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# 990-PF

Department of the Treasury

Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

2009

OMB No. 1545-0052

For calendar year 2009, or tax year beginning , 2009, and ending , 20 G Check all that apply ☐ Initial return Initial return of a former public charity ☐ Final return Amended return Address change Name of foundation A Employer identification number Use the IRS 26-1499383 label. Gregin Istion Otherwise, B Telephone number (see page 10 of the instructions) Number and street (or P O box number if mail is not delivered to street address) Room/suite print 215-626-2965 or type. City or town, state, and ZIP code See Specific C If exemption application is pending, check here Instructions. 6/08/ 1. Foreign organizations, check here Section 501(c)(3) exempt private foundation 2. Foreign organizations meeting the 85% test, Check type of organization. check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation E If private foundation status was terminated under Fair market value of all assets at J Accounting method. ☑ Cash ☐ Accrual section 507(b)(1)(A), check here Other (specify) end of year (from Part II, col. (c). If the foundation is in a 60-month termination 15 273 line 16) ▶ \$ (Part I, column (d) must be on cash basis ) under section 507(b)(1)(B), check here ▶ □ Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per books purposes (cash basis only) ıncome the amounts in column (a) (see page 11 of the instructions) ) 1 Contributions, gifts, grants, etc., received (attach schedule) 120 ر روم ادرا ر 2 Check ► ☐ If the foundation is **not** required to attach Sch. B 643 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities . . . . Gross rents . . . . . . . h Net rental income or (loss) Revenue Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain . . . . 9 Income modifications 1 10a Gross sales less returns and allowances Less: Cost of goods sold h Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) . . 12 Total. Add lines 1 through 11 . 658 13 Compensation of officers, directors, trustees, etc. Expenses 14 Other employee salaries and wages . . . . . 15 Pension plans, employee benefits 16a Legal fees (attach schedule) h Accounting fees (attach schedule) 850 Administrative Other professional fees (attach schedule) . . 17 18 Taxes (attach schedule) (see-page-14-of Depreciation (attach schedule) and Color (attach schedule) 19 20 Occupancy . . . . Ø 21 and Printing and publications 22 23 Other expenses (attach schedu Total operating and administrative spenses. 24 Add lines 13 through 23 1285 25 Contributions, gifts, grants paid . 374910 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-) . Adjusted net income (if negative, enter -0-) 658

Page 2

1   Cash - non-interest-bearing   Savings and temporary cash investments   S			Balance Sheets Attached schedules and amounts in the description column	Beginning of year		nd o	f year
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		d Losses for Tax on Investme kind(s) of property sold (e.g., real estat		(b) How acquired	(c) Date acquired	(d) Date sold
	2-story bnck warehou	ise, or common stock, 200 shs MLC Co	)	P-Purchase D-Donation	(mo , day, yr )	(mo., day, yr.)
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b						
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d_						
е_		(f) Depreciation allowed	(a) Cost or	other basis	(b) G:	ain or (loss)
	(e) Gross sales price	(or allowable)		nse of sale		(f) minus (g)
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<u>e</u>	Complete only for courts abo	(6)	<u> </u>	10/01/00		
	Complete only for assets sho	owing gain in column (h) and owned	T			ol (h) gain minus ot less than -0-) <b>or</b>
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		is of col. (i) (j), if any		(from col (h))
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2	Capital gain net income of	r ingt canital lose)	also enter in Pa			
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3		in or (loss) as defined in sections I, line 8, column (c) (see pages 1				
	If (loss), enter -0- in Part I,			' '	3	
		ler Section 4940(e) for Reduvate foundations subject to the	uced Tax on N	let Investment	Income	
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Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of	of the ins	tructi	ons)		
1a	Exempt operating foundations described in section 4940(d)(2), check here \( \bigcup \) and enter "N/A" on line 1.  Date of ruling or determination letter.  (attach copy of letter if necessary—see instructions)		1 1			
b						
	have N (2) and enter 10/ of Double live 07h					
С	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		$\gamma$			
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		2			
6	Credits/Payments:	; ii	٠,			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 0	- 7	* * * * * * * * * * * * * * * * * * *	-		
b	Exempt foreign organizations—tax withheld at source 6b		٠.٠	-		
С	Tax paid with application for extension of time to file (Form 8868) . 6c 6c		- }	,		
d	Backup withholding erroneously withheld			لتسل		
7	Total credits and payments. Add lines 6a through 6d			<del> </del>		
8	Enter any penalty for underpayment of estimated tax. Check here  if Form 2220 is attached 8		<del>-</del> -	<del> </del>		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9			├		
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10  Enter the amount of line 10 to be. Credited to 2010 estimated tax > Refunded > 11			├		
	Enter the amount of line 10 to be. Credited to 2010 estimated tax ► Refunded ► 11 VII-A Statements Regarding Activities			<u> </u>		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	ıt :	Yes	No		
	participate or intervene in any political campaign?	" <u>la</u>	1	×		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 1		_			
	of the instructions for definition)?	16	ĺ	$\mid \times \mid$		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any material	als .				
	published or distributed by the foundation in connection with the activities	h.				
С	Did the foundation file Form 1120-POL for this year?	1c		X		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	1				
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$	_ { ;	\	-3		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$	ا د ا	-			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X		
	If "Yes," attach a detailed description of the activities.	1		,		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			×		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	<u> </u>	<del>                                     </del>	×		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X		
	If "Yes," attach the statement required by General Instruction T.	4	1	, 1		
. 6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			ľ		
	By language in the governing instrument, or		, ·			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions the	at	Ļ			
	conflict with the state law remain in the governing instrument?	6	X	<u> </u>		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XI		$\times$			
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	ne	٠,			
L	Instructions) >	r	1	j- \$		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gener		1			
^	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	$\times$	<del> </del> -		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) (4942(j)(5) for calendar year 2009 or the tryable year beginning in 2009 (see instructions for Part VIV) as pre-		<del> </del>	ļ		
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)? If "Yes," complete Part XIV	-	[	×		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the	air 9	<del> </del>	<del>                                     </del>		
	names and addresses	10	$ \times $	1		
		10	<del></del>	<del></del>		

Form 99	00-PF (2009)		P	age 5
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		$\times$
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		$\times$
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
14	Website address $\blacktriangleright$ None of this time  The books are in care of $\blacktriangleright$ Gres Wahl  Located at $\blacktriangleright$ 27/3/ $R$ Street Sterling IL  ZIP+4 $\blacktriangleright$ Gr	-626	- 2.	965-
15	Located at ► 27/3/ R Street Sterling TL ZIP+4 ► 67 Section 4947(a)(1) nonexempt charitable trusts filing Form-990-PF in lieu of Form 1041—Check here	08/	. 1	<b>\</b>
	and enter the amount of tax-exempt interest received or accrued during the year			
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.	1	Yes	No
1a	During the year did the foundation (either directly or indirectly).	i 1	. ]	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? $\square$ Yes $\square$ No	1	1	1.
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		1 - 1	
	disqualified person?	1	i i	· **
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? $\square$ Yes $\square$ No	k. (		. 1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? $\square$ Yes $\square$ No	ļ - I		3
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			1 4
	the benefit or use of a disqualified person)?	[ - ]	{	3.1
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	, - <u>-</u>	1	
	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.)	P 12 - 4		1
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here		7-7-1	7 7 74
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			3 3 3
•	were not corrected before the first day of the tax year beginning in 2009?	1c		
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)):		-:	\$*************************************
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and	- 4	·	150
	6e, Part XIII) for tax year(s) beginning before 2009?	r il	1	
	If "Yes," list the years ▶ 20, 20, 20, 20	1 4	, • 1	1.
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	[r 4]	٠. ١	5
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	ļ`l	·	
	all years listed, answer "No" and attach statement—see page 20 of the instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  ▶ 20, 20, 20, 20,		, , ,	-1. 1.
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	F 1	, ; · · ;	( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )
	at any time during the year?		l	7, 7,
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			1 4
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of		: 5	ال را
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		ا قدم شده	السساذ
	foundation had excess business holdings in 2009.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		$\geq$
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		



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



All other program-related investments. See page 24 of the instructions

Total. Add lines 1 through 3



Page 8

Part	X Minimum Investment Return (All domestic foundations must complete this part. Fore see page 24 of the instructions.)	ign fo	oundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	7	
	purposes:	===	_
а	Average monthly fair market value of securities	1a	5,242
b	Average of monthly cash balances	1b	138.871
c	Fair market value of all other assets (see page 24 of the instructions)	10	-
d	Total (add lines 1a, b, and c)	1d	104 618
e	Reduction claimed for blockage or other factors reported on lines 1a and	10	171/610
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	_
3	Subtract line 2 from line 1d	3	1114 / 18
4	Cash deemed held for charitable activities. Enter 1 ½ % of line 3 (for greater amount, see page 25 of	-	141,010
-	the instructions)	4	2,169
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	142 449
6	Minimum investment return. Enter 5% of line 5	6	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
Part	XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private	OPON	$\frac{1}{2}$
	foundations and certain foreign organizations check here ▶ ☐ and do not complete this part.)	open	ating
1	Minimum investment return from Part X, line 6	1	2/32
2а	Tax on investment income for 2009 from Part VI, line 5	100	1,166
b			
C	Income tax for 2009. (This does not include the tax from Part VI.)		2
3	Add lines 2a and 2b	2c	^
	Distributable amount before adjustments. Subtract line 2c from line 1	3	7,715
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	7,7/3
6 7	Deduction from distributable amount (see page 25 of the instructions)	6	<del>-</del> `
•	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		0.11
	line 1	7	7,115
Part	Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1. 32	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	374,910
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	0
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	_
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	374.910
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	-	9 11, 10
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	2
- 6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	774917
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		ther the foundation
	qualifies for the section 4940(e) reduction of tax in those years.	y wne	mer the loundation



Part	XIII Undistributed Income (see page 26	of the instructions	)		Fage 3
		(a)	/ (b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7	,			2/15
2	Undistributed income, if any, as of the end of 2009				
а	Enter amount for 2008 only			0	ı
þ	Total for prior years 20,20,20		0	è	
3	Excess distributions carryover, if any, to 2009:			į.	
а	From 2004				
b	From 2005			,	
d	From 2006			-	
e	From 2008	;			
f	Total of lines 3a through e	2,226,815	, ,	]	
4	Qualifying distributions for 2009 from Part XII,	1			,
	line 4: ▶ \$ 374.9/0				
а	Applied to 2008, but not more than line 2a .		, , ,	0	
b	Applied to undistributed income of prior years	47		5 m Th	
	(Election required—see page 26 of the instructions)	<u> </u>	0		
С	Treated as distributions out of corpus (Election				
_	required—see page 26 of the instructions) .	<u> </u>			
d	Applied to 2009 distributable amount	5/4/4	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<u>,, C </u>	///
e	Remaining amount distributed out of corpus	367,795		1 15	
5	Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same	<i>U</i>			1- " - " - A-
	amount must be shown in column (a).)	h' '			
6	Enter the net total of each column as				
	indicated below:		the transfer of		
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	2,594,610	14 Land 18 19 19 19 19 19 19 19 19 19 19 19 19 19		,
b	Prior years' undistributed income. Subtract	*			-
	line 4b from line 2b	,	0		
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed		0		
d	Subtract line 6c from line 6b. Taxable	·			
ŭ	amount—see page 27 of the instructions .		0		
e	Undistributed income for 2008. Subtract line				
	4a from line 2a. Taxable amount—see page	, , .1			, , , , ,
	27 of the instructions	4		0	
f	Undistributed income for 2009. Subtract lines				
	4d and 5 from line 1. This amount must be		, ,		
	distributed in 2010	1,1			0
7	Amounts treated as distributions out of corpus			1	1
	to satisfy requirements imposed by section		1		
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)	0		,	**
8	Excess distributions carryover from 2004 not		Ŧ.		
Ū	applied on line 5 or line 7 (see page 27 of the		· ;	;	
	instructions)	0			
9	Excess distributions carryover to 2010.		1	· ·	
	Subtract lines 7 and 8 from line 6a	2,594,610			, ,
10	Analysis of line 9				
а	Excess from 2005		**		1
þ	Excess from 2006		ا يا سايا		4. 3
C	Excess from 2007				3
d	Excess from 2008 2, 226,9/5		1 .		
е	Excess from 2009 363,795	'	<u>'</u>	1	5 000 PT
					Form <b>990-PF</b> (2009)

Part	Part XIV Private Operating Foundations (see page 27 of the instructions and Part VII-A, question 9)						
1a	If the foundation has received a ruling foundation, and the ruling is effective for				1	1/-A	
b	Check box to indicate whether the four		-		ection 4942(j)	(3) or 4942(J)(5)	
2a		Tax year		Prior 3 years			
	income from Part I or the minimum investment return from Part X for	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total	
	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						
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c						
3	Complete 3a, b, or c for the alternative test relied upon						
а	"Assets" alternative test-enter						
	(1) Value of all assets						
	(2) Value of assets qualifying under						
L	section 4942(j)(3)(B)(i)						
þ	of minimum investment return shown in						
_	Part X, line 6 for each year listed				ļ		
С	"Support" alternative test—enter:						
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)						
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)						
	(3) Largest amount of support from an exempt organization						
	(4) Gross investment income						
Part	XV Supplementary Information	n (Complete th	is part only if the	he foundation h	ad \$5,000 or m	ore in assets at	
	any time during the year-	see page 28 of	the instruction	ıs.)			
1	Information Regarding Foundation	•					
а	List any managers of the foundation of before the close of any tax year (but of	nly if they have co	ited more than 2% ontributed more th	6 of the total cont an \$5,000). (See s	ributions received ection 507(d)(2).)	by the foundation	
b	List any managers of the foundation		more of the stor	ck of a corporation	o (or an equally la	urge portion of the	
	ownership of a partnership or other er			•	, , ,	ago portion of the	
		• •		•			
2	Information Regarding Contribution Check here ► ☑ if the foundation unsolicited requests for funds. If the organizations under other conditions,	only makes contr foundation make	ibutions to prese s gifts, grants, et	lected charitable	organizations and of the instructions	does not accept to individuals or	
а	The name, address, and telephone nu	mber of the perso	n to whom applic	ations should be a	ddressed:		
b	The form in which applications should	be submitted and	d information and	materials they sho	uld include.		
С	Any submission deadlines:						
d	Any restrictions or limitations on aw factors:	ards, such as by	geographical ar	eas, charitable fi	elds, kinds of ins	titutions, or other	



3 Grants and Contributions Paid During		ea for Fut	ure Payment	<del></del>
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		<del>  '</del>
a Paid during the year  Newman Central Catholic  High School  Sterling, IL 61081		TOKE\3	For Construction of Sports  Education  Excitity	323, 21
West Fork Sportsman Club 3534 Country Club Road Viroqua, Wi 54667	4	דה ובנטיצ)	For Stream Conservation	1,200
Total		· · · · · · · · · · · · · · · · · · ·	<b>&gt;</b> 3a	374,916
b Approved for future payment  None				
T-111		<u> </u>		
Total	<u> </u>		<b>&gt;</b> 3b	n <b>990-PF</b> (2009)

26-1497383

	t XVI-A Analysis of Income-Producing Ac	tivities				
Ente	r gross amounts unless otherwise indicated.		siness income	Excluded by section	on 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion code	<b>(d)</b> Amount	Related or exempt function income (See page 28 of
1	Program service revenue					the instructions.)
	b		<u>-</u>	<del>                                     </del>	<del></del>	
	c			1		
	d				<del></del>	<del></del>
	e					
	f			<del>                                     </del>		
	g Fees and contracts from government agencies				-	
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments			01	643	
4	Dividends and interest from securities	,	,	01	15	
5			<u> </u>		1 - e	
	a Debt-financed property			<del> </del>	·	
_	<b>b</b> Not debt-financed property					
	Net rental income or (loss) from personal property			-		
7	Other investment income			+	<del></del> -	
8 9	Gain or (loss) from sales of assets other than inventory Net income or (loss) from special events			<del>                                     </del>		
10	Gross profit or (loss) from sales of inventory			<del> </del>		
11						
	b					
	С				·	
	d					
					150	
12	Subtotal. Add columns (b), (d), and (e)	لائی ہیں۔ سختی		J.,	658	L
13	Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)			<u> </u>		658
<b>13</b> See	<b>Total.</b> Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to verify	calculations.)				658
13 See Par	Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to verify   XVI-B Relationship of Activities to the A	calculations.)	ent of Exemi	ot Purposes	13	
13 See Par Line	<b>Total.</b> Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to verify	calculations.)	ent of Exemi	ot Purposes	13	
13 See Par Line	worksheet in line 13 instructions on page 28 to verify  t XVI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt to	calculations.)	ent of Exemi	ot Purposes	13	
13 See Par Line	worksheet in line 13 instructions on page 28 to verify  t XVI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt to	calculations.)	ent of Exemi	ot Purposes	13	
13 See Par Line	worksheet in line 13 instructions on page 28 to verify  t XVI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt to	calculations.)	ent of Exemi	ot Purposes	13	
13 See Par Line	worksheet in line 13 instructions on page 28 to verify  t XVI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt to	calculations.)	ent of Exemi	ot Purposes	13	
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13 See Par Line	worksheet in line 13 instructions on page 28 to verify  t XVI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt to	calculations.)	ent of Exemi	ot Purposes	13	
13 See Par Line	worksheet in line 13 instructions on page 28 to verify  t XVI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt to	calculations.)	ent of Exemi	ot Purposes	13	
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13 See Par Line	worksheet in line 13 instructions on page 28 to verify  t XVI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt to	calculations.)	ent of Exemi	ot Purposes	13	
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13 See Par Line	worksheet in line 13 instructions on page 28 to verify  t XVI-B Relationship of Activities to the A  Explain below how each activity for which accomplishment of the foundation's exempt to	calculations.)	ent of Exemi	ot Purposes	13	

Page 13

Par	τ Ανι	1	Exempt Or			sters 10 a	and Iran	ISACTIO	ns and	Relatio	onsnips wii	in Noncha	ritable	е	
1	Did	the o	organization c		· · · · · · · · · · · · · · · · · · ·	engage in a	nv of the	following	with an	v other	organization	described	T	Yes	No
•			n 501(c) of th										4		
			itions?	•			· / / / - 3-		•	-		•		,	į `Ì
а	_		s from the rep	ortina foui	ndation to	a nonchar	itable exe	mot ora	anızatıor	n of:			[ ]	, ,	1
_			١	_									1a(1)	نـــــ	$\sim$
			r assets .										1a(2)		X
b			ansactions:				. , , ,	•		•			1		
	(1)	Sale	s of assets to	a nonchar	table exe	mpt organi	zation .						1b(1)		\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
			hases of asse										1b(2)		<u>\</u>
	(3)	Rent	al of facilities,	equipmen	it, or other	r assets							1b(3)		حَدَا
			nbursement a										1b(4)		×
			is or loan gua										1b(5)		XXXXX
			ormance of se										1b(6)		X
С			of facilities, e										1c		>
d			swer to any										v the	fair m	
			the goods, o												
	valu	ue in	any transaction	on or sharıı	ng arrange	ement, sho	w ın colur	nn <b>(d)</b> th	e value	of the g	oods, other a	assets, or se	rvices	recei	ved.
(a) Li	ne no	(b) A	mount involved	(c) Na	me of nonch	arıtable exem	pt organizati	on	(d) Desc	cription of	transfers, transa	ictions, and sha	ring arra	angem	ents
		<u> </u>													
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2a	12 (1	cribe	undation dire	icity or ind	arecuy am	iliated with	oction 50	1 (a)(3)) a	e or mo	ore tax-	exempt orga	Inizations	٦.,	15-7-	
h			complete the				ection 30	1(0)(3)) 0	i ili Seci	1011 321		L	」 Yes	تطرة	No
	11 1		) Name of organi		schedule.		Tuno of ora			1	(a) Dana	untion of solution			
			iy i vame or organi	2811011		(0)	) Type of org	anization		<del> </del>	(c) Desci	ription of relatio	nsnip		
											······································	<del> </del>			
									<del></del>	<del> </del>		· · · · · · · · · · · · · · · · · · ·		_	
							· <del>- · - · · ·</del>								
	Under	r pena	Ities of perjury, I	declare that	have exam	ined this retui	rn including	accompa	nvina sche	dules and	l statements ar	nd to the best	of my kr		
			ue, correct, and o												
	1	. 9	no extu	45.h	Jak V	9		1261	128/1	0	$\sim$ $t_{a}$	unto ex			
ē	_		e of officer or true	tee	<u> </u>		-	Date	- //	<u></u>	Title	wite			
Sign Here		T						Date				Preparer's id	lentifu		
Ξ	so a					11 //				Check	ıf	number (see			n
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	Paid Preparer's Use Only	sig	nature	J W.	1/11			6/6	2/10			PODE	641	651	)
	2=	Fire	n's name (or you	rs if	/		-	•		•	EIN►		<u>-</u>		
		and	f-employed), add IZIP code	035,							Phone no. /	915-62	2-f	11	Y
			<del></del>			DONAL	D B. VOG	FI CD	Α			Fo	orm <b>99</b>	0-PF	(2009)

(13)

#### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

### **Schedule of Contributors**

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

OMB No 1545-0047

2009

Employer identification number

Greg And	1 Beth Wahl Foundation 26:1497383
Organization type (check	
Filers of:	Section:
Form 990 or 990-EZ	501(c)( ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
Note. Only a section 501(a instructions.	is covered by the <b>General Rule</b> or a <b>Special Rule</b> . c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See
General Rule	
	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or one contributor. Complete Parts I and II
Special Rules	
sections 509(a)(1) a	e)(3) organization filing Form 990 or 990-EZ that met the 33% % support test of the regulations under and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greate 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and
the year, aggregate	)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or es, or the prevention of cruelty to children or animals. Complete Parts I, II, and III
the year, contribution aggregate to more year for an exclusive applies to this orga	)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during ons for use exclusively for religious, charitable, etc., purposes, but these contributions did not than \$1,000. If this box is checked, enter here the total contributions that were received during the ely religious, charitable, etc., purpose Do not complete any of the parts unless the <b>General Rule</b> nization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more
Caution. An organization to 990-EZ, or 990-PF), but it	hat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, <b>must</b> answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, 0-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or



Schedule B (Form 990, 990-EZ, or 990-PF) (2009) Name of organization Employer identification number Found ation Part I Contributors (see instructions) (a) (c) (d) No. Name, address, and ZIP + 4 **Aggregate contributions** Type of contribution Person Payroll \$ 10,000 Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) No. **Aggregate contributions** Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution.) (a) (d) (b) (c) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person Payroli Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) Name, address, and ZIP + 4 No. Aggregate contributions Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person Payroli Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person Payrol! Noncash (Complete Part II if there is a noncash contribution.)

Gregard Beth Wahl

Foundation

Form 990-PF 12-31-09 26-1497383 Part 1, Exprenser:
Line 1666) Accounting:

Donald B Voge 1 CM \* 850 Illinois Hanvel Regult 15

Illinois Cliparate Regult 12

22

Department of the Treasury Internal Revenue Service

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

File a separate application for each return.

OMB No. 1545-1709

• If yo	ou are t	filing for an Automatic 3-Month Extension, complete only Part I and check this box filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (	on page 2		
Part		lete Part II unless you have already been granted an automatic 3-month extension on a particular and a lateral and		filed Form	8868
		required to file Form 990-T and requesting an automatic 6-month extension—check			plete ▶ □
		porations (including 1120-C filers), partnerships, REMICs, and trusts must use Form T Icome tax returns	7004 to re	quest an	extension of
one of electro returns	the re onically s, or a c	iling (e-file). Generally, you can electronically file Form 8868 if you want a 3-month au eturns noted below (6 months for a corporation required to file Form 990-T). Hower if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms composite or consolidated Form 990-T. Instead, you must submit the fully completed and red details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file the	ver, you o s 990-BL, id signed	cannot file 6069, or page 2 (Pa	Form 8868 8870, group art II) of Form
Type o	or	Name of Exempt Organization			ition number
print File by t	ho	Oreg and Beth Wahl Foundation  Number, street, and room or suite no. If a P.O. box, see instructions	26	14	97383
due date	e for	27131 R Street			
return S	See [	City, town or post office, state, and ZIP code. For a foreign address, see instructions Sterling, Illinois 61081			
Check	type	of return to be filed (file a separate application for each return):			
	rm 990			Form 4	
_	rm 990	=		Form 5	
	rm 990		L	Form 6	
✓ Fo	rm 990	D-PF	L	Form 8	870
Telep If the If the for the a list w	phone e organis is to e whole with the	are in the care of ▶ Donald B. Vogel CPA  No. ▶ ( 815 ) 626-8474  FAX No. ▶ ( )  Dizition does not have an office or place of business in the United States, check this a Group Return, enter the organization's four digit Group Exemption Number (GEN).  The group, check this box ▶ □ . If it is for part of the group, check this box	box .		
u	intil or the •	est an automatic 3-month (6 months for a corporation required to file Foi 8-15 , 20_10 , to file the exempt organization return for the organization organization's return for calendar year 20_09 or tax year beginning	named at	oove. The	extension is
2 If	f this ta	ax year is for less than 12 months, check reason 🏻 Initial return 🗀 Final return [	☐ Chang	e in acco	unting period
<u>le</u>	ess any	pplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax nonrefundable credits. See instructions.	3	a \$	0
		pplication is for Form 990-PF or 990-T, enter any refundable credits and estimated ta its made. Include any prior year overpayment allowed as a credit.		b \$	0
c B	Balanc ieposit	e <b>Due</b> . Subtract line 3b from line 3a. Include your payment with this form, or, if required with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Paymer) See instructions.	1,		
		ou are going to make an electronic fund withdrawal with this Form 8868, see Form 84 instructions.			879-EO
		ct and Paperwork Reduction Act Notice, see Instructions. Cat No 27916D		Form 886	8 (Rev 4-2009)



Form 8868	(Rev 4-2009)			Page 2
Note. Or	are filing for an Additional (Not Automatic) 3-Month Extension, complete an automatic 3-month extension are filing for an Automatic 3-Month Extension, complete only Part I (on	ension on a previous		. ▶ □
Part II			copies needed)	
Type or print			ployer identification	
File by the extended due date for filing the return See instructions	Number, street, and room or suite no. If a P.O. box, see instructions.	For	IRS use only	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions			
Check t	ype of return to be filed (File a separate application for each return).			
☐ Form	990	Form 1041-A	☐ Form 6069	9
☐ Form	990-BL	Form 4720	Form 8870	)
☐ Form		Form 5227		
STOP! D	o not complete Part II if you were not already granted an automatic 3-mor		previously filed Fo	rm 8868.
Talaah	ooks are in the care of ►			
	organization does not have an office or place of business in the United Sta			
	is for a Group Return, enter the organization's four digit Group Exemption I			
	vhole group, check this box $\ldots$ $\blacktriangleright$ $\square$ . If it is for part of the group, c	heck this box	▶ 🔲 and attar	ch a
list with	the names and EINs of all members the extension is for			
4 1 re	quest an additional 3-month extension of time until	, 20.		
5 Fo	calendar year, or other tax year beginning, 20, and ending, 20, 20,			
	tax year is for less than 12 months, check reason \( \square\$ Initial return \( \square\$ Final return \( \square\$ Change in accounting period			
	te in detail why you need the extension			
	his application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the any nonrefundable credits. See instructions.	ne tentative tax,	8a \$	
b If t	nis application is for Form 990-PF, 990-T, 4720, or 6069, enter any refunda	able credits and	The state of the s	
est	imated tax payments made. Include any prior year overpayment allowed as	a credit and any		
	ount paid previously with Form 8868.	a credit and any	8b \$	
_			OD 2	
c Bal	ance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)	required, deposit . See instructions.	8c \$	
	Signature and Verification			
Under pen	alties of perjury, I declare that I have examined this form, including accompanying schedules and orrect, and complete, and that I am arthorized to prepare this form	d statements, and to the	best of my knowledge	and belief,
Signature	Title > CP/4	1	Date > 5/14	110
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