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

OMB No 1545-0052 2009

Fo	or cal	endar	year 2009, d	or tax year beg	inning				, 2009,	and endi	ng	_	, 20
			nat apply	Initial retu			Initial ret	turn o	f a former p	ublic chari	ity		Final return
			1.,	Amended	return		X Ac	ddres	s change		٦	lame change	,
			Name of fou	ndation			<u> </u>					A Employer identi	fication number
1	Use the	e IRS											
`	labe		M.G. O'NEIL FOUNDATION								34-6516968		
	Otherv	vise,	Number and	street (or P O box	mail is not c	lelivered to	street a	address)	Room/sui	te	B Telephone number (see page 10 of the instructions)		
	pri	nt	ı										
_	or ty		P.O. BOX	<u>ረ</u> 730								(3	30) 650-6302
	See Sp Instruc		City or town,	, state, and ZIP co	de							C If exemption applied pending, check he	
	IISLI UC	uons.										D 1. Foreign organiz	L
			HUDSON,	OH 44236								•	zations meeting the
H	Chec	ck type	of organiza	tion X Sect	ion 501(c)(3) exe	mpt priv	ate fo	oundation				here and attach
Ĩ			-	nexempt charitab					vate foundat	tion		i i	
Ť				assets at end		unting m				rual			ion status was terminated (b)(1)(A), check here
_	of ve	ar (fro	m Part II, col	(c), line		her (spe	· ·	_					is in a 60-month termination
	16)			55,441.				be on	cash basis)	-		1	(b)(1)(B), check here . ►
F	Part I	Analy	sis of Reve	nue and Expen	ses (The	(a) Bo	vonuo an	<u>. </u>				/-> 6 diakada.aa	(d) Disbursements
		total o	f amounts ın c	olumns (b), (c), ar equal the amoun	nd (d)	`éxpe	venue an	۱ ۲	(b) Net inve	I .	((c) Adjusted net income	for charitable purposes
				equal the amoun e 11 of the instruc			ooks						(cash basis only)
	1	Contribu	tions, gifts, grants,	etc , received (attach so	chedule) .		1	.00					
		Check I	if the f	oundation is not red Sch B.	uired to				-				
	3	Interest		temporary cash inve			-						
2	1		-	est from securities	ſ		6,7	728		6,728.			ATCH 1
2010	1												
87	Ь	Net ren	tal income or (lo	ss)									
	6a	Net gai	n or (loss) from	sale of assets not or	line 10								
	b		ales price for all on line 6a										
NOV Revenu	7			ome (from Part IV,	line 2)								
ດ້	8			Na CEIVE									
皿	9	Income	e modification	S									
ş	10 a	Gross sa and allo	ales less returns wancesco	:	<u> </u>								
₹	b	Less C	wancesco ost of goods sold	HON IN SH.	17/1								
SCANNED	С	Gross	profit or (loss)	(attach schedule)									
	11	Other	income (attaç	hischedule)VI, L	! †			200		6 700			
_	12_	Total.	Add lines-1-th	rough 11 - :			6,8	328.		6,728.			
	13	Compe	nsation of office	ers, directors, trustee	s, etc			0 ;					
Ø	14			aries and wages .									
JSe	15		•	loyee benefits				764.					76
Expenses	16a			chedule)				025.					2,02
Ĭ,	b			tach schedule)			۷,۱	023.					2,02
<u>i</u> .	C		•	ees (attach sched	-								
and Administrative	17				4 +	ļ	2	568.					
tist	18) (see page 14 of the in			۷,	200.					
Ë	19	•	•	n schedule) and d	•							· · · · · · · · · · · · · · · · · · ·	
PΑ	20					<u> </u>							-
2	21			, and meetings .									
ă	22			itions		<u> </u>		636.		380.	<u> </u>		25
ţi	23			ach schedule) An		 		050.		500.	_	<u>-</u>	
Operating	24		-	d administrative e			Ε.	993.		380.			3,04
aC			_	h 23			24,			300.	-		24,85
	25		_	grants paid		<u> </u>	30,			380.	_		27,89
-				rsements Add lines	24 and 25		50,	040.		300.			
	27		ct line 26 fro				-24,	ი15					
	1			xpenses and disburse		-	24,	010.		6,348.	-		
	b	Net in	vestment inc	ome (if negative,	enter -0-)	-				0,040.	-	-0-	_

c Adjusted net income (If negative, enter -0-). .

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

9E1410 2 0000 7 2 4 3 1 Q A 1 0 A 1 0 / 2 6 / 2 0 1 0 2 : 4 2 : 0 5 PM V 0 9 - 8 . 3

ATCH 2

Form 990-PF (2009)



Б	art II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	year
4	ai t ii	Dalance Officets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ing	4,000.	2,510.	2,510.
-			cash investments	155,128.	125,995.	125,995.
	3	Accounts receivable				
i		Less allowance for dou	btful accounts ▶			
	4					
		Less, allowance for dou	btful accounts			
	5					
	6		officers, directors, trustees, and other			
	•		ach schedule) (see page 16 of the instructions)			
	7		receivable (attach schedule)			
	′		btful accounts			
ets	8		se			
Assets	9		leferred charges			
۷			te government obligations (attach schedule)			
			e stock (attach schedule)	1		
	11 C	Investments - land, building and equipment basis Less accumulated depreci			-	
	12	(attach schedule)	loans			
	13	Investments - nther (att	ach schedule) ATCH 4	231,738.	238,346.	326,936.
	14	Land, buildings, and	▶			
		Less accumulated deprecial (attach schedule)	ation	1		
	15		>)			
	16		pleted by all filers - see the			
			page 1, item I)	390,866.	366,851.	455,441.
	17		accrued expenses	· ·		
	18			1		
ģ	19	• • • •				
Liabilities	20		ors, trustees, and other disqualified persons			
Ē	21		otes payable (attach schedule)			
==	22		be ►)			
	~~	Other habilities (describ				
	23	Total liabilities (add line	es 17 through 22)			
_		· · · · · · · · · · · · · · · · · · ·	llow SFAS 117, check here ▶			
			24 through 26 and lines 30 and 31.			
Š	۱.,	•	•			
2	24					
ala	25					
Õ	26					
Ĕ	24 25 26		not follow SFAS 117,			
Ŧ			nplete lines 27 through 31. X			
0	27		ncipal, or current funds			
ě	28		or land, bldg, and equipment fund	390,866.	366,851.	
Net Assets	29	~ .	nulated income, endowment, or other funds	390,000.	300,031.	
et /	30		nd balances (see page 17 of the	200 000	266 051	
Ž		instructions)		390,866.	366,851.	
	31	Total liabilities and ne	et assets/fund balances (see page 17	200 000	266 254	
_					366,851.	
			anges in Net Assets or Fund			
1			ealances at beginning of year - Part I		- ,	200 000
			ed on prior year's return)		1	390,866.
2	Ente	er amount from Part I,	line 27a		2	-24,015.
3	Othe	er increases not includ			_	
4	Add	lines 1, 2, and 3				366,851.
5	Dec				_	
6	Tota	al net assets or fund b	n line 2 (itemize) ► palances at end of year (line 4 minus	line 5) - Part II, column (b)	line 30 6	366,851.
						Form 990-PF (2009)

• •	d describe the kind(s) of property sold (erick warehouse, or common stock, 200 s		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
la					
<u>b</u>					
<u>c</u>			-		
<u>d</u>			 	ļ · · · · ·	
<u>e</u>		(a) Cook or other hour	 		<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) min	•
a b			-		
С					
d			<u> </u>		
e				=	
Complete only for assets s	howing gain in column (h) and own	ed by the foundation on 12/31/69		Gains (Col (h) g	jain minus
(i) F M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col (j), if any	col	(k), but not less Losses (from co	
a					
b					
С					
d					
е					
Capital gain net income or		gain, also enter in Part I, line 7			
· -	("	(loss), enter -0- in Part I, line 7	2		
	n or (loss) as defined in sections 12				
			111		
• .	, line 8, column (c) (see pages 13	•	}		
If (loss), enter -0- in Part I, Part V Qualification Ui For optional use by domestic	nder Section 4940(e) for Reduce private foundations subject to the	uced Tax on Net Investment Ir		ome)	
If (loss), enter -0- in Part I, Part V Qualification Ui For optional use by domestic f section 4940(d)(2) applies, Vas the foundation liable for	Inne 8	uced Tax on Net Investment In e section 4940(a) tax on net inves	tment inco	_	Yes X N
If (loss), enter -0- in Part I, Part V Qualification Ur For optional use by domestic f section 4940(d)(2) applies, Vas the foundation liable for f "Yes," the foundation does	Inne 8	uced Tax on Net Investment In e section 4940(a) tax on net invest outable amount of any year in the Do not complete this part	tment inco	od? [
If (loss), enter -0- in Part I, Part V Qualification Ui For optional use by domestic f section 4940(d)(2) applies, Vas the foundation liable for f "Yes," the foundation does 1 Enter the appropriate am	line 8	putable amount of any year in the Do not complete this part see page 18 of the instructions to	tment inco	od?	
If (loss), enter -0- in Part I, Part V Qualification Ur For optional use by domestic f section 4940(d)(2) applies, Vas the foundation liable for f "Yes," the foundation does	line 8	outable amount of any year in the Do not complete this part see page 18 of the instructions to the value of nonchantable-use assets	tment inco	od? [ratio by col (c))
If (loss), enter -0- in Part I, Part V Qualification Un For optional use by domestic section 4940(d)(2) applies, Vas the foundation liable for "Yes," the foundation does I Enter the appropriate am (a) Base period years	line 8	outable amount of any year in the Do not complete this part see page 18 of the instructions to the value of nonchantable-use assets	tment inco	king any entries (d) Distribution	ratio by col (c)) 0.777265
If (loss), enter -0- in Part I, Part V Qualification Un For optional use by domestic section 4940(d)(2) applies, Vas the foundation liable for "Yes," the foundation does 1 Enter the appropriate am (a) Base penod years Calendar year (or tax year beginning in)	line 8	outable amount of any year in the Do not complete this part see page 18 of the instructions to Net value of nonchantable-use assets 617,632.	tment inco	king any entries (d) Distribution	ratio by col (c)) 0.777265 0.440957
If (loss), enter -0- in Part I, Part V Qualification Un For optional use by domestic f section 4940(d)(2) applies, Vas the foundation liable for f "Yes," the foundation does 1 Enter the appropriate am (a) Base penod years Calendar year (or tax year beginning in) 2008 2007 2006	line 8	outable amount of any year in the Do not complete this part see page 18 of the instructions to (c) Net value of nonchantable-use assets 617, 632. 1,166,933. 1,306,907.	tment inco	king any entries (d) Distribution	ratio by col (c)) 0.777265 0.440957 0.284219
If (loss), enter -0- in Part I, Part V Qualification Un For optional use by domestic section 4940(d)(2) applies, Vas the foundation liable for "Yes," the foundation does I Enter the appropriate am (a) Base penod years Calendar year (or tax year beginning in) 2008 2007 2006 2005	line 8	outable amount of any year in the Do not complete this part, see page 18 of the instructions to (c) Net value of nonchantable-use assets 617, 632. 1,166,933. 1,306,907. 1,552,157.	tment inco	king any entries (d) Distribution	ratio by col (c)) 0.777265 0.440957 0.284219 0.233886
If (loss), enter -0- in Part I, Part V Qualification Un For optional use by domestic f section 4940(d)(2) applies, Vas the foundation liable for f "Yes," the foundation does 1 Enter the appropriate am (a) Base penod years Calendar year (or tax year beginning in) 2008 2007 2006	line 8	outable amount of any year in the Do not complete this part see page 18 of the instructions to (c) Net value of nonchantable-use assets 617, 632. 1,166,933. 1,306,907.	tment inco	king any entries (d) Distribution	ratio
If (loss), enter -0- in Part I, Part V Qualification Ur For optional use by domestic f section 4940(d)(2) applies, Vas the foundation liable for f "Yes," the foundation does 1 Enter the appropriate am (a) Base penod years Calendar year (or tax year beginning in) 2008 2007 2006 2005 2004 Total of line 1, column (d)	line 8	outable amount of any year in the Do not complete this part see page 18 of the instructions to (c) Net value of nonchantable-use assets 617,632. 1,166,933. 1,306,907. 1,552,157. 1,798,852.	base perio	king any entries (d) Distribution	ratio by col (c)) 0.777265 0.440957 0.284219 0.233886 0.223047
If (loss), enter -0- in Part I, Part V Qualification Un For optional use by domestic f section 4940(d)(2) applies, Vas the foundation liable for f "Yes," the foundation does 1 Enter the appropriate am (a) Base penod years Calendar year (or tax year beginning in) 2008 2007 2006 2005 2004 2 Total of line 1, column (d) 3 Average distribution ratio	line 8	outable amount of any year in the Do not complete this part see page 18 of the instructions to het value of nonchantable-use assets (c) Net value of nonchantable-use assets 617,632. 1,166,933. 1,306,907. 1,552,157. 1,798,852.	base periodefore male	king any entries (d) Distribution	ratio by col (c)) 0.777265 0.440957 0.284219 0.233886 0.223047
If (loss), enter -0- in Part I, Part V Qualification Un For optional use by domestic f section 4940(d)(2) applies, Vas the foundation liable for f "Yes," the foundation does f Enter the appropriate am (a) Base penod years Calendar year (or tax year beginning in) 2008 2007 2006 2005 2004 Total of line 1, column (d) 6 Average distribution ratio	line 8	outable amount of any year in the Do not complete this part see page 18 of the instructions to het value of nonchantable-use assets (c) Net value of nonchantable-use assets 617,632. 1,166,933. 1,306,907. 1,552,157. 1,798,852.	base periodefore male	king any entries (d) Distribution	ratio py col (c)) 0.777265 0.440957 0.284219 0.233886 0.223047
If (loss), enter -0- in Part I, Part V Qualification Un For optional use by domestic f section 4940(d)(2) applies, Vas the foundation liable for f "Yes," the foundation does f Enter the appropriate am (a) Base period years Calendar year (or lax year beginning in) 2008 2007 2006 2005 2004 Total of line 1, column (d) 6 Average distribution ratio number of years the foun	line 8	outable amount of any year in the Do not complete this part, see page 18 of the instructions to the value of nonchantable-use assets (c) Net value of nonchantable-use assets 617,632. 1,166,933. 1,306,907. 1,552,157. 1,798,852.	base periodefore main	king any entries (d) Distribution	ratio by col (c)) 0.777265 0.440957 0.284219 0.233886 0.223047
If (loss), enter -0- in Part I, Part V Qualification Ur For optional use by domestic f section 4940(d)(2) applies, Vas the foundation liable for f "Yes," the foundation does 1 Enter the appropriate am (a) Base penod years Calendar year (or tax year beginning in) 2008 2007 2006 2005 2004 Total of line 1, column (d) A Average distribution ratio number of years the foun	line 8	outable amount of any year in the Do not complete this part see page 18 of the instructions to (c) Net value of nonchantable-use assets 617,632. 1,166,933. 1,306,907. 1,552,157. 1,798,852. et the total on line 2 by 5, or by the set than 5 years om Part X, line 5	base periodefore male	king any entries (d) Distribution	ratio by col (c)) 0.777265 0.440957 0.284219 0.233886 0.223047 1.959374 0.391875
If (loss), enter -0- in Part I, Part V Qualification Ur For optional use by domestic f section 4940(d)(2) applies, Vas the foundation liable for f "Yes," the foundation does 1 Enter the appropriate am (a) Base penod years Calendar year (or tax year beginning in) 2008 2007 2006 2005 2004 Total of line 1, column (d) A Average distribution ratio number of years the foun Enter the net value of nor Multiply line 4 by line 3	line 8	outable amount of any year in the Do not complete this part see page 18 of the instructions to (c) Net value of nonchantable-use assets 617,632. 1,166,933. 1,306,907. 1,552,157. 1,798,852. et the total on line 2 by 5, or by the sthan 5 years om Part X, line 5	base periodefore male	king any entries (d) Distribution	ratio by col (c)) 0.777265 0.440957 0.284219 0.233886 0.223047 1.959374 0.391875 400,620.
If (loss), enter -0- in Part I, Part V Qualification Un For optional use by domestic f section 4940(d)(2) applies, Vas the foundation liable for f "Yes," the foundation does 1 Enter the appropriate am (a) Base penod years Calendar year (or tax year beginning in) 2008 2007 2006 2005 2004 2 Total of line 1, column (d) 3 Average distribution ratio number of years the foun 4 Enter the net value of nor 5 Multiply line 4 by line 3 6 Enter 1% of net investme	line 8	outable amount of any year in the Do not complete this part see page 18 of the instructions to het value of nonchantable-use assets (c) Net value of nonchantable-use assets 617,632. 1,166,933. 1,306,907. 1,552,157. 1,798,852. et the total on line 2 by 5, or by the set than 5 years om Part X, line 5	base periodefore main	king any entries (d) Distribution	ratio (c)) 0.777265 0.440957 0.284219 0.233886 0.223047 1.959374 0.391875 400,620.

Par	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the	e ins	truction	ons)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)			
	Domestic_foundations that meet the section 4940(e) requirements in Part V, check		1	27.
	here and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
	of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2		- 1	07
3	Add lines 1 and 2		1	27.
4	Subtitle Å (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		1	27.
6	Credits/Payments			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1,678.			
	Exempt foreign organizations-tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c 0.			
	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		1,6	578.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2010 estimated tax 1,551 Refunded 11		1,5	51.
	t VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No X
	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	.]		X
	of the instructions for definition)?	1b		
	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			х
С	Did the foundation file Form 1120-POL for this year?	1 c		
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 >\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$			х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		-
	If "Yes," attach a detailed description of the activities	i		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			x
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?			X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	_3_		
	If "Yes," attach the statement required by General Instruction T			
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?	6	Х	
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 XV	7	X	
	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	<u> </u>		
	instructions) > OH,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		x	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8 b	 ^`	
9	is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	1		1
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			X
	27)? If "Yes," complete Part XIV	9_		 ^ -
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		1	x
	names and addresses	10	i .	1

Form 990-PF (2009)

Χ

3 b

4a

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

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?

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Par	t VII-B Statements Regarding Activities for	or Which Form 47	'20 May Be Requi	red (continued)		
5a	During the year did the foundation pay or incur any amou (1) Carry on propaganda, or otherwise attempt to influer (2) Influence the outcome of any specific public election directly or indirectly, any voter registration drive?	ce legislation (section (see section 4955), or	to carry on,	Yes X No	.	
	(3) Provide a grant to an individual for travel, study, or off(4) Provide a grant to an organization other than a chari					
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charital			Yes X No	,	
	purposes, or for the prevention of cruelty to children o	r anımals?				
b	If any answer is "Yes" to 5a(1)-(5), did any of the trans Regulations section 53 4945 or in a current notice regard Organizations relying on a current notice regarding disast	ing disaster assistanc	e (see page 22 of the i	nstructions)?	5b	
С	If the answer is "Yes" to question 5a(4), does the foundation					
	because it maintained expenditure responsibility for the gill "Yes," attach the statement required by Regulations section.	tion 53 4945-5(d)		Yes X No		
	Did the foundation, during the year, receive any funds, don a personal benefit contract?				6b	Х
	If "Yes" to 6b, file Form 8870	ary or maneous, on a p	orgonal benefit contrac			
	At any time during the tax year, was the foundation a pa	•	•	. — —		
	If yes, did the foundation receive any proceeds or have a tyll Information About Officers, Directors					
	and Contractors					
<u>1</u>	List all officers, directors, trustees, foundation m (a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (see (lf not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense a other allow	
<u>AT</u>	TACHMENT 5		0.	0.		0
		1				
2	Compensation of five highest-paid employees (ot If none, enter "NONE."	her than those inc	luded on line 1 - se		ructions).	
		her than those inc. (b) Title, and average hours per week devoted to position	(c) Compensation	e page 23 of the inst (d) Contributions to employee benefit plans and deferred compensation	(e) Expense a	
	If none, enter "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expense a	
(a	If none, enter "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expense a	
(a	If none, enter "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expense a	
(a	If none, enter "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expense a	
(a	If none, enter "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expense a	

Form 990-PF (2009) Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII 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

NONE	
Total number of others receiving over \$50,000 for professional services	▶ NONE
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 23 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 N/A	Amount
1/	
2	
2	
All other program-related investments See page 24 of the instructions	
3 NONE	

Form 990-PF (2009)

34-6516968

Par	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	gn founda	lions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	403,234.
b	Average of monthly cash balances	1b	3,487.
С	-	1c	0.
		1d	406,721.
е	Total (add lines 1a, b, and c) 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	0.
3	Out the Atlanta Control to And	3	406,721.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
		4	6,101.
5	of the instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	400,620.
6	Minimum investment return. Enter 5% of line 5	6	20,031.
Pa	To Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privation foundations and certain foreign organizations check here ▶ and do not complete this j	ate operating	3
1	Minimum investment return from Part X, line 6	1	20,031.
	127		
- b	Income tax for 2009 (This does not include the tax from Part VI) 2b	1	
	Add lines 2a and 2b	2c	127.
3	Distributable amount before adjustments Subtract line 2c from line 1		19,904.
4	Recoveries of amounts treated as qualifying distributions		
5		5	19,904.
6	Add lines 3 and 4 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	19,904.
		<u> </u>	
Pa	Irt XII Qualifying Distributions (see page 25 of the instructions)	1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		07.005
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	27,895.
ʻ p		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	0.
b	Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	27,895.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		4-
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4		27,895.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating v qualifies for the section 4940(e) reduction of tax in those years	vhether the	foundation

Form **990-PF** (2009)

Pa	rt XIII Undistributed Income (see page	26 of the instruction	ns)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7		-		19,904.
2	Undistributed income, if any, as of the end of 2009				
	Enter amount for 2008 only				
b	Total for prior years 20 07 ,20 06 ,20 05				
3	Excess distributions carryover, if any, to 2009				
-	From 2004 1 311, 748,				
	From 2005 297, 351.				
	From 2006 327, 071.				
	From 2007				
	From 2008 452,528.				
	Total of lines 3a through e	1,852,412.			
	Qualifying distributions for 2009 from Part XII,				
•	line 4 ► \$ 27,895.				
а	Applied to 2008, but not more than line 2a				
					
D	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)				
_					
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)		ļ		
А	Applied to 2009 distributable amount	" - · - ·			19,904.
	Remaining amount distributed out of corpus	7,991.			
5	Excess distributions carryover applied to 2009				
•	(If an amount appears in column (d), the same				
6	amount must be shown in column (a)) Enter the net total of each column as				
v	indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,860,403.			
	Prior years' undistributed income Subtract				
U	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				<u> </u>
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	211 740			
	instructions)	311,748.			
9	Excess distributions carryover to 2010.	1 540 655			
	Subtract lines 7 and 8 from line 6a	1,548,655.			
	Analysis of line 9		:		
	Excess from 2005 297, 351.				
þ	Excess from 2006 327, 071.				
C	Excess from 2007 463,714.				
d	Excess from 2008 452, 528.				
_е	Excess from 2009 7,991.			L	

Pa	rt XIV Private Oper	ating Foundations (see page 27 of the	instructions and Pa	rt VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or de	etermination letter tha	t it is a private oper	ating	
	foundation, and the ruling	g is effective for 2009, ei	nter the date of the ruling		. ▶	
b -	Check box to indicate wh	ether the foundation is a	private operating found	ation described in section	4942(j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years	т	(e) Total
	justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
	I or the minimum investment return from Part X for each					
	year listed					
b	85% of line 2a				<u> </u>	
С	Qualifying distributions from Part					
	XII, line 4 for each year listed .					
d	Amounts included in line 2c not used directly for active conduct of exempt activities	,				
е	Qualifying distributions made					
	directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
а	alternative test relied upon "Assets" alternative test - enter					İ
-	(1) Value of all assets					
	(2) Value of assets qualifying under section					
b	4942(j)(3)(B)(i) "Endowment" alternative test-	_				
	enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed			ü		
C	"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					
Pa	rt XV Supplement	ary Information (C	omplete this part	only if the found	lation had \$5,000	or more in assets
	<u>*</u>	during the year -se		structions.)		
1	Information Regardin	•				
а	List any managers of before the close of any	the foundation who f y tax year (but only if th	have contributed mor hey have contributed	e than 2% of the tota more than \$5,000) (S	al contributions recei See section 507(d)(2)	ved by the foundation)
	NONE					
b	List any managers of ownership of a partne					y large portion of the
	NONE					
2	Information Regardin	a Contribution Grant	Gift Loan Scholare	hip. etc Programs:		
_	<u> </u>	_		•	itable erganizations	and door not seeset
						and does not accept ons) to individuals or
	organizations under of					ono, to mamada or
	The name, address, a				ne addressed	
	ATTACHM	ENT 6				
b	The form in which app			on and materials they	snould include	
		QUESTS-NO SPEC	IAL FORMAT			
С	Any submission dead	ines				
	NONE	·	.			
d	Any restrictions or l factors	ımıtatıons on awards	, such as by geogr	aphical areas, charita	able fields, kinds of	institutions, or other
	NONE				<u>,</u>	

rt XV Supplementary Information Grants and Contributions Paid D - Recipient —	If recipient is an individual,	Foundation		
Name and address (home or business)	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
Paid during the year	or substantial contributor	recipient		
r aid during the year				
TTACHMENT 7				
•		1		
			i	
			İ	
		1		
				24.6
Total	<u> </u>		▶ 3a	24,
Approved for future payment				
		1		
		1		
	I	1		

er gross am	ounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
- Program se	rvice revenue	- (a) Business code	(b) - Amount	(c) Exclusion code	(d) Amount	Related or exempt function income- (See page 28 of the instructions)
_						the matructions /
ъ b			· -			
						
d						
- ——— e '	•			-		
·						
g Fees and	d contracts from government agencies					
-	p dues and assessments					·
	avings and temporary cash investments					
	and interest from securities			14	6,728.	
	ncome or (loss) from real estate					
a Debt-fir	nanced property		_			
	ot-financed property					
	come or (loss) from personal property					
Other inves	stment income					
) from sales of assets other than inventory					
Net income	or (loss) from special events					
	t or (loss) from sales of inventory					
	ue a					
b		<u> </u>				
c						
d		1		I		
е						
e Subtotal Ad Total Add I e workshee	dd columns (b), (d), and (e)	to verify calci	ulations)			6,7
Subtotal Ad Total Add I e workshee Irt XVI-B	line 12, columns (b), (d), and (e)	to verify calco	ulations) complishment of E	xempt Purp	oses (e) of Part XVI-A con	tributed important
Subtotal Ad I e workshee	Ine 12, columns (b), (d), and (e)	to verify calco	ulations) complishment of E	xempt Purp	oses (e) of Part XVI-A con	tributed important
Subtotal Ad I e workshee rt XVI-B	line 12, columns (b), (d), and (e)	to verify calco	ulations) complishment of E	xempt Purp	oses (e) of Part XVI-A con	tributed important
Subtotal Ad I e workshee	line 12, columns (b), (d), and (e)	to verify calco	ulations) complishment of E	xempt Purp	oses (e) of Part XVI-A con	tributed important
Subtotal Ad I e workshee	line 12, columns (b), (d), and (e)	to verify calco	ulations) complishment of E	xempt Purp	oses (e) of Part XVI-A con	tributed important
Subtotal Ad I e workshee	line 12, columns (b), (d), and (e)	to verify calco	ulations) complishment of E	ed in column other than t	oses (e) of Part XVI-A con	tributed important
Subtotal Add I workshee rt XVI-B	line 12, columns (b), (d), and (e)	to verify calco	ulations) complishment of E ch income is reporte exempt purposes (ed in column other than t	oses (e) of Part XVI-A con	tributed importan
Subtotal Ad I over the No.	line 12, columns (b), (d), and (e)	to verify calco	ulations) complishment of E ch income is reporte exempt purposes (ed in column other than t	oses (e) of Part XVI-A con	tributed important
Subtotal Ad I over the No.	line 12, columns (b), (d), and (e)	to verify calco	ulations) complishment of E ch income is reporte exempt purposes (ed in column other than t	oses (e) of Part XVI-A con	tributed important
Subtotal Ad I over the No.	line 12, columns (b), (d), and (e)	to verify calco	ulations) complishment of E ch income is reporte exempt purposes (ed in column other than t	oses (e) of Part XVI-A con	tributed important
Subtotal Ad I over the No.	line 12, columns (b), (d), and (e)	to verify calco	ulations) complishment of E ch income is reporte exempt purposes (ed in column other than t	oses (e) of Part XVI-A con	tributed important
Subtotal Ad I over the No.	line 12, columns (b), (d), and (e)	to verify calco	ulations) complishment of E ch income is reporte exempt purposes (ed in column other than t	oses (e) of Part XVI-A con	tributed important
Subtotal Ad Total Add I e workshee Irt XVI-B	line 12, columns (b), (d), and (e)	to verify calco	ulations) complishment of E ch income is reporte exempt purposes (ed in column other than t	oses (e) of Part XVI-A con	tributed important
Subtotal Ad I e workshee Irt XVI-B	line 12, columns (b), (d), and (e)	to verify calco	ulations) complishment of E ch income is reporte exempt purposes (ed in column other than t	oses (e) of Part XVI-A con	tributed important
Subtotal Ad I e workshee Irt XVI-B	line 12, columns (b), (d), and (e)	to verify calco	ulations) complishment of E ch income is reporte exempt purposes (ed in column other than t	oses (e) of Part XVI-A con	tributed important

Par	t XVII	Information F Exempt Orga		ransfers To and T	ransa	ctions a	nd Relation	onships Wit	h Nonc	harit	able
1	in sec	ction 501(c) of the Co	ode (other than	engage in any of the section 501(c)(3) organizencharitable exempt organizence	nizations					Yes	No
а				· · · · · · · · · · · · · · · · · · ·					1a(1)		X
										1	Х
b		transactions	anitable average	rannization					45/4		x
				rganization					- 1	1	X
				ts						1	Х
	(4) Re	eimbursement arrangeme	ents	. 					1b(4)	ļ	X
				fundamina salahahan							X
c				fundraising solicitations . her assets, or paid employe						'	X
		•	-	Yes," complete the follo						fair i	market
		-		ices given by the repo							
	value	in any transaction or	sharing arrani	gement, show in columi	n (d) t	he value o	f the goods	s, other assets,	or servic	es re	ceived
(a) L	ine no	(b) Amount involved	(c) Name of r	noncharitable exempt organiza	tion	(d) Descri	iption of transfe	ers, transactions, an	d shanng am	angeme	ents
		N/A				N/A					
											•
					-						
											
						<u> </u>					
				<u> </u>							
										-	
					-						
						:					
2a				ted with, or related to, o		more tax-ex	empt organiz	ations describe	1 1		X No
.		n 501(c) of the Code (otl s," complete the followin		501(c)(3)) or in section 527	"				Ш Ү	′es	∆ No
	II TE	(a) Name of organizatio		(b) Type of organ	ızatıon		(c) Description of re	elationship		
									 		
											
	Under belief,	penalties of perjury, I deci	lare that I have explete Declaration	amined this return, including of preparer (other than taxpa	accomp yer or fic	anying schedu luciary) is bas	ules and staten	mation of which p	reparer has a	knowled any knowled	dge and owledge
		6 au	YN P			11/10	110	Vice .	eside	nl	
ere	Sı	gnature of officer or trustee			D-4-	Date	<u></u>	Title	arer's ident	ıfvına	
Sign Here	Paid Preparer's Use Only	Preparer's signature	la 1 -	11	Date OCT	2 6 2010	Check if self-employe	ed ▶ nuḿl	oer (See Sigi 30 of the ins 633138	náture (
"	Paid repare Jse Or	Firm's name (or yours it		MHM, LLC				EIN ▶ 34-1	513062		
	⊆ ⊃	self-employed), address	4040	EMBASSY PARKWAY	SUIT		22 025:	^^	0 660		
		and ZIP code	AKRON	, ОН		443	33-8354	Phone no 33	0-668-		(2000)

2009 THE M. G. O'NEIL FOUNDATION

Akron Rotary Foundation, Akron, O.	1,000.00
Bluecoats, Inc., Akron, O.	250.00
The Christophers, NYC Clara Martin Center, Randolph, Vt.	200.00
First Step Cleaning Co. II, Milford, O.	5,000.00
Keep Akron Beautiful, Akron, O.	1,000.00
LPGA Foundation, Daytona Beach, Fla. Little Flower Conference of St. Vincent dePaul, Coral Gables,Fla.	8,000.00 500.00
Mission Honduras, Chicago, Ill.	600.00
Spring Lake Ranch, Inc., Cuttingsville, Vt. St. Mary's Church, Akron, O. St. Vincent dePaul Society(St. Sebastian Church) Akron, O. St. Vincent dePaul Society (St. Vincent Church) Akron, O.	2,000.00 1,800.00 1,500.00 1,500.00
Weathervane Community Playhouse, Akron, O.	500.00
TOTAL CONTRIBUTIONS	24,850.00

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SECURITIES	
FROM	
INTEREST	
AND	
DIVIDENDS	
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PART I	
990PF,	•
FORM	

NET INVESTMENT INCOME	120.	6,728.
REVENUE AND EXPENSES PER BOOKS	120.	6,728.
DESCRIPTION	FEDERATED GOVERNMENT CASH TRUST ACCOUNT VANGUARD	TOTAL

FORM 990PF, PART I - TAXES

		REVENUE AND
• •		EXPENSES
DESCRIPTION		PER BOOKS
OHIO FILING FEE		100.
FEDERAL EXCISE TAX 2008		1,225.
FEDERAL EXCISE TAX 2009	EST	1,243.
	moma	
	TOTALS	2,568.

PXPENSES SECOND
- OTHER
<u>-</u>
DART
99005
₩ Ω Ω

NET INVESTMENT INCOME 43.	380.
REVENUE AND EXPENSES PER BOOKS 215.	636.
	TOTALS
. POSTAGE	
DESCRIPTION P.O. BOX RENTAL & POSTAGE INVESTMENT FEES	

OTHER INVESTMENTS PART II FORM 990PF,

DESCRIPTION

VANGUARD INDEX TRUST 500 PORT

TOTALS

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BOOK VALUE ENDING

ENDING

238,346.

326,936.

326,936.

238,346.

				-		-
EXPENSE ACCT AND OTHER ALLOWANCES	· .	.0	. 0		. 0	.0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	· O	.0			.0	. 0
COMPENSATION	·		·	. 0	.0	.0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRES. TREAS., TRUSTEE	VICE PRES., TRUSTEE	VICE PRES., SECRETARY, TRUSTEE	TRUSTEE	VICE PRESIDENT, TRUSTEE	TRUSTEE
NAME AND ADDRESS	M.G. O'NEIL 426 RED HAWK DRIVE JUPITER, FL 33477	T.M. HAIDNICK P.O. BOX 730 HUDSON, OH 44236	E.R. DYE P.O. BOX 730 HUDSON, OH 44236	JEAN O'NEIL 426 RED HAWK DRIVE JUPITER, FL 33477	JOE LEYDON P.O. BOX 730 HUDSON, OH 44236	M.G. O'NEIL JR P.O. BOX 730 HUDSON, OH 44236

ATTACHMENT 5 (CONT'D)	EXPENSE ACCT AND OTHER ALLOWANCES	Ö	. 0		. 0	0.
ATTACH	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	Ö	· o	Ö	. 0	0
	COMPENSATION	.0	Ö	ó	.0	0
IST OF OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TRUSTEE	TRUSTEE	TRUSTEE	TRUSTEE	GRAND TOTALS
FORM 990PF, PART VIII - LIST OF OFFICERS,	NAME AND ADDRESS	SHAWN O'NEIL P.O. BOX 730 HUDSON, OH 44236	DR. NANCY O'CONNOR P.O. BOX 730 HUDSON, OH 44236	SEAN O'CONNOR P.O. BOX 730 HUDSON, OH 44236	JANETTE COOK P.O. BOX 730 HUDSON, OH 44236	

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

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

SEE ATTACHED STATEMENT

PURPOSE OF GRANT OR CONTRIBUTION

AMOUNT

ATTACHMENT 7

TO SUPPORT THE CHARITABLE PURPOSE OF THE

ORGANIZATIONS ATTACHED 501(C)(3)

24,850

TOTAL CONTRIBUTIONS PAID

24,850

ATTACHMENT 7

72431Q A10A 10/26/2010

v 09-8 3

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

Form **8868**

(Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File a separate application for each return.

OMB No 1545-1709

internal Revenue 3	elvice	
 If you are f 	ling for an Automatic 3-Month Extension, complete only Part I and check this box	
	ling for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on pag de Part II unless you have already been granted an automatic 3-month extension on a prev	
Part I Auto	matic 3-Month Extension of Time. Only submit original (no copies needed)	
A corporation	equired to file Form 990-T and requesting an automatic 6-month extension - check this b	ox and complete
Part I only		▶
	prations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 70 ome tax returns.	004 to request an extension of
one of the re- electronically i returns, or a c	ng (e-file). Generally, you can electronically file Form 8868 if you want a 3-month auto- curns noted below (6 months for a corporation required to file Form 990-T). However, f (1) you want the additional (not automatic) 3-month extension or (2) you file Forms omposite or consolidated From 990-T. Instead, you must submit the fully completed and be details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for C	er, you cannot file Form 8868 990-BL, 6069, or 8870, group I signed page 2 (Part II) of Form
Type or	Name of Exempt Organization	Employer identification number
print	M.G O'NEIL FOUNDATION	34-6516968
File by the	Number, street, and room or suite no. If a P.O. box, see instructions	
due date for	4040 EMBASSY PARKWAY, SUITE 100	
filing your return See	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
instructions	AKRON, OH 44333	
Check type o	f return to be filed (file a separate application for each return)	
Form 990	Form 990-T (corporation)	m 4720
Form 990	-BL Form 990-T (sec 401(a) or 408(a) trust) For	m 5227
Form 990	EZ Form 990-T (trust other than above) Form	m 6069
X Form 990	PF Form 1041-A Form	m 8870
If the organIf this is for	No ► 330 668-6500 FAX No ► 330 666-8789 Itization does not have an office or place of business in the United States, check this box a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box.	
names and Elf	s of all members the extension will cover	
until	at an automatic 3-month $(6 \text{ months for a corporation required to file Form } 08/15, 2010 = 0.00000000000000000000000000000000$	
2 If this tax	year is for less than 12 months, check reason Initial return Final return	Change in accounting period
=	plication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, dable credits. See instructions	less any 3a \$ 119.
	plication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax p.	
	clude any prior year overpayment allowed as a credit	3b \$ 1,678.
	Due. Subtract line 3b from line 3a Include your payment with this form, or, if required,	
	O coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System	
instructio		3c \$ 0.
	are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EC	10014
for payment in		3
	ct and Paperwork Reduction Act Notice, see Instructions.	Form 8868 (Rev 4-2009)

			•
	(Rev 4-2009)		Page 2
	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo		. ► X
	nly complete Part II if you have already been granted an automatic 3-month extension on a previously file	ea Form 8868	_
	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)		-11
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co		
Type or	Name of Exempt Organization Employer ident		
print	M.G. O'NEIL FOUNDATION 34-65169		
File by the	Number, street, and room or suite no. If a P O box, see instructions For IRS use only	•	
extended due date fo	4040 EMBASSY PARKWAY, SUITE 100		
filing the return See	City, town or post office, state, and ZIP code. For a foreign address, see instructions		
instructions			
Check ty	ype of return to be filed (File a separate application for each return)		
F	orm 990 X Form 990-PF	⊢ −−1	า 6069
Fc Fc	orm 990-BL Form 990-T (sec 401(a) or 408(a) trust) Form 4720	Form	n 8870
	orm 990-EZ Form 990-T (trust other than above) Form 5227		
STOP! D	Do not complete Part II if you were not already granted an automatic 3-month extension on a previ	iously filed Fo	rm 8868.
	ooks are in the care of ROSALIND EDWARDS		
Telepi	hone No ▶ 330 668-6500 FAX No ▶ 330 666-8789		
If the	organization does not have an office or place of business in the United States, check this box		. ▶ 🔃
If this	is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	f this is	
for the v	whole group, check this box ▶ 🔛 If it is for part of the group, check this box ▶ 🔛 and atta	ach a	
list with 1	the names and EINs of all members the extension is for		
4 I re	equest an additional 3-month extension of time until 11/15/2010		
5 Fo	r calendar year <u>2009</u> , or other tax year beginningand ending		
6 If t	If this tax year is for less than 12 months, check reason Initial return Final return Change in accounting period		
7 Sta	State in detail why you need the extension ADDITIONAL TIME IS NEEDED IN ORDER TO GATHER		
TH	THE INFORMATION NECESSARY TO PREPARE A COMPLETE AND ACCURATE RETURN.		
8a If t	this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		
no	nrefundable credits. See instructions	8a \$	119.
b if t	his application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated		
	payments made Include any prior year overpayment allowed as a credit and any amount paid		
pre	eviously with Form 8868	8b \$	1,678.
	lance Due. Subtract line 8b from line 8a Include your payment with this form, or, if required, deposit		
	th FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	8c \$	0.
	Signature and Verification		
Under per	nalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best	of my knowledge	and belief,
	orrect, and complete, and that I am authorized to prepare this form	. 3	•
	\bigcap_{α}		
Signature	► Illa Title ► CPA Date	€ 10-	٠, ٠
2.52.270	CBIZ MHM, LLC	Form 8868 (F	

4040 EMBASSY PARKWAY SUITE 100

AKRON, OH 44333-8354