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Form 990-PF

Department of the Treasury

Return of Private Foundation

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

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

2009

OMB No 1545-0052

Internal Revenue Service and ending For calendar year 2009, or tax year beginning Final return G Check all that apply: Initial return Initial return of a former public charity Amended return Address change Name change A Employer identification number Name of foundation Use the IRS label THE COLLINS FAMILY FOUNDATION 41-1792606 Otherwise, Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number print (312) 253 - 4044 or type. 4N1540 N. LAKE SHORE DRIVE See Specific City or town, state, and ZIP code C If exemption application is pending, check here Instructions. CHICAGO, TT. 60610 1. Foreign organizations, check here Foreign organizations meeting the 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated I Fair market value of all assets at end of year J Accounting method: under section 507(b)(1)(A), check here Other (specify) (from Part II, col. (c), line 16) If the foundation is in a 60-month termination 1,773,606. (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here ▶\$ Analysis of Revenue and Expenses Part I (d) Disbursements (a) Revenue and (c) Adjusted net (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) charitable purposes (cash basis only) expenses per books income income 27,669 N/A Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 30,944 30,944 STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 48,367 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 193,172. 48,367 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications c Gross profit 11 Other II 106,980 79.311 12 Total. 0. Other employee salaries 15 Pension plans, employee benefits 16a Legal fees 5,500 0 5,500. **b** Accounting fees STMT 2 720 720 STMT 0. c Other professional fees Administrative | 17 Interest 315 285 30. STMT 4 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications O Other expenses

24 Total operating
expenses. Add

Contributions of 55 STMT 5 88 33. 24 Total operating and administrative <u>6,6</u>23 1.060 5,563. expenses. Add lines 13 through 23 245,075 245,075. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 250,638. 251,698 Add lines 24 and 25 060 27 Subtract line 26 from line 12: <144,718 a Excess of revenue over expenses and disbursements 78,251 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-) Form **990-PF** (2009)

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

1 Total net asse	ts or fund balances at beginning of year - Part II, column (a), line 30		
(must agree v	with end-of-year figure reported on prior year's return)	1	533,202.
2 Enter amount	from Part I, line 27a	2	<144,718.>
3 Other increase	es not included in line 2 (itemize)	3	0.
4 Add lines 1, 2	, and 3	4	388,484.
5 Decreases no	t included in line 2 (itemize)	5	0.
6 Total net asse	ts or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	388,484.
		- '	

_	2008	345,787.	4,049,10/.		•158990
	2007	298,396.	2,011,084.		.148376
_	2006	204,750.	2,056,112.		.099581
_	2005	272,071.	1,759,985.		.154587
_	2004	213,625.	1,784,530.		.119709
	Total of line 1, column (d)		number of uporo	2	.681243
J	the foundation has been in existence if less th	period - divide the total on line 2 by 5, or by the lan 5 years	number of years	3	.136249
4	Enter the net value of noncharitable-use asset	s for 2009 from Part X, line 5		4	1,273,707.
5	Multiply line 4 by line 3		-	5	173,541.
6	Enter 1% of net investment income (1% of Pa	ırt i, line 27b)		_6	783.
7	Add lines 5 and 6			7	174,324.
8	Enter qualifying distributions from Part XII, lin	e 4 .		8	250,638.
	If line 8 is equal to or greater than line 7, chec	k the hox in Part VI, line 1h, and complete that n	art usino a 1% tax rate		

923521 02-02-10

Form **990-PF** (2009)

See the Part VI instructions.

Forn	n 990-PF (2009) THE COLLINS FAMILY FOUNDATION	<u>41-</u>	<u>-17926</u>	06	Page 4
Pa	art VI. Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see in:	structi	ons)
18	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	T			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		1		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1	İ		783.
	of Part I, line 27b		†		<u> </u>
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			783.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	 		0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	 		783.
6	Credits/Payments:	J			105.
	2009 estimated tax payments and 2008 overpayment credited to 2009 [6a] 1,099	1	ļ		
	Exempt foreign organizations - tax withheld at source	┧			
	Tax paid with application for extension of time to file (Form 8868)	┨.			
	Backup withholding erroneously withheld 6d	┥			
	Total credits and payments. Add lines 6a through 6d	┥_		1	000
_		7	 	<u> </u>	<u>099.</u>
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	 		
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9	 		216
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	 		316.
	Enter the amount of line 10 to be: Credited to 2010 estimated tax ► 316. Refunded ► art VII-A Statements Regarding Activities	11	<u> </u>		0.
					- 1 81 -
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interver	ie iu	⊢	. Ye	
	any political campaign?			<u>1a </u>	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		<u> </u>	1b	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ed or		,	'
	distributed by the foundation in connection with the activities.			- '	:
	Did the foundation file Form 1120-POL for this year?		L	1c	<u> </u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				1,
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0	<u>•</u>		- [,
е	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?		L	2	X
	If "Yes," attach a detailed description of the activities			-	4. 볼
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		L	3	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		_	4a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A <u> </u>	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.				1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				٦
	By language in the governing instrument, or			- 1	-
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state.	te law		يلا . هـ	
	remain in the governing instrument?			6 X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7 X	
	If "Yes," complete Part II, col. (c), and Part XV.			134	1
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			1 .,	1 ' '
	IL			- [1
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)			1	ار
	of each state as required by General Instruction G? If "No," attach explanation			3b 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 cal	endar		3 H .	1
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV		1	9	X
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses			10	X
				90-PF	

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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

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

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

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

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

Form 4720, to determine if the foundation had excess business holdings in 2009)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

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N/A

N/A

___ Yes X No

2b

3ь

4a

If "Yes," list the years

during the year?

statement - see instructions.)

Form 990-PF (2009) THE COLLINS FAMILY FOUND			<u>41-17926</u>	06	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	nued)		
5a During the year did the foundation pay or incur any amount to:					
' (1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	□ Y	es X No		ĺ
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indir				
any voter registration drive?		· · · · · · · · · · · · · · · · · · ·	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	22		es X No		1
(4) Provide a grant to an individual for travel, study, or other similar purposes		r	פי באות וויי		1
• • • • • • • • • • • • • • • • • • • •	m described in Section	П.,	(1 2)		
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or				ĺ
the prevention of cruelty to children or animals?			es 🗶 No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	ın Regulations]		ļ
section 53.4945 or in a current notice regarding disaster assistance (see instru	uctions)?		N/A	5b	L
Organizations relying on a current notice regarding disaster assistance check to	nere				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ined			
expenditure responsibility for the grant?			es No		
If "Yes," attach the statement required by Regulations section 53.494		',			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	. ,		H		-
· · · · · · · · · · · · · · · · · · ·	pay premiums on	٠, اسا	□	1 1	Į
a personal benefit contract?		Y6	es X No	. -	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?		-	6b	<u> X</u>
If "Yes" to 6b, file Form 8870.				`	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y€	es 🗶 No 📙		
b If yes, did the foundation receive any proceeds or have any net income attribut				7b	
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highl	y		
Part VIII Paid Employees, and Contractors					
1 List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expe	ense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, allowan	
ARTHUR D. COLLINS, JR.	TRUSTEE	enter -0-1	compensation	anowan	1003
1540 N. LAKE SHORE DRIVE APT. 4N	INUSTEE				
	1 00				_
CHICAGO, IL 60610	1.00	0.	0.		0.
	TRUSTEE				
1540 N. LAKE SHORE DRIVE APT. 4N					
CHICAGO, IL 60610	1.00	0.	0.		0.
100					
				l	
		}			
· · · · · · · · · · · · · · · · · · ·					
Compensation of five highest-paid employees (other than those inc	luded on line 1) If none	optor "NONE "			
- Compensation of the highest-paid employees (other than those me		enter NOIVE.	(d) Contributions to	(a) Evpo	
(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	(e) Expe account, o	other
	devoted to position		compensation	allowan	ces
NONE					
				**	
otal number of other employees paid over \$50,000			<u> </u>		0
			Form 9	990-PF (2	(009

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08540622 099821 411792606

0.

N/A

Total. Add lines 1 through 3

All other program-related investments. See instructions.

P	art X ' Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	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	1,253,557.
	Average of monthly cash balances	1b	39,547.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,293,104.
е	Reduction claimed for blockage or other factors reported on lines 1a and		<u> </u>
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	O.
3	Subtract line 2 from line 1d	3	1,293,104.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	19,397.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,273,707.
6	Minimum investment return. Enter 5% of line 5	6	63,685.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	63,685.
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	783.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	62,902.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	62,902.
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	62,902.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	-	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	250,638.
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:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	250,638.
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	783.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	249,855.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation	ualifies for	

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				62,902.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	ł
b Total for prior years:			-	
		0.	-	,
3 Excess distributions carryover, if any, to 2009:				
a From 2004 125,148.				
b From 2005 185, 180.				
c From 2006 204,750.				
d From 2007 300, 254.				
e From 2008 326,548.				
f Total of lines 3a through e	1,141,880.	·		
4 Qualifying distributions for 2009 from	/			
Part XII, line 4: ►\$ 250,638.				
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 STMT				,
(Election required - see instructions)	250,638.	,		
d Applied to 2009 distributable amount	2307030.			0.
e Remaining amount distributed out of corpus	0.	· · · · · · · · · · · · · · · · · · ·	•	· ·
5 Excess distributions carryover applied to 2009	62,902.		-	62,902.
(If an amount appears in column (d), the same amount must be shown in column (a))	02,502.		, -	02,302.
6 Enter the net total of each column as indicated below:	· · · · · · · · · · · · · · · · · · ·			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,329,616.			3 ^ .
b Prior years' undistributed income. Subtract)			
line 4b from line 2b	5	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	1 43	0.		<u>.</u>
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.		4 4 4	0.	* .
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must	ĺ		· .	
be distributed in 2010			,	0.
7 Amounts treated as distributions out of			,	,
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			,
8 Excess distributions carryover from 2004				· · · · · · · · · · · · · · · · · · ·
not applied on line 5 or line 7	62,246.		,	
9 Excess distributions carryover to 2010.	<u> </u>			
Subtract lines 7 and 8 from line 6a	1,267,370.			
10 Analysis of line 9:	_,,_,			
a Excess from 2005 185, 180.				
b Excess from 2006 204, 750.				
c Excess from 2007 300, 254.				
d Excess from 2008 326, 548.				
e Excess from 2009 250, 638.				
C EAGGES II UIII 2003 230,030 •				Form 990-PF (2000)

Part XIV Private Operating For	INS FAMILY Indations (see ins			41-1/ N/A	92606 Page
1° a If the foundation has received a ruling or d		·· · · · · · · · · · · · · · · · · · ·	 	N/A	·
foundation, and the ruling is effective for 2			′ <u> </u>		
b Check box to indicate whether the foundati	•	<u> </u>	t in section	4942(j)(3) or 49)42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	ig roundation described	Prior 3 years		142())(3)
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for	(4) 4444	(0) 2000	(0) 2001	(0) 2000	(0) 10121
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.					
Subtract line 2d from line 2c			İ		
3 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 Regarding Foundation It a List any managers of the foundation who have (but only if they have contributed more	year-see the in Managers: ave contributed more t	nstructions.) han 2% of the total cor		·	
SEE STATEMENT 7	e man 40,000). (Oce 30	(u)(2).)			
b List any managers of the foundation who o			(or an equally large por	tion of the ownership of a pa	rtnership or
other entity) of which the foundation has a	10 /0 OF GLEATER HIRES	.			
NONE	0	011			
2 Information Regarding Contribution Check here ► X if the foundation only the foundation makes gifts, grants, etc. (see	makes contributions to	o preselected charitable	organizations and does	not accept unsolicited requi complete items 2a, b, c, and	ests for funds. If d.
f a The name, address, and telephone number $f N/A$	of the person to whom	applications should be	e addressed:		
b The form in which applications should be s \mathbf{N}/\mathbf{A}	ubmitted and informati	on and materials they s	should include:		
c Any submission deadlines:				-	
d Any restrictions or limitations on awards, si	uch as by geographical	areas, charitable fields	, kınds of ınstitutions, or	other factors:	
		· · · · · · · · · · · · · · · · · · ·		 	
1000 A 00 00 40					- 000 DC

Recipient	Year or Approved for Future F If recipient is an individual,		D	-
Name and address (home or business)	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
a Paid during the year	or outstantial contributor			
		İ		
SEE STATEMENT 8		1		
Total STATEMENT O			▶ 3a	245,07
Approved for future payment				
NONE				
]			
		1		
		ĺ		
Total			▶ 3b	m 990-PF (200

nter gross amounts unless otherwise indicated.	Unrelated b	Unrelated business income		y section 512, 513, or 514	(e)
The group and and an about the managed.	(a) Business	(b) Amount	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a	_				
b	— 	·			
<u> </u>		.			. ,
d	_				
e					
f	_				
g Fees and contracts from government agencies					·
! Membership dues and assessments					
3 Interest on savings and temporary cash					
investments	<u> </u>			20 011	
Dividends and interest from securities			14	30,944.	· · · · · · · · · · · · · · · · · · ·
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property	<u> </u>				
Net rental income or (loss) from personal					
property					
Other investment income			 		
Gain or (loss) from sales of assets other	i i		1.0	40 267	
than inventory			18	48,367.	
Net income or (loss) from special events Gross profit or (loss) from sales of inventory			 - - 		
Other revenue:			 		
a	I I				
b					
d			 		
			 	- 	
e		C		79,311.	0
Total. Add line 12, columns (b), (d), and (e)			<u> </u>	13	
see worksheet in line 13 instructions to verify calculations	٠,١			13	
					
Part XVI-B Relationship of Activitie	s to the Accom	plishment of I	Exempt Pu	ırposes	
ine No. Explain below how each activity for which	income is reported in ci	Numn (e) of Part YV	-A contributed	importantly to the accomp	lichment of
the foundation's exempt purposes (other t			-A COILLIDUIGU	importantly to the accomp	usiment or
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923622 02-02-10

Form **990-PF** (2009)

Schedule B

(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

тн	E COLLINS FAMILY FOUNDATION	41-1792606
Organization type (check o		11 1/2000
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
General Rule X For an organization contributor Comples Special Rules For a section 501(c 509(a)(1) and 170(b)	(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule in filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in motete Parts I and II. (c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the region (1)(A)(vi), and received from any one contributor, during the year, a contribution of the contribution of the poor of 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II	oney or property) from any one ulations under sections
For a section 501(c	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contri tions of more than \$1,000 for use <i>exclusively</i> for religious, chantable, scientific, literary, ruelty to children or animals. Complete Parts I, II, and III.	
contributions for us If this box is check purpose. Do not co	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contribute exclusively for religious, charitable, etc., purposes, but these contributions did not agreed, enter here the total contributions that were received during the year for an exclusive amplete any of the parts unless the General Rule applies to this organization because it e, etc., contributions of \$5,000 or more during the year	gregate to more than \$1,000. Iy religious, charitable, etc.,
out it must answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 ng requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	
HA For Privacy Act and F for Form 990, 990-EZ		(Form 990, 990-EZ, or 990-PF) (2009)

Employer identification number

THE COLLINS FAMILY FOUNDATION

41-1792606

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ARTHUR D. COLLINS, JR. AND ANNE B. COLLINS 1540 N. LAKE SHORE DRIVE APT. #4N CHICAGO, IL 60610	\$27,669. 	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash 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 Oncash 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 Oncash (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.)

Employer identification number

THE COLLINS FAMILY FOUNDATION

41-1792606

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
_1	7,000 SHARES OF MEDTRONIC, INC. COMMON STOCK		
		\$ 310,135.	12/31/09
(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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	·
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

FORM 990-PF DIVIDENT	OS AND	INTER	EST	FROM	SECU	RITIES	STATEMENT	1
SOURCE		GROSS	AMO	UNT		ITAL GAINS IVIDENDS	COLUMN (A	.)
US BANK	_	·	30,	944.		0.	30,9	44.
TOTAL TO FM 990-PF, PART I, I	LN 4 =	·	30	944.		0.	30,9	44.
FORM 990-PF	ACC	COUNTI	NG E	EES			STATEMENT	2
DESCRIPTION	EXPEI PER I			(B) INVE IT INC		(C) ADJUSTED NET INCOM		
DELOITTE TAX LLP	Ę	5,500.		0.		5,500.		
TO FORM 990-PF, PG 1, LN 16B		5,500.			0.		5,5	00.
FORM 990-PF C	THER E	PROFES	SION	IAL FE	EES		STATEMENT	3
DESCRIPTION	(/ EXPEN PER F	ISES		(B) 'INVE		(C) ADJUSTED NET INCOM		
US BANK INVESTMENT FEES		720.	_		720.			0.
TO FORM 990-PF, PG 1, LN 16C =		720.			720.			0.
FORM 990-PF		TAX	ES				STATEMENT	4
DESCRIPTION	(A EXPEN PER E	ISES		(B) INVE		(C) ADJUSTED NET INCOME	(D) CHARITA E PURPOS	
FOREIGN TAX ON SECURITIES ILLINOIS REGISTRATION FEE		285.			285.			0. 30.
TO FORM 990-PF, PG 1, LN 18		315.		-	285.			30.

		(D) CHARITABLE PURPOSES 33.
FIRST FOUNDATION ADVISORS 55. 5 TO FORM 990-PF, PG 1, LN 23 88. 5	55.	0.
	55.	33.
FORM 990-PF CORPORATE STOCK		
		STATEMENT 6
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
CAPITAL WORLD GROWTH & INCOME FUND EURO PACIFIC GROWTH WASH MUTL INVS FD INC MEDTRONIC INTERMEDIATE BOND FD AMER	46,442. 41,930. 134,487. 98,354. 52,271.	57,543. 57,092. 123,513. 1,468,932. 51,526.
TOTAL TO FORM 990-PF, PART II, LINE 10B	373,484.	1,758,606.

NAME OF MANAGER

ARTHUR D. COLLINS, JR. ANNE B. COLLINS

		AND CONTRIBUTIONS DURING THE YEAR		STAT	EMENT 8
RECIPIENT NAME AND ADDRESS		RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT			
VAIL VALLEY MEDICAL FOUNDATE 181 W. MEADOW DRIVE VAIL 81657		NONE CHARITABLE	501		200.
THE YOUTH FOUNDATION P.O. BOX 2761 EDWARDS, CO 8			501 (3)		400.
SHAW REGIONAL CANCER CENTER 322 BEARD CREEK ROAD PO BOX EDWARDS, CO 81632			501 (3)		500.
2009 ALPHA ANNUAL FUND		NONE CHARITABLE	501 (3)		250.
AMERICAN CANCER SOCIETY 250 WILLIAMS STREET, SUITE 4 ATLANTA, GA 30303	400	NONE CHARITABLE	501 (3)		5,000.
BRAVO VAIL VALLEY MUSIC FEST PO BOX 2270 VAIL, CO 81658		NONE CHARITABLE	501 (3)	(C)	11,400.
HABITAT FOR HUMANITY 121 HABITAT STREET AMERICUS 31709	S, GA	NONE CHARITABLE	501 (3)	(C)	1,000.
MUSEUM OF CONTEMPORARY ART 220 E CHICAGO AVE CHICAGO, 60611	IL	NONE PROMOTION OF ARTS	501 (3)	(C)	1,500.

THE COLLINS FAMILY FOUNDATION			41-1792606
OPPORTUNITY INTERNATIONAL 2122 YORK ROAD SUITE 150 OAK BROOK, IL 60523	NONE CHARITABLE	501 (C) (3)	4,650.
QUAD CITY SPORTS CENTER 700 WEST RIVER DRIVE DAVENPORT, IA 52802	NONE CHARITABLE	501 (C) (3)	10,000.
UNITED STATES ARTISTS 118 NORTH BROAD STREET PHILADELPHIA, PA 19102	NONE CHARITABLE	501 (C) (3)	50,000.
UNIVERSITY OF ST. THOMAS 2115 SUMMIT AVENUE ST PAUL, MN 55105		501 (C) (3)	20,000.
VAIL VALLEY MEDICAL CENTER VOLUNTEER CORP PO BOX 2270 VAIL, CO 81658	NONE CHARITABLE	501 (C) (3)	100.
VAIL BREAST CANCER AWARENESS GROUP P.O. BOX 4043 AVON, CO 81620	NONE CHARITABLE	501 (C) (3)	100.
WHARTON SCHOOL OF UNIVERSITY OF PENNSYLVANIA - 344 VANCE HALL, 3733 SPRUCE STREET PHILADELPHIA, PA 191046360	NONE EDUCATIONAL	501 (C) (3)	130,000.
FOURTH PRESBYTERIAN CHURCH 126 E. CHESTNUT STREET CHICAGO, IL 60611	NONE CHARITABLE	501 (C) (3)	5,100.
ART INSTITUTE OF CHICAGO 111 SOUTH MICHIGAN AVENUE CHICAGO, IL 60603-6404	NONE PROMOTION OF ARTS	501 (C) (3)	175.
MARWEN FOUNDATION 833 NEW ORLEANS ST. CHICAGO, IL 60610	NONE CHARITABLE	501 (C) (3)	1,700.

THE COLLINS FAMILY FOUNDATION			41-1792606
PRAIRIE VIEW HIGH SCHOOL 12909 EAST 120TH AVE HENDERSON, CO 80640-9146	NONE EDUCATIONAL	501 (C) (3)	3,000.

TOTAL TO FORM 990-PF, PART XV, LINE 3A 245,075.

The Collins Family Foundation 41-1792606

ATTACHMENT TO FORM 990-PF, PART XIII, LINE 4c

FOR THE TAX PERIOD ENDED DECEMBER 31, 2009

Election to Treat Qualifying Distributions as Distributions Out of Corpus

The Foundation Manager, Arthur Collins, hereby elects to treat the 2009 qualifying distribution of \$250,638 as a distribution out of corpus under Treasury Regulation § 53.4942(a)-3(d)(2).

Arthur D. Collins

Date

Oupital Gains and Co	SSCS TOT TAX OIL INVESTINCIAL INCOME				
(a) List and 2-story b	d describe the kind(s) of property sol rick warehouse; or common stock, 2	d, e.g., real estate, 00 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
		RMED BD FD OF AM			
				04/06/04	
	F AMERICAN INTER	MED BD FD OF AM (VARIOUS	
c 400 SHS OF MED	TRONIC INC		P	05/12/92	04/08/09
d 1500 SHS OF M	EDTRONIC INC		P		06/19/09
e			-		=.= <i>1</i> = <i>21</i> = <i>2</i>
f					 _
					
9					
<u>h</u>					
1					
k					
<u> </u>					
				ļ	
m					
n					
0					
4.0	(f) Depreciation allowed	(g) Cost or other basis	(h)	Gain or (loss)	
(e) Gross sales price	(or allowable)	plus expense of sale	(e) p	lus (f) minus (g)	
. 12 <i>C</i> E 41			(3) P	. , , (9)	-6 261
a 126,541.	<u> </u>	132,902.			<u><6,361.</u> >
b 3,459.		3,714.			<u> </u>
c 12,052.		1,724.			10,328.
d 51,120.		6,465.			44,655.
e					
f				=	
				_	
9					
h				-	
1					
1					
k					
1					
· · · · · · · · · · · · · · · · · · ·					
m					
n					
0			<u></u>		
Complete only for assets showing	ng gain in column (h) and owned by t	he foundation on 12/31/69	(I) Los	ses (from col. (h))	
	(j) Adjusted basis	(k) Excess of col. (i)	Gains (excess o	f col. (h) gain over	col. (k),
(i) F.M.V. as of 12/31/69	as of 12/31/69	over col. (j), if any	but no	ot less than "-0-")	. ,-
		(I), it all y		 	C 261
a					<u><6,361.</u> >
b					<u><255.</u> >
C					10,328.
d					44,655.
e					
f					
				<u>.</u>	
9					
h					
<u> </u>					
1					
k					
1					
·			·	 -	
m					
n					
0					
		B			
2 Capital gain net income or (net ca	pital loss) { If gain, also enter follows, enter follows.	In Part I, line /	2		48,367.
·		_ 1			20,0011
	ss) as defined in sections 1222(5) and	1 (6):			
If gain, also enter in Part I, line 8,		Pi			
If (loss), enter "-0-" in Part I, line 8)		3	N/A	

Form **8868**

(Rev. April*2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return

OMB No 1545-1709

Form 8868 (Rev. 4-2009)

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. 							
	a ro						
Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)							
corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and comp	plete						
Part I only		▶ □					
Il other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an offile income tax returns.	exten	ision of time					
lectronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension oted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or con ou must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic film www.irs gov/efile and click on e-file for Chanties & Nonprofits	ally if	f (1) you want the additional ated Form 990-T. Instead.					
ype or Name of Exempt Organization	Emp	loyer identification number					
THE COLLINS FAMILY FOUNDATION	4	1-1792606					
Number, street, and room or suite no. If a P.O. box, see instructions 1540 N. LAKE SHORE DRIVE, NO. 4N							
City, town or post office, state, and ZIP code. For a foreign address, see instructions. CHICAGO, IL 60610							
theck type of return to be filed (file a separate application for each return)							
Form 990	27 69						
ARTHUR D. COLLINS The books are in the care of 1540 N. LAKE SHORE DRIVE APT. 4N - CHICA	AGO	, IL 60610					
Telephone No. ► <u>(612)</u> 889 – 2738 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 ox If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this ox If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)							
and attach a list with the harnes and clins of all it	iei iib	ers the extension will cover.					
I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until AUGUST 16 , 2010 , to file the exempt organization return for the organization named ab is for the organization's return for: X calendar year 2009 or tax year beginning , and ending		The extension					
, and criding		- '					
2 If this tax year is for less than 12 months, check reason: Initial return Final return		Change in accounting period					
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.	0-	•					
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	3a	\$ 0.					
tax payments made Include any prior year overpayment allowed as a credit.	3b	\$ 1,099.					
Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).							
See instructions.	3c	s 0.					
aution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8							

923831

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.