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Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private FoundationDepartment of the Treasury
Internal Revenue Service

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

2009

For calendar year 2009, or tax year beginning

, and ending

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

Use the IRS label. Otherwise, print or type. See Specific Instructions.	Name of foundation BRUBAKER CHARITABLE TRUST	A Employer identification number 36-3768220		
	Number and street (or P.O. box number if mail is not delivered to street address) 9 CRAB APPLE LANE	Room/suite	B Telephone number 8152295811	
	City or town, state, and ZIP code ROCKFORD, IL 61107	<p>C If exemption application is pending, check here ► <input type="checkbox"/></p> <p>D 1. Foreign organizations, check here ► <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/></p> <p>E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/></p> <p>F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/></p>		
<p>H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation</p> <p>I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ 1,043,985. (Part I, column (d) must be on cash basis.)</p>		J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____		
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income
Revenue	1 Contributions, gifts, grants, etc., received	290,000.		N/A
	2 Check ► <input type="checkbox"/> if the foundation is not required to attach Sch. B			
	3 Interest on savings and temporary cash investments			
	4 Dividends and interest from securities	15,705.	15,705.	STATEMENT 1
	5a Gross rents			
	b Net rental income or (loss)			
	6a Net gain or (loss) from sale of assets not on line 10	10,340.		
	b Gross sales price for all assets on line 6a	240,398.		
	7 Capital gain net income (from Part IV, line 2)		10,340.	
	8 Net short-term capital gain			
	9 Income modifications			
	Gross sales less returns and allowances			
10a				
b Less. Cost of goods sold				
c Gross profit or (loss)				
11 Other income	1,099.	1,099.	STATEMENT 2	
12 Total. Add lines 1 through 11	317,144.	27,144.		
	0.	0.	0.	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.			
	14 Other employee salaries and wages			
	15 Pension plans, employee benefits			
	16a Legal fees	1,450.	725.	725.
	b Accounting fees	2,175.	1,088.	1,087.
	c Other professional fees			
	17 Interest			
	18 Taxes	276.	276.	0.
	19 Depreciation and depletion			
	20 Occupancy			
	21 Travel, conferences, and meetings			
	22 Printing and publications			
	23 Other expenses	5,313.	5,313.	0.
	24 Total operating and administrative expenses. Add lines 13 through 23	9,214.	7,402.	1,812.
25 Contributions, gifts, grants paid	95,440.		95,440.	
26 Total expenses and disbursements. Add lines 24 and 25	104,654.	7,402.	97,252.	
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	212,490.			
b Net investment income (if negative, enter -0-)		19,742.		
c Adjusted net income (if negative, enter -0-)			N/A	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			1.	1.
2	Savings and temporary cash investments		357,872.	40,730.	40,730.
3	Accounts receivable ►				
	Less: allowance for doubtful accounts ►				
4	Pledges receivable ►				
	Less: allowance for doubtful accounts ►				
5	Grants receivable				
6	Receivables due from officers, directors, trustees, and other disqualified persons				
7	Other notes and loans receivable ►				
	Less: allowance for doubtful accounts ►				
8	Inventories for sale or use				
9	Prepaid expenses and deferred charges				
10a	Investments - U.S. and state government obligations				
b	Investments - corporate stock				
c	Investments - corporate bonds	STMT 7	0.	109,257.	114,947.
11	Investments - land, buildings, and equipment basis ►				
	Less: accumulated depreciation ►				
12	Investments - mortgage loans				
13	Investments - other	STMT 8	309,092.	750,751.	888,307.
14	Land, buildings, and equipment basis ►				
	Less: accumulated depreciation ►				
15	Other assets (describe ►)				
16	Total assets (to be completed by all filers)		666,964.	900,739.	1,043,985.
17	Accounts payable and accrued expenses				
18	Grants payable				
19	Deferred revenue				
20	Loans from officers, directors, trustees, and other disqualified persons				
21	Mortgages and other notes payable				
22	Other liabilities (describe ►)				
23	Total liabilities (add lines 17 through 22)		0.	0.	
	Foundations that follow SFAS 117, check here ► <input type="checkbox"/>				
	and complete lines 24 through 26 and lines 30 and 31.				
24	Unrestricted				
25	Temporarily restricted				
26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/>				
	and complete lines 27 through 31.				
27	Capital stock, trust principal, or current funds		666,964.	900,739.	
28	Paid-in or capital surplus, or land, bldg., and equipment fund		0.	0.	
29	Retained earnings, accumulated income, endowment, or other funds		0.	0.	
30	Total net assets or fund balances		666,964.	900,739.	
31	Total liabilities and net assets/fund balances		666,964.	900,739.	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	666,964.
2	Enter amount from Part I, line 27a	2	212,490.
3	Other increases not included in line 2 (itemize) ► <u>PRIOR PERIOD ADJUSTMENT</u>	3	21,285.
4	Add lines 1, 2, and 3	4	900,739.
5	Decreases not included in line 2 (itemize) ►	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	900,739.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a ALPINE BANK & TRUST-SEE ATTACHED			P	VARIOUS	VARIOUS
b ALPINE BANK & TRUST-SEE ATTACHED			P	VARIOUS	VARIOUS
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a 106,183.		92,678.	13,505.		
b 134,215.		137,380.	-3,165.		
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))		
(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			
a			13,505.		
b			-3,165.		
c					
d					
e					
2 Capital gain net income or (net capital loss)			2	10,340.	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8				N/A	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2008	65,115.	778,390.	.083653
2007	55,995.	771,166.	.072611
2006	98,679.	626,795.	.157434
2005	40,277.	576,647.	.069847
2004	36,833.	558,594.	.065939

2 Total of line 1, column (d) **.449484**

3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years **.089897**

4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5 **704,087.**

5 Multiply line 4 by line 3 **63,295.**

6 Enter 1% of net investment income (1% of Part I, line 27b) **197.**

7 Add lines 5 and 6 **63,492.**

8 Enter qualifying distributions from Part XII, line 4 **97,252.**

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)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)

b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► and enter 1% of Part I, line 27b

c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)

2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

3 Add lines 1 and 2

4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-

6 Credits/Payments:

a 2009 estimated tax payments and 2008 overpayment credited to 2009

b Exempt foreign organizations - tax withheld at source

c Tax paid with application for extension of time to file (Form 6668)

d Backup withholding erroneously withheld

7 Total credits and payments. Add lines 6a through 6d

8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached

9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed

10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid

11 Enter the amount of line 10 to be: Credited to 2010 estimated tax ►

748.

6a

6b

6c

6d

748.

7

8

9

10

551. Refunded ►

11

748.

0.

197.

0.

551.

0.

Part 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 in any political campaign?

Yes

No

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 published 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:

0.

0.

0.

0.

0.

0.

0.

0.

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0.

2 Has the foundation engaged in any activities that have not previously been reported to the IRS?

2 X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

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, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*

4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?

b If "Yes," has it filed a tax return on Form 990-T for this year?

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?

N/A

7 Did the foundation have at least \$5,000 in assets at any time during the year?

N/A

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) 11

12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? 12

13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13

Website address ► N/A

14 The books are in care of ► JOHN & SUZANNE BRUBAKER

Telephone no. ► 815-229-5811

Located at ► 9 CRAB APPLE LN, ROCKFORD, IL

ZIP+4 ► 61107

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year ► 15 ► N/A

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a During the year did the foundation (either directly or indirectly):

(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No

(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes No

(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No

(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No

(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes No

(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) Yes No

b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?

Organizations relying on a current notice regarding disaster assistance check here ► N/A

c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009? 1c

2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(i)(3) or 4942(j)(5)): 2 Yes No

a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? Yes No

If "Yes," list the years ► , , , , ,

b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) 2b

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► , , , ,

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes No

b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009.) 3b

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009? 4b

	Yes	No
1a		
1b	<u>N/A</u>	
1c		<input checked="" type="checkbox"/>
2		
2a		
2b	<u>N/A</u>	
3		
3a		
3b		
4		
4a		<input checked="" type="checkbox"/>
4b		<input checked="" type="checkbox"/>

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

5a During the year did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? Yes No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? Yes No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

5b

Organizations relying on a current notice regarding disaster assistance check here ►

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No

N/A

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 on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

 Yes No

N/A

7b

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JOHN D. BRUBAKER	TRUSTEE			
ROCKFORD, IL 61107	1.00	0.	0.	0.
SUZANNE M. BRUBAKER	TRUSTEE			
ROCKFORD, IL 61107	1.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

►

0

Part VIII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services

►

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 such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

Expenses

1	N/A	
2		
3		
4		

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

Amount

1	N/A	
2		
3		
Total. Add lines 1 through 3		0.

Form 990-PF (2009)

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

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:
 a Average monthly fair market value of securities
 b Average of monthly cash balances
 c Fair market value of all other assets
 d Total (add lines 1a, b, and c)
 e Reduction claimed for blockage or other factors reported on lines 1a and
 1c (attach detailed explanation)

2 Acquisition indebtedness applicable to line 1 assets
 3 Subtract line 2 from line 1d
 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)
 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4
 6 Minimum investment return. Enter 5% of line 5

1a	632,535.
1b	82,274.
1c	
1d	714,809.
1e	0.
2	0.
3	714,809.
4	10,722.
5	704,087.
6	35,204.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ► and do not complete this part.)

1 Minimum investment return from Part X, line 6
 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.)
 c Add lines 2a and 2b
 3 Distributable amount before adjustments. Subtract line 2c from line 1
 4 Recoveries of amounts treated as qualifying distributions
 5 Add lines 3 and 4
 6 Deduction from distributable amount (see instructions)
 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1

1	35,204.
2a	197.
2b	
2c	197.
3	35,007.
4	0.
5	35,007.
6	0.
7	35,007.

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:
 a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26
 b Program-related investments - total from Part IX-B
 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes
 3 Amounts set aside for specific charitable projects that satisfy the:
 a Suitability test (prior IRS approval required)
 b Cash distribution test (attach the required schedule)
 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4
 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
 6 Adjusted qualifying distributions. Subtract line 5 from line 4

1a	97,252.
1b	0.
2	
3a	
3b	
4	97,252.
5	197.
6	97,055.

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				35,007.
2 Undistributed income, if any, as of the end of 2009:			0.	
a Enter amount for 2008 only				
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004	9,344.			
b From 2005	12,926.			
c From 2006	68,477.			
d From 2007	18,969.			
e From 2008	27,007.			
f Total of lines 3a through e	136,723.			
4 Qualifying distributions for 2009 from Part XII, line 4: ► \$ 97,252.			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				35,007.
e Remaining amount distributed out of corpus	62,245.			0.
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			
6 Enter the net total of each column as indicated below:	198,968.			
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 be distributed in 2010				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7	9,344.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	189,624.			
10 Analysis of line 9:				
a Excess from 2005	12,926.			
b Excess from 2006	68,477.			
c Excess from 2007	18,969.			
d Excess from 2008	27,007.			
e Excess from 2009	62,245.			

Part XV Supplementary Information (continued)

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
SEE STATEMENT 10				
Total			► 3a	95,440.
<i>b Approved for future payment</i>				
NONE				
Total			► 3b	0.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1 Program service revenue:					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments				14	
4 Dividends and interest from securities			14	15,705.	
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			14		1,099.
8 Gain or (loss) from sales of assets other than inventory			18	10,340.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		26,045.	1,099.
13 Total. Add line 12, columns (b), (d), and (e)					27,144.

Part V: Relationship of Activities to the Accomplishment of Exempt Purposes

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

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting foundation to a noncharitable exempt organization of:

(1) Cash

b Other transactions:

- (1) Sales of assets to a noncharitable exempt organization
- (2) Purchases of assets from a noncharitable exempt organization
- (3) Rental of facilities, equipment, or other assets
- (4) Reimbursement arrangements
- (5) Loans or loan guarantees
- (6) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

Yes No

b. If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

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

Signature of officer or trustee		Date	Title	
John D Boubaker		5-27-10	TRUSTEE	
Paid Preparer's Use Only	Preparer's signature	Date	Check if self- employed	Preparer's identifying number
	Michael J. Boubaker	5-14-10	<input type="checkbox"/>	
Firm's name (or yours if self-employed), address, and ZIP code	RSM MCGLADREY, INC. 1252 BELL VALLEY ROAD, SUITE 300 ROCKFORD, IL 61108			EIN <input type="checkbox"/>
				Phone no. 815-231-7300

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

BRUBAKER CHARITABLE TRUST36-3768220

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.

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

General Rule

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

Special Rules

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

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

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

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

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

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

Name of organization

Employer identification number

BRUBAKER CHARITABLE TRUST

36-3768220

Part I **Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	<u>JOHN D. BRUBAKER</u>	\$ <u>240,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
	<u>9 CRAB APPLE LANE</u>		(Complete Part II if there is a noncash contribution.)
	<u>ROCKFORD, IL 61107</u>		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	<u>AQUA AEROBIC SYSTEM, INC.</u>	\$ <u>50,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
	<u>P.O. BOX 2026</u>		(Complete Part II if there is a noncash contribution.)
	<u>ROCKFORD, IL 61130</u>		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$ <u> </u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
			(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$ <u> </u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
			(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$ <u> </u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
			(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$ <u> </u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
			(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$ <u> </u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
			(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$ <u> </u>	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/>
			(Complete Part II if there is a noncash contribution.)

BRUBAKER CHARITABLE TRUST

36-3768220

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 1

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
ALPINE BANK & TRUST - DIVIDENDS	15,503.	0.	15,503.
ALPINE BANK & TRUST - INTEREST	202.	0.	202.
TOTAL TO FM 990-PF, PART I, LN 4	15,705.	0.	15,705.

FORM 990-PF OTHER INCOME STATEMENT 2

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
OTHER INCOME	1,099.	1,099.	
TOTAL TO FORM 990-PF, PART I, LINE 11	1,099.	1,099.	

FORM 990-PF LEGAL FEES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	1,450.	725.		725.
TO FM 990-PF, PG 1, LN 16A	1,450.	725.		725.

FORM 990-PF ACCOUNTING FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	2,175.	1,088.		1,087.
TO FORM 990-PF, PG 1, LN 16B	2,175.	1,088.		1,087.

STATEMENT(S) 1, 2, 3, 4

FORM 990-PF

TAXES

STATEMENT

5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAX	276.	276.		0.
TO FORM 990-PF, PG 1, LN 18	276.	276.		0.

FORM 990-PF

OTHER EXPENSES

STATEMENT

6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
AGENCY FEES	5,310.	5,310.		0.
INVESTMENT FEES	3.	3.		0.
TO FORM 990-PF, PG 1, LN 23	5,313.	5,313.		0.

FORM 990-PF

CORPORATE BONDS

STATEMENT

7

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
FIXED INCOME	109,257.	114,947.
TOTAL TO FORM 990-PF, PART II, LINE 10C	109,257.	114,947.

FORM 990-PF

OTHER INVESTMENTS

STATEMENT

8

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
EQUITIES	COST	750,751.	888,307.
TOTAL TO FORM 990-PF, PART II, LINE 13		750,751.	888,307.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION
PART XV, LINES 2A THROUGH 2D

STATEMENT 9

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

JOHN & SUZANNE BRUBAKER, 9 CRAB APPLE LANE, ROCKFORD IL

TELEPHONE NUMBER

FORM AND CONTENT OF APPLICATIONS

LETTER FORM: INCLUDE INFORMATION AS TO USE OF MONEY AND STATUS AS A
QUALIFIED CHARITABLE ORGANIZATION.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

NONE

FORM 990-PF

GRANTS AND CONTRIBUTIONS
PAID DURING THE YEAR

STATEMENT 10

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
ALZHEIMERS ASSOCIATION ROCKFORD IL	NONE SOCIAL WELFARE	PUBLIC	500.
AMERICAN CANCER SOCIETY ROCKFORD, IL 61100	NONE MEDICAL	PUBLIC	300.
AMERICAN FOUNDATION FOR AIDS RESEARCH NEW YORK, NY	NONE MEDICAL	PUBLIC	250.
ARIZONA-SENORA DANCE COMPANY	NONE ARTISTIC	PUBLIC	250.
BACH CHAMBER CHIOR ROCKFORD IL	NONE GENERAL	PUBLIC	250.
BOYS AND GIRLS CLUB ROCKFORD IL	NONE GENERAL	PUBLIC	240.
CHICAGO CULTURAL CENTER ASSOC CHICAGO, IL	NONE ARTS	PUBLIC	250.
CHICAGO SHAKESPEARE THEATER 800 E. GRAND AVE CHICAGO, IL 60611	NONE ARTISTIC	PUBLIC	1,000.

BRUBAKER CHARITABLE TRUST

36-3768220

CHICAGO SYMPHONY ORCHESTRA
CHICAGO, IL

NONE
ARTISTIC

PUBLIC

1,750.

COMMUNITY FOUNDATION OF NORTHERN
ILLINOIS
946 NORTH SECOND STREET
ROCKFORD IL

NONE
GENERAL

PUBLIC

5,000.

CRUSADER HEALTH FOUNDATION
ROCKFORD IL

NONE
MEDICAL

PUBLIC

5,000.

DISCOVERY CENTER MUSEUM
711 NORTH MAIN STREET ROCKFORD
IL

NONE
EDUCATIONAL

PUBLIC

500.

FRIENDS OF THE CORANADO
ROCKFORD IL

NONE
GENERAL

PUBLIC

12,500.

GIORANO JAZZ DANCE ACADEMY
CHICAGO, IL

NONE
ARTISTIC

PUBLIC

500.

GLUCOMA RESEARCH FOUNDATION
ROCKFORD, IL

NONE
MEDICAL

PUBLIC

250.

GOODMAN THEATHER
CHICAGO, IL

NONE
ARTISTIC

PUBLIC

300.

GRANT PARK MUSIC FESTIVAL
CHICAGO, IL

NONE
ARTISTIC

PUBLIC

1,500.

JOEFFREY BALLET
ROCKFORD IL

NONE
GENERAL

PUBLIC

300.

BRUBAKER CHARITABLE TRUST

36-3768220

KAUT RADIO P.O. BOX 28821	TUSCAN, AR	NONE ARTISTIC	PUBLIC	250.
KLEHM ARBORETUM ROCKFORD IL		NONE GENERAL	PUBLIC	500.
LEUKEMIA AND LYMPHOMA ROCKFORD, IL		NONE MEDICAL	PUBLIC	500.
LINCOLN BICENTENNIAL ROCKFORD IL		NONE GENERAL	PUBLIC	25,000.
LOONWATCH ROCKFORD IL		NONE EDUCATIONAL	PUBLIC	250.
MPR 480 CEDAR STREET	ST PAUL MN	NONE GENERAL	PUBLIC	300.
MUSIC ACADEMY FOUNDATION ROCKFORD IL		NONE GENERAL	PUBLIC	250.
NATURAL LAND INSTITUTE 320 SOUTH THIRD STREET	ROCKFORD IL	NONE NATURE PRESERVATION	PUBLIC	500.
NORTHERN ILLINOIS HOSPICE ASSN 4215 NEWBURG RD.	ROCKFORD, IL	NONE MEDICAL	PUBLIC	1,550.
611086436				
NORTHERN PUBLIC RADIO 801 N. FIRST ST	DEKALB, IL	NONE ARTISTIC	PUBLIC	500.
60115				

BRUBAKER CHARITABLE TRUST		36-3768220	
RAMP 202 MARKET STREET	ROCKFORD IL	NONE SOCIAL WELFARE	PUBLIC 500.
ROCKFORD AREA ARTS COUNCIL ROCKFORD IL		NONE ARTS	PUBLIC 500.
ROCKFORD ART MUSEUM ROCKFORD, IL		NONE SOCIAL WELFARE	PUBLIC 250.
ROCKFORD CORONADO CONCERT ASSOC P.O. BOX 4444	ROCKFORD IL	NONE ARTS	PUBLIC 13,500.
ROCKFORD DANCE COMPANY ROCKFORD IL		NONE ARTISTIC	PUBLIC 10,000.
ROCKFORD RESCUE MISSION PO BOX 1958	ROCKFORD IL	NONE SOCIAL WELFARE	PUBLIC 400.
THE ART INSTITUTE OF CHICAGO 111 S. MICHIGAN AVE	CHICAGO, IL 60603	NONE ARTS	PUBLIC 1,250.
THE METROPOLITAN MUSEUM OF ART ROCKFORD IL		NONE ARTISTIC	PUBLIC 1,050.
THE ROCK RIVER VALLEY ROCKFORD IL		NONE GENERAL	PUBLIC 250.
THE SALVATION ARMY ROCKFORD IL		NONE SOCIAL WELFARE	PUBLIC 1,500.

BRUBAKER CHARITABLE TRUST

36-3768220

UNITED WAY OF ROCK RIVER VALLEY 612 N MAIN ST #200 ROCKFORD IL	NONE GENERAL	PUBLIC	5,000.
UNIVERSITY OF WISCONSIN MADISON WI	NONE EDUCATIONAL	PUBLIC	250.
WFMT FINE ARTS CIRCLE ROCKFORD IL	NONE ARTISTIC	PUBLIC	250.
WISCONSIN PUBLIC RADIO 821 UNIVERSITY AVENUE MADISON WI	NONE GENERAL	PUBLIC	250.
WTTW CHANNEL 11 P.O. BOX 597873 CHICAGO, IL 606599967	NONE GENERAL	PUBLIC	250.
TOTAL TO FORM 990-PF, PART XV, LINE 3A			95,440.

2009 Tax Information Statement

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Recipient's Name and Address
BRUBAKER CHARITABLE TRUST
9 CRAB APPLE LANE
ROCKFORD , IL 61107

Account Number: 673630000
Recipient's Tax ID number: 36-3768220
Payer's Federal ID number: 36-2476850
Questions? (815)231-2481
 Corrected
 2nd TIN notice

Payer's Name and Address
ALPINE BANK & TRUST CO
6838 EAST STATE STREET
ROCKFORD, IL 61108

2009 Form 1099-B: Proceeds from Broker and Barter Exchange Transactions

OMB No. 1545-0715

Reported to the IRS are Gross Proceeds less commissions and option premiums.

Number of shares (Box 5)	CUSIP (Box 1b)	Description (Box 7)	Date Acquired (Box 1a)	Date of Sale (Box 2)	Stocks Bonds, etc. (Box 3)	Cost or other Basis (Box 4)	Federal Income Tax Withheld (Box 4)	Net Gain or Loss (Box 5)
Short Term Sales Reported on 1099-B								
25000.00000 3133XT5\$1	11/24/09	FEDERAL HOME LOAN BANK 0.8%	02/20/2009	11/24/2009	25,000.00	25,000.00	0.00	0.00
350.00000 464287507		ISHARES S&P MIDCAP 400 INDEX FUND	03/19/2009	10/19/2009	24,930.76	16,768.50	8,162.26	0.00
250.00000 464287804		ISHARES S&P SM CAP FUND	03/23/2009	10/08/2009	13,252.56	9,136.77	4,115.79	0.00
1488.0960 76628T439		RIDGEWORTH INST US GOV ULTRA SHORT-I	05/22/2009	07/23/2009	15,000.00	14,985.13	14.87	0.00
495.0490 76628T439		RIDGEWORTH INST US GOV ULTRA SHORT-I	05/22/2009	11/16/2009	5,000.00	4,985.14	14.86	0.00
126.3680 922031737		VANGUARD INFLATION PROTECT ADM #5119	01/26/2009	08/05/2009	3,000.00	2,869.82	130.18	0.00
1939.8640 922031406		VANGUARD SHTM INVESTMENT GRADE #39	02/24/2009	07/27/2009	20,000.00	18,933.08	1,066.92	0.00
Total Short Term Sales Reported on 1099-B						106,183.32	92,678.44	13,504.88
Long Term 15% Sales Reported on 1099-B								
635.5620 939330403	CL F1	AMER WASHINGTON MUTUAL INVEST	07/31/2001	10/07/2009	14,617.93	18,813.96	-4,196.03	0.00
193.2740 399874403		AMERICAN GROWTH FUND OF AMERICA-F	07/31/2001	10/07/2009	5,000.00	4,857.87	142.13	0.00

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

2009 Tax Information Statement

Recipient's Name and Address

BRUBAKER CHARITABLE TRUST
9 CRAB APPLE LANE
ROCKFORD, IL 61107

Account Number: 673630000
Recipient's Tax ID number: 36-3768220
Payer's Federal ID number: 36-2476850
Questions? (815)231-2481

Corrected

2nd TIN notice

Payer's Name and Address
ALPINE BANK & TRUST CO
6838 EAST STATE STREET
ROCKFORD, IL 61108

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Number of shares (Box 5)	CUSIP (Box 1b)	Description (Box 7)	Date Acquired (Box 8)	Date of Sale (Box 9)	Stocks, Bonds, etc. (Box 10)	Cost or other Basis (Box 2)	Federal Income Tax Withheld (Box 4)	Net Gain or Loss (Box 3)
946.0200	399874403	AMERICAN GROWTH FUND OF AMERICA - F	07/31/2001	10/19/2009	25,438.48	25,941.75	-503.27	0.00
171.6740	461308405	AMERICAN INVESTMENT CO OF AMERICA-F1	07/31/2001	08/05/2009	4,000.00	5,081.95	-1,081.95	0.00
452.3000	461308405	AMERICAN INVESTMENT CO OF AMERICA-F1	12/31/2007	10/07/2009	11,058.74	13,054.51	-1,995.77	0.00
500.0000	045487105	ASSOCIATED BANC CORP	01/01/1999	02/24/2009	6,536.56	1,466.67	5,069.89	0.00
500.0000	045487105	ASSOCIATED BANC CORP	01/01/1999	07/15/2009	6,150.64	1,466.67	4,683.97	0.00
500.0000	045487105	ASSOCIATED BANC CORP	01/01/1999	07/23/2009	4,750.67	1,466.67	3,284.00	0.00
500.0000	045487105	ASSOCIATED BANC CORP	01/01/1999	12/01/2009	5,565.35	1,466.67	4,098.68	0.00
1000.0000	045487105	ASSOCIATED BANC CORP	01/01/1999	12/21/2009	10,750.72	2,933.33	7,817.39	0.00
1799.4570	30023C350	EVERGREEN EQ ASSET ALLOCATION FDA	07/31/2006	02/24/2009	15,745.25	27,290.90	-11,545.65	0.00
5347.5940	353496300	FRANKLIN INCOME FUNDA	02/25/2008	07/27/2009	10,000.00	13,852.35	-3,852.35	0.00
7587.9980	353496300	FRANKLIN INCOME FUNDA	02/25/2008	08/05/2009	14,568.96	19,655.86	-5,086.90	0.00
2,4500	36202BNF8	GNMA POOL #1290 9.000% 11/20/2019 11/01/1989 01/15/2009			2.45	2.45	0.00	0.00
2,4700	36202BNF8	GNMA POOL #1290 9.000% 11/20/2019 11/01/1989 02/20/2009			2.47	2.47	0.00	0.00
2,4900	36202BNF8	GNMA POOL #1290 9.000% 11/20/2019 11/01/1989 03/16/2009			2.49	2.49	0.00	0.00
2,5100	36202BNF8	GNMA POOL #1290 9.000% 11/20/2019 11/01/1989 04/20/2009			2.51	2.51	0.00	0.00
2,5300	36202BNF8	GNMA POOL #1290 9.000% 11/20/2019 11/01/1989 05/20/2009			2.53	2.53	0.00	0.00
2,5500	36202BNF8	GNMA POOL #1290 9.000% 11/20/2019 11/01/1989 06/15/2009			2.55	2.55	0.00	0.00

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

2009 Tax Information Statement

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Recipient's Name and Address
BRUBAKER CHARITABLE TRUST
9 CRAB APPLE LANE
ROCKFORD , IL 61107

Account Number: 673630000
Recipient's Tax ID number: 36-3769220
Payer's Federal ID number: 36-2476850
Questions? (815)231-2481
 Corrected
 2nd TIN notice

Payer's Name and Address
ALPINE BANK & TRUST CO
6838 EAST STATE STREET
ROCKFORD, IL 61108

Number of shares (Box 5)	CUSIP (Box 1b)	Description (Box 7)	Date Acquired (Box 1a)	Date of Sale (Box 1a)	Stocks Bonds, etc. (Box 2)	Cost or Other Basis (Box 3)	Federal Income Tax Withheld (Box 4)		
							Net Gain or Loss (Box 5)	Net Gain or Loss (Box 6)	Tax Withheld (Box 7)
2.6700	36202BNF8	GNMA POOL # 290 9.000% 11/20/2019 11/01/1989 07/20/2009				2.67		2.67	0.00 0.00
2.6000	36202BNF8	GNMA POOL # 290 9.000% 11/20/2019 11/01/1989 08/20/2009				2.80		2.60	0.00 0.00
2.6400	36202BNF8	GNMA POOL # 1290 9.000% 11/20/2019 11/01/1989 09/20/2009				2.64		2.64	0.00 0.00
2.7200	36202BNF8	GNMA POOL # 1290 9.000% 11/20/2019 11/01/1989 10/20/2009				2.72		2.72	0.00 0.00
2.7400	36202BNF8	GNMA POOL # 1290 9.000% 11/20/2019 11/01/1989 11/20/2009				2.74		2.74	0.00 0.00
2.7300	36202BNF8	GNMA POOL # 1290 9.000% 11/20/2019 11/01/1989 12/20/2009				2.73		2.73	0.00 0.00
Total Long Term 15% Sales Reported on 1099-B				134,214.40	137,380.26		-3,165.86	-3,165.86	0.00

This is important tax information and is being furnished to the Internal Revenue Service. If you are required to file a return, a negligence penalty or other sanction may be imposed on you if this income is taxable and the IRS determines that it has not been reported.

Application for Extension of Time To File an
Exempt Organization Return

► File a separate application for each return.

- If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box ►
- If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ► *All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.*

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Type or print	Name of Exempt Organization BRUBAKER CHARITABLE TRUST	Employer identification number 36-3768220
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 9 CRAB APPLE LANE	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ROCKFORD, IL 61107	

Check type of return to be filed (file a separate application for each return):

<input type="checkbox"/> Form 990	<input type="checkbox"/> Form 990-T (corporation)	<input type="checkbox"/> Form 4720
<input type="checkbox"/> Form 990-BL	<input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust)	<input type="checkbox"/> Form 5227
<input type="checkbox"/> Form 990-EZ	<input type="checkbox"/> Form 990-T (trust other than above)	<input type="checkbox"/> Form 6069
<input checked="" type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

JOHN & SUZANNE BRUBAKER

- The books are in the care of ► **9 CRAB APPLE LN, ROCKFORD, IL - 61107**

Telephone No. ► **815-229-5811** FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ►
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ► . If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension will cover.

- 1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2010**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 - calendar year **2009** or
 - tax year beginning , and ending
- 2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period
- 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions **3a \$ 197.**
- 3b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit **3b \$ 748.**
- 3c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions **3c \$ 0.**

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.