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

2009

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

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 <b>THE HOPE AND TOM REYNOLDS FAMILY FOUNDATION</b>		A Employer identification number <b>36-4161117</b>
	Number and street (or P.O. box number if mail is not delivered to street address)	Room/suite	B Telephone number <b>312-609-1100</b>
	City or town, state, and ZIP code <b>WINNETKA, IL 60093</b>		C If exemption application is pending, check here <input type="checkbox"/>
			D 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
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			
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ <b>270,246.</b> (Part I, column (d) must be on cash basis)		J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

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	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received	1,000.		N/A	
2	Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
3	Interest on savings and temporary cash investments	50.	50.		STATEMENT 1
4	Dividends and interest from securities	6,485.	6,485.		STATEMENT 2
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10	<32,255.>			
b	Gross sales price for all assets on line 6a	51,179.			
7	Capital gain net income (from Part IV, line 2)		0.		
8	Net short-term capital gain				
9	Income modifications				
10a	Gross sales less returns and allowances				
b	Less: Cost of goods sold				
c	Gross profit or (loss)				
11	Other income				
12	Total. Add lines 1 through 11	<24,720.>	6,535.		
13	Compensation of officers, directors, trustees, etc.	0.	0.		0.
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees				
b	Accounting fees STMT 3	3,550.	3,550.		0.
c	Other professional fees STMT 4	2,312.	2,312.		0.
17	Interest				
18	Taxes STMT 5	480.	480.		0.
19	Depreciation and depletion				
20	Occupancy				
21	Travel, conferences, and meetings				
22	Printing and publications				
23	Other expenses STMT 6	25.	0.		25.
24	Total operating and administrative expenses. Add lines 13 through 23	6,367.	6,342.		25.
25	Contributions, gifts, grants paid	12,495.			12,495.
26	Total expenses and disbursements. Add lines 24 and 25	18,862.	6,342.		12,520.
27	Subtract line 26 from line 12	<43,582.>			
a	Excess of revenue over expenses and disbursements		193.		
b	Net investment income (if negative, enter -0-)				
c	Adjusted net income (if negative, enter -0-)			N/A	

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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		
Assets	1 Cash - non-interest-bearing			5,410.	7,360.	7,360.
	2 Savings and temporary cash investments			893.	26,287.	26,287.
	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 STMT 7			286,768.	197,051.	195,128.
	c Investments - corporate bonds STMT 8			29,707.	48,479.	41,471.
11 Investments - land, buildings, and equipment basis ▶						
Less accumulated depreciation ▶						
12 Investments - mortgage loans						
13 Investments - other						
14 Land, buildings, and equipment basis ▶						
Less accumulated depreciation ▶						
15 Other assets (describe ▶)						
16 Total assets (to be completed by all filers)			322,778.	279,177.	270,246.	
Liabilities	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.		
Net Assets or Fund Balances	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			322,778.	279,177.	
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			322,778.	279,177.		
31 Total liabilities and net assets/fund balances			322,778.	279,177.		

**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	322,778.
2 Enter amount from Part I, line 27a	2	<43,582.>
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	279,196.
5 Decreases not included in line 2 (itemize) ▶ <b>ROUNDING</b>	5	19.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	279,177.

**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 MERRILL LYNCH - SEE ATTACHED	P	VARIOUS	VARIOUS
b			
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 51,179.		83,434.	<32,255.>
b			
c			
d			
e			

  

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			<32,255.>
b			
c			
d			
e			

  

2 Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	2	<32,255.>
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)		3	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	12,605.	316,177.	.039867
2007	24,091.	381,931.	.063077
2006	19,755.	356,656.	.055390
2005	15,250.	349,665.	.043613
2004	29,183.	354,909.	.082227

  

2 Total of line 1, column (d)	2	.284174
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	3	.056835
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	237,927.
5 Multiply line 4 by line 3	5	13,523.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	2.
7 Add lines 5 and 6	7	13,525.
8 Enter qualifying distributions from Part XII, line 4	8	12,520.

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.

THE HOPE AND TOM REYNOLDS FAMILY  
FOUNDATION

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**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 <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary-see instructions)		1	4.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> 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	0.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		3	4.
3 Add lines 1 and 2		4	0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		5	4.
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	6a 155.	7	155.
b Exempt foreign organizations - tax withheld at source	6b	8	
c Tax paid with application for extension of time to file (Form 8868)	6c	9	
d Backup withholding erroneously withheld	6d	10	151.
7 Total credits and payments Add lines 6a through 6d		11	0.
8 Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> 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 151. Refunded			

**Part VII-A Statements Regarding Activities**

	Yes	No
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?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 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		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$ 0. (2) On foundation managers \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
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? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) IL		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	X	
14	The books are in care of ► <b>ROBBINS &amp; ASSOCIATES LLC</b> Telephone no ► <b>312-609-1100</b> Located at ► <b>333 W. WACKER DRIVE, SUITE 830, CHICAGO, IL</b> ZIP+4 ► <b>60606</b>			
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.

	Yes	No
<b>1a</b> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 )	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</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	1b
<b>c</b> 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
<b>2</b> Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
<b>a</b> 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? If "Yes," list the years ►	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</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 )	N/A	2b
<b>c</b> If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ►		
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>b</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.)	N/A	3b
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a
<b>b</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

**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?

N/A

☐ Yes ☐ No

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?

6b

X

If "Yes" to 6b, file Form 8870

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

☐ Yes ☒ No

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

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
THOMAS A. REYNOLDS, III 1208 PINE STREET WINNETKA, IL 60093	PRES./DIR. 0.00	0.	0.	0.
HOPE C. REYNOLDS 1208 PINE STREET WINNETKA, IL 60093	V.P./DIR. 0.00	0.	0.	0.
THOMAS A. REYNOLDS, IV 1208 PINE STREET WINNETKA, IL 60093	DIRECTOR 0.00	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	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	0.



**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	1a	224,112.
b	Average of monthly cash balances	1b	17,438.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	241,550.
e	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	241,550.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,623.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	237,927.
6	Minimum investment return. Enter 5% of line 5	6	11,896.

**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	1	11,896.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	4.
b	Income tax for 2009 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	4.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	11,892.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	11,892.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	11,892.

**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	1a	12,520.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	12,520.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	12,520.

**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				11,892.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004	2,149.			
b From 2005				
c From 2006	2,080.			
d From 2007	5,322.			
e From 2008				
f Total of lines 3a through e	9,551.			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ 12,520.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions) **	12,520.			
d Applied to 2009 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	9,551.			9,551.
6 Enter the net total of each column as indicated below.				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	12,520.			
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				2,341.
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	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	12,520.			
10 Analysis of line 9				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009	12,520.			

\*\* SEE STATEMENT 9

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9) N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
2 a Enter the lesser of the adjusted net income from Part I or the minimum 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					
e Qualifying distributions made directly for active conduct of exempt activities					
3 Subtract line 2d from line 2c					
Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.)

- 1 **Information Regarding Foundation Managers:**
- a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

SEE STATEMENT 10

- b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

- 2 **Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**
- Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

- a The name, address, and telephone number of the person to whom applications should be addressed
- b The form in which applications should be submitted and information and materials they should include
- c Any submission deadlines
- d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

**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)				
<b>a Paid during the year</b>				
SEE STATEMENT 11				
<b>Total</b>			<b>▶ 3a</b>	12,495.
<b>b Approved for future payment</b>				
NONE				
<b>Total</b>			<b>▶ 3b</b>	0.

**Part XVI-A Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated

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	50.		
4 Dividends and interest from securities			14	6,485.		
5 Net rental income or (loss) from real estate						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal property						
7 Other investment income						
8 Gain or (loss) from sales of assets other than inventory			18	<32,255.>		
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.		<25,720.>		0.
13 Total Add line 12, columns (b), (d), and (e)					13	<25,720.>

(See worksheet in line 13 instructions to verify calculations.)

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**[illegible]



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FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

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SOURCE	AMOUNT
MERRILL LYNCH	50.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	50.

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FORM 990-PF	DIVIDENDS AND INTEREST FROM SECURITIES	STATEMENT	2
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SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
MERRILL LYNCH DIVIDENDS	6,485.	0.	6,485.
TOTAL TO FM 990-PF, PART I, LN 4	6,485.	0.	6,485.



FORM 990-PF

ACCOUNTING FEES

STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ROBBINS & ASSOC.	3,550.	3,550.		0.
TO FORM 990-PF, PG 1, LN 16B	3,550.	3,550.		0.

FORM 990-PF	OTHER PROFESSIONAL FEES	STATEMENT	4
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MERRILL LYNCH	2,312.	2,312.		0.
TO FORM 990-PF, PG 1, LN 16C	2,312.	2,312.		0.

FORM 990-PF

TAXES

STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAXES	480.	480.		0.
TO FORM 990-PF, PG 1, LN 18	480.	480.		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
SECRETARY OF STATE	10.	0.		10.
ILLINOIS CHARITY BUREAU FUND	15.	0.		15.
TO FORM 990-PF, PG 1, LN 23	25.	0.		25.

FORM 990-PF

CORPORATE STOCK

STATEMENT 7

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
MERRILL LYNCH - SEE STMT.	197,051.	195,128.
TOTAL TO FORM 990-PF, PART II, LINE 10B	197,051.	195,128.

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FORM 990-PF	CORPORATE BONDS	STATEMENT	8
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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
MERRILL LYNCH - SEE STMT.	48,479.	41,471.
TOTAL TO FORM 990-PF, PART II, LINE 10C	48,479.	41,471.



FAMILY FOUNDATION

Account Number 6CW-04A69

24-Hour Assistance, (800) MERRILL  
Access Code 72-629-04269

## YOUR EMA BANK DEPOSIT INTEREST SUMMARY

December 01 2009 - December 31, 2009

Money Account Description	Opening Balance	Average Deposit Balance	Current Yield%	Interest on Deposits	Closing Balance
FIA Card Services, N.A.	25 599	25 897	40	8 69	26,002
<b>TOTAL ML Bank Deposit Program</b>	<b>25 599</b>			<b>8 69</b>	<b>26,002</b>

## YOUR EMA ASSETS

CASH/MONEY ACCOUNTS		Quantity	Total Cost Basis	Estimated Market Price	Estimated Market Value	Estimated Annual Income	Est Annual Yield%
Description							
CASH		284 93	284 93		284.93		
ML BANK DEPOSIT PROGRAM		26,002 00	26,002 00	1 0000	26,002.00	104	40
<b>TOTAL</b>			<b>26,286 93</b>		<b>26,286.93</b>	<b>104</b>	<b>40</b>

EQUITIES		Symbol	Acquired	Quantity	Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain/(Loss)	Estimated Annual Income	Estimated Current Yield%
Description											
ABBOTT LABS		ABT	01/11/00	3	32 6500	97 95	53 9900	161 97	64 02	5	2 96
			03/15/00	100	30 6540	3 065 40	53 9900	5 399 00	2 333 60	160	2 96
Subtotal				103		3,163 35		5,560.97	2,397 62	165	2 96
AMER EXPRESS COMPANY		AXP	03/19/09	150	13 1400	1 971 00	40 5200	6,078.00	4,107 00	108	1 77
AT&T INC		T	08/14/00	20	42 3755	847 51	28 0300	560 60	(286 91)	34	5 99
			03/11/03	80	19 6407	1,571.26	28 0300	2 242 40	671 14	135	5 99
			03/19/09	50	25 4000	1,270 00	28 0300	1,401 50	131 50	84	5 99
Subtotal				150		3,688 77		4,204.50	515 73	253	5 99
AUTOMATIC DATA PROC		ADP	09/19/01	95	43 1868	4,102 75	42 8200	4,067.90	(34 85)	130	3 17
BERKSHIRE HATHAWAY CLB		BRKB	01/11/00	1	1 781 0000	1,781 00	3 286 0000	3 286 00	1,505 00		
			03/15/00	3	1 611 0000	4,833 00	3 286 0000	9 858 00	5,025 00		
Subtotal				4		6,614 00		13,144.00	6,530 00		
BP PLC		BP	08/09/00	30	52 8753	1 586 26	57 9700	1 739 10	152 84	101	5 79
SPON ADR			08/11/00	75	53 9374	4,045 31	57 9700	4 347 75	302 44	252	5 79
Subtotal				105		5,631 57		6,086.85	455 28	353	5 79



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Private Banking and  
Investment Group

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FAMILY FOUNDATION

Account Number 6CW-04A69

YOUR EMA ASSETS

December 01, 2009 December 31, 2009

EQUITIES (continued) Description	Symbol	Acquired	Quantity	Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain/(Loss)	Estimated Current Annual Income	Yield%
BRISTOL-MYERS SQUIBB CO	BMJ	08/11/00	60	48 6596	2,919 58	25 2500	1,515 00	(1,404 58)	77	5 06
		06/20/01	40	52 1097	2,084 39	25 2500	1,010 00	(1 074 39)	52	5 06
		12/06/01	70	54 0000	3,780 00	25 2500	1 767 50	(2,012 50)	90	5 06
Subtotal			170		8,783 97		4,292.50	(4,491 47)	219	5 06
CISCO SYSTEMS INC COM	CSCO	03/11/05	175	18 4600	3,230 51	23 9400	4,189 50	958 99		
		03/19/09	75	16 1900	1,214 25	23 9400	1,795 50	581.25		
Subtotal			250		4,444 76		5,985.00	1,540.24		
COCA COLA COM	KO	07/23/04	10	45 0510	450 51	57 0000	570 00	119 49	17	2 87
		10/12/04	95	39 7053	3,772 01	57 0000	5,415 00	1 642 99	156	2 87
Subtotal			105		4,222 52		5,985.00	1,762 48	173	2 87
COMCAST CORP NEW CL A	CMCSA	07/15/05	270	20 3333	5,490 01	16 8600	4,552.20	(937 81)	103	2 24
COMERICA INC COM	CMA	01/29/03	135	40 3746	5,450 58	29 5700	3,991.95	(1,458 63)	27	67
CONOCOPHILLIPS	COP	06/20/01	101	32 6786	3,300 54	51 0700	5,158.07	1,857 53	202	3 91
COSTCO WHOLESALE CRP DEL	COST	08/11/00	100	35.0001	3,500 01	59 1700	5,917.00	2,416 99	72	1 21
DELL INC	DELL	06/20/01	5	22.9920	114 96	14 3600	71.80	(43 16)		
		04/27/06	145	26.0804	3,781 67	14 3600	2,082 20	(1,699 47)		
		03/29/07	75	23 2974	1,747 31	14 3600	1 077 00	(670 31)		
		03/19/09	100	10 0200	1,002.00	14 3600	1,436 00	434 00		
Subtotal			325		6,645.94		4,667.00	(1,978 94)		
DOW CHEMICAL CO	DOW	04/10/06	165	40 0950	6,615 68	27 6300	4,558.95	(2,056 73)	99	2 17
EL PASO CORPORATION	EP	05/12/04	420	6 7730	2,844 66	9 8300	4,128.60	1,283 94	17	40
EXXON MOBIL CORP COM	XOM	08/14/00	95	41.1875	3,912.82	68 1900	6,478.05	2,565 23	160	2 46
GENERAL ELECTRIC	GE	06/23/08	240	27 5840	6,620 16	15 1300	3,631.20	(2,988 96)	96	2 64
		03/12/09	200	9 3300	1,866 00	15 1300	3,026 00	1 160 00	80	2 64
Subtotal			440		8,486 16		6,657.20	(1,828 96)	176	2 64
HARLEY DAVIDSON INC WIS	HOG	01/15/08	175	38 8857	6,805 00	25 2000	4,410.00	(2,395 00)	70	1 58
INTEL CORP	INTC	06/20/01	80	26 4200	2 113 60	20 4000	1,632 00	(481 60)	45	2 74
		09/07/04	270	19 9448	5 385 10	20 4000	5,508 00	122 90	152	2 74
Subtotal			350		7,498 70		7,140.00	(358 70)	197	2 74



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Private Banking and  
Investment Group



FAMILY FOUNDATION

Account Number 6CW-04A69

24-Hour Assistance (800) MERRILL  
Access Code 72-629-04269

## YOUR EMA ASSETS

December 01, 2009 December 31, 2009

EQUITIES (continued)									
Description	Symbol	Acquired	Quantity	Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain/(Loss)	Estimated Current Annual Income Yield%
JOHNSON AND JOHNSON COM	JNJ	08/14/00	35	48.6877	1,704.07	64.4100	2,254.35	550.28	69 3.04
		07/10/03	70	51.4000	3,598.00	64.4100	4,508.70	910.70	138 3.04
Subtotal			105		5,302.07		6,763.05	1,460.98	207 3.04
JPMORGAN CHASE & CO	JPM	07/19/02	150	26.7000	4,005.00	41.6700	6,250.50	2,245.50	30 4.8
		08/15/07	15	43.4300	651.45	41.6700	625.05	(26.40)	3 4.8
Subtotal			165		4,656.45		6,875.55	2,219.10	33 4.8
LOCKHEED MARTIN CORP	LMT	03/09/04	115	44.7800	5,149.70	75.3500	8,665.25	3,515.55	290 3.34
MEDTRONIC INC COM	MDT	12/22/03	145	47.9900	6,958.55	43.9800	6,377.10	(581.45)	119 1.86
		07/09/09	65	32.5063	2,112.91	43.9800	2,858.70	745.79	54 1.86
Subtotal			210		9,071.46		9,235.80	164.34	173 1.86
MERCK AND CO INC SHS	MRK	12/12/01	10	54.4070	544.07	36.5400	365.40	(178.67)	16 4.15
		12/22/03	135	44.1100	5,954.85	36.5400	4,932.90	(1,021.95)	206 4.15
Subtotal			145		6,498.92		5,298.30	(1,200.62)	222 4.15
MICROSOFT CORP	MSFT	02/01/00	50	50.3126	2,515.63	30.4800	1,524.00	(991.63)	26 1.70
		11/29/00	120	32.2812	3,873.75	30.4800	3,657.60	(216.15)	63 1.70
		02/23/04	140	26.6500	3,731.00	30.4800	4,267.20	536.20	73 1.70
Subtotal			310		10,120.38		9,448.80	(671.58)	162 1.70
MORGAN STANLEY	MS	05/14/02	90	41.1202	3,700.82	29.6000	2,664.00	(1,036.82)	18 6.7
		07/01/08	85	36.4500	3,098.25	29.6000	2,516.00	(582.25)	17 6.7
Subtotal			175		6,799.07		5,180.00	(1,619.07)	35 6.7
ORACLE CORP \$0.01 DEL	ORCL	08/09/00	60	41.7813	2,506.88	24.5300	1,471.80	(1,035.08)	12 8.1
		08/14/00	60	40.6250	2,437.50	24.5300	1,471.80	(965.70)	12 8.1
		11/29/00	180	22.4375	4,038.75	24.5300	4,415.40	376.65	36 8.1
Subtotal			300		8,983.13		7,359.00	(1,624.13)	60 8.1
PFIZER INC	PFE	08/26/03	200	29.9400	5,988.00	18.1900	3,638.00	(2,350.00)	144 3.95
TELLABS INC DEL PV 1CT	TLAB	04/19/00	100	47.7808	4,778.08	5.6800	568.00	(4,210.08)	
		08/14/00	60	64.3750	3,862.50	5.6800	340.80	(3,521.70)	
Subtotal			160		8,640.58		908.80	(7,731.78)	
TRAVELERS COS INC	TRV	03/15/05	85	37.8950	3,221.08	49.8600	4,238.10	1,017.02	113 2.64
USG CORP COM NEW	USG	07/27/07	185	41.0763	7,599.12	14.0500	2,599.25	(4,999.87)	
VERIZON COMMUNICATNS COM	VZ	09/22/03	140	33.2442	4,654.20	33.1300	4,638.20	(16.00)	266 5.73

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FAMILY FOUNDATION

Account Number 6CW-04A69

## YOUR EMA ASSETS

December 01, 2009 - December 31 2009

EQUITIES (continued) Description	Symbol	Acquired	Quantity	Unit Cost Basis	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain/(Loss)	Estimated Current Annual Income	Yield%
WAL-MART STORES INC	WMT	08/09/00	60	54.1251	3,247.51	53.4500	3,207.00	(40.51)	66	2.03
		08/14/00	75	52.6250	3,946.88	53.4500	4,008.75	61.87	82	2.03
Subtotal			135		7,194.39		7,215.75	21.36	148	2.03
<b>TOTAL</b>					<b>197,051.34</b>		<b>195,127.59</b>	<b>(1,923.75)</b>	<b>4,377</b>	<b>2.24</b>

MUTUAL FUNDS/CLOSED END FUNDS/UIT Description	Quantity	Total Client Investment	Cumulative Investment Return	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain/(Loss)	Estimated Current Annual Income	Yield%
ISHARES S&P SMALLCAP 600 INDEX FUND SYMBOL IIR Initial Purchase 07/01/08 Equity 100%	100	6,023	(551)	6,023.74	54.7200	5,472.00	(551.74)	68	1.23
ISHARES MSCI EAFE INDEX FUND SYMBOL EFA Initial Purchase 12/20/06 Equity 100%	300	21,662	(5,078)	21,662.77	55.2800	16,584.00	(5,078.77)	432	2.60
PIMCO COMMODITY REAL RETURN STRATEGY FD CL P SYMBOL PCRPX Initial Purchase 03/29/07 3230 Fractional Share Equity 100%	758	5,954	321	9,232.57	8.2800	6,276.24	(2,956.33)	375	5.96
TEMPLETON GLBL BOND FD ADV CL	1,034	7,999	5,122	11,559.67	12.6900	13,121.46	1,561.79	589	4.48
	1			N/A	12.6900	12.69	N/A	1	4.38
SYMBOL TGBAX Initial Purchase 01/19/07 1810 Fractional Share Fixed Income 100%				N/A	12.6900	2.29	N/A	1	4.48
Subtotal (Fixed Income)						13,136.44			
Subtotal (Equities)						28,334.91			



FAMILY FOUNDATION

Account Number: 6CW-04A69

24-Hour Assistance (800) MERRILL  
Access Code: 72-629-04269

## YOUR EMA ASSETS

December 01, 2009 December 31, 2009

## MUTUAL FUNDS/CLOSED END FUNDS/UIT

(continued) Description	Quantity	Total Client Investment	Cumulative Investment Return	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain/(Loss)	Estimated Current Annual Income	Yield%
<b>TOTAL</b>			(186)	48,478.75		41,471.35	(7,025.05)	1,467	3.54

**Total Client Investment:** Cost of shares directly purchased and still held. Does not include shares purchased through reinvestment.

**Cumulative Investment Return:** Estimated Market Value minus Total Client Investment. Cumulative Investment Return is the capital appreciation (depreciation) of all shares purchased, including shares purchased through reinvestment.

**Unrealized Gain or (Loss):** Estimated Market Value minus Total Cost Basis (total cost of shares directly purchased and still held, as well as cost of shares acquired through reinvestment). Provided for Tax Planning purposes only and is not applicable to retirement accounts.

**Initial Purchase:** Date of your initial investment in this fund.

**Market Timing:** Merrill Lynch's policies prohibit mutual fund market timing, which involves the purchase and sale of mutual fund shares within short periods of time with the intention of capturing short-term profits resulting from market volatility. Market timing may result in lower returns for long-term fund shareholders because market timers capture short-term gains that would otherwise pass to all shareholders and due to increased transaction costs and fewer assets for investment due to the need to retain cash to satisfy redemptions.

## LONG PORTFOLIO

	Adjusted/Total Cost Basis	Estimated Market Value	Unrealized Gain/(Loss)	Estimated Accrued Interest	Estimated Annual Income	Current Yield%
<b>TOTAL</b>	271,817.02	262,885.87	(8,948.80)		5,948	2.26

Total values exclude N/A items

## YOUR EMA TRANSACTIONS

## DIVIDENDS/INTEREST INCOME TRANSACTIONS

Date	Transaction Type	Quantity	Description	Reinvestment	Income	Income Year To Date
12/31	□ Bank Interest		BANK DEPOSIT INTEREST		69	
	Income Total		ML BANK DEPOSIT PROGRAM		8.00	
	Subtotal (Taxable Interest)				8.69	49.94
12/01	* Dividend		CONOCOPHILLIPS		50.50	
			HOLDING 101.0000			
			PAY DATE 12/01/2009			
12/01	* Dividend		INTEL CORP		49.00	
			HOLDING 350.0000			
			PAY DATE 12/01/2009			



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FORM 990-PF

ELECTION UNDER REGULATIONS SECTION  
53.4942(A)-3(D)(2) TO TREAT  
EXCESS QUALIFYING DISTRIBUTIONS  
AS DISTRIBUTIONS OUT OF CORPUS

STATEMENT 9

PURSUANT TO IRC SEC. 4942(H)(2) AND REG. 53.4942(A)-3(D)(2), THE ABOVE  
REFERENCED FOUNDATION HEREBY ELECTS TO TREAT CURRENT YEAR QUALIFYING  
DISTRIBUTIONS IN EXCESS OF THE IMMEDIATELY PRECEDING TAX YEAR'S  
UNDISTRIBUTED INCOME AS BEING MADE OUT OF CORPUS.

FORM 990-PF

PART XV - LINE 1A  
LIST OF FOUNDATION MANAGERS

STATEMENT 10

NAME OF MANAGER

THOMAS A. REYNOLDS, III  
HOPE C. REYNOLDS  
THOMAS A. REYNOLDS, IV

FORM 990-PF

GRANTS AND CONTRIBUTIONS  
PAID DURING THE YEAR

STATEMENT 11

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
CHICAGO BAR FOUNDATION 321 S PLYMOUTH COURT, SUITE 3B CHICAGO, IL 60604	NONE UNRESTRICTED CHARITABLE GIFT	PUBLIC CHARITY	1,000.
GOLF-GREATER ORGANIZATION FOR THE LESS FORTUNATE 306 ROLLWIND GLENVIEW, IL 60025	NONE UNRESTRICTED CHARITABLE GIFT	PUBLIC CHARITY	250.
LINK UNLIMITED 2221 SOUTH STATE STREET CHICAGO, IL 60616	NONE UNRESTRICTED CHARITABLE GIFT	PUBLIC CHARITY	1,500.
LOYOLA ACADEMY 1100 LARAMIE AVENUE WILMETTE, IL 60091	NONE UNRESTRICTED CHARITABLE GIFT	PUBLIC CHARITY	8,000.
NORTH SHORE ALANO 607 LAKE ST. EVANSTON, IL 60201	NONE UNRESTRICTED CHARITABLE GIFT	PUBLIC CHARITY	1,000.
ORIGINAL PROVIDENCE BAPTIST CHURCH 515 N PINE AVE CHICAGO, IL 60644	NONE UNRESTRICTED CHARITABLE GIFT	PUBLIC CHARITY	245.
ST. MARY COLLEGE NOTRE DAME, IN 46556	NONE UNRESTRICTED CHARITABLE GIFT	PUBLIC CHARITY	500.
TOTAL TO FORM 990-PF, PART XV, LINE 3A			12,495.

**The Hope and Tom Reynolds Family Foundation**

FEIN 36-4161117  
2009 Form 990-PF

**Capital Gains and Losses**

2009

<u>Securities Sold</u>			<u>Acquired</u>	<u>Sold</u>	<u>Proceeds</u>	<u>Cost</u>	<u>Gain/(Loss)</u>	<u>Cost</u>	<u>Gain/(Loss)</u>
					<u>Tax</u>	<u>Tax</u>	<u>Tax</u>	<u>Book</u>	<u>Book</u>
120 AMER INTL GROUP INC	P		7/1/2003	3/12/2009	47	6,564	(6,517)	6,564	(6,517)
120 AMER INTL GROUP INC	P		7/1/2008	3/12/2009	47	3,176	(3,129)	3,176	(3,129)
50 AUTOMATIC DATA PROC	P		9/19/2001	3/19/2009	1,826	2,159	(333)	2,159	(333)
10 CITIGROUP INC	P		8/9/2000	3/12/2009	15	504	(489)	504	(489)
73 CITIGROUP INC	P		8/11/2000	3/12/2009	112	3,737	(3,624)	3,737	(3,624)
60 CITIGROUP INC	P		7/21/2004	3/12/2009	92	2,662	(2,570)	2,662	(2,570)
70 CITIGROUP INC	P		11/6/2007	3/12/2009	108	2,460	(2,352)	2,460	(2,352)
45 DISCOVER FINL SVCS	P		5/14/2002	3/12/2009	265	731	(465)	731	(465)
140 R R DONNELLEY SONS	P		3/24/2004	3/12/2009	883	3,919	(3,035)	3,919	(3,035)
10 GANNETT CO	P		1/11/2000	3/12/2009	20	784	(764)	784	(764)
90 GANNETT CO	P		8/14/2000	3/12/2009	179	4,978	(4,799)	4,978	(4,799)
16 INGERSOLL RAND CO LTD A	P		8/11/2000	3/12/2009	216	696	(480)	696	(480)
5 JOHNSON AND JOHNSON COM	P		8/9/2000	3/19/2009	248	238	10	238	10
45 JOHNSON AND JOHNSON COM	P		8/14/2000	3/19/2009	2,232	2,191	41	2,191	41
50 TRAVELERS COS INC	P		3/15/2005	3/19/2009	1,974	1,895	79	1,895	79
907 TEMPLETON GLB BD FD CL A	P		12/20/2006	3/19/2009	10,000	10,000	0	10,000	0
370 KB HOME	P		8/26/2008	4/2/2009	5,462	6,505	(1,042)	6,505	(1,042)
41 BANK OF AMERICA CORP	P		1/11/2000	8/26/2009	730	1,477	(747)	1,477	(747)
22 BANK OF AMERICA CORP	P		8/9/2000	8/26/2009	392	1,020	(628)	1,020	(628)
87 BANK OF AMERICA CORP	P		8/14/2000	8/26/2009	1,549	4,060	(2,510)	4,060	(2,510)
150 AMER EXPRESS COMPANY	P		3/19/2009	11/6/2009	5,595	1,971	3,624	1,971	3,624
50 COSTCO WHOLESALE CRP DEL	P		8/11/2000	11/6/2009	2,957	1,749	1,208	1,749	1,208
50 COCA COLA COM	P		7/23/2004	11/6/2009	2,710	2,252	458	2,252	458
100 DELL INC	P		6/20/2001	11/6/2009	1,483	2,299	(816)	2,299	(816)
500 ISHARES MSCI JAPAN INDEX	P		3/29/2007	11/6/2009	4,801	7,335	(2,534)	7,335	(2,534)
8 GOOGLE INC CL A	P		11/7/2008	11/6/2009	4,390	2,674	1,716	2,674	1,716
70 MICROSOFT CORP	P		1/11/2000	11/6/2009	1,990	3,889	(1,899)	3,889	(1,899)
30 MICROSOFT CORP	P		2/1/2000	11/6/2009	853	1,509	(656)	1,509	(656)
					51,179	83,434	(32,255)	83,434	(32,255)
<u>Cash in Lieu of Fractional Shares</u>									
Various CIL		Various	Various			0	0	0	0
					51,179	83,434	(32,255)	83,434	\$ (32,255)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

<b>Part II</b>		<b>Additional (Not Automatic) 3-Month Extension of Time.</b> Only file the original (no copies needed)	
Type or print  File by the extended due date for filing the return. See instructions	Name of Exempt Organization <b>THE HOPE AND TOM REYNOLDS FAMILY FOUNDATION</b>		Employer identification number <b>36-4161117</b>
	Number, street, and room or suite no. If a P O box, see instructions. <b>1208 PINE STREET</b>		For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions <b>WINNETKA, IL 60093</b>		

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

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

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

**ROBBINS & ASSOCIATES LLC**

- The books are in the care of ☒ **333 W. WACKER DRIVE, SUITE 830 - CHICAGO, IL 60606**

Telephone No. ☒ **312-609-1100**

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 is for

4 I request an additional 3-month extension of time until **NOVEMBER 15, 2010**

5 For calendar year **2009**, or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension

**THE TAXPAYER HAS NOT RECEIVED THE INFORMATION NECESSARY TO FILE A COMPLETE RETURN AND REQUESTS AN ADDITIONAL EXTENSION OF TIME TO FILE.**

<b>8a</b> 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	<b>8a</b>	\$	<b>400.</b>
<b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	<b>8b</b>	\$	<b>400.</b>
<b>c Balance Due.</b> Subtract line 8b from line 8a. 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.	<b>8c</b>	\$	<b>0.</b>

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature  Title ☒ **CPA**

Date ☒ **8/10/10**

Form **8868** (Rev. 4-2009)



Application for Extension of Time To file an  
Exempt Organization Return

OMB No. 1545-1709

► 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](http://www.irs.gov/efile) and click on e-file for Charities & Nonprofits

Type or print  File by the due date for filing your return. See instructions	Name of Exempt Organization <b>THE HOPE AND TOM REYNOLDS FAMILY FOUNDATION</b>	Employer identification number <b>36-4161117</b>
	Number, street, and room or suite no. If a P.O. box, see instructions <b>1208 PINE STREET</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions <b>WINNETKA, IL 60093</b>	

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 |

## ROBBINS &amp; ASSOCIATES LLC

- The books are in the care of ► **333 W. WACKER DRIVE, SUITE 830 - CHICAGO, IL 60606**  
Telephone No ► **312-609-1100** 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

<b>3a</b> 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.	<b>3a</b>	\$	<b>400.</b>
<b>b</b> 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	<b>3b</b>	\$	<b>400.</b>
<b>c</b> <b>Balance Due.</b> 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	<b>3c</b>	\$	<b>0.</b>

**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

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

OMB No 1545-1709

► 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 ☒ **X**
- 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](http://www.irs.gov/efile) and click on e-file for Charities & Nonprofits.

Type or print  File by the due date for filing your return. See instructions.	Name of Exempt Organization <b>THE HOPE AND TOM REYNOLDS FAMILY FOUNDATION</b>	Employer identification number <b>36-4161117</b>
	Number, street, and room or suite no. If a P.O. box, see instructions <b>1208 PINE STREET</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions <b>WINNETKA, IL 60093</b>	

**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 |

### **ROBBINS & ASSOCIATES LLC**

- The books are in the care of ► **333 W. WACKER DRIVE, SUITE 830 - CHICAGO, IL 60606**  
Telephone No ► **312-609-1100** 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

<b>3a</b> 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	<b>3a</b>	\$	<b>400.</b>
<b>b</b> 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	<b>3b</b>	\$	<b>400.</b>
<b>c</b> <b>Balance Due.</b> 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	<b>3c</b>	\$	<b>0.</b>

**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