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## **Return of Private Foundation**

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

OMB No 1545-0052

	t of the Treasury venue Service Note The foundation may be	be able to use a copy of this	return to satisfy state reno	rting requirements.	2009
		24, 2009	, and ending	DEC 31, 2009	. 1
	all that apply:  X Initial return  Amended return	Initial return of a fo	rmer public charity	Final return Name change	
Use the label Otherwi	Name of foundation ORVILLE H. AND SHIRLE	Y I. LARSON	yo L	A Employer identification  36-7517145	number
print or type	i i	livered to street address)	Room/suite	B Telephone number 309-343-71	41
See Spe	cific City or town, state, and ZIP code	<del> =</del>		C If exemption application is pe	
Instruction	GALESBURG, IL 61401 type of organization: X Section 501(c)(3) ex	compt private foundation		D 1 Foreign organizations, 2 Foreign organizations mee check here and attach con	check here
		Other taxable private founda	tion	İ	
Fair ma	arket value of all assets at end of year J Accounting		Accrual	E If private foundation state under section 507(b)(1)(	A), check here
<b>▶</b> \$	2,709,396. (Part I, colu	mn (d) must be on cash b	pasis)	F If the foundation is in a 6 under section 507(b)(1)(	
	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	2,841,852.		N/A	
2	Check if the foundation is not required to attach Sch. B				
3	Interest on savings and temporary cash investments	79.	79.	<del>†</del>	STATEMENT 1
4	Dividends and interest from securities	97,325.	97,325.		STATEMENT 2
	Gross rents				
	Net rental income or (loss)	25,168.			
a pa	Net gain or (loss) from sale of assets not on line 10  Gross sales price for all assets on line 8a  556,216.	23,160.			
Revenue 2	Capital gain net income (from Part IV, line 2)		25,168.		<del></del>
8 2	Net short-term capital gain				
9 10a	Income modifications Gross sales less returns				
Ι.	Less Cost of goods sold				
C	Gross profit or (loss)				
11	Other income				
12	Total Add lines 1 through 11	2,964,424.	122,572.		
13	Compensation of officers, directors, trustees, etc.	12,515.	8,344.		0
14	Other employee-salaries and wages				
2 15 2 16	Person plans, employee benefits  Lega Res NOV 9 9 2010 STIMP 3	616.	0.		0
S I I	Legaties NOV 2 2 2010 STREE 3 According fees 0 2 2 2010 STREE 3 Other professional fees	010.			
X .	Other professional fees				<del> </del>
9 17	Interest OGDEN, UT				
[발 18	Taxes				
.돌 19	Depreciation and depletion				
E 20	Occupancy		<del> </del>		
and Administrative Expenses of 12 05	Travel, conferences, and meetings		<del></del>		
22	Printing and publications Other expenses STMT 4	1,064.	0.		0
Operating 25	Other expenses STMT 4  Total operating and administrative	1,004.	<u> </u>		
Sera	expenses. Add lines 13 through 23	14,195.	8,344.		0
O 25	Contributions, gifts, grants paid	348,507.			348,507
26	Total expenses and disbursements				
	Add lines 24 and 25	362,702.	8,344.		348,507
27	Subtract line 26 from line 12:	0 604 705			
1	Excess of revenue over expenses and disbursements	2,601,722.	114 000	ļ	
	Net investment income (if negative, enter -0-)	-	114,228	N/A	
923501 02-02-10	Adjusted net income (If negative, enter -0-)  LHA For Privacy Act and Paperwork Reduction	Act Notice see the instruct	tions	N/A	Form <b>990-PF</b> (2009

L A	TUUE	п.	WAD SHIKIET	<b>.</b>	TIL
	DIMBE		MD11CM		

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	of year		
드	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing	_				
	2	Savings and temporary cash investments		30,911.	30,911.		
	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 ▶					
छ	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
ĕ	10a	Investments - U.S. and state government obligations STMT 5	0.	1,676,995.	1,694,701.		
	ь	Investments - corporate stock STMT 6	0.	525,927.	598,047.		
	С	Investments - corporate bonds					
	11	investments - land, buildings, and equipment basis		, t			
		Less accumulated depreciation					
	12	Investments - mortgage loans					
	13	Investments - other STMT 7	0.	351,347.	370,330.		
	14	Land, buildings, and equipment: basis					
		Less accumulated depreciation					
	15	Other assets (describe ► STATEMENT 8)	0.	15,407.	15,407.		
_	16	Total assets (to be completed by all filers)	0.	2,600,587.	<u>2,709,396.</u>		
	17	Accounts payable and accrued expenses					
	18	Grants payable					
S	19	Deferred revenue					
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons					
Liabilities	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					
es		and complete lines 24 through 26 and lines 30 and 31.					
ည	ı	Unrestricted					
alai	25	Temporarily restricted					
a B	26	Permanently restricted					
5		Foundations that do not follow SFAS 117, check here					
P		and complete lines 27 through 31.		2 600 507			
Net Assets or Fund Balance	27	Capital stock, trust principal, or current funds	0.	2,600,587. 0.			
SS	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.			
at A	29	Retained earnings, accumulated income, endowment, or other funds	0.	2,600,587.			
ž	30	Total net assets or fund balances	0.	2,600,567.			
	24	Total liabilities and not essets/fund halaness	0.	2,600,587.			
_		Total liabilities and net assets/fund balances					
<u>P</u>	art	Analysis of Changes in Net Assets or Fund E	salances				
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30				
	(mu:	st agree with end-of-year figure reported on prior year's return)		1	0.		
2	Ente	r amount from Part I, line 27a		2	2,601,722.		
3	Othe	r increases not included in line 2 (itemize)	<u> </u>	3	0.		
		lines 1, 2, and 3	_	4	2,601,722.		
		eases not included in line 2 (itemize) > 2010 ACTIVITY		2009 5	1,135.		
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	column (b), line 30	6	2,600,587.		
					Form <b>990-PF</b> (2009)		

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	m 990-PF (2009) CHAF	RITABLE TRUST		III.				36-751	7145	Page 3
Pa		and Losses for Tax or		tincome	17551	Journal Lawred	1 _		<del>-</del>	
	(a) List and descr • 2-story brick wai	ibe the kind(s) of property sold rehouse; or common stock, 200	(e.g., real estate, ) shs. MLC Co.)		( <b>0</b> )   	How acquired - Purchase - Donation	(c) Da (mo.	te acquired , day, yr.)	( <b>d)</b> Dat (mo., d	
1a	PUBLICLY TRADEI	SECURITIES								
b										
С										
d										
e		· · · · · · · · · · · · · · · · · · ·								
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				Gain or (loss lus (f) minus		
a	556,216.			531,04	8.				25	,168.
b	330/2200	<del></del> .	<del></del>							
c										
<del>-ر</del>				-						
									-	
е_	Complete only for assets showing	o gain in column (h) and owner	hy the foundation	n on 12/31/69			/IV Gaine	(Col. (h) gair	minue	
	Complete only for assets showing							ut not less tha		
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		xcess of col. (1) col (1), if any			Loss	es (from col.	(h))	
a									<u>25</u>	<u>,168.</u>
b										
C										
d										
e										
2 1	Capital gain net income or (net ca	If gain, also	enter in Part I, line er -0- in Part I, line	7	_	2			25	,168.
					7					<u>/ =</u>
	Net short-term capital gain or (los If gain, also enter in Part I, line 8,		5) and (6):		}			NT / 7		
	If (loss), enter -0- in Part I, line 8  art V Qualification U	nder Section 4940(e)	for Beduce	Tay on Net	lov	estment	Income	N/A	<u> </u>	
								<u> </u>	37 / 3	
(For	optional use by domestic private	foundations subject to the sect	tion 4940(a) tax o	n net investment ir	ncom	e.)			N/A	
lf se	ection 4940(d)(2) applies, leave th	us part blank.								
						•			<del></del>	<u> </u>
	s the foundation liable for the sect				riod?				Yes	Li No
	es," the foundation does not qual									
1	Enter the appropriate amount in e	each column for each year; see	instructions before	e making any entri	es.				(4)	
	(a) Base period years	(b)			(c)	)		Distri	(d) bution ratio	
(	Calendar year (or tax year beginnir	ng in) Adjusted qualifyin	g distributions	Net value of no	oncha	ritable-use as	sets	(col. (b) dı	vided by col.	(c))
	2008									
	2007									
	2006									
_	2005									
_	2004									
	2001		<del></del>						<del> </del>	
,	Total of line 1, column (d)						2	.		
	Average distribution ratio for the S	5-vear hace period - divide the t	ntal on line 2 hy F	or by the number	r of w	ars	<u> </u>	<u> </u>		
	-		otal off fille 2 by 3	, or by the number	i Oi y	sai s	١,	,		
	the foundation has been in exister	nce it less than 5 years					3			
4	Enter the net value of noncharitab	le-use assets for 2009 from Pa	rt X, line 5				<u>  4</u>		<del></del> -	
E	Multiply line 4 by line 3						5			
J	татру шо тоу шо о						<u> </u>			
6	Enter 1% of net investment incon	ne (1% of Part I, line 27b)					_6			
7	Add lines 5 and 6						1_1	·		
ρ	Enter qualifying distributions fron	n Part XII. line 4						.		
	If line 8 is equal to or greater than		I, line 1b, and com	plete that part usi	ng a 1	1% tax rate.				
	See the Part VI instructions.	,								

ORVILLE H. AND SHIRLEY I. LARSON

_						
_	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4		7517			Page 4
	Exempt operating foundations described in section 4940(d)(2), check here \( \bigcup \) and enter "N/A" on line 1.	-10	300		01101	
14	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
h	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1			2.2	85.
·	of Part I, line 27b	•				<del></del>
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
	Add lines 1 and 2	3			2,2	85.
-	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			2 2	85.
6	Credits/Payments:				<u>. ,</u>	<del></del>
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a					
	Exempt foreign organizations - tax withheld at source 6b					
	Tax paid with application for extension of time to file (Form 8868)  6c  2,500.					
	Backup withholding erroneously withheld  6d		1			
	Total credits and payments. Add lines 6a through 6d	7			2 5	۸۸
_	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached		<del> </del>		4,5	$\frac{00.}{46.}$
8		8				40.
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9	<del>                                     </del>		1	69.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  Enter the amount of line 10 to be: Credited to 2010 estimated tax   169. Refunded	10			<u> </u>	0.
	Enter the amount of line 10 to be: Credited to 2010 estimated tax   169. Refunded   rt VII-A   Statements Regarding Activities	11				<u> </u>
					Yes	No
ıa	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	111		1a	.00	X
	any political campaign?  Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		X
D		d a		10		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	a or				
	distributed by the foundation in connection with the activities					v
	Did the foundation file Form 1120-POL for this year?			1c	-	X
0	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.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
_	managers. > \$ 0.			_		v
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		<u>X</u>
	If "Yes," attach a detailed description of the activities	_				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, of	ı				v
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	18.7	(/7)	4a	-	
	If "Yes," has it filed a tax return on Form 990-T for this year?	IN	I/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
•	If "Yes," attach the statement required by General Instruction T.					
b	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or	<b>1</b>				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	iaw		_		77
_	remain in the governing instrument?			6	37	X
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7_	<u>X</u>	<del></del>
_	If "Yes," complete Part II, col. (c), and Part XV					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	IL CONTRACTOR OF THE CONTRACTO					
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)				77	
_	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	noar				7.7
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV	ጥΜጥ		9	v	X
10	Did any nersons become substantial contributors during the tax year? If "yes " attach a schedule listing their names and addresses.	1 M11	٠ ٦	1 10		ı

Form	ORVILLE H. AND SHIRLEY I. LARSON 1990-PF (2009) CHARITABLE TRUST	26 7515	71 4 5		Page 5
	art VII-A   Statements Regarding Activities (continued)	36-7517	145		aye 3
			T - 1		
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		<u>X</u> _
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?		_13	X	
	Website address ► N/A				
14	The books are in care of FARMERS & MECHANICS BANK  Telephone no	o. <b>▶</b> 309-34	<u>13-7</u>	<u> 141</u>	
	Located at ▶ 21 EAST MAIN STREET, GALESBURG, IL	ZIP+4 <b>►</b> 61	401		
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	/ <u>A</u>	
Pa	art 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
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 X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X 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 X 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				
	• • • • • • • • • • • • • • • • • • • •	Yes X No			
b	olf 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)?	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here				
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		<u> </u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	n		i	
	defined in section 4942(j)(3) or 4942(j)(5)):				
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) begini				
		Yes X No			
	If "Yes," list the years \(\bigs_{				
t	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorr				
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and atta				
	statement - see instructions.)	N/A	2b		
C	: If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.				
_					
38	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	, <del>,</del>			
	during the year?	Yes X No			
	of "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons				
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to				
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule		,		
	Form 4720, to determine if the foundation had excess business holdings in 2009)	N/A	3b		<u>v</u>
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	ace that	4a		X
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purp	use that	,		v
	had not been removed from jeopardy before the first day of the tax year beginning in 2009?		4b		_X_

Form **990-PF** (2009)

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

Part VIII Information About Officers, Directors, Trustees, Foundation Managers Paid Employees, and Contractors (continued)	s, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
	ype of service	(c) Compensation
NONE		
	_	
	···	
	1-1-1-1	
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such	ac the	
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	i as the	Expenses
1 <u>N/A</u>		
		<del></del>
2		
3		
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.  N/A		Amount
1 N/A		
2		
All other program-related investments. See instructions.		<del>- , , .</del>
3		
Total. Add lines 1 through 3	<b>&gt;</b>	0 . Form <b>990-PF</b> (2009)

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		<del></del>
a		1a	3,359,077.
b		1b	117,959.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	3,477,036.
e			
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,477,036.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	52,156.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,424,880.
6	Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	89,609.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	89,609.
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	2c	2,285.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	87,324.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	87,324.
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	87,324.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	, , , , , , , , , , , , , , , , , , , ,	1a	348,507.
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:	i	
а		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	348,507.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	348,507.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	ualifies fo	or the section

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2008	(c) 2008	( <b>d</b> ) 2009
1 Distributable amount for 2009 from Part XI,	Corpus	rears prior to 2006	2000	2009
line 7				87,324.
2 Undistributed income, if any, as of the end of 2009				07,324.
a Enter amount for 2008 only			0.	
b Total for prior years:			•	
S rotario prio yearo		0.		
3 Excess distributions carryover, if any, to 2009.			······································	
<b>a</b> From 2004				
<b>b</b> From 2005				
<b>c</b> From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ►\$ 348,507.				
a Applied to 2008, but not more than line 2a			0.	
<b>b</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				87,324.
e Remaining amount distributed out of corpus	261,183.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	261,183.			
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.	t .	
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	_		1	
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.	064 455			
Subtract lines 7 and 8 from line 6a	261,183.			
10 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008			ı	
e Excess from 2009 261,183.			<u> </u>	Form <b>990-DF</b> (2000)

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:

36-7517145 Page 11

3 Grants and Contributions Paid During the Ye		Payment		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
<u> </u>	or substantial contributor	recipient		
a Paid duning the year AMERICAN HEART ASSOCIATION PO BOX 22249 ST PETERSBURG, FL 33742		501 (C)	FURTHER DONEE'S CHARITABLE PURPOSE	58,084
AMERICAN LUNG ASSOCIATION 13100 W. LISBON ROAD GROOKFIELD, WI 53005		501 (C) (3)	FURTHER DONEE'S CHARITABLE PURPOSE	58,085
UNITED METHODIST FOUNDATION PO BOX 3487 SPRINGFIELD, IL 62708			FURTHER DONEE'S CHARITABLE PURPOSE	116,169
EVANGELICAL LUTHERAN CHURCH IN AMERICA 8765 WEST HIGGINS ROAD CHICAGO, IL 60631			FURTHER DONEE'S CHARITABLE PURPOSE	116,169
Total			<b>▶</b> 3a	348,507
b Approved for future payment				
NONE				
			,	
Total	·	<del></del>	<b>▶</b> 3b	0

36-7517145 Page 12

Part XVI-A	Analysis of Income-Producion	ng Activities
------------	------------------------------	---------------

nter gross amounts unless otherwise indicated.		business income		y section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a		<del></del>			
b		<del></del>			
c					
d					
e					
f		-			
g Fees and contracts from government agencies					
Membership dues and assessments		•			
Interest on savings and temporary cash				-	
investments			14	79.	
Dividends and interest from securities			14	97,325.	
Net rental income or (loss) from real estate:		<del></del>	1-1	3,,5251	
a Debt-financed property		<del></del>	1 1		
b Not debt-financed property			+ + -		
Net rental income or (loss) from personal	<del></del>		+ +	-	
property					
Other investment income		<del></del>	<del></del>		· ·
					-
Gain or (loss) from sales of assets other			1.0	25 160	
than inventory		<del> </del>	18	25,168.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
a	_		$\perp$		
b	_				
C	_				
d	_				· · · · · · · · · · · · · · · · · · ·
e					
Subtotal. Add columns (b), (d), and (e)			).	122,572.	
Total. Add line 12, columns (b), (d), and (e)				13	122,572
See worksheet in line 13 instructions to verify calculations	i.)				
Part XVI-B Relationship of Activitie	s to the Accor	nnlishment of	Exempt Pi	irnoses	
Tielddollollip of Activitie	5 to the Accor	inpliation of	Exemptit		
ine No Explain below how each activity for which i	ncome is reported in	column (e) of Part XV	I-A contributed	importantly to the accomp	lishment of
the foundation's exempt purposes (other the	han by providing fund	ls for such purposes).			
					· · · <del>-</del>

923621 02-02-10

For	n 990-f	PF (2009) CHARI	TABLE	TRUST		.1 11 2/2/2001	ı	36-751	7145	Pa	age 13	
P	art X				o ar	nd Transactions a	and	<b>Relationships With Noncha</b>				
		Exempt Organ	izations									
1	Did th	ne organization directly or indi	rectly engage	e in any of the follo	owing	with any other organizatio	on de	escribed in section 501(c) of		Yes	No	
	the C	ode (other than section 501(c	)(3) organiza	tions) or in sectio	n 527,	, relating to political organi	nizatio	ons?				
а	Trans	fers from the reporting found	ation to a no.	ncharitable exemp	t orga	inization of:						
	(1)	Cash							1a(1)		X	
	(2)	Other assets							1a(2)		Х	
b		transactions;								T		
	(1) 5	Sales of assets to a noncharita	ble exempt o	rganization					1b(1)		Х	
		Purchases of assets from a no	•	=	n				1b(2)		Х	
		Rental of facilities, equipment,							1b(3)		X	
		Reimbursement arrangements							1b(4)		X	
		oans or loan guarantees							1b(5)		X	
	. ,	Performance of services or me	embership or	fundraising solici	tations	S			1b(6)	1	X	
С		ng of facilities, equipment, ma							1c	-	X	
d			-		-	=	wavs	show the fair market value of the goods,		sets.		
				=		• •	-	any transaction or sharing arrangement,		,		
		nn (d) the value of the goods,										
(a)	Line no	(b) Amount involved				exempt organization	T	(d) Description of transfers, transactions, and	sharing a	arıng arrangemen		
				N/.	A		_					
						<del> </del>						
							1					
								· · · · · · · · · · · · · · · · · · ·				
							-					
_												
							┪					
						··· · · · · · · · · · · · · · · · · ·	1					
2a	Is the	foundation directly or indirec	tly affiliated v	with, or related to.	one o	r more tax-exempt organiz	zatio	ons described				
		ction 501(c) of the Code (othe				•		Γ	Yes	ΓX	No	
b		s," complete the following sch						_		·		
		(a) Name of org				(b) Type of organization		(c) Description of relations	hip	•		
		N/A										
								, and to the best of my knowledge and belief, it is	true, com	ect,		
	and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has Summers + Nuchanics Cank, Co-Sustic							any knowledge				
-	by: Dou Hedden T.O. 11-15-10							GrusXObbicer				
e e	Signature of officer or trustee Date						_,	Title				
Ĭ	Preparer's					1 10	Date		er's identi	ying nur	nber	
Sign Here	aid arer's Only		C COU	RTNEY /	L')		1/	12/10 self-				
"	Paid Preparer' Use Only	Firm's name (or yours KELL	Y, CO		R &			EIN ►				
	ra Useu			N ST, SU								
			SBURG		401			Phone no. (309	) 34	3-9	171	

Form **990-PF** (2009)

#### Schedule B (Form 990, 990-EZ.

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

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

OMB No 1545-0047

2009

Employer identification number

	CHARITABLE TRUST	36-7517145	
Organization type (check	k 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 for	oundation	
	527 political organization	·	
Form 990-PF	X 501(c)(3) exempt private foundation		
	4947(a)(1) nonexempt charitable trust treated as a private found	dation	
	501(c)(3) taxable private foundation		
Note. Only a section 501  General Rule	(c)(7), (8), or (10) organization can check boxes for both the General Rule :		
contributor Cor	mplete Parts I and II.		
Special Rules			
509(a)(1) and 17		entribution of the greater of (1) \$5,000 or (2) 2%	
aggregate contr			
contributions fo If this box is che purpose Do not	or use exclusively for religious, charitable, etc , purposes, but these contrib ecked, enter here the total contributions that were received during the yea	utions did not aggregate to more than \$1,000 ar for an exclusively religious, charitable, etc.,	
but it must answer "No"			
LHA For Privacy Act ar	nd Paperwork Reduction Act Notice, see the Instructions	501(c)( ) (enter number) organization     4947(a)(1) nonexempt charitable trust not treated as a private foundation     527 political organization     501(c)(3) exempt private foundation     4947(a)(1) nonexempt charitable trust treated as a private foundation     501(c)(3) taxable private foundation     501(c)(3) taxabl	

for Form 990, 990-EZ, or 990-PF.

Name of organization

ORVILLE H. AND SHIRLEY I. LARSON

CHARITABLE TRUST

Employer identification number 36-7517145

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ORVILLE H LARSON ESTATE  21 E MAIN ST  GALESBURG, IL 61401	\$ 595,553.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	ORVILLE H LARSON ESTATE  21 E MAIN ST  GALESBURG, IL 61401	s2,246,298.	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\ \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Aggregate contributions	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
Ann 24 - 10		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization

ORVILLE H. AND SHIRLEY I. LARSON CHARITABLE TRUST

Employer identification number 36-7517145

HARI	TABLE TRUST		-7517145
art II	Noncash Property (see instructions)		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	DEBT AND EQUITY SECURITIES		
		\$\$.	06/29/09
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		   \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<del></del>		   \$	
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<sub>\$</sub>	

FORM 990-PF INTEREST ON SAV	INGS A	ND TEM	PORARY C	ASH IN	VESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
THRU F&M TRUST					•		79.
TOTAL TO FORM 990-PF, PART I	, LINE	3, CO	LUMN A				79.
FORM 990-PF DIVIDEN	DS AND	INTER	EST FROM	SECUF	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		TAL GAINS	COLUMN (A AMOUNT	)
THRU F&M TRUST			97,325.		0.	97,3	25.
TOTAL TO FM 990-PF, PART I,	LN 4		97,325.		0.	97,3	25.
FORM 990-PF		LEGAL	FEES			STATEMENT	3
DESCRIPTION	EXPE	A) ENSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		
LEGAL FEES		616.		0.			0.
TO FM 990-PF, PG 1, LN 16A		616.	:	0.			0.
FORM 990-PF	C	THER E	XPENSES			STATEMENT	4
DESCRIPTION	EXPE	(A) ENSES BOOKS	(B) NET INV MENT IN	EST-			
INSURANCE UTILIITES		800. 264.		0.		·····	0.
TO FORM 990-PF, PG 1, LN 23		1,064.	-	0.			0.

FORM 990-PF U.S. AND STATE	E/CITY GO	VERNMENT	OBLIGATIONS	STATEMENT	5
DESCRIPTION	U.S. GOV'I		BOOK VALUE	FAIR MARKET VALUE	ר
US TREASURIES MUNICIPAL BONDS	×	х	1,666,592. 10,403.	1,684,24	
TOTAL U.S. GOVERNMENT OBLIGATIONS	3	•	1,666,592.	1,684,24	16.
TOTAL STATE AND MUNICIPAL GOVERNM	MENT OBLI	GATIONS	10,403.	10,45	55.
TOTAL TO FORM 990-PF, PART II, LI	NE 10A	:	1,676,995.	1,694,70	)1.
FORM 990-PF C	CORPORATE	E STOCK		STATEMENT	6
DESCRIPTION			BOOK VALUE	FAIR MARKET	C
COMMON STOCK		•	525,927.	598,04	17.
TOTAL TO FORM 990-PF, PART II, LI	NE 10B	:	525,927.	598,04	17.
FORM 990-PF OT	THER INVE	ESTMENTS		STATEMENT	7
DESCRIPTION		LUATION ETHOD	BOOK VALUE	FAIR MARKET VALUE	ŗ
MUTUAL FUNDS FOREIGN EQUITIES		COST	313,168. 38,179.	325,49 44,84	
TOTAL TO FORM 990-PF, PART II, LI	INE 13	:	351,347.	370,33	30.
			<del></del>	STATEMENT	 8
FORM 990-PF	OTHER A	ASSETS			
DESCRIPTION	· · · · · · · · · · · · · · · · · · ·	NING OF	END OF YEAR BOOK VALUE	FAIR MARKET	
	BEGIN	NING OF		FAIR MARKET	r

FORM 990-PF LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

STATEMENT 9

NAME OF CONTRIBUTOR

ADDRESS

ESTATE OF ORVILLE LARSON

21 EAST MAIN ST GALESBURG, IL 61401

Form 886	8 (Rev. 4-2009)			Page 2
-	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check thi			ightharpoons
	nly complete Part II if you have already been granted an automatic 3-month extension on a previously t	led Form	8868	
	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)			
Part I	<del>                                     </del>	<u> </u>		
Type or	Name of Exempt Organization	Emp	loyer ide	ntification number
print	ORVILLE H. AND SHIRLEY I. LARSON	۔ ا	C 855	<b>54.45</b>
File by the	CHARITABLE TRUST		<u>6-751</u>	
extended due date for	Number, street, and room or suite no. If a P.O. box, see instructions  21 E. MAIN STREET	For II	RS use or	niy
filing the return See instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions		•	
☐ Fo	ype of return to be filed (File a separate application for each return).  yrm 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A  yrm 990-BL X Form 990-PF Form 990-T (trust other than above) Form 4720	=	orm 5227 orm 6069	Form 8870
STOP! D	o not complete Part II if you were not already granted an automatic 3-month extension on a pre-	iously file	d Form 8	3868.
Telep  If the  If this box ▶  4	cooks are in the care of ▶ 21 EAST MAIN STREET - GALESBURG, IL 6 shone No ▶ 309-343-7141 FAX No. ▶  organization does not have an office or place of business in the United States, check this box is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  if it is for part of the group, check this box ▶ and attach a list with the names and EINs of equest an additional 3-month extension of time until or calendar year or other tax year beginning this tax year is for less than 12 months, check reason.  If it is for part of the group, check this box ▶ and attach a list with the names and EINs of equest an additional 3-month extension or time until or calendar year or or other tax year beginning this tax year is for less than 12 months, check reason.  If it is for part of the group, check this box ▶ and attach a list with the names and EINs of the calendar year or other tax year beginning this tax year is for less than 12 months, check reason.  If it is for part of the group, check this box ▶ and attach a list with the names and EINs of the part of the group is for less than 12 months, check reason.  If it is for part of the group, check this box ▶ and attach a list with the names and EINs of the part of the group is foundation in the United States, check this box ▶ and attach a list with the names and EINs of the part of the group is foundation.  If it is for part of the group, check this box ▶ and attach a list with the names and EINs of the United States, check this box ▶ and attach a list with the names and EINs of the United States, check this box ▶ and attach a list with the names and EINs of the United States, check this box ▶ and attach a list with the names and EINs of the United States, check this box ▶ and attach a list with the names and EINs of the United States, check this box ▶ and attach a list with the names and EINs of the United States, check this box ▶ and attach a list with the names and EINs of the United States, check this box ▶ and attach a list with the names and	f this is fo	31, Change	2009 . n accounting period
b  f1	this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated			
	x payments made. Include any prior year overpayment allowed as a credit and any amount paid			
	reviously with Form 8868.	8b	\$	2,500.
c Ba	alance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit			
wi	th FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instruction	ns 8c	\$	0.
	Signature and Verification			
Under pe	nalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and t correct, and complete, and that I am authorized to prepare this form.	o the best o	f my know	ledge and belief,
Signature	Title ▶	Date	<b>•</b>	
				rm <b>8868</b> (Rev. 4-2009

923832 05-26-09