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Form **990-PF**

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 No 1545-0052

For calendar year 2009, or tax year beginning , and ending						
G Check all that apply: Initial return			Initial return of a fo	rmer public charity	Final retur	n
		Amended return	Address chang	<u>ge</u>	Name change	
Usi	e the	IRS Name of foundation			A Employer identification number	
	label					
Otl	nerwi	se, SNYDER FAMILY FOUNDAT	ION, NFP		35-2274063	3
	print		livered to street address)	Room/suite	B Telephone number	
	r type Spe	SEA DIVICIONAL DIVIAN			309-664-18	814
	ructio	ane City of town, state, and ZIP code			C If exemption application is	
		BLOOMINGTON, IL 61/0	•		D 1. Foreign organization	
H_(_	type of organization: X Section 501(c)(3) ex			Foreign organizations m check here and attach c	computation
ᆫ			Other taxable private founda		E If private foundation st	atus was terminated
		rket value of all assets at end of year J Accounting		Accrual	under section 507(b)(1	I)(A), check here
			her (specify)		F If the foundation is in a	
	- \$	2,653,543. (Part I, colu.) Analysis of Revenue and Expenses	_		under section 507(b)(1	T
Pa	art i	(The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes
		necessarily equal the amounts in column (a).)		income		(cash basis only)
	1 2	Contributions, gifts, grants, etc., received Check I if the foundation is not required to attach Sch. B	493,586.		N/A	
	3	Interest on savings and temporary	46,418.	46,418.		STATEMENT 1
	4	cash investments Dividends and interest from securities	31,278.	31,088.		STATEMENT 2
	l '	Gross rents	31,270.	31,000.		STATEMENT Z
Revenue	l '.'	Net rental income or (loss)				
	١.	Net gain or (loss) from sale of assets not on line 10	31.			
	Ь	Gross sales price for all assets on line 8a 50,036.				
	7	Capital gain net income (from Part IV, line 2)		31.		
æ	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	Ь	Less Cost of State Sole IVED				
	C	Gross profit or (loss)				
	11	Other Income				
	12	Total Add Wheel through Hill (571,313.	77,537.		
	13	Compensation of officers, directore-trustees, etc	0.	0.	_	0.
	14	Other employee satartes and wages		·		
Ś	15	Pension plans, employee benefits				
nses	ı	Legal fees	2 102	2 102		
ğ		Accounting fees STMT 3 Other professional fees	2,182.	2,182.		0.
e	ı	Interest				
at€	ı	Taxes				-
str	l .	Depreciation and depletion		-		
ᇤ	l	Occupancy				
Adr	21	Travel, conferences, and meetings				
P	l - ·	Printing and publications				
Operating and Administrative Expe		Other expenses STMT 4	2,960.	2,935.	–	25.
atır		Total operating and administrative	,			
per		expenses. Add lines 13 through 23	5,142.	5,117.		25.
0	25	Contributions, gifts, grants paid	56,275.			25. 56,275.
	26	Total expenses and disbursements.				
		Add lines 24 and 25	61,417.	5,117.		56,300.
	27	Subtract line 26 from line 12:				
		Excess of revenue over expenses and disbursements	509,896.			
		Net investment income (if negative, enter -0-)		72,420.	·	
9235		Adjusted net income (if negative, enter -0-)			N/A	<u> </u>

NFP

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Form **990-PF** (2009)

35-22<u>74063</u>

Form 990-PF (2009)

SNYDER FAMILY FOUNDATION,

2) Learning the state of the st				How a - Purd - Don		(c) Date (mo.,	acquired day, yr.)	(d) Date sold (mo., day, yr.)			
- Condition				01/07	12/21/09						
	SENERAL FOODS			06/15	/2011						
c F	RATE 7.000_							P	10/	L6/08	09/03/09
<u>d</u>											
<u>e</u>						L					
	(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale					Gain or (loss is (f) minus	
	36.		· · · · · · · · · · · · · · · · · · ·		·					· · ·	36.
<u>b</u>			-								
C	50,000.				50,00	5.					-5.
<u>d</u>											
<u>e</u>)	40.04.00						
	omplete only for assets showing	ig gain in	· · · · · · · · · · · · · · · · · · ·	1						Col. (h) gaın not less tha	
	(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (1), if any			00		s (from col. (
а	·							•			36.
b											
C											-5.
<u>d</u>											
<u>e</u>											
2 Ca	pital gain net income or (net ca	pital loss	If gain, also enter If (loss), enter -0-	in Part I, line in Part I, line	7 7	}	2				31.
3 Ne	t short-term capital gain or (los	ss) as def	ined in sections 1222(5) an	d (6):		`					
	gain, also enter in Part I, line 8,	column ((c)			\				N/A	
Par	loss), enter -0- in Part I, line 8 t V Qualification U	nder S	Section 4940(e) for	Reduced	Tax on Net	Inv	estr	nent Ind	come	N/A	
	ptional use by domestic private		*.*.	•							
				10 TO(a) tax of	not invodencing in	100111	,				
If sect	ion 4940(d)(2) applies, leave th	ns part b	lank.								
Was t	he foundation liable for the sec	tion 4942	tax on the distributable am	ount of any ye	ear in the base per	rıod?					Yes X No
	," the foundation does not qual										
1 Er	iter the appropriate amount in (each colu		actions before	making any entri				i		(4)
Cal	(a) Base period years endar year (or tax year beginnii	ng in)	(b) Adjusted qualifying dist		Net value of no		rıtable			Distrit (col. (b) div	(d) oution ratio vided by col. (c))
	2008			0,272.				6,753			.055492
	2007		8	0,379.		_1	,53	9,779			.052202
	2006			0.).		.000000
	2005										
	2004						-			1	
2 To	tal of line 1, column (d)								2		.107694
	erage distribution ratio for the !	5-vear ba	se period - divide the total o	on line 2 by 5.	or by the number	of ve	ars		-		*107054
	foundation has been in exister		·			•			3	1	.035898
4 En	ter the net value of noncharitab	le-use as	sets for 2009 from Part X, I	ine 5					4		1,977,041.
5 Mι	Iltiply line 4 by line 3								5		70,972.
c [n	tor 10/ of not investment incom	- (40/ 54	Dort Live 07h								724
ם בח	ter 1% of net investment incom	IE (I% O	Part I, line 270)						6	 	724.
7 Ad	d lines 5 and 6								7		71,696.
. , 10	V and V								- '-		1 = 1 0 5 0 6
8 En	ter qualifying distributions from	n Part XII,	, line 4						8	<u> </u>	56,300.
	ne 8 is equal to or greater than e the Part VI instructions.	line 7, cl	neck the box in Part VI, line	1b, and comp	lete that part usin	g a 1	% tax	rate.			
00	and ture vimoliucions.										

Forn	n 990-PF (2009) SNYDER FAMILY FOUNDATION, NFP		<u> 2274</u>			Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 -	- see i	nstru	ctio	ns)
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 letter if necessary-see instructions)		İ			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%	_1_			1,4	48.
	of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3			1,4	48.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			1,4	48.
6	Credits/Payments:					
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 560.					
b	Exempt foreign organizations - tax withheld at source 6b					
c	Tax paid with application for extension of time to file (Form 8868)					
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d	7	İ		5	60.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			_	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			8	88.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be: Credited to 2010 estimated tax	11				
Pa	art VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın			Yes	No
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publishe	d or				
	distributed by the foundation in connection with the activities					
C	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) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				ľ	
	managers. ► \$0 .					
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					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, of	ır				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		_X_
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	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.					
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_	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X_	
	If "Yes," complete Part II, col. (c), and Part XV					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	IL					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			8ь	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar				
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X

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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be I	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:		_		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	. T	es X No	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir	ectly,		
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?		es X No	1 1
(4) Provide a grant to an organization other than a charitable, etc., organization				
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses or			
the prevention of cruelty to children or animals?	or oddodnonar purpoods, or		es X No	}
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the excentions described		3 (2) 110	
section 53.4945 or in a current notice regarding disaster assistance (see instru		iii riogalations	N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	•			30
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for		unad		
• • • • • • • • • • • • • • • • • • • •				
expenditure responsibility for the grant?		I/A L Ye	es L No	
If "Yes," attach the statement required by Regulations section 53 494				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		[32]	
a personal benefit contract?		Ye	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Ye	es 🗶 No 📙	
b If yes, did the foundation receive any proceeds or have any net income attribut				7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	anagers, Highly	y	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowances
JACK SNYDER	DIRECTOR	,		
1 BRICKYARD DRIVE				
BLOOMINGTON, IL 61701	0.00	0.	0.	0.
	DIRECTOR			
1 BRICKYARD DRIVE	I			
BLOOMINGTON, IL 61701	0.00	0.	0.	0.
BEOOMINGION, ID 01701	0.00		0.	
			ļ	
			İ	
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	enter "NONE "		
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter NONE.	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	account, other allowances
NONE	devoted to position		compensation	ano mandes
HOME				
	-			
				
		 		
			<u> </u>	
Total number of other employees paid over \$50,000			<u> </u>	0

Form 990-PF (2009) SNYDER FAMILY FOUNDATION, NFP		<u> 2274063 </u>	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation M Paid Employees, and Contractors (continued)	anagers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE	, n		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Com	ensation
NONE			
		_	
Total number of others receiving over \$50,000 for professional services		<u> </u>	0
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 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			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	d 2.	Amount	
1 <u>N/A</u>			
2	-		
All other program-related investments. See instructions.			
an other program-related investments. See instructions.			
·			
Total Add lines 1 through 3	b	· · ·	0.

P	art X Minimum Investment Return (All domestic foundations must	complete this part. Foreign four	ndations	s, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, et	c purposes:		
·	Average monthly fair market value of securities	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1a	1,603,123.
b	Average of monthly cash balances		1b	404,025.
C	Fair market value of all other assets		1c	
d	Total (add lines 1a, b, and c)		1d	2,007,148.
e	Reduction claimed for blockage or other factors reported on lines 1a and			
•	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	2,007,148.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	instructions)	4	30,107.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Par	·	5	1,977,041.
6	Minimum investment return. Enter 5% of line 5	,	6	98,852.
=	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j) foreign organizations check here and do not complete this part.)	(5) private operating foundations an	id certain	
1	Minimum investment return from Part X, line 6	<u>, </u>	1	<u>98,852.</u>
2a	Tax on investment income for 2009 from Part VI, line 5	1,448.		
b	Income tax for 2009. (This does not include the tax from Part VI.)			
C	Add lines 2a and 2b		2c	1,448.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	97,404.
4	Recoveries of amounts treated as qualifying distributions		4	<u>0.</u>
5	Add lines 3 and 4		5	97,404.
6	Deduction from distributable amount (see instructions)		6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	line 1	7	97,404.
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpose	s:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	<u>56,300.</u>
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, e	tc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:			
а	Suitability test (prior IRS approval required)		3a	
b	Cash distribution test (attach the required schedule)		3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part V, line 8, an	art XIII, line 4	4	56,300.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	ent		
	income. Enter 1% of Part I, line 27b		5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	56,300.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when 4940(e) reduction of tax in those years.	calculating whether the foundation o	qualifies f	for the section

Part XIII Undistributed Income (see instructions)

·				
	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
Distributable amount for 2009 from Part XI, line 7	····	·		97,404.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005				
c From 2006				
d From 2007 26,718.				
e From 2008 10,030.	26 740			
f Total of lines 3a through e	36,748.			
4 Qualifying distributions for 2009 from Part XII, line 4: ►\$56,300.				
			0.	
a Applied to 2008, but not more than line 2a b Applied to undistributed income of prior	+			
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2009 distributable amount				56,300.
e Remaining amount distributed out of corpus	0.			007.0.0.
Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	36,748.			36,748.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must				4 256
be distributed in 2010				4,356.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	0.			
section 170(b)(1)(F) or 4942(g)(3)	<u> </u>			
8 Excess distributions carryover from 2004	0.			
not applied on line 5 or line 7				· · ·
9 Excess distributions carryover to 2010 Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:	0.			
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				

	art XIV Private Operating Fo	NUNDATIONS (See ins			N/A	2/4063 Page 10			
_	<u></u>			-x, question 5)	N/A				
1 8	If the foundation has received a ruling of								
	foundation, and the ruling is effective for 2009, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)								
	i de la companya de la companya de la companya de la companya de la companya de la companya de la companya de		ig touridation described i	Prior 3 years	4942(j)(3) or4	942(j)(5)			
2 8	a Enter the lesser of the adjusted net	Tax year (a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total			
	income from Part I or the minimum	(4) 2000	(0) 2000	(6) 2007	(4) 2000	(6) 10141			
	investment return from Part X for								
	each year listed								
	a 85% of line 2a	·	· -			<u> </u>			
(Qualifying distributions from Part XII,								
	line 4 for each year listed								
•	Amounts included in line 2c not								
	used directly for active conduct of								
	exempt activities								
•	Qualifying distributions made directly								
	for active conduct of exempt activities.								
3	Subtract line 2d from line 2c Complete 3a, b, or c for the								
J	alternative test relied upon:								
â	"Assets" alternative test - enter:								
	(1) Value of all assets								
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)								
t	"Endowment" alternative test - enter								
	2/3 of minimum investment return		1						
	shown in Part X, line 6 for each year listed								
	"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	art XV Supplementary Info	•	•	if the foundat	ion had \$5,000 or m	ore in assets			
	at any time during t	he year-see the i	nstructions.)						
1	Information Regarding Foundation	n Managers:							
a	List any managers of the foundation who			ibutions received by	the foundation before the clo	ose of any tax			
	year (but only if they have contributed m	ore than \$5,000). (See so	ection 507(d)(2).)						
	NE								
t	List any managers of the foundation who			or an equally large p	ortion of the ownership of a p	partnership or			
	other entity) of which the foundation has	a 10% of greater interes	il.						
	NE								
2	Information Regarding Contribution								
	Check here X if the foundation of the foundation makes gifts, grants, etc. (
			<u>-</u>		s, complete items za, o, c, an				
a	The name, address, and telephone numb	iei oi trie person to whon	ii appiications snouid de i	auuresseu.					
b	The form in which applications should be	e submitted and informat	ion and materials they sh	ould include:					
						 .			
C	Any submission deadlines:								
ď	d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:								

3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
	,			
SEE STATEMENT 9 Total		<u> </u>	▶ 3a	56,275.
b Approved for future payment				307273.
NONE				
Total		<u></u>	_ > 3b	0.

35-2274063 SNYDER FAMILY FOUNDATION, NFP Page 12 Part XVI-A **Analysis of Income-Producing Activities** Unrelated business income Excluded by section 512, 513, or 514 Enter gross amounts unless otherwise indicated. (e) (c) Exclu (a) Business Related or exempt (b) (d) Amount sion function income **Amount** 1 Program service revenue: code g Fees and contracts from government agencies 2 Membership dues and assessments 3 Interest on savings and temporary cash 46,418. 31,278. 14 investments 14 4 Dividends and interest from securities 5 Net rental income or (loss) from real estate: a Debt-financed property b Not debt-financed property 6 Net rental income or (loss) from personal property 7 Other investment income 8 Gain or (loss) from sales of assets other than inventory 18 31 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue: 77,727 0 12 Subtotal. Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of Line No

the foundation's exempt purposes (other than by providing funds for such purposes). \blacksquare

	ın sec	tion 501(c) of the Code (other than section 501(c)(3))	or in section 527?			Yes X No
	b If "Yes	s," complete the following schedule.				
		(a) Name of organization	(b) Type of organization		(c) Description	n of relationship
		N/A				-
		·				-
						1212
		enalties of perjury, I declare that I have examined this return, inc				and belief, it is true, correct,
	and com	npleto Declaration of presarer (other than taxpayer or fiduciary) i	s based on all information of which prepare	r has any knowled	ige	
		XCOULLUM LA	15-7-10	► PRE	SIDENT	
Here	Sı	gnature of officer or trustee	Date	Title		
Ĭ		Preparer's		Date	Check if	Preparer's identifying number
Sign	id irer's Only	signature		5-6-10	self- employed > [
•,	Paid Preparer Use Onl	Firm's name (or yours DUNBAR, BREITWE	ISER & COMPANY,	LLP	EIN ▶	
	Use P	if self-employed). 202 NORTH CENTE	•			
	4-	address, and ZIP code PT. COMTNOTON TI			Dhona no	(309) 827-0349

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

Employer identification number Name of the organization SNYDER FAMILY FOUNDATION, NFP 35-2274063 Organization type (check one) Section: Filers of: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II ___ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990 EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III 🔟 For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively

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

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

religious, charitable, etc., contributions of \$5,000 or more during the year

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

▶ \$

Schadula	P /Earm 000	000 E7 or	990-PF) (2009)	
3CH IECUIE	, ערטיווו ששט	890-EZ, U	990-77 (2009)	

Page 1 of 1 of Part I

Name of organization

Employer identification number

SNYDER FAMILY FOUNDATION, NFP

35-2274063

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	JACK & JEAN SNYDER 1 BRICKYARD DRIVE BLOOMINGTON, IL 61701	\$\$.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Occupate Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

SNYDER FAMILY FOUNDATION, NFP

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Noncash Property (see instructions)		
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
12,741 SHARES OF COMMERCE BANCSHARES, INC.		
	\$ 493,586.	12/07/09
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
	Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given	Description of noncash property given 12,741 SHARES OF COMMERCE BANCSHARES, INC. (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (f) FMV (or estimate) (see instructions) (h) Description of noncash property given (c) FMV (or estimate) (see instructions)

MESH & COMPANY - FREESTAR TRUST 91	FORM 990-PF INTEREST ON SAVI	INGS A	AND TEM	PORARY C	ASH IN	NVESTMENTS	STATEMENT	1
CITI SMITH BARNEY - ACCRUED INTEREST PURCHASED -3,436	SOURCE						AMOUNT	
FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT SOURCE GROSS AMOUNT DIVIDENDS AMOUNT CITI SMITH BARNEY 6,992. 0. 6,992 MESH & COMPANY - FREESTAR TRUST 24,286. 0. 24,286 TOTAL TO FM 990-PF, PART I, LN 4 31,278. 0. 31,278 FORM 990-PF ACCOUNTING FEES STATEMENT (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITABLE DESCRIPTION PER BOOKS MENT INCOME NET INCOME PURPOSES ACCOUNTING 2,182. 2,182.	CITI SMITH BARNEY - ACCRUED I FREESTAR BANK MESH & COMPANY - FREESTAR TRU PNC BANK		EST PUR	CHASED			-3,4 3	30. 79. 42. 30.
SOURCE GROSS AMOUNT DIVIDENDS AMOUNT CITI SMITH BARNEY MESH & COMPANY - FREESTAR TRUST TOTAL TO FM 990-PF, PART I, LN 4 CITI SMITH BARNEY ACCOUNTING FEES (A) EXPENSES NET INVEST- ADJUSTED CHARITABIN PER BOOKS MENT INCOME NET INCOME PURPOSES ACCOUNTING 2,182. 2,182. CAPITAL GAINS COLUMN (A) 6,992 0. 6,992 0. 6,992 0. 24,286 0. 24,286 0. 31,278 COLUMN (A) (B) (C) (D) CHARITABIN DESCRIPTION 2,182. COLUMN (A) AMOUNT (A) (B) (C) (D) CHARITABIN DESCRIPTION (A) (B) (C) (D) (D) (D) (D) (D) (D) (D	TOTAL TO FORM 990-PF, PART I	, LINE	3, CO	LUMN A			46,4	18.
GROSS AMOUNT DIVIDENDS AMOUNT	FORM 990-PF DIVIDENI	OS ANI) INTER	EST FROM	SECUE	RITIES	STATEMENT	2
MESH & COMPANY - FREESTAR TRUST 24,286. 0. 24,286. TOTAL TO FM 990-PF, PART I, LN 4 31,278. 0. 31,278 FORM 990-PF ACCOUNTING FEES STATEMENT (A) (B) (C) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D	SOURCE		GROSS	AMOUNT)
FORM 990-PF (A) (B) (C) EXPENSES NET INVEST- ADJUSTED CHARITABI PER BOOKS MENT INCOME NET INCOME PURPOSES ACCOUNTING 2,182. 2,182.		JST						
(A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARITABI PER BOOKS MENT INCOME NET INCOME PURPOSES ACCOUNTING 2,182. 2,182.	TOTAL TO FM 990-PF, PART I, I	LN 4		31,278.		0.	31,2	78.
EXPENSES NET INVEST- ADJUSTED CHARITABI PER BOOKS MENT INCOME NET INCOME PURPOSES ACCOUNTING 2,182. 2,182.	FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	3
	DESCRIPTION	EXPE	ENSES	NET INV	-	ADJUSTED	CHARITA	
TO FORM 990-PF, PG 1, LN 16B 2,182. 2,182.	ACCOUNTING		2,182.	2	,182.			0.
	TO FORM 990-PF, PG 1, LN 16B		2,182.	2	,182.			0.

ORM 990-PF OTHER EXPENSES			STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
TRUST FEES BANK FEES REGISTRATION FEES	2,692. 243. 25.		•	(0. 0. 5.
TO FORM 990-PF, PG 1, LN 23	2,960.	2,935	•	2!	5.
FORM 990-PF OTHER INCREASES	IN NET ASS	ETS OR FUND	BALANCES	STATEMENT	5
DESCRIPTION				AMOUNT	
REFUND OF 990-PF OVERPAYMENT NONTAXABLE INTEREST				4,732	2. 1.
TOTAL TO FORM 990-PF, PART II	i, LINE 3			4,74	3.
FORM 990-PF OTHER DECREASE	S IN NET AS	SETS OR FUND	BALANCES	STATEMENT	6
DESCRIPTION				AMOUNT	
UNREALIZED LOSS ON INVESTMENT	'S DURING 20	09		25,65	4.
TOTAL TO FORM 990-PF, PART II	I, LINE 5			25,654	4.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT	7
DESCRIPTION		В	OOK VALUE	FAIR MARKET VALUE	
COMMERCE BANCSHARES JP MORGAN CHASE & CO. PRUDENTIAL FINANCIAL INC. BB&T CAPITAL TRUST AMEREN CORP DUKE ENERGY VERIZON MFS INTERMEDIATE INC. FPL CAPITAL GROUP, INC.			1,521,812. 56,480. 53,100. 53,720. 27,950. 25,815. 28,326. 23,450. 57,580.	1,521,812 56,480 53,100 53,720 27,950 25,819 28,320 23,450 57,580	0. 0. 0. 5. 6.

SNYDER FAMILY FOUNDATION, NFP		35-2274063	
METLIFE MORGAN STANLEY	48,020. 50,408.	48,020 50,408	
TOTAL TO FORM 990-PF, PART II, LINE 10B	1,946,661.	1,946,661.	
FORM 990-PF CORPORATE BONDS		STATEMENT 8	
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE	
AMERICAN EXPRESS GE CAP CORP MEDIUM TERM CITIGROUP INC. GOLDMAN SACHS GROUP INC. GENERAL FOODS CORP JOHNSON CONTROLS WHIRLPOOL CORP. RR DONNELLEY DOW CHEMICAL FORTUNE BRANDS, INC. HORACE MANN COUNTRYWIDE FINANCIAL MARRIOTT	53,658. 50,416. 52,785. 53,022. 0. 52,471. 51,966. 50,240. 53,729. 49,767. 24,910. 50,858. 25,252.	53,658. 50,416. 52,785. 53,022. 0. 52,471. 51,966. 50,240. 53,729. 49,767. 24,910. 50,858. 25,252.	
TOTAL TO FORM 990-PF, PART II, LINE 10C	569,074.	569,074.	

FORM 990-PF

STATEMENT 9

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
ALZEIMER'S ASSOCIATION P.O. BOX 806457 CHICAGO, IL 606804125	NONE SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	PUBLIC	50.
BOY SCOUTS OF AMERICA - PRAIRIELAND 305 WOODBURY DANVILLE, IL 61834	NONE SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	PUBLIC	10,000.
BOY SCOUTS OF AMERICA - W.D. BOYCE 614 N.E. MADISON PEORIA, IL 61603	NONE SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	PUBLIC	2,500.
CHILDREN'S HOME+AID CHILDREN'S FOUNDATION 403 SOUTH STATE STREET BLOOMINGTON, IL 617015556	NONE SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	PUBLIC	25.
COMMUNITY HEALTH CARE CLINIC 902 FRANKLIN AVENUE NORMAL, IL 61761	NONE SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	PUBLIC	150.
FIRST CHRISTIAN CHURCH 401 WEST JEFFERSON BLOOMINGTON, IL 617013899	NONE SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	PUBLIC	12,000.
GIRL SCOUTS OF CENTRAL ILLINOIS 3020 BAKER DRIVE SPRINGFIELD, IL 62703	NONE SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	PUBLIC	100.
GOOD FELLOW FUND 301 W. WASHINGTON, ST. BLOOMINGTON, IL 61701	NONE SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	PUBLIC	100.

GRANTS AND CONTRIBUTIONS
PAID DURING THE YEAR

SNYDER FAMILY FOUNDATION, NFP			35-2274063
GULF COAST SCHOLASTIC SHOOTERS, INC. P.O. BOX 802 NOKOMIS, FL 342740802	NONE SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	PUBLIC	1,000.
HOME SWEET HOME MINISTRIES, INC 410 N. MAIN STREET BLOOMINGTON, IL 617013914	NONE SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	PUBLIC	250.
HUMANE SOCIETY OF CENTRAL ILLINOIS P.O. BOX 401 BLOOMINGTON, IL 617020401	NONE SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	PUBLIC	100.
ILLINOIS STATE UNIVERSITY FOUNDATION CAMPUS BOX 8000 NORMAL, IL 617908000	NONE SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	PUBLIC	25,000.
ILLINOIS WESLEYAN UNIVERSITY P.O. BOX 2900 BLOOMINGTON, IL 617022900		PUBLIC	50.
LAND OF LINCOLN GOODWILL INDUSTRIES, INC. 401 GREENBRIAR DR. NORMAL, IL 61761	NONE SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	PUBLIC	100.
MISHAWAKA FOUNDATION C/O STEPHEN SNYDER 1 BRICKYARD DRIVE BLOOMINGTON, IL 61701	SUPPORT OF	PUBLIC	3,000.
SECOND PRESBYTERIAN CHURCH 313 NORTH EAST STREET BLOOMINGTON, IL 61701	NONE SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	PUBLIC	50.
SPECIAL OLYMICS 605 EAST WILLOW STREET NORMAL, IL 617612682	NONE SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	PUBLIC	200.
THE ILLINOIS PRARIE COMMUNITY FOUNDATION 202 N PROSPECT ROAD BLOOMINGTON, IL 61704	NONE SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	PUBLIC	250.

. SNYDER FAMILY FOUNDATION, NFP			35-2274063
THE SALVATION ARMY 611 WEST WASHINGTON STREET BLOOMINGTON, IL 61701	NONE SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	PUBLIC	1,100.
THE SMILE TRAIN 41 MADISON AVE, FLOOR 28 NEW YORK, NY 10010	NONE SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	PUBLIC	250.
TOTAL TO FORM 990-PF. PART XV. L	INE 3A		56.275.