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Form 990-PF

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

OMB No 1545-0052

2009

Department of the Treasury Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements Internal Revenue Service and ending For calendar year 2009, or tax year beginning Final return Initial return Initial return of a former public charity G Check all that apply Name change Amended return Address change A Employer identification number Use the IRS Name of foundation 36-3745791 label. Telephone number (see page 10 of the instructions) WEIGLE FAMILY FOUNDATION Otherwise. print Number and street (or P O box number if mail is not delivered to street address) Room/suite 563-355-2671 2611 STATE STREET or type. If exemption application is pending, check here See Specific D 1. Foreign organizations, check here City or town, state, and ZIP code Instructions. IA 52722 BETTENDORF 2 Foreign organizations meeting the 85% test, check here and attach computation Check type of organization | X | Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here J Accounting method X Cash Fair market value of all assets at end of year (from Part II, col (c), Other (specify) If the foundation is in a 60-month termination under section 507(b)(1)(B), check here 265,221 (Part I, column (d) must be on cash basis) line 16) ▶ \$ Part.I Analysis of Revenue and Expenses (The (a) Revenue and (d) Disbursements (b) Net investment (c) Adjusted net for charitable expenses per total of amounts in columns (b), (c), and (d) may not necessarily equal hooks income income purposes the amounts in column (a) (see page 11 of the instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 115,543 1 Check ▶ if the foundation is **not** required to attach Sch B 2 37 37 Interest on savings and temporary cash investments 3 5,489 5.489 Dividends and interest from securities 4 5a Gross rents م الله و الماس الاستان المنافذ الاستان الاستا Net rental income or (loss) Revenue STMT 1 888 Net gain or (loss) from sale of assets not on line 10 117 89,038 Gross sales price for all assets on line 6a b 0 Capital gain net income (from Part IV, line 2) 4 12 To 1 414 : Net short-term capital gain 8 . 414 9 Income modifications Gross sales less returns & allowances 10a Less Cost of goods sold Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 121,957 5,526 12 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc CAMPED and Addinistrative Expenses Other employee salaries and wages 14 15 Pension plans, employee benefits 610 Legal fees (attach schedule) SEE STMT 2 16a Accounting fees (attach schedule) Other professional fees (attach schedule) 17 Taxes (attach schedule) (see page 14 of the instructions) STMT 3 90 18 19 Depreciation (attach schedule) and depletton BECEIVED Travel, conferences, and meetings 21 Printing and publications 22 Other expenses (alt. sch) 2 23 Total operating and administrative expenses. Add lines 13 through 23 N. 700 0 180,507 180,507 Contributions, gifts, grants paid 25 180,507 0 0 181,207 Total expenses and disbursements. Add lines 24 and 25 26 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements -59,250 5,526 Net investment income (if negative, enter -0-) 0 Adjusted net income (if negative, enter -0-)

Form 990-PF (2009) (

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of the instructions) Part III Analysis of Changes in Net Assets or Fund Balances	7		· · · · ·	365,749	306,499	
of the instructions) iPart III Analysis of Changes in Net Assets or Fund Balances 1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5	ž	31	,		-	1
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5			· · · · ·	365,749	306,499	
end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5		Part '	II Analysis of Changes in Net Assets or Fund Balances			
2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5	1	Tota	I net assets or fund balances at beginning of year—Part II, column (a), line 30 (mu	ust agree with		
3 Other increases not included in line 2 (itemize) ▶ 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ 5		end-	of-year figure reported on prior year's return)		1	
4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► 5	2	Ente	r amount from Part I, line 27a		2	-59,250
5 Decreases not included in line 2 (itemize) ▶ 5	3	Othe	er increases not included in line 2 (itemize)		3	
	4				4	306,499
6. Total net assets or fund balances at end of year (line 4 minus line 5)—Part II. column (b), line 30			·			
Form 990-PF (2009)	_6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)—Part II, column	(b), line 30		306,499

2	<u>_</u>	2-	7 /	E -	791	
	n -		, 4		91	

	FAMILY FOUNDATION		36-3745791		Page
	nd Losses for Tax on Investme	ent incor	ne (b) How acquired	(-) 5	
(a) List and describ 2-story brick ware	be the kind(s) of property sold (e.g., real estate, ehouse, or common stock, 200 shs MLC Co.)		P—Purchase D—Donation	(c) Date act	
a N/A					
b					
c					
d					
e					
(e) Gross sales pnce	(f) Depreciation allowed (or allowable)	_	(g) Cost or other basis plus expense of sale	((h) Gain or (loss) e) plus (f) minus (g)
a					
b					
		_			
<u> </u>					
Complete only for assets showing	I ng gain in column (h) and owned by the fo	undation (on 12/31/69		
(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)	ains (Col (h) gain minus), but not less than -0-) or .osses (from col (h))
ab					
C					=
d .					<u> </u>
					
01-1	If gain, also enter in	Part I, line	7 7		
Capital gain net income or (net	If (loss), enter -0- in	Part I, line	7	2	
Net short-term capital gain or (lo	oss) as defined in sections 1222(5) and (6	3)			
If gain, also enter in Part I, line	8, column (c) (see pages 13 and 17 of the	e instructio	ns)		
If (loss), enter -0- in Part I, line			<u></u>	3	· · · · · · · · · · · · · · · · · · ·
	Inder Section 4940(e) for Reduc			me	
or optional use by domestic priva	te foundations subject to the section 4940	J(a) tax on	net investment income)		
section 4940(d)(2) applies, leave	this part blank				
as the foundation liable for the se	ction 4942 tax on the distributable amour	nt of any ye	ear in the base period? 🔲 Yo	es 🗓 No	
"Yes," the foundation does not qu	alify under section 4940(e) Do not comp	lete this pa	rt .		
Enter the appropriate amount in	each column for each year, see page 18	of the ins	tructions before making any er	itries	
(a)	(b)		(c)		(d) Distribution ratio
Base period years Calendar year (or tax year beginnir	Advisted avalifiand distribute	ns	Net value of noncharitable-use as	sets	(col (b) divided by col (c))
2008	203	,148	350,	445	0.57968
2007		,422	384,		0.18293
2006		,710	321,		0.30044
2005		, 925	344,		0.19430
2004	55	,918	320,	863	0.17427
? Total of line 1, column (d)				2	1.43163
· ·	e 5-year base period—divide the total on	-	, or by the		0.0000
number of years the foundation	has been in existence if less than 5 year	rs		3	0.28632
					000 66
4 Enter the net value of nonchar	table-use assets for 2009 from Part X, lin	e 5		. 4	230,60
					66.05
Multiply line 4 by line 3				5	66,03
				1.	
6 Enter 1% of net investment inc	ome (1% of Part I, line 27b)			6	5
				_	66,08
7 Add lines 5 and 6				7	1 00,00
a Paraganaténa datah kac	om Dod VII. line 4			8	180,50
8 Enter qualifying distributions fr		h and	onlote that work warms = 40/ torr		
•	nan line 7, check the box in Part VI, line 1	u, and cor	ipiete that part using a 1% tax	rate See In	IC
Part VI instructions on page 18)				

orm !	990-PF (2009) WEIGLE FAMILY FOUNDATION 36-3745791					Pa	ige 4
	nt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of	he	instru	ictions)			
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	٦Ţ			•		
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)	11					
	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1				55
	here X and enter 1% of Part I, line 27b						
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of	ل	I				
	Part I, line 12, col (b)		-		•		
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2				0
	Add lines 1 and 2	- 1	3				55
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4				0
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5				55
	Credits/Payments		. ,				
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a	- 1	· ·				
	Exempt foreign organizations—tax withheld at source 6b		,				
	Tax paid with application for extension of time to file (Form 8868) 6c						
	Backup withholding erroneously withheld 6d 6d		١.	}			
	Total credits and payments Add lines 6a through 6d		7			- , -	
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		8		-		
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	9				55
	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				
	nt WII-A Statements Regarding Activities			<u></u>			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it					Yes	No
	participate or intervene in any political campaign?				1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19						
-	of the instructions for definition)?				1 _b		X
	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						
c	Did the foundation file Form 1120-POL for this year?				1c	اسہ	х
						3	
_	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				n (
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					,	
•	on foundation managers > \$:	1	- ,
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				5	;	}
	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
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					<u> </u>	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				3	,	1
•	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	1-
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	d Pa	art XV		7	X	\vdash
, 8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the				<u> </u>		-
Ja	Instructions) IA				1	'	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					j :	
.,	(or designate) of each state as required by General Instruction G? If "No," attach explanation				8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					<u> </u>	
-	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page				'		1
	27)? If "Yes," complete Part XIV				9	1	x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their						
	names and addresses				10	1	x

Form **990-PF** (2009)

orm	990-PF (2009) WEIGLE FA	MILY	FOUNDAT	ION	36-374579	1			Pa	ge 5
	rt VII-A Statements Reg						· · · · · · · · · · · · · · · · · · ·			
11	At any time during the year, did the found	ation, dire	ctly or indirectly, o	wn a controlled	entity within the					
	meaning of section 512(b)(13)? If "Yes,"						1	11		<u>X</u>
12	Did the foundation acquire a direct	or indired	t interest in any	applicable ins	surance contract before				ŀ	
	August 17, 2008?							12		<u>x</u> _
13	Did the foundation comply with the	public ins	spection require	ments for its a	annual returns and exemption applic	ation?	Į	13	X	
	Website address ► N/A						F (2 2	E		
14			WEIGLE	i	Tele	phone no 🕨	263-3	35-4	267.	L
	2611 STAT					=15.4 b	52722			
	Located at ▶ BETTENDOR	•			CT 4044 Obselvberg	ZIP+4 ▶	52122			
15	Section 4947(a)(1) nonexempt cha		=			. I	ا ء		•	
iD.	and enter the amount of tax-exemp						15			
- 1 P (2					orm 4720 May Be Required	<u> </u>			Yes	No
4	File Form 4720 if any item is ched				ехсерион аррнеѕ.				165	NO
1a	During the year did the foundation (1) Engage in the sale or exchange				find norcon?	Yes	X No	3	4	
	(2) Borrow money from, lend money					163	<u> </u>	i	- 4	
	disqualified person?	sy (0, 0) t	otherwise exteri	a credit to (or	accept it noin, a	Yes	X No	i	- 4	•
	(3) Furnish goods, services, or fac	ulities to i	or accept them	from) a disqui	alified nerson?	Yes	X No X No	1	3	
	(4) Pay compensation to, or pay o					Yes	X No	Ì		-
	(5) Transfer any income or assets								- 1	
	the benefit or use of a disqualit			(5		Yes	X No		- 1	;
	(6) Agree to pay money or propert			al? (Exception	. Check "No" if the			1	- [
	foundation agreed to make a g								٠. ،	
	termination of government sen					Yes	X No	•	- 1	
þ	If any answer is "Yes" to 1a(1)-(6),	did any	of the acts fail to	o qualify unde	r the exceptions described in Regula	ations			أسيا	
	section 53 4941(d)-3 or in a curren						N/A	1b		
	Organizations relying on a current	notice re	garding disaste	r assistance c	heck here		▶ 🗌		1	
С	Did the foundation engage in a price	or year in	any of the acts	described in	a, other than excepted acts, that			, ,	Ĺ.	
	were not corrected before the first	day of th	e tax year begir	nning in 2009?			N/A	1c		
2	Taxes on failure to distribute incon	ne (sectio	on 4942) (does	not apply for y	ears the foundation was a private			r 7	, ,	!
	operating foundation defined in se	ction 494	2(j)(3) or 4942(j)(5))				1		-
а	At the end of tax year 2009, did the	e foundat	ion have any ui	ndistributed in	come (lines 6d and		E21	, ;	, 1	
	6e, Part XIII) for tax year(s) beginn	ing befor	re 2009?			Yes	X No		,	
	If "Yes," list the years ▶ 20	, 20	, 20	, 20] ;	1	. •.`
b					he provisions of section 4942(a)(2)			ŀ	ı	
	· •	-	-		ne? (If applying section 4942(a)(2) t	0	37/7			
	all years listed, answer "No" and a		•	_			N/A	2b		
С	If the provisions of section 4942(a			any of the year	ars listed in 2a, list the years here			ا ا		
٥.	▶ 20 , 20 , 20	, 20		staroot in only	huainaga antarariaa					Ì
3a		a 2% uii	ect or indirect ii	nterest in any	business enterprise	Yes	X No	,	[,	
_	at any time during the year?	ee boldin	ue in 2000 ac a	result of (1) a	ny nurchaea by the foundation or	[] 163	140	1		İ
b			-		d (or longer period approved by the]	1	
					by gift or bequest, or (3) the lapse	of		'	!	Ì
	the 10-, 15-, or 20-year first phase		•	- :						
	foundation had excess business h	_					N/A	3b	-	
4a		_		manner that w	ould jeopardize its charitable purpo	ses?	= ,-	4a		x
b	_		-		iber 31, 1969) that could jeopardize				:	
	•				first day of the tax year beginning in			4b	1	x

Form 990-PF (2009) WEIGLE FAMILY FOUNDATION		745791		Pa	ge 6
Part VII-B Statements Regarding Activities for Which Form	4720 May Be R	equired (conti	nued)		
5a During the year did the foundation pay or incur any amount to		_]	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	<u> </u>	es 🗓 No		
(2) Influence the outcome of any specific public election (see section 4955), or	to carry on,		Ì	1 1	
directly or indirectly, any voter registration drive?		Y	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?		Пү	es 🗓 No	1 1	
(4) Provide a grant to an organization other than a charitable, etc., organization			_		
section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the ins		ПУ	es X No	4	
(5) Provide for any purpose other than religious, charitable, scientific, literary, of		□.	63 [23] 110	1 1	
· · · · · · · · · · · · · · · · · · ·	or educational	\sqcap	es X No		
purposes, or for the prevention of cruelty to children or animals?			es X No	4 1	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc			37/3		
Regulations section 53 4945 or in a current notice regarding disaster assistance		e instructions)?	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	nere		▶ 📋		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax	. –	_	- 1 . [
because it maintained expenditure responsibility for the grant?		N/A 📙 Y	es No	4 1	
If "Yes," attach the statement required by Regulations section 53 4945-5(d)					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums			1 1	
on a personal benefit contract?	• •	Пу	es X No	1 1	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contr			6b	x
If "Yes" to 6b, file Form 8870	Croonar bonom com	uot	j	- 55 /	
·	haltar transaction?		es 🕱 No	1 1	
7a At any time during the tax year, was the foundation a party to a prohibited tax s				: 	
b If yes, did the foundation receive any proceeds or have any net income attribut			N/A	7b	
Part VIII Information About Officers, Directors, Trustees, F	oundation wan	agers, Hignly	Paid Employe	es,	
and Contractors	 		<u></u>		
1 List all officers, directors, trustees, foundation managers and their compens	ation (see page 22	of the instruction	s).		
	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Evanges es	lanua d
(a) Name and address	hours per week	(If not paid, enter	employee benefit plans and deferred	(e) Expense ac other allowan	
	devoted to position	-0-)	compensation		
SEE STATEMENT 5			"	1	
				1	
		·			
			· ···· ·		
		 		 	
	<u> </u>			<u> </u>	
2 Compensation of five highest-paid employees (other than those included	on line 1 see page	23 of the instruc	tions).		
If none, enter "NONE."					
	(b) Title, and average		(d) Contributions to		
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expense ac	
	devoted to position		compensation	Ouridi dilotta	
NONE					
				 	
•					
		 	 	 	
	1		1		
	 	 	 	 	_
			1		
	<u> </u>		 	<u> </u>	
		L	<u> </u>		
Total number of other employees paid over \$50,000				>	
			Fo	m 990-PF	(2009

	09) WEIGLE FAMILY FOUNDATION	36-3745791	Page
Part VIII	Information About Officers, Directors, Trustees, Fo	oundation Managers, Highly Paid Em	iployees,
	and Contractors (continued)	22 of the instructions) If none orter "NO	ME "
3 Five highes	st-paid independent contractors for professional services (see p		
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
			
			
Fatal number of	others recovered over \$50,000 for professional sequences		
otal number of	others receiving over \$50,000 for professional services		
Part IX-A	Summary of Direct Charitable Activities		
1 set the few adets	on's four largest direct charitable activities during the tax year. Include relevant s	totictical information such as the number of	
organizations and	d other beneficiaries served, conferences convened, research papers produced	, etc	Expenses
1 N/A		<u> </u>	
I M/A			
2			
4			
3			
3			
4			
7			
Part IX-B	Summary of Program-Related Investments (see	page 24 of the instructions)	
	plargest program-related investments made by the foundation during the tax year		Amount
1 N/A			
,,,,,			
2			
-			
		,	
All other program	m-related investments. See page 24 of the instructions		
3	m related in realistic doo page 2 . of the medianis		
Ū			

Total. Add lines 1 through 3

Pa	Int X Minimum Investment Return (All domestic foundations must complete this part. Fore	eign f	oundations,
	see page 24 of the instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		•
	purposes	_	
а	Average monthly fair market value of securities	1a	227,746
b	Average of monthly cash balances	1b	6,374
С	Fair market value of all other assets (see page 24 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	234,120
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0		_
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	_3_	234,120
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	3,512
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	230,608
6	Minimum investment return. Enter 5% of line 5	6	11,530
Pa	Int.XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of	peratıı	ng
	foundations and certain foreign organizations check here and do not complete this part)	 	
1	Minimum investment return from Part X, line 6	1	11,530
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	_2c	55
3	Distributable amount before adjustments Subtract line 2c from line 1	3	11,475
,4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	11,475
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	11,475
Đ.	art XII Qualifying Distributions (see page 25 of the instructions)		
			
1	Amounts paid (including administrative expenses) to accomplish chantable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	180,507
þ	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		'
a	Suitability test (prior IRS approval required)	3a	
þ	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	180,507
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	_ 5	55
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	180,452
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	ation	
	qualifies for the section 4940(e) reduction of tax in those years		

	rt XIII Undistributed Income	(see page 26 of t	he instructions)			
	orale and a modern	1000 P-30 01	(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part >	d.	Corpus	Years prior to 2008	2008	2009
•	line 7	"		1	,	11,475
2	Undistributed income, if any, as of the en	d of 2009	'			
	Enter amount for 2008 only		The same lines	, , , , , , , , , , , , , , , , , , ,		
	Total for prior years 20 , 20	, 20	min on the standard of		, " ~ ţ	* * * * * * * * * * * * * * * * * * * *
3	Excess distributions carryover, if any, to		1. 8. 1. 1. 1.	,		
	From 2004	40,105		Willer Tales .	> -	,
b	From 2005	50,284		Marie Control		
С	From 2006	81,253				
d	From 2007	51,410	The second s	The Conference of the Conferen		
е	From 2008	185,806			·	
f	Total of lines 3a through e		408,858			
4	Qualifying distributions for 2009 from Pa	rt XII,	* -	60		
	line 4 ▶ \$ 180,507					
а	Applied to 2008, but not more than line 2	la [
b	Applied to undistributed income of prior y	/ears	the management of the state of			in the second
	(Election required—see page 26 of the in	nstructions)	1		14 134	
С	Treated as distributions out of corpus (E	lection		3 300	9 Jan 1	
	required—see page 26 of the instruction	s)	_	And the state of t	* * * * * * * * * * * * * * * * * * *	
d	Applied to 2009 distributable amount				mag 27	11,475
е	Remaining amount distributed out of cor	pus	169,032	Brade St.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
5	Excess distributions carryover applied to	2009		Tang 1		
	(If an amount appears in column (d), the	same				
	amount must be shown in column (a))			, , , , , , , , , , , , , , , , , , , ,		
6	Enter the net total of each column as					
	indicated below:		The state of the s			
а	Corpus Add lines 3f, 4c, and 4e Subtra	ct line 5	577,890	The state of the s	4	
b	Prior years' undistributed income Subtra	act				£
	line 4b from line 2b				4	
С	Enter the amount of prior years' undistri	buted				
	income for which a notice of deficiency	has			San San	
	been issued, or on which the section 49	42(a)				
	tax has been previously assessed		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7			, ,
d	Subtract line 6c from line 6b Taxable			4		
	amount—see page 27 of the instruction		10 / 1 - 1/2 / 1/2	설 대表		
е	Undistributed income for 2008 Subtract		The state of the s	4		,
	4a from line 2a Taxable amount—see p	page	""	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		•
	27 of the instructions		7,480,	4-3-7	1	ļ
f	Undistributed income for 2009. Subtract					1
	4d and 5 from line 1 This amount must	be		A Company		1
_	distributed in 2010		This is a state in	The state of the s		0
7	Amounts treated as distributions out of	•			3	′,
	to satisfy requirements imposed by sec			大学 一大学 一大学 一大学 アンド		···
	170(b)(1)(F) or 4942(g)(3) (see page 27	of the			1	
_	instructions)	144		1	4 '	
8	Excess distributions carryover from 200			Control of the Control	4	
	applied on line 5 or line 7 (see page 27	or the	40 10		1	1
_	instructions)	•	40,10	Jan 1	1	1
9	Excess distributions carryover to 201	U.	527 70	R CONTRACTOR	引起走 艾	1
	Subtract lines 7 and 8 from line 6a		537,78	3	1 *** 5	1
10	Analysis of line 9	50,284	The state of the s	A will and have a	1	· ·
a	Excess from 2005	81,253		The second	.`^ /	1
b	Excess from 2006	51,410	→ 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1		1	1
C	Excess from 2007	185,806	-			1
đ	Excess from 2008 Excess from 2009	169,032	- (1	
е	にんしこう けいけ としりき		- 1	11	1	ii .

≀Ra	rt.XIV Private Operating For	undations (see pa	age 27 of the insti	ructions and Part	VII-A, question 9)	
1a	If the foundation has received a ruling or					
	foundation, and the ruling is effective for	2009, enter the date o	f the ruling	•		•
b	Check box to indicate whether the found	ation is a private opera	ting foundation descri	bed in section 7 49	942(j)(3) or 4942	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	<u> </u>	
	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	investment return from Part X for					
	each year listed					
b	85% of line 2a					
c	Qualifying distributions from Part XII,					
•	line 4 for each year listed	:				
d	Amounts included in line 2c not used directly					
•	for active conduct of exempt activities					
е	Qualifying distributions made directly					
C	for active conduct of exempt activities		1			
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					*
3	alternative test relied upon					
•	"Assets" alternative test—enter	·				
а	(1) Value of all assets			(
	(2) Value of all assets qualifying under			 		
	section 4942(j)(3)(B)(i)					
h	"Endowment" alternative test—enter 2/3					
b	of minimum investment return shown in					
	Part X, line 6 for each year listed			 		
С	"Support" alternative test—enter					1
	(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)					<u> </u>
	(3) Largest amount of support from					
	an exempt organization					
īD.	(4) Gross investment income art:XV Supplementary Infor	mation (Complete	this part only if	the foundation b	ad \$5 000 as mar	o in cocoto et
1 4574	Supplementary Informany time during the y				au \$5,000 or mor	e iii assets at
1	Information Regarding Foundation Ma		or the manach	7113.7		
' a	List any managers of the foundation wh	-	re than 2% of the total	contributions received	by the foundation	
u	before the close of any tax year (but onl				•	
	SEE STATEMENT 6	, a.o, nave continual		(300 000001 007 (0)(2	-1-1	
	List any managers of the foundation wh	o own 10% or more of	the stock of a comora	tion (or an equally large	e portion of the	
	ownership of a partnership or other enti		•		- herman at min	
	N/A	-,, 5 ino ioanda				
2	Information Regarding Contribution,	Grant, Gift, Loan, Sch	olarship, etc Progra	ms:		····
_	Check here ► X if the foundation on				does not accept	
	unsolicited requests for funds. If the four	•	•	_	•	
	organizations under other conditions, co			,		
	The name, address, and telephone nun			uld be addressed	 	······································
-	N/A					
b	The form in which applications should b	pe submitted and inform	nation and materials th	ney should include		
_	N/A Any submission deadlines					
	N/A					
d	Any restrictions or limitations on awards N/A	s, such as by geograph	nical areas, charitable	fields, kinds of institution	ons, or other factors	
						5 990 PE (2006

Part XV Supplementary Information (c	continued)	Futuro Dovernost		
3 Grants and Contributions Paid During th	If recipient is an individual,	•		
Recipient	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		·
a Paid during the year SCHEDULE ATTACHED	N/A	N/A	GENERAL	180,507
Total		<u> </u>	▶ 3a	180,50
Total b Approved for future payment			₽ 3a	160,30
N/A				
	}			
Total			→ 3b	
				- 000 DE (000

DAA

Part XVI-A	Analysis of Income-Producing Acts unless otherwise indicated		usiness income	Excluded	l by section 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
1 Program service				+		the instructions)
а b				 		
		-		1		
_						
f						
g Fees and co	ontracts from government agencies					
•	ues and assessments			1		
	ings and temporary cash investments			14	37	
	interest from securities			14	5,489	
	me or (loss) from real estate.	-		+		
a Debt-finance b Not debt-fin	nanced property	 		 		
	me or (loss) from personal property			+		
7 Other investmen				†		
	rom sales of assets other than inventory		· · · · · · · · · · · · · · · · · · ·	†		888
	(loss) from special events			†		
•	(loss) from sales of inventory					
1 Other revenue	a					
b						
C				<u> </u>		
		_				
d e						
d e 12 Subtotal Add c	columns (b), (d), and (e)	L		0 .	5,526	
d e	columns (b), (d), and (e) 12, columns (b), (d), and (e)	<u> </u>		0 .	5,526 13 _	888 6,414
de 12 Subtotal Add c 13 Total. Add line See worksheet in li	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula	ations)			13	
de 12 Subtotal Add c 13 Total. Add line See worksheet in li Part XVI B Line No. E a	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula Relationship of Activities to the A Explain below how each activity for which inconaccomplishment of the foundation's exempt put	ations) Accomplishme ne is reported in col	nt of Exempt F	Purpose	13	6,414
de 12 Subtotal Add c 13 Total. Add line See worksheet in li Rart XVIIB Line No. E a	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula Relationship of Activities to the a	ations) Accomplishme ne is reported in col	nt of Exempt F	Purpose	13	6,414
de 12 Subtotal Add c 13 Total. Add line See worksheet in li Part XVIIB Line No.	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula Relationship of Activities to the A Explain below how each activity for which inconaccomplishment of the foundation's exempt put	ations) Accomplishme ne is reported in col	nt of Exempt F	Purpose	13	6,41
de 2 Subtotal Add c 3 Total. Add line See worksheet in li Part XVIIB Line No.	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula Relationship of Activities to the A Explain below how each activity for which inconaccomplishment of the foundation's exempt put	ations) Accomplishme ne is reported in col	nt of Exempt F	Purpose	13	6,41
de 2 Subtotal Add c 3 Total. Add line See worksheet in li Part XVIIB Line No.	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula Relationship of Activities to the A Explain below how each activity for which inconaccomplishment of the foundation's exempt put	ations) Accomplishme ne is reported in col	nt of Exempt F	Purpose	13	6,41
de 12 Subtotal Add c 13 Total. Add line See worksheet in li Part XVIIB Line No.	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula Relationship of Activities to the A Explain below how each activity for which inconaccomplishment of the foundation's exempt put	ations) Accomplishme ne is reported in col	nt of Exempt F	Purpose	13	6,414
de 12 Subtotal Add c 13 Total. Add line See worksheet in li Part XVIIB Line No.	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula Relationship of Activities to the A Explain below how each activity for which inconaccomplishment of the foundation's exempt put	ations) Accomplishme ne is reported in col	nt of Exempt F	Purpose	13	6,414
de 2 Subtotal Add c 3 Total. Add line See worksheet in li Part XVIIB Line No.	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula Relationship of Activities to the A Explain below how each activity for which inconaccomplishment of the foundation's exempt put	ations) Accomplishme ne is reported in col	nt of Exempt F	Purpose	13	6,41
de 2 Subtotal Add c 3 Total. Add line See worksheet in li Part XVIIB Line No.	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula Relationship of Activities to the A Explain below how each activity for which inconaccomplishment of the foundation's exempt put	ations) Accomplishme ne is reported in col	nt of Exempt F	Purpose	13	6,41
de 12 Subtotal Add c 13 Total. Add line See worksheet in li Part XVIIB Line No.	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula Relationship of Activities to the A Explain below how each activity for which inconaccomplishment of the foundation's exempt put	ations) Accomplishme ne is reported in col	nt of Exempt F	Purpose	13	6,414
de 2 Subtotal Add c 3 Total. Add line See worksheet in li Part XVIIB Line No.	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula Relationship of Activities to the A Explain below how each activity for which inconaccomplishment of the foundation's exempt put	ations) Accomplishme ne is reported in col	nt of Exempt F	Purpose	13	6,414
de 2 Subtotal Add c 3 Total. Add line See worksheet in li Part XVIIB Line No.	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula Relationship of Activities to the A Explain below how each activity for which inconaccomplishment of the foundation's exempt put	ations) Accomplishme ne is reported in col	nt of Exempt F	Purpose	13	6,414
de 12 Subtotal Add c 13 Total. Add line See worksheet in li Part XVIIB Line No.	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula Relationship of Activities to the A Explain below how each activity for which inconaccomplishment of the foundation's exempt put	ations) Accomplishme ne is reported in col	nt of Exempt F	Purpose	13	6,414
de 2 Subtotal Add c 3 Total. Add line See worksheet in li Part XVIIB Line No.	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula Relationship of Activities to the A Explain below how each activity for which inconaccomplishment of the foundation's exempt put	ations) Accomplishme ne is reported in col	nt of Exempt F	Purpose	13	6,414
de 2 Subtotal Add c 3 Total. Add line See worksheet in li Part XVIIB Line No.	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula Relationship of Activities to the A Explain below how each activity for which inconaccomplishment of the foundation's exempt put	ations) Accomplishme ne is reported in col	nt of Exempt F	Purpose	13	6,414
de 2 Subtotal Add c 3 Total. Add line See worksheet in li Part XVIIB Line No.	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula Relationship of Activities to the A Explain below how each activity for which inconaccomplishment of the foundation's exempt put	ations) Accomplishme ne is reported in col	nt of Exempt F	Purpose	13	6,414
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de 2 Subtotal Add c 3 Total. Add line See worksheet in li Part XVIIB Line No.	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula Relationship of Activities to the A Explain below how each activity for which inconaccomplishment of the foundation's exempt put	ations) Accomplishme ne is reported in col	nt of Exempt F	Purpose	13	6,414
de 2 Subtotal Add c 3 Total. Add line See worksheet in li Part XVIIB Line No.	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula Relationship of Activities to the A Explain below how each activity for which inconaccomplishment of the foundation's exempt put	ations) Accomplishme ne is reported in col	nt of Exempt F	Purpose	13	6,41
de 12 Subtotal Add c 13 Total. Add line See worksheet in li Part XVIIB Line No.	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula Relationship of Activities to the A Explain below how each activity for which inconaccomplishment of the foundation's exempt put	ations) Accomplishme ne is reported in col	nt of Exempt F	Purpose	13	6,414
de 12 Subtotal Add c 13 Total. Add line See worksheet in li Part XVIIB Line No.	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula Relationship of Activities to the A Explain below how each activity for which inconaccomplishment of the foundation's exempt put	ations) Accomplishme ne is reported in col	nt of Exempt F	Purpose	13	6,414
de 12 Subtotal Add c 13 Total. Add line See worksheet in li Part XVIIB Line No.	columns (b), (d), and (e) 12, columns (b), (d), and (e) line 13 instructions on page 28 to verify calcula Relationship of Activities to the A Explain below how each activity for which inconaccomplishment of the foundation's exempt put	ations) Accomplishme ne is reported in col	nt of Exempt F	Purpose	13	6,414

Page	1	3

Pa	rt XVII	Information Rega Exempt Organiza	_	nsfers To and Transaction	ns and Re	lationships With N	loncharitable		
1	Did the or			e in any of the following with any o	ther organiza	tion described		Yes	No
•				n 501(c)(3) organizations) or in se					
	organizatio			,		3 · ·			ļ
а			ation to a noi	ncharitable exempt organization of	f			(
	(1) Cash	,		, ,			1a(1)	X
	(2) Other	assets					1a(2)	X
b	Other tran	sactions						_ _	
	(1) Sales	of assets to a noncharita	ble exempt	organization			1b(1)	X
	(2) Purch	ases of assets from a no	ncharitable e	exempt organization			1b(2	1	X
	(3) Renta	l of facilities, equipment,	or other ass	ets			1b(3	1	X
	(4) Reimb	oursement arrangements					1b(4)	X
	(5) Loans	or loan guarantees					1b(5	1	X
	(6) Perfor	mance of services or me	embership or	fundraising solicitations			1b(6)	X
	-		-	her assets, or paid employees			<u>1c</u>		X
d				plete the following schedule Colu					
		-	-	ven by the reporting foundation. If					
	value in a	ny transaction or sharing		it, show in column (d) the value of			-		
	a) Line no	(b) Amount involved	(c) Name o	of noncharitable exempt organization	(d) Des	cription of transfers, transac	tions, and sharing arran	gements	s
[/:	<u> </u>				 				
			ļ		 		 		
							·		
			<u> </u>		ļ				
					 				
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			ļ	<u> </u>					
				·····					
					 				
				···					
					<u> </u>			_	
			<u> </u>						
2 a	Is the fou	indation directly or indirec	ctly affiliated	with, or related to, one or more tax	x-exempt org	anızatıons		_	_
	described	in section 501(c) of the	Code (other	than section 501(c)(3)) or in section	on 527?			Yes 🛚	K No
b	If "Yes,"	complete the following so	hedule						
		(a) Name of organization		(b) Type of organization		(c) Description	of relationship		
	N/A								
					<u> </u>				
									<u> </u>
	Under per	alties of perjury, I declare that	at I have exam	ined this return, including accompanying	g schedules and	statements, and to the best	t of my knowledge and		
	belief, it is	true, correct, and complete	Declaration of	preparer (other than taxpayer or fiducial	· /	all information of which prep	arer has any knowledge	•	
		Ostrino O	200	5/17	1/10	1) Near	x MOR		
ē	Signa	iture of officer or trustee	<i>y y</i>	Date		Title			
ᅙ				\sim	Date	9	Preparer's ide		'0 on
Ξ	v _	Preparer's	$/ \langle \langle \rangle$	M (///	/	Check if self-employe	number (see page 30 of th		
Sign Here	무호호	signature	1 / 1	3 NLLV	5/1	14/10	P005:		,
U)	Pai Pai	Firm's name for yours if	MOORH	EAD, PETERSEN & W	OODWAR	D, LLP			
	Paid Preparer's Use Only	Firm's hame (or yours if self-employed), address,		RIVER DR		•	EIN ► 36-31	.811	79
		and ZIP code	MOLI		6		Phone no 309-7		
	<u>. </u>	\		, == ;== ;= = ;				990-P	

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2009

Name of the organization

Employer identification number

WEIGLE FAMII	LY FOUNDATION	36-3745791
Organization type (check	one)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private four	ndation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundat	tion
	501(c)(3) taxable private foundation	
	n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and	d a Special Rule See
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or one contributor. Complete Parts I and II	or more (in money or
Special Rules		
sections 509(a)(1	I (c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support to i) and 170(b)(1)(A)(vi), and received from any one contributor, during the year 2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, lin	r, a contribution of the greater
the year, aggrega	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from a ate contributions of more than \$1,000 for use exclusively for religious, chantal oses, or the prevention of cruelty to children or animals. Complete Parts I, II,	ble, scientific, literary, or
the year, contribution aggregate to most year for an exclu	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from autions for use exclusively for religious, charitable, etc., purposes, but these core than \$1,000. If this box is checked, enter here the total contributions that was ively religious, charitable, etc., purpose. Do not complete any of the parts unganization because it received nonexclusively religious, charitable, etc., contributions.	ontributions did not vere received during the nless the General Rul e
990-EZ, or 990-PF), but	n that is not covered by the General Rule and/or the Special Rules does not fi it must answer "No" on Part IV, line 2 of its Form 990, or check the box in the s Form 990-PF, to certify that it does not meet the filing requirements of Sche	heading of its Form

or 990-PF)

	(Form 990, 990-EZ, or 990-PF) (2009)		Page 1 of 1 of Part I
Name of or WEIGI	ganization LE FAMILY FOUNDATION		Employer identification number 36-3745791
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) s Type of contribution
1	DAVID B WEIGLE 3310 N HALSTED, #2 CHICAGO IL 60657	\$ 115,5	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contribution	ns 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 contribution	(d) 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 contribution	ns 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 contribution	ns 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 contributio	(d) ns Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Page 1 of 1 of Part II Schedule B (Form 990, 990-EZ, or 990-PF) (2009) Employer identification number Name of organization 36-3745791 WEIGLE FAMILY FOUNDATION Part II Noncash Property (see instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given Date received (see instructions) Part I 2,000 SH CISCO SYSTEMS COMM STK 1 37,515 05/20/09 \$ (c) (a) No. (d) (b) FMV (or estimate) from Description of noncash property given Date received (see instructions) Part I 300 SH MICROSOFT COMMON STOCK 1 6,137 05/20/09 \$ (a) No. (c) (d) (b) from FMV (or estimate) Date received Description of noncash property given (see instructions) Part I 1,000 SH JOHNSON CONTR 1 20,345 05/20/09 \$ (c) (a) No. (d) (b) from FMV (or estimate) **Date received** Description of noncash property given (see instructions) Part I 400 SH JOHNSON & JOHNSON COM STK 1 09/08/09 24,152 \$ (a) No. (c) (d) (b) FMV (or estimate) from **Date received** Description of noncash property given (see instructions) Part I 400 SH EXXON MOBIL COMMON STOCK 1 12/31/09 27,394 \$ (c) (a) No. (d) (b) FMV (or estimate) from **Date received** Description of noncash property given (see instructions) Part I

\$

Federal Statements

4613 Weigle Family Foundation 36-3745791 FYE: 12/31/2009

f Assets
6a - Sale c
art I, Line (
990-PF, Pa
t 1 - Form
Statemen

Des	Description		How Received					
Whom Sold	Date Acquired	Date Sold	Sale Price	Cost	Expense	Depreciation	Net Gain / Loss	SSO
CISCO SYSTEMS INC	5/20/09	\$/20/09 \$	DONATION 18,932 \$	18,758 \$		۷Դ	জ	174
CISCO SYSTEMS INC	5/20/09	5/28/09	DONATION 7,400	7,503				-103
CISCO SYSTEMS INC	5/20/09	6/01/09	11,638	11,254				384
JOHNSON CONTROLS INC	5/20/09	5/20/09	10,042	10,173				-131
JOHNSON CONTROLS INC	5/20/09	6/01/09	DONATION 10,612	10,173				439
MICROSOFT CORP	5/20/09	5/20/09	DONATION 6,199	6,137				62
JOHNSON & JOHNSON	60/80/6	60/60/6	DONATION 24,215	24,152				63
TOTAL		_{\$\sigma}	\$ 850,68	88,150 \$	0	\$	တ	888

Fees
- Legal
e 16a
t. Lin
P. Par
n 990-PF,
- Forn
ment 2
State

Charitable Purpose	n w
Adjusted Net	\$ \$
Net Investment	0 % %
Total	\$ 610
Description	REVIEW OF GIFT AGREEMENT BY ATTY TOTAL

Federal Statements 4613 Weigle Family Foundation 36-3745791 FYE: 12/31/2009

	Charitable Purpose
Şį	Adjusted Net
ment 3 - Form 990-PF, Part I, Line 18 - Taxes	Investment
Statement 3 - Form 990-	Total
	Description FORM 990-PF TOTAL

4613 Weigle Family Foundation

36-3745791 FYE: 12/31/2009

Federal Statements

Statement 4 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description	

<u> </u>						
		ginning f Year	 End of Year	Basis of Valuation	_	Fair Market Value
FIDELITY BROKERAGE ACCOUNT VARIOUS CORPOATE STOCKS & MUTL	\$ FUNDS	260,490	\$ 287,884	COST	\$	246,606
TOTAL	\$	260,490	\$ 287,884		\$	246,606

0 0 0 0 Expenses ß 0 0 0 0 0 Benefits Statement 5 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc. 0 0 0 0 0 Compensation Federal Statements Average Hours 0.00 0.00 0.00 0.00 00.0 DIRECTOR/MGR DIRECTOR/MGR DIRECTOR/MGR DIRECTOR/MGR DIRECTOR/MGR Title NANCY B WEIGLE 3752 THUNDER RIDGE RD APT 123 BETTENDORF IA 52722 4613 Weigle Family Foundation Name and Address JONATHAN H WEIGLE 249 HILLCREST AVENUE DAVENPORT IA 52803 BENJAMIN J WEIGLE 310 HOLMES STREET BETTENDORF IA 52722 JOAN W MCGEE 315 HOLMES STREET BETTENDORF IA 52722 DAVID B WEIGLE 3310 N HALSTED, #2 CHICAGO IL 60657 FYE: 12/31/2009 36-3745791

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4613 Weigle Family Foundation

36-3745791

FYE: 12/31/2009

Federal Statements

Statement 6 - Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

Name of Manager	Amount
NANCY B WEIGLE	\$ 102,427
DAVID B WEIGLE	1,553,329
BENJAMIN J WEIGLE	115,083
JONATHAN H WEIGLE	80,735
JOAN W MCGEE	33,977
TOTAL	\$ 1,885,551

Weigle Family Foundation

36-3745791

Bettendorf, Iowa

Grants & Contributions Paid For The Year Ended December 31, 2009

1 of The Tour Endod 2	2000111001 31, 2007	
ALZHEIMERS ASSOCIATION	DAVENPORT, IA	\$ 75
AMERICAN FRIENDS OF THE ARMED FORCES	PALM SPRINGS, CA	50
BETTENDORF COMMUNITY SCHOOL FNDN	BETTENDORF, IA	100
BIRDIES FOR CHARITY	SILVIS, IL	13,769
BOY SCOUTS OF AMERICA	DAVENPORT, IA	100
CC FOOD DRIVE	PALM SPRINGS, CA	50
DANCE MARATHON	IOWA CITY, IA	400
FRIENDS OF VANDEVERE	DAVENPORT, IA	70
HABITAT FOR HUMANITY	DAVENPORT, IA	250
IOWA COLLEGE FOUNDATION	DES MOINES, IA	500
JEFFERSON JUBILEE	BETTENDORF, IA	50
JEWISH FEDERATION OF THE QC	ROCK ISLAND, IL	12,350
JUNIOR ACHIEVEMENT	DAVENPORT, IA	550
JUNIOR LEAGUE OF THE QC	BETTENDORF, IA	195
KIWANIS	BETTENDORF, IA	35
LEUKEMIA & LYMPOMA SOCIETY	MINNEAPOLIS, MN	800
LITERACY ASSISTANCE	NEW YORK, NY	25
PUTNAM MUSEUM	DAVENPORT, IA	550
QC SYMPHONY	DAVENPORT, IA	50
SCOTT COUNTY I-CLUB	DAVENPORT, IA	364
STUDENT HUNGER DRIVE	DAVENPORT, IA	675
TEMPLE EMANUEL	DAVENPORT, IA	310
TEMPLE EMANUEL SISTERHOOD	DAVENPORT, IA	1,000
TRI CITY JEWISH CENTER	ROCK ISLAND, IL	11,733
UNITED WAY OF THE QC	DAVENPORT, IA	21,500
UNIVERSITY OF IOWA FOUNDATION	IOWA CITY, IA	1,850
UNVERSITY OF PENNSYLVANIA	PHILADELPHIA, PA	113,106
Total		\$ 180,507

Part XV, Line 3a