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

2009

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

For calendar year 2009, or tax year beginning , and ending

G Check all that apply Initial return Initial return of a former public charity Final return
 Amended return Address change Name change

Use the IRS label. Otherwise, print or type. See Specific Instructions.	Name of foundation THE SELFRELIANCE FOUNDATION Number and street (or P O box number if mail is not delivered to street address) 2332 W CHICAGO AVE City or town, state, and ZIP code CHICAGO IL 60622	A Employer identification number 20-5423872 B Telephone number (see page 10 of the instructions) 773-328-7500
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		C If exemption application is pending, check here ► <input type="checkbox"/> D 1 Foreign organizations, check here ► <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ► \$ 1,189,457	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) <i>(Part I, column (d) must be on cash basis)</i>	

Part I Analysis of Revenue and Expenses *(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions))*

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received (attach schedule)	1,357,500			
2 Check ► <input type="checkbox"/> if the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments	698	698		
4 Dividends and interest from securities				
5 a Gross rents				
b Net rental income or (loss)				
6 a Net gain or (loss) from sale of assets not on line 10				
b Gross sales price for all assets on line 6a				
7 Capital gain net income (from Part IV, line 2)				
8 Net short-term capital gain				
9 Income modifications				
10 a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss) (attach schedule)				
11 Other income (attach schedule)				
12 Total. Add lines 1 through 11	1,358,198	698		
13 Compensation of officers, directors, trustees, etc				
14 Other employee salaries and wages	2,170			
15 Pension plans, employee benefits				
16 a Legal fees (attach schedule)				
b Accounting fees (attach schedule)				
c Other professional fees (attach schedule)				
17 Interest				
18 Taxes (attach schedule) (see page 14 of the instructions)				
19 Depreciation (attach schedule) and depletion				
20 Occupancy				
21 Travel, conferences, and meetings				
22 Printing and publications				
23 Other expenses (attach schedule)	71			
24 Total operating and administrative expenses.	2,241			
Add lines 13 through 23				
25 Contributions, gifts, grants paid	266,500		266,500	
26 Total expenses and disbursements. Add lines 24 and 25	268,741		266,500	
27 Subtract line 26 from line 12				
a Excess of revenue over expenses and disbursements	1,089,457			
b Net investment income (if negative, enter -0-)		698		
c Adjusted net income (if negative, enter -0-)				

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing	100,000	1,189,457	1,189,457
	2	Savings and temporary cash investments			
	3	Accounts receivable ►			
		Less allowance for doubtful accounts ►			
	4	Pledges receivable ►			
		Less allowance for doubtful accounts ►			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions)			
	7	Other notes and loans receivable (attach schedule) ►			
		Less allowance for doubtful accounts ►			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10	a Investments—U S and state government obligations (attach schedule)			
		b Investments—corporate stock (attach schedule)			
		c Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ►			
	Less accumulated depreciation (attach schedule) ►				
12	Investments—mortgage loans				
13	Investments—other (attach schedule)				
14	Land, buildings, and equipment basis ►				
	Less accumulated depreciation (attach schedule) ►				
15	Other assets (describe ►)				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	100,000	1,189,457	1,189,457	
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ►)			
23	Total liabilities (add lines 17 through 22)				
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. ► <input checked="" type="checkbox"/>				
	24	Unrestricted	100,000	1,189,457	
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ► <input type="checkbox"/>				
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see page 17 of the instructions)	100,000	1,189,457	
	31	Total liabilities and net assets/fund balances (see page 17 of the instructions)	100,000	1,189,457	

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	100,000
2	Enter amount from Part I, line 27a	2	1,089,457
3	Other increases not included in line 2 (itemize) ►	3	
4	Add lines 1, 2, and 3	4	1,189,457
5	Decreases 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, column (b), line 30	6	1,189,457

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a				
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
a				
b				
c				
d				
e				
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8	{ }		3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

1 Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2008			
2007			
2006			
2005			
2004			

2 Total of line 1, column (d)

3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by
the number of years the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5

5 Multiply line 4 by line 3

6 Enter 1% of net investment income (1% of Part I, line 27b)

7 Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4

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 on page 18

2	
3	
4	
5	
6	
7	
8	

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1 a Exempt operating foundations described in section 4940(d)(2), check here ► <input checked="" type="checkbox"/> and enter "N/A" on line 1	Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)	1 N/A
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input type="checkbox"/> 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-)		
3 Add lines 1 and 2		
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		
6 Credits/Payments		
a 2009 estimated tax payments and 2008 overpayment credited to 2009	6a 6b 6c 6d	7
b Exempt foreign organizations—tax withheld at source		
c Tax paid with application for extension of time to file (Form 8868)		
d Backup withholding erroneously withheld		
7 Total credits and payments Add lines 6a through 6d		
8 Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8 9 10	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		
11 Enter the amount of line 10 to be Credited to 2010 estimated tax ► Refunded ► 11		

Part VII-A Statements Regarding Activities

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	
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)? <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b	
c Did the foundation file Form 1120-POL for this year?	1c	
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ► \$ _____ (2) On foundation managers ► \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year? b If "Yes," has it filed a tax return on Form 990-T for this year?	4a	X
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	4b	N/A
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either ● By language in the governing instrument, or ● By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	5	
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	6	X
8 a Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ► IL b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i>	7	X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)? <i>If "Yes," complete Part XIV</i>	8b	
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	9	
	10	X

Part 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 page 20 of the instructions)	11	X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X
Website address ►			
14	The books are in care of ►	Telephone no ►	
Located at ►		ZIP+4 ►	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year	►	15 □

Part VII-B 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.		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(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)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here ►	1b N/A	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1c X	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	If "Yes," list the years ► 20_____ , 20_____ , 20_____ , 20_____		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see page 20 of the instructions)	2b N/A	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20_____ , 20_____ , 20_____ , 20_____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If "Yes," did it have excess business holdings in 2009 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 Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)	3b N/A	
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 charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b X	

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 5a(1)–(5), 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 page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here ► <input checked="" type="checkbox"/>		5b	N/A
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 grant? <i>If "Yes," attach the statement required by Regulations section 53 4945–5(d)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No		
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <i>If "Yes" to 6b, file Form 8870</i>		6b	X
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b	X

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 (see page 22 of the instructions).				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). 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	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
None				

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

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). 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



1

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 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See page 24 of the instructions	
3	
Total. Add lines 1 through 3	►

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	
c	Fair market value of all other assets (see page 24 of the instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 of the instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	
6	Minimum investment return. Enter 5% of line 5	6	

Part XI Distributable Amount (see page 25 of the 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	
2a	Tax on investment income for 2009 from Part VI, line 5	2a	
b	Income tax for 2009 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	

Part XII Qualifying Distributions (see page 25 of the instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	266,500
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		
a	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	266,500
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 page 26 of the instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	266,500

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only				
b Total for prior years 20 _____, 20 _____, 20 _____				
3 Excess distributions carryover, if any, to 2009				
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e				
4 Qualifying distributions for 2009 from Part XII, line 4 ► \$ 266,500				
a Applied to 2008, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see page 26 of the instructions)				
c Treated as distributions out of corpus (Election required—see page 26 of the instructions)				
d Applied to 2009 distributable amount				
e Remaining amount distributed out of corpus	266,500			
5 Excess distributions carryover applied to 2009 <i>(If an amount appears in column (d), the same amount must be shown in column (a))</i>				
6 Enter the net total of each column as indicated below:	266,500			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions				
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions				
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)				
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	266,500			
10 Analysis of line 9				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009	266,500			

Part XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section

4942(j)(3) or 4942(j)(5)

2 a Enter the lesser of the adjusted net income from Part I or the minimum required for Part I. If less than £1,500, enter £1,500.	Tax year	(a) 2009	(b) 2008
--	----------	----------	----------

4942(j)(3) or 4942(j)(5)

- 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
- e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c

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 page 28 of the instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ► if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number of the person to whom applications should be addressed

THE SELFRELIANCE FOUNDATION c/o ORESTA FEDYNIAK 2332 W CHICAGO AVE CHICAGO IL 60622 (773) 328-7500

b The form in which applications should be submitted and information and materials they should include

LETTER REQUESTING ASSISTANCE

c Any submission deadlines

NONE

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

ORGANIZATION MUST HAVE 501 c(3) STATUS

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
UKRAINIAN INSTITUTE OF MODERN ART 2320 W CHICAGO AVE CHICAGO IL 60622			GENERAL EXPENSES	10,000
MEDICAL DEVELOPMENT & RESEARCH FOUNDATION 1S376 SUMMIT AVE OAKBROOK TERRACE IL 60181			MEDICAL SUPPLIES SENT TO UA	500
STS VOLODYMYR & OLHA UKR CATH CHURCH 2245 W SUPERIOR ST CHICAGO IL 60612			ST POKROVA CHURCH UA	250
STS VOLODYMYR & OLHA UKR CATH CHURCH 2245 W SUPERIOR ST CHICAGO IL 60612			TRANSFIGURATION CHURCH UA	250
UNITED UKRAINIAN AMERICAN RELIEF COMMITTEE 1206 COTTMAN AVE PHILADELPHIA PA 19111			CHILDRRENS AID	
UKRAINIAN MEDICAL ASSOCIATION OF NORTH AMERICA 2247 W CHICAGO AVE CHICAGO IL 60622			FIRST AID TRAINING	1,000
CHICAGO SISTER CITIES COMMITTEE 78 E WASHINGTON ST CHICAGO IL 60602			YOUTH COUNSELORS	500
CHICAGO SISTER CITIES COMMITTEE 78 E WASHINGTON ST CHICAGO IL 60602			GLOBAL SISTER CITIES ROUNDTABLE	2,000
UKRAINIAN NATIONAL WOMAN'S LEAGUE OF AMERICA 742 N OAKLEY BLVD CHICAGO IL 60622			CHICAGO KYIV	
STS VOLODYMYR & OLHA UKR CATH CHURCH 2245 W SUPERIOR ST CHICAGO IL 60612			SISTER CITIES PUBLICATIONS	500
SHEVCHENKO SCIENTIFIC SOCIETY 63 FOURTH AVE NEW YORK NY 10003			SHEPTYCKY INSTITUTE PUBLICATIONS	500
CONFERENCE OF UKRAINIAN PLAST ORGANIZATION 5566 PEARL ROAD PARMA OH 44129			ANNUAL CONFERENCE	2,500
AMERICAN UKRAINIAN YOUTH ASSOC PAVLUSHKI 2457 W CHICAGO AVE CHICAGO IL 60622			SOCCER TEAM KRYLA	5,000
UKRAINIAN CONGRESS COMMITTEE OF AMERICA 2247 W CHICAGO AVE CHICAGO IL 60622			TRAVEL	500
UKRAINIAN NATIONAL ASSOCIATION FOUNDATION 2200 ROUTE 10 PARSIPPANY NJ 07054			35TH ANNIVERSARY	1,000
STS VOLODYMYR & OLHA UKR CATH CHURCH 2245 W SUPERIOR ST CHICAGO IL 60612			ELECTRONIC ARCHIV OF PUBS	10,000
			HROMOVYTSIA	
			DANCE ENSEMBLE	5,000
Total	See Attached Statement		► 3a	266,500
b Approved for future payment				
Total			► 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See page 28 of the instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments	900099	698			
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue	a				
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		698			

12 Subtotal Add columns (b), (d), and (e)

13 Total. Add line 12, columns (b), (d), and (e)

(See worksheet in line 13 instructions on page 28 to verify calculations)

13 698

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

	Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
a Transfers from the reporting foundation to a noncharitable exempt organization of		
(1) Cash	1a(1)	
(2) Other assets	1a(2)	
b Other transactions		
(1) Sales of assets to a noncharitable exempt organization	1b(1)	
(2) Purchases of assets from a noncharitable exempt organization	1b(2)	
(3) Rental of facilities, equipment, or other assets	1b(3)	
(4) Reimbursement arrangements	1b(4)	
(5) Loans or loan guarantees	1b(5)	
(6) Performance of services or membership or fundraising solicitations	1b(6)	
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees		
d 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		

2a 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?

Yes No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

Sign Here

 Oresta Fedynian
Signature of officer or trustee

15/16/10

► president
Title

Signature of officer or trustee

Date

Title

Sign Here Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed	Preparer's identifying number (see Signature on page 30 of the instructions)
	Firm's name (or yours if self-employed) address, and ZIP code	5/16/2010	<input type="checkbox"/>	EIN <input type="checkbox"/> Phone no (773) 489-1040

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

OMB No 1545-0047

► Attach to Form 990, 990-EZ, or 990-PF.

2009

Name of the organization

THE SELFRELIANCE FOUNDATION

Employer identification number

20-5423872

Organization type (check one)

Filers of: Section:

Form 990 or 990-EZ 501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust not treated as a private foundation

527 political organization

Form 990-PF 501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc , purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc , purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc , contributions of \$5,000 or more during the year

► \$

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

THE SELFRELIANCE FOUNDATION

Employer identification number

20-5423872

Part I **Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	SELFRELIANCE UKRAINIAN AMERICAN FED C U 2232 W CHICAGO AVE CHICAGO IL 60622 Foreign State or Province _____ Foreign Country _____	\$ 1,357,500	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
2	_____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
3	_____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
4	_____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
5	_____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
6	_____ Foreign State or Province _____ Foreign Country _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Line 23 (990-PF) - Other Expenses

71

	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	Amortization See attached statement				
2	Fund Raising				
3	Bank Service Charges				
4	Secretary of State - Registration				
5					
6					
7					
8					
9					
10					

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name
STS VOLODYMYR & OLHA UKR CATH CHURCH Person Business

Street
2245 W SUPERIOR ST

City
CHICAGO State IL Zip code 60612 Foreign Country

Relationship Foundation Status

Purpose of grant/contribution Amount
UKRAINIAN YOUTH FESTIVAL 1,000

Name
BAHRIANY FOUNDATION Person Business

Street
811 S ROOSEVELT RD

City
ARLINGTON HEIGHTS State IL Zip code 60005 Foreign Country

Relationship Foundation Status

Purpose of grant/contribution Amount
UKRAINIAN LANGUAGE SOCIETY 1,000

Name
UKRAINIAN ARTISTIC CENTER Person Business

Street
2657 W IOWA ST

City
CHICAGO State IL Zip code 60622 Foreign Country

Relationship Foundation Status

Purpose of grant/contribution Amount
SURMA CHORUS 500

Name
UKRAINIAN NATIONAL ASSOCIATION FOUNDATION Person Business

Street
107 ILEHAMWOOD DR

City
DEKALB State IL Zip code 60015 Foreign Country

Relationship Foundation Status

Purpose of grant/contribution Amount
OSTROH ACADEMY NAT'L UNIV 2,500

Name
SHEVCHENKO SCIENTIFIC SOCIETY Person Business

Street
63 FOURTH AVE

City
NEW YORK State NY Zip code 10003 Foreign Country

Relationship Foundation Status

Purpose of grant/contribution Amount
ENCYL OF UKR DIASPORA OFF EXP 3,000

Name
UKRAINIAN CONGRESS COMMITTEE OF AMERICA Person Business

Street
203 SECOND AVE

City
NEW YORK State NY Zip code 10003 Foreign Country

Relationship Foundation Status

Purpose of grant/contribution Amount
GENOCIDE AWARENESS COMM 1,000

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name
 UKRAINIAN AMERICAN YOUTH ASSN INC Person Business

Street
 136 SECOND AVE

City
 NEW YORK State NY Zip code 10003 Foreign Country

Relationship Foundation Status

Purpose of grant/contribution
 60TH ANNIVERSARY Amount 1,000

Name
 UKRAINIAN CONGRESS COMMITTEE OF AMERICA Person Business

Street
 203 SECOND AVE

City
 NEW YORK State NY Zip code 10003 Foreign Country

Relationship Foundation Status

Purpose of grant/contribution
 ARCHIVAL RESEARCH Amount 2,000

Name
 ST NICHOLAS EPARCHY Person Business

Street
 2245 W RICE ST

City
 CHICAGO State IL Zip code 60622 Foreign Country

Relationship Foundation Status

Purpose of grant/contribution
 ST MARY CHURCH UA Amount 500

Name
 ORPHANS AID SOCIETY Person Business

Street
 129 RIDGE ROAD

City
 DOUGLASTON State NY Zip code 11363 Foreign Country

Relationship Foundation Status

Purpose of grant/contribution
 CHILDRENS CAMP IN UA Amount 500

Name
 ST VOLODYMYR UKR ORTH CATHEDRAL Person Business

Street
 2238 W CORTEZ

City
 CHICAGO State IL Zip code 60622 Foreign Country

Relationship Foundation Status

Purpose of grant/contribution
 BUILDING RENOVATION FUND Amount 5,000

Name
 UKRAINIAN CONGRESS COMMITTEE OF AMERICA - IL BRANCH Person Business

Street
 2247 W CHICAGO AVE

City
 CHICAGO State IL Zip code 60622 Foreign Country

Relationship Foundation Status

Purpose of grant/contribution
 UKRAINIAN VETERANS ASSOC Amount 1,000

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year**Recipient(s) paid during the year**

Name

HOLY TRINITY UKRAINIAN ORTHODOX CHURCH

 Person Business

Street

1009 S CHURCH ROAD

City BENSENVILLE	State IL	Zip code 60106	Foreign Country
---------------------	-------------	-------------------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution PARISH EXPENSES	Amount 1,000
--	-----------------

Name

IMMACULATE CONCEPTION UKRAINIAN CATHOLIC CHURCH

 Person Business

Street

761 S BENTON ST

City PALATINE	State IL	Zip code 60067	Foreign Country
------------------	-------------	-------------------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution PARISH EXPENSES	Amount 2,000
--	-----------------

Name

STS VOLODYMYR & OLHA UKR CATH CHURCH

 Person Business

Street

2245 W SUPERIOR ST

City CHICAGO	State IL	Zip code 60612	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution VILLAGE FESTIVAL	Amount 5,000
---	-----------------

Name

UKRAINIAN GENOCIDE FOUNDATION IL

 Person Business

Street

2247 W SUPERIOR ST

City CHICAGO	State IL	Zip code 60612	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution GENERAL EXPENSES	Amount 1,000
---	-----------------

Name

ST JOSEPH UKRAINIAN CATHOLIC CHURCH

 Person Business

Street

5000 N CUMBERLAND AVE

City CHICAGO	State IL	Zip code 60656	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution GENERAL EXPENSES	Amount 5,000
---	-----------------

Name

UKRAINIAN NATIONAL MUSEUM

 Person Business

Street

2247 W SUPERIOR ST

City CHICAGO	State IL	Zip code 60612	Foreign Country
-----------------	-------------	-------------------	-----------------

Relationship	Foundation Status
--------------	-------------------

Purpose of grant/contribution FUNDRAISER GENERAL EXPENSES	Amount 10,000
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Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

UKRAINIAN CONGRESS COMMITTEE OF AMERICA

Person

Business

Street

203 SECOND AVE

City

NEW YORK

State NY Zip code 10003

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

UKR NAT'L INFORMATION SERVICE

Amount

10,000

Name

AMERICAN ASSN OF YOUTH OF UKR DESCENT

Person

Business

Street

6N090 FERSON WOODS DR

City

ST CHARLES

State IL Zip code 60175

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

GENERAL EXPENSES

Amount

2,500

Name

UNITED UKRAINIAN AMERICAN RELIEF COMMITTEE

Person

Business

Street

2247 W CHICAGO AVE

City

CHICAGO

State IL Zip code 60622

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

SHIPMENT OF SUPPLIES TO UA

Amount

1,000

Name

SMOLOSKYP CHARITABLE FOUNDATION

Person

Business

Street

P O BOX 561

City

ELLIOTT CITY

State MD Zip code 21041

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

STUDENT AID IN UKRAINE

Amount

1,000

Name

ST MICHAEL UKRAINIAN CATHOLIC CHURCH

Person

Business

Street

1587 BALTUSROL DR

City

GREEN VALLEY

State AZ Zip code 85622

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

BUILDING FUND

Amount

750

Name

WESTERN EPARCHY UKRAINIAN ORTHODOX CHURCH

Person

Business

Street

3200 N LAKE SHORE DR

City

CHICAGO

State IL Zip code 60657

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

ST VOLODYMYR UOC CHARITABLE

Amount

1,000

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name AMERICAN UKRAINIAN YOUTH ASSOC VITOVSKY		<input type="checkbox"/> Person	<input type="checkbox"/> Business
Street 761 S BENTON ST			
City PALATINE		State IL	Zip code 60067
Relationship	Foundation Status		
Purpose of grant/contribution BUILDING FUND		Amount 10,000	
Name ST ANDREW UKRAINIAN ORTHODOX CHURCH		<input type="checkbox"/> Person	<input type="checkbox"/> Business
Street 300 E ARMY TRAIL RD			
City BLOOMINGDALE		State IL	Zip code 60108
Relationship	Foundation Status		
Purpose of grant/contribution BUILDING FUND		Amount 5,000	
Name ST ANDREW UKRAINIAN ORTHODOX CHURCH		<input type="checkbox"/> Person	<input type="checkbox"/> Business
Street 300 E ARMY TRAIL RD			
City BLOOMINGDALE		State IL	Zip code 60108
Relationship	Foundation Status		
Purpose of grant/contribution BUILDING FUND		Amount 5,000	
Name STS PETER AND PAUL UKRAINIAN ORTHODOX CHURCH		<input type="checkbox"/> Person	<input type="checkbox"/> Business
Street 8410 W 131ST ST			
City PALOS PARK		State IL	Zip code 60464
Relationship	Foundation Status		
Purpose of grant/contribution BUILDING FUND		Amount 5,000	
Name STS VOLODYMYR & OLHA PARISH FOR SLIPYJ MONUMENT		<input type="checkbox"/> Person	<input type="checkbox"/> Business
Street 2245 W SUPERIOR ST			
City CHICAGO		State IL	Zip code 60612
Relationship	Foundation Status		
Purpose of grant/contribution CARPATHIAN MINORITIES FUND		Amount 250	
Name HOLODOMOR THE MOVIE LLC		<input type="checkbox"/> Person	<input type="checkbox"/> Business
Street 8306 WILSHIRE BLVD			
City BEVERLEY HILLS		State CA	Zip code 90211
Relationship	Foundation Status		
Purpose of grant/contribution GENOCIDE FILM		Amount 1,500	

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year**Recipient(s) paid during the year**

Name

UKRAINIAN AMERICAN YOUTH ASSN INC

 Person Business

Street

136 SECOND AVE

City

NEW YORK

State

NY

Zip code

10003

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

MEMORIAL RESTORATION

Amount

5,000

Name

PLAST USA CHICAGO CHAPTER

 Person Business

Street

2110 W CHICAGO AVE

City

CHICAGO

State

IL

Zip code

60622

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

60TH ANNIVERSARY

Amount

10,000

Name

UKRAINIAN AMERICAN YOUTH ASSN INC PAVLUSHKOV

 Person Business

Street

2457 W CHICAGO AVE

City

CHICAGO

State

IL

Zip code

60622

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

60TH ANNIVERSARY

Amount

7,500

Name

ST POKROVA UKRAINIAN ORTHODOX CHURCH

 Person Business

Street

961 W WASHTENAW

City

CHICAGO

State

IL

Zip code

60622

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

PARISH EXPENSES

Amount

1,000

Name

UKRAINIAN CATHOLIC EDUCATION FOUNDATION

 Person Business

Street

2247 W CHICAGO AVE

City

CHICAGO

State

IL

Zip code

60622

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

KYIV-MOHYLA ACADEMY

Amount

25,000

Name

UNITED UKRAINIAN AMERICAN RELIEF COMMITTEE

 Person Business

Street

2247 W CHICAGO AVE

City

CHICAGO

State

IL

Zip code

60622

Foreign Country

Relationship

Foundation Status

Purpose of grant/contribution

H1N1 AID FOR UA

Amount

10,000

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name STS VOLODYMYR & OLHA PARISH FOR SLIPYJ MONUMENT			<input type="checkbox"/> Person	<input type="checkbox"/> Business
Street 2245 W SUPERIOR ST				
City CHICAGO		State IL	Zip code 60612	Foreign Country
Relationship	Foundation Status			
Purpose of grant/contribution METR SLIPY MONUMENT			Amount 7,500	
Name ST NICHOLAS CATHEDRAL SCHOOL			<input type="checkbox"/> Person	<input type="checkbox"/> Business
Street 2200 W RICE ST				
City CHICAGO		State IL	Zip code 60622	Foreign Country
Relationship	Foundation Status			
Purpose of grant/contribution SCHOOL EXPENSES			Amount 50,000	
Name ST JOSEPH UKRAINIAN CATHOLIC CHURCH			<input type="checkbox"/> Person	<input type="checkbox"/> Business
Street 5000 N CUMBERLAND AVE				
City CHICAGO		State IL	Zip code 60656	Foreign Country
Relationship	Foundation Status			
Purpose of grant/contribution HOMIN DANCE ENSEMBLE			Amount 1,000	
Name UKRAINIAN CONGRESS COMMITTEE OF AMERICA - IL BRANCH			<input type="checkbox"/> Person	<input type="checkbox"/> Business
Street 2245 W CHICAGO AVE				
City CHICAGO		State IL	Zip code 60622	Foreign Country
Relationship	Foundation Status			
Purpose of grant/contribution PUBL IN UKRAINE ELECTION INFO			Amount 10,000	
Name UKRAINIAN WORLD CONGRESS			<input type="checkbox"/> Person	<input type="checkbox"/> Business
Street 224 E 11TH ST				
City NEW YORK		State NY	Zip code 10003	Foreign Country
Relationship	Foundation Status			
Purpose of grant/contribution GENERAL EXPENSES			Amount 10,000	
Name UKRAINIAN CHILDRENS AID & RELIEF EFFORT INC			<input type="checkbox"/> Person	<input type="checkbox"/> Business
Street P O BOX 123				
City GLENCOE		State MO	Zip code 63138	Foreign Country
Relationship	Foundation Status			
Purpose of grant/contribution ORPHANS BEDS			Amount 1,500	

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year**Recipient(s) paid during the year**

Name ST ANDREW UKRAINIAN ORTHODOX CHURCH		<input type="checkbox"/> Person	<input type="checkbox"/> Business
Street 300 E ARMY TRAIL ROAD			
City BLOOMINGDALE		State IL	Zip code 60108
Relationship	Foundation Status		
Purpose of grant/contribution GENERAL EXPENSES		Amount 2,000	
Name		<input type="checkbox"/> Person	<input type="checkbox"/> Business
Street			
City		State	Zip code
Relationship	Foundation Status		
Purpose of grant/contribution		Amount	
Name		<input type="checkbox"/> Person	<input type="checkbox"/> Business
Street			
City		State	Zip code
Relationship	Foundation Status		
Purpose of grant/contribution		Amount	
Name		<input type="checkbox"/> Person	<input type="checkbox"/> Business
Street			
City		State	Zip code
Relationship	Foundation Status		
Purpose of grant/contribution		Amount	
Name		<input type="checkbox"/> Person	<input type="checkbox"/> Business
Street			
City		State	Zip code
Relationship	Foundation Status		
Purpose of grant/contribution		Amount	
Name		<input type="checkbox"/> Person	<input type="checkbox"/> Business
Street			
City		State	Zip code
Relationship	Foundation Status		
Purpose of grant/contribution		Amount	

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2009

**Open to Public
Inspection**

Name of the organization

THE SELFRELIANCE FOUNDATION

Employer identification number

20-5423872

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E)
 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state
 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II)
 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II)
 9 An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2)**. (Complete Part III)
 10 An organization organized and operated exclusively to test for public safety See **section 509(a)(4)**.
 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)** See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h
 a Type I b Type II c Type III—Functionally integrated d Type III—Other
 e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**
 f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
 g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 (ii) A family member of a person described in (i) above?
 (iii) A 35% controlled entity of a person described in (i) or (ii) above?
 h Provide the following information about the supported organization(s)

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
 (Complete only if you checked the box on line 5, 7, or 8 of Part I.)
Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						► <input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	
16a 33 1/3% support test-2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization	► <input type="checkbox"/>	
b 33 1/3% support test-2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization	► <input type="checkbox"/>	
17a 10%-facts-and-circumstances test-2009. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	► <input type="checkbox"/>	
b 10%-facts-and-circumstances test-2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization	► <input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a ,or 17b, check this box and see instructions	► <input type="checkbox"/>	

Part III Support Schedule for Organizations Described in Section 509(a)(2)
 (Complete only if you checked the box on line 9 of Part I.)
Section A. Public Support

Calendar year (or fiscal year beginning in) ►

- 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")
- 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose
- 3 Gross receipts from activities that are not an unrelated trade or business under section 513
- 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf
- 5 The value of services or facilities furnished by a governmental unit to the organization without charge
- 6 **Total.** Add lines 1 through 5
- 7a Amounts included on lines 1, 2, and 3 received from disqualified persons
- b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year
- c Add lines 7a and 7b
- 8 **Public support** (Subtract line 7c from line 6)

	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1						
2						
3						
4						
5						
6						
7a						
b						
c						
8						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►

- 9 Amounts from line 6
- 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources
- b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975
- c Add lines 10a and 10b
- 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on
- 12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)
- 13 **Total support.** (Add lines 9, 10c, 11, and 12)
- 14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ►

	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9						
10a						
b						
c						
11						
12						
13						

Section C. Computation of Public Support Percentage

- 15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))
- 16 Public support percentage from 2008 Schedule A, Part III, line 15

15

16

Section D. Computation of Investment Income Percentage

- 17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))
- 18 Investment income percentage from 2008 Schedule A, Part III, line 17
- 19a **33 1/3% support tests—2009.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►
- b **33 1/3% support tests—2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ►
- 20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ►

Part IV

Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.