for 2007 only			0.	
b Total for prior years:				
,		0.		
3 Excess distributions carryover, if any, to 2008:				
a From 2003 76,022.				
b From 2004 88,658.				
c From 2005 225, 209.		10		
d From 2006 124,602.				
e From 2007 222, 098.	a facilities and the second se			
f Total of lines 3a through e	736,589.			
4 Qualifying distributions for 2008 from				
Part XII, line 4: ► \$ 438,863.				
a Applied to 2007, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	*		4.40 0.45
d Applied to 2008 distributable amount	200 016			149,947.
e Remaining amount distributed out of corpus	288,916.	·		^
5 Excess distributions carryover applied to 2008 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as				
indicated below:	1 005 505	18	,	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,025,505.			
b Prior years' undistributed income. Subtract		0.		
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of				
deficiency has been issued, or on which	,		,	
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2007. Subtract line		•		
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2008. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2009			;	0.
7 Amounts treated as distributions out of	·			
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2003				
not applied on line 5 or line 7	76,022.			
9 Excess distributions carryover to 2009.				
Subtract lines 7 and 8 from line 6a	949,483.			
0 Analysis of line 9:				
a Excess from 2004 88,658.				
b Excess from 2005 225, 209.				
c Excess from 2006 124,602.				
d Excess from 2007 222, 098.				
e Excess from 2008 288,916.				5 OOO DE (0000)

Form 990-PF (2008) PHOEBE Part XIV Private Operating F	B. BUEHLER		VII.A guestion (1)		0196790	
				N/A		
1 a If the foundation has received a ruling of			ig			
foundation, and the ruling is effective fo b Check box to indicate whether the found			od un costion	14040(1)(2)	14040(-)(5)	
		ing ioundation describe		4942(j)(3) or	<u> 4942(j)(5)</u> 	
2 a Enter the lesser of the adjusted net	Tax year (a) 2008	(b) 2007	Prior 3 years	(4) 2005	(a) Take	
income from Part I or the minimum	(a) 2000	(0) 2007	(c) 2006	(d) 2005	(e) Total	
investment return from Part X for						
each year listed						
b 85% of line 2a						
c Qualifying distributions from Part XII,					1	
line 4 for each year listed						
d Amounts included in line 2c not				,		
used directly for active conduct of						
exempt activities		i				
•						
•						
			}			
		· · · · · · · · · · · · · · · · · · ·		 		
alternative test relied upon:						
` '		+-				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)						
b "Endowment" alternative test - enter						
shown in Part X, line 6 for each year listed						
c "Support" alternative test - enter:						
• •						
investment income (interest,						
dividends, rents, payments on					İ	
		_				
(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						
			ly if the foundatio	n had \$5,000 or	more in asset	
at any time during t	he year-see the	instructions.)				
1 Information Regarding Foundation	n Managers:				-	
	•	e than 2% of the total o	ontributions received by th	se foundation before the	a close of any tay	
year (but only if they have contributed n	nore than \$5,000). (See	section 507(d)(2).)	ond ibudions received by ti	ie ioundation before the	coose of ally lax	
	40,000,000					
						
b List any managers of the foundation when	0 OWN 10% or more of t	the stock of a corporation	on (or an equally large por	tion of the ownership o	f a partnership or	
-,	sa 1070 Or greater litter	29r				
	 					
Check here ► LX If the foundation o	nly makes contributions	s to preselected charitat	ole organizations and does	not accept unsolicited	requests for funds. If	
the foundation makes gifts, grants, etc.	(see instructions) to ind	ividuals or organization	s under other conditions,	complete items 2a, b, c	, and d.	
a The name, address, and telephone num	ber of the person to who	om applications should	be addressed:			
b The form in which applications should b	e submitted and inform	ation and materials they	y should include:			
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 C Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, or or for the alternative test enter: (1) Value of all assets (2) Value of all assets (2) Value of all assets (2) Value of assets qualifying under section 4942(i)(3)(8)(i) b Endowment" alternative test - enter: 23 of minimum investment return shown in Part X, the 6 for each year listed c Support alternative test - enter: (1) Total support other than gross investment alternative inderest, dividends, renis, 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(i)(3)(8)(iii) (3) Largest amount of support from an exempt organizations as provided in section 4942(i)(3)(8)(iii) 1 Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.) Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.)						
the 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempl activities e Qualifying distributions made directly for active conduct of exempl activities. Sobtract hine 2d from line 2c Complete 3n, b, or of or the a Assets' alternative test - enter; (1) Yalue of assets qualifying under section 4942(I)(S)(9)(y) b Tendowment' alternative test - enter; (1) Yalue of all assets (2) Value of assets qualifying under section 4942(I)(S)(9)(y) b Tendowment' alternative test - enter; (1) Total support alter						
d Any restrictions or limitations on awards	s, such as by geographi	cal areas, charitable fiel	ds, kinds of institutions, o	r other factors:		
202004 04 00 00					F- 000 PF	
323601 01-02-09		10	`	 	Form 990-PF	

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient a Paid during the year CHRISTIAN BUEHLER NOT FOR AID THE PROFIT OPERATION OF A MEMORIAL, 3415 N SHERIDAN RD, PEORIA, IL 61604 N/A CORP LIFE CARE HOME. 438,863. 438,863. ➤ 3a Total b Approved for future payment NONE **▶** 3b 0. Total 823611 01-02-09 Form 990-PF (2008)

Part XVI-A Analysis of Income-Producing Activities

(a) Business code	(b) Amount	Exclu- sion code	(d)	(e) Related or exempt
code		sion	` '	
		1 6000	Amount	function income
- 1				
	-	1 1		
	_	1 1		
		1 1		
	·	1 1		
		1 1		
			-	
	**			
		1	-	
		14	55.595	
	 	1 - 1	33,7331	
		1 1		
		+ +	-	
	•	1		
		15	236.782.	
Ì				
				183,154.
	· -			
	0		292,377.	183,154.
			13	475,531.
			14	15 236,782. 0. 292,377.

Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.				ch income is reported or than by providing t			ortantly to the accomplishment of	
11A	+			 	 	INSURANCE	CONTRACT	
	<u> </u>							
	<u> </u>			 	 			
-				 	 			
	<u> </u>			 				
		<u>-</u> .		 	 			
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		· .		 	 •			
	<u> </u>				 			
			-	 	 			
				 	 	•		

823621 01-02-09

_	art A	Exempt Orgai		s to and transactions	s and Helationships with No	ncnantabl	е	
1	Did th			following with any other organiz	ration described in section 501(c) of		Ves	No
٠	•	_		ection 527, relating to political or			103	140
					yanızanınıs?	:		1
Ċ		fers from the reporting found	iation to a nonchantable ex	tempt organization of:		1 4 44		
	(1) (•	1a(1)	1	X
		other assets			•	1a(2)	 	X
•								
								X
	` '		. , .	zation			1	X
						1b(3)		X
		-	S			. <u>1b(4)</u>		<u> </u>
	(5) L	oans or loan guarantees				. 1b(5)	<u> </u>	X
	(6) F	erformance of services or m	embership or fundraising s	olicitations		1b(6)	↓	X
						1c_		X
(sets,	
					value in any transaction or sharing arrange	ment, show in		
								
(a)	Line no	(b) Amount involved	 		(d) Description of transfers, transaction	ons, and sharing a	rrangeme	ents
]	N/A				
			<u></u>					
				-				
							-	
			-					
						_		
2:	ls the	foundation directly or indire	ctly affiliated with, or related	d to, one or more tax-exempt org	anizations described			
-					amzanono doddiboo		X] No
				57 H. GOULON GET .		103	Las) IIO
	, 11 10			(b) Type of organization	on (c) Description of re	elationship		
_				(-)	(-)	-		
_	_	21/ 22						
_	-							
_								
				· · · · · · · · · · · · · · · · · · ·				
	Under p	enalties of periury. I declare that I	have examined this return, inclu	uding accompanying schedules and sta	atements, and to the best of my knowledge and be	elief, it is true, corr	ect.	
						,		
		1 - 1		1 / July	LAN CHARGE			
ē	<u>s</u>	anature of theor or tructon	0,00					
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	žž		S.W. ADAMS	STREET, BOX 183				
		PEOF	RIA, IL 61	<u>656-1835</u>	Phone no.		1-4	
						Form 99 ()-PF	(2008)
b Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets to man anoncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (7) Sharing of facilities, equipment, maining lists, other assets, or paid employees (8) International of the above is "es," complete the following schedule. Column (b) should always show the fair market value of the goods, other asset or services year 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 prevent or granization (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangement in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? (a) Line no (b) Amount involved (c) Name of organization (d) Description of relationship (e) Description of relationship (f) Name of organization (g) Name of organization (h) Type of organization (g) Name of organization (h) Type of organization (g) Name of organization (h) Type of organization (g) Description of relationship (h) Type of organization (g) Name of organization (h) Type of or								

FORM 990-PF, INTEREST ON SAVI	INGS AND TE	MPORARY CASH	INVESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
COMMERCE BANK INVESTMENT SAVI SAVINGS CERTIFICATES	INGS		_	55,5	6. 89.
TOTAL TO FORM 990-PF, PART I,	LINE 3, C	OLUMN A	=	55,5	95.
FORM 990-PF	OTHER	INCOME		STATEMENT	2
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTE NET INCO	
OIL AND GAS ROYALTIES GAIN ON LIFE INSURANCE PROCES	EDS	236,782. 183,154.	236,782		
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	419,936.	236,782	•	
FORM 990-PF	LEGA	L FEES		STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
LEGAL	12,240	. 12,240	•		0.
TO FM 990-PF, PG 1, LN 16A =	12,240	. 12,240	•		0.
FORM 990-PF	ACCOUNT	ING FEES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
AUDIT AND TAX PREPARATION	5,775	. 5,775	•		0.
TO FORM 990-PF, PG 1, LN 16B	5,775	5,775	•		0.
=					_

FORM 990-PF	TAXES			STATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	ADJUSTED	CHARITABLE	
NET FEDERAL EXCISE TAX ON NET INVESTMENT INCOME	9,569.	0	•	0.	
TO FORM 990-PF, PG 1, LN 18	9,569.	0		0.	
FORM 990-PF	OTHER EXPENSES			STATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS		ADJUSTED	CHARITABLE	
MISCELLANEOUS	84.	84	•	0.	
TO FORM 990-PF, PG 1, LN 23	84.	84	•	0.	
FORM 990-PF	OTHER INV	ESTMENTS		STATEMENT 7	
DESCRIPTION	VALUATION METHOD BOO		OOK VALUE	FAIR MARKET VALUE	
REAL ESTATE - MINERAL RIGHTS		COST	59.	59.	
TOTAL TO FORM 990-PF, PART II	, LINE 13		59.	59.	