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**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

**2009**

Department of the Treasury  
Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements

**Open to Public Inspection**

For the 2009 calendar year, or tax year beginning Feb 1, 2009, and ending Jan 31, 2010

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type See specific instructions.	<b>C</b> Name of organization MARGARET BLOOM TRUST Number and street (or P O box if mail is not delivered to street addr) Room/suite BUSEY TRUST CO., P.O. BOX 260 City, town or country State ZIP code + 4 CHAMPAIGN IL 61824-0260	<b>D</b> Employer Identification Number 37-6224584 <b>E</b> Telephone number (217) 351-2837 <b>G</b> Gross receipts \$ 1,298,434.
<b>F</b> Name and address of principal officer Kathleen Moore, v 100 W. University Champaign IL 61820		<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'No', attach a list (see instructions)	
<b>I</b> Tax-exempt status <input type="checkbox"/> 501(c) ( ) (insert no) <input checked="" type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>H(c)</b> Group exemption number	
<b>J</b> Website: N/A		<b>K</b> Form of organization <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other	
<b>L</b> Year of Formation 1983		<b>M</b> State of legal domicile IL	

**Part I Summary**

	<b>1</b> Briefly describe the organization's mission or most significant activities <u>See statement attached</u>		
Activities & Governance	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	1
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	1
	<b>5</b> Total number of employees (Part V, line 2a)	<b>5</b>	0
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	0
	<b>7a</b> Total gross unrelated business revenue from Part VIII, I column (C), line 12	<b>7a</b>	0.
	<b>7b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	
Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>8</b>	
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>9</b>	
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7e)	<b>10</b>	254,506.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5 and 6, 7f, 7g, 7h, 7i, 7j, 7k, 7l, 7m, 7n, 7o, 7p, 7q, 7r, 7s, 7t, 7u, 7v, 7w, 7x, 7y, 7z)	<b>11</b>	149,835.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>12</b>	404,341.
	<b>13</b> Grants and similar amounts paid (Part IX, column (A), line 3)	<b>13</b>	381,796.
Expenses	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	<b>14</b>	
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>15</b>	50,086.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11)	<b>16a</b>	
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25)	<b>16b</b>	0.
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	<b>17</b>	1,715.
	<b>18</b> Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>18</b>	433,597.
Net Assets or Fund Balances	<b>19</b> Revenue less expenses Subtract line 18 from line 12	<b>19</b>	-29,256.
	<b>20</b> Total assets (Part X, line 16)	<b>20</b>	8,647,875.
	<b>21</b> Total liabilities (Part X, line 26)	<b>21</b>	80,224.
	<b>22</b> Net assets or fund balances Subtract line 21 from line 20	<b>22</b>	8,567,651.

**Part II Signature Block**

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

**Sign Here**

**Busey Trust Company, Trustee**  
 Signature of officer: *Kathleen Moore* Date: 12/15/2010  
 **Kathleen Moore, VP Busey Trust Co., Trustee**  
 Type or print name and title

**Preparer's Use Only**  
 Preparer's signature: *[Signature]* Date: 12/10/10  
 Firm's name (or yours if self-employed) address, and ZIP + 4: YG FINANCIAL GROUP, P.C., 115 WEST CHURCH STREET, CHAMPAIGN IL 61820  
 Check if self-employed:  Preparer's identifying number (see instructions): P00749591  
 EIN: 37-1359694 Phone no: (217) 351-6900

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

SCANNED JAN 10 2011

9-13 20

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

See statement attached

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

Yes No

If 'Yes,' describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

If 'Yes,' describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code ) (Expenses \$ 242,465. including grants of \$ 242,465.) (Revenue \$ 122,630.)

See statement attached

4b (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4c (Code ) (Expenses \$ including grants of \$ ) (Revenue \$ )

4d Other program services (Describe in Schedule O )

(Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 242,465.

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I		X
4	<b>Section 501(c)(3) organizations</b> Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II		N/A
5	<b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III		N/A
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V		X
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
	• Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI		
	• Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII		
	• Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII		
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX		
	• Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X		
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X		
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII		X
12A	Was the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional		
		Yes	No
12 A			X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III		X
20	Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H		X

**Part IV Checklist of Required Schedules (continued)**

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If 'Yes,' complete Schedule I, Parts I and III</i>		X
23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>		X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	NA	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	NP	
d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	NA	
25a <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If 'Yes,' complete Schedule L, Part I</i>		NA
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If 'Yes,' complete Schedule L, Part I</i>		NA
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If 'Yes,' complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If 'Yes,' complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If 'Yes,' complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>		X
36 <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	NA	
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	X	

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Form 990 (2009)

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No
<b>1 a</b>	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable		
<b>1 a</b>	0		
<b>1 b</b>	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		
<b>1 b</b>	0		
<b>1 c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		N/A
<b>2 a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
<b>2 a</b>	0		
<b>2 b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)		N/A
<b>3 a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
<b>3 b</b>	If 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		
<b>4 a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
<b>4 b</b>	If 'Yes,' enter the name of the foreign country: _____ See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts		
<b>5 a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>5 b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>5 c</b>	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		N/A
<b>6 a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
<b>6 b</b>	If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?		N/A
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>7 a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
<b>7 b</b>	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		N/A
<b>7 c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>7 d</b>	If 'Yes,' indicate the number of Forms 8282 filed during the year		N/A
<b>7 e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>7 f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>7 g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		N/A
<b>7 h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		N/A
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		N/A
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>9 a</b>	Did the organization make any taxable distributions under section 4966?		N/A
<b>9 b</b>	Did the organization make any distribution to a donor, donor advisor, or related person?		N/A
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter		
<b>10 a</b>	Initiation fees and capital contributions included on Part VIII, line 12		N/A
<b>10 b</b>	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		N/A
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter		
<b>11 a</b>	Gross income from other members or shareholders		N/A
<b>11 b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		N/A
<b>12 a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	X	
<b>12 b</b>	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year		0.

**Part VI Governance, Management and Disclosure** For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

**Section A. Governing Body and Management**

	Yes	No
1a Enter the number of voting members of the governing body <i>See Stmt attached</i>		
b Enter the number of voting members that are independent <i>See Stmt attached</i>		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?		X
b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		N/A
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13 <i>See Stmt attached</i>	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done	X	
13 Does the organization have a written whistleblower policy? <i>See statement attached</i>	X	
14 Does the organization have a written document retention and destruction policy? <i>See Stmt attached</i>	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official <i>See Stmt attached</i>		X
b Other officers of key employees of the organization		X
If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b If 'Yes,' has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		

**Section C. Disclosures**

- 17 List the states with which a copy of this Form 990 is required to be filed ▶ Illinois
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.
  - Own website
  - Another's website
  - Upon request *See statement attached*
- 19 Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
  - ▶ BUSEY TRUST COMPANY 100 W. UNIVERSITY, CHAMPAIGN IL 61820 (217) 351-2741





**Part VIII Statement of Revenue**

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514		
<b>CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS</b>	<b>1 a</b> Federated campaigns	<b>1 a</b>					
	<b>b</b> Membership dues	<b>1 b</b>					
	<b>c</b> Fundraising events	<b>1 c</b>					
	<b>d</b> Related organizations	<b>1 d</b>					
	<b>e</b> Government grants (contributions)	<b>1 e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1 f</b>					
	<b>g</b> Noncash contribns included in lns 1a-1f	\$					
	<b>h Total.</b> Add lines 1a-1f						
<b>PROGRAM SERVICE REVENUE</b>	<b>Business Code</b>						
	<b>2 a</b> -----						
	<b>b</b> -----						
	<b>c</b> -----						
	<b>d</b> -----						
	<b>e</b> -----						
	<b>f</b> All other program service revenue						
<b>g Total.</b> Add lines 2a-2f							
<b>OTHER REVENUE</b>	<b>3</b> Investment income (including dividends, interest and other similar amounts)		234,382.	0.	0.	234,382.	
	<b>4</b> Income from investment of tax-exempt bond proceeds		0.	0.	0.	0.	
	<b>5</b> Royalties						
	<b>6 a</b> Gross Rents	(i) Real	72,273.				
		(ii) Personal					
	<b>b</b> Less: rental expenses		11,913.				
	<b>c</b> Rental income or (loss)		60,360.				
	<b>d</b> Net rental income or (loss)		60,360.	0.	0.	60,360.	
	<b>7 a</b> Gross amount from sales of assets other than inventory	(i) Securities	991,779.				
		(ii) Other					
	<b>b</b> Less: cost or other basis and sales expenses		1,163,891.				
	<b>c</b> Gain or (loss)		-172,112.				
	<b>d</b> Net gain or (loss)		-172,112.	0.	0.	-172,112.	
	<b>8 a</b> Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	<b>a</b>					
	<b>b</b> Less: direct expenses	<b>b</b>					
<b>c</b> Net income or (loss) from fundraising events							
<b>9 a</b> Gross income from gaming activities See Part IV, line 19	<b>a</b>						
<b>b</b> Less: direct expenses	<b>b</b>						
<b>c</b> Net income or (loss) from gaming activities							
<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>a</b>						
<b>b</b> Less: cost of goods sold	<b>b</b>						
<b>c</b> Net income or (loss) from sales of inventory							
<b>Miscellaneous Revenue</b>		<b>Business Code</b>					
<b>11 a</b> -----							
<b>b</b> -----							
<b>c</b> -----							
<b>d</b> All other revenue							
<b>e Total.</b> Add lines 11a-11d							
<b>12 Total revenue.</b> See instructions		122,630.	0.	0.	122,630.		

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
<b>1</b> Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	242,465.	242,465.		
<b>2</b> Grants and other assistance to individuals in the U.S. See Part IV, line 22				
<b>3</b> Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
<b>4</b> Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	47,047.	0.	47,047.	0.
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B))				
<b>7</b> Other salaries and wages				
<b>8</b> Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
<b>9</b> Other employee benefits				
<b>10</b> Payroll taxes				
<b>11</b> Fees for services (non-employees)				
<b>a</b> Management				
<b>b</b> Legal				
<b>c</b> Accounting	5,215.	0.	5,215.	0.
<b>d</b> Lobbying				
<b>e</b> Prof fundraising svcs. See Part IV, ln 17				
<b>f</b> Investment management fees				
<b>g</b> Other				
<b>12</b> Advertising and promotion				
<b>13</b> Office expenses				
<b>14</b> Information technology				
<b>15</b> Royalties				
<b>16</b> Occupancy				
<b>17</b> Travel				
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials				
<b>19</b> Conferences, conventions, and meetings				
<b>20</b> Interest				
<b>21</b> Payments to affiliates				
<b>22</b> Depreciation, depletion, and amortization	0.	0.	0.	0.
<b>23</b> Insurance				
<b>24</b> Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
<b>a</b> MISCELLANEOUS	15.	0.	15.	0.
<b>b</b> -----				
<b>c</b> -----				
<b>d</b> -----				
<b>e</b> -----				
<b>f</b> All other expenses				
<b>25</b> Total functional expenses. Add lines 1 through 24f	294,742.	242,465.	52,277.	0.
<b>26</b> Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year		
ASSETS	1	Cash – non-interest-bearing	0.	1	0.	
	2	Savings and temporary cash investments	590,002.	2	345,351.	
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net		4		
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5		
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6		
	7	Notes and loans receivable, net		7		
	8	Inventories for sale or use		8		
	9	Prepaid expenses and deferred charges		9		
	10a	Land, buildings, and equipment: cost or other basis Complete Part VI of Schedule D	1,128,552.			
	b	Less accumulated depreciation	3,250.	1,125,302.	10c	1,125,302.
	11	Investments – publicly-traded securities	6,932,571.	11	7,067,600.	
	12	Investments – other securities See Part IV, line 11		12		
	13	Investments – program-related See Part IV, line 11		13		
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11		15		
16	<b>Total assets</b> Add lines 1 through 15 (must equal line 34)	8,647,875.	16	8,538,253.		
LIABILITIES	17	Accounts payable and accrued expenses		17		
	18	Grants payable	80,224.	18	142,715.	
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities		20		
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21		
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22		
	23	Secured mortgages and notes payable to unrelated third parties		23		
	24	Unsecured notes and loans payable to unrelated third parties		24		
	25	Other liabilities Complete Part X of Schedule D		25		
	26	<b>Total liabilities.</b> Add lines 17 through 25	80,224.	26	142,715.	
FUNDS OR BALANCES	<b>Organizations that follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 27 through 29 and lines 33 and 34.</b>					
	27	Unrestricted net assets		27		
	28	Temporarily restricted net assets		28		
	29	Permanently restricted net assets		29		
	<b>Organizations that do not follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 30 through 34.</b>					
	30	Capital stock or trust principal, or current funds	8,567,651.	30	8,395,538.	
	31	Paid-in or capital surplus, or land, building, and equipment fund		31		
	32	Retained earnings, endowment, accumulated income, or other funds		32		
	33	<b>Total net assets or fund balances</b>	8,567,651.	33	8,395,538.	
	34	<b>Total liabilities and net assets/fund balances</b>	8,647,875.	34	8,538,253.	

BAA

**Part XI Financial Statements and Reporting**

1 Accounting method used to prepare the Form 990  Cash  Accrual  Other

If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

b Were the organization's financial statements audited by an independent accountant?

c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both

Separate basis  Consolidated basis  Both consolidated and separate basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		X
2b		X
2c		N/A
3a		X
3b		N/A

BAA

Form 990 (2009)

**SCHEDULE A**  
(Form 990 or 990-EZ)

**Public Charity Status and Public Support**

OMB No 1545-0047

**2009**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization

Employer identification number

**MARGARET BLOOM TRUST**

**37-6224584**

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3  A hospital or cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An organization that normally receives (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I
  - b  Type II
  - c  Type III – Functionally integrated
  - d  Type III – Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

*SEE STATEMENT ATTACHED*

- (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
- (ii) a family member of a person described in (i) above?
- (iii) a 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11 g (i)		X
11 g (ii)		X
11 g (iii)		X

h Provide the following information about the supported organizations

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U.S.?		(vii) Amount of Support
			Yes	No	Yes	No	Yes	No	
Univ of IL Fdn	37-6176582	5	X		X		X		242,465.
<b>Total</b>									<b>242,465.</b>

**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
<b>3</b> The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						
<b>4 Total.</b> Add lines 1-through 3						
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
<b>6 Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>7</b> Amounts from line 4						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions)					<b>12</b>	
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	%
<b>15</b> Public support percentage from 2008 Schedule A, Part II, line 14	<b>15</b>	%
<b>16a 33-1/3 support test – 2009.</b> If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>b 33-1/3 support test – 2008.</b> If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>17a 10%-facts-and-circumstances test – 2009.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>b 10%-facts-and-circumstances test – 2008.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
<b>18 Private foundation.</b> If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		



SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. Attach to Form 990. See separate instructions

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization

Employer identification number

MARGARET BLOOM TRUST

37-6224584

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. N/A

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate contributions to (during year), 3 Aggregate grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors...?, 6 Did the organization inform all grantees...?

Part II Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, line 7. N/A

Table with 2 columns: Description, Held at the End of the Year. Rows include: 1 Purpose(s) of conservation easements held by the organization, 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?, 9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. N/A

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items, 1b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X, 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

3 Using the organization's acquisition accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

- a  Public exhibition
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements** Complete if organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. N/A

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

b If 'Yes,' explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

b If 'Yes,' explain the arrangement in Part XIV

**Part V Endowment Funds** Complete if organization answered 'Yes' to Form 990, Part IV, line 10 N/A

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ▶ \_\_\_\_\_ %
- b Permanent endowment ▶ \_\_\_\_\_ %
- c Term endowment ▶ \_\_\_\_\_ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

	Yes	No
3a(i) unrelated organizations		
3a(ii) related organizations		
3b		

- (i) unrelated organizations
- (ii) related organizations

b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds

**Part VI Investments—Land, Buildings, and Equipment.** See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book Value
1a Land	1,125,302.			1,125,302.
b Buildings				
c Leasehold improvements				
d Equipment				
e Other	3,250.		3,250.	0.

**Total.** Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c) ) ▶ 1,125,302.

BAA



**Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements** N/A

1 Total revenue (Form 990, Part VIII, column (A), line 12)	
2 Total expenses (Form 990, Part IX, column (A), line 25)	
3 Excess or (deficit) for the year Subtract line 2 from line 1	
4 Net unrealized gains (losses) on investments	
5 Donated services and use of facilities	
6 Investment expenses	
7 Prior period adjustments	
8 Other (Describe in Part XIV)	
9 Total adjustments (net) Add lines 4 through 8	
10 Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return** N/A

1 Total revenue, gains, and other support per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains on investments	2a		
b Donated services and use of facilities	2b		
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIV)	2d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investments expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIV)	4b		
c Add lines 4a and 4b		4c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return** N/A

1 Total expenses and losses per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a Donated services and use of facilities	2a		
b Prior year adjustments	2b		
c Other losses	2c		
d Other (Describe in Part XIV)	2d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investments expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIV)	4b		
c Add lines 4a and 4b		4c	
5 Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18)		5	

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

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Margaret Bloom Trust  
E-I # 37-6224584  
Form 990  
Year Ended January, 31, 2010

Election Pursuant to Regulation 1.642(c)(-1)(b) to Treat Contributions as Paid in  
Preceding Taxable Year

Taxpayer is a charitable trust under Section 4947(a)(1). For year ended year ended January 31, 2010, it is filing Form 990 in lieu of Form 1041 pursuant to Revenue Procedure 93-32. Pursuant to Section 642(c) and Regulation 1.624(c)-4 the Trust is entitled to an unlimited charitable deduction. Further, it hereby confirms its practice in previous years to treat amounts paid as charitable contributions in the taxable year following the current year.

For the year ended January 31, 2010, the amount subject to the election is \$142,715.12. Said amount is payable to the University of Illinois Foundation subsequent to January 31, 2010 but no later than January 31, 2011.

Further, the amount of \$80,224.40, which was paid during the fiscal year end of January 31, 2010, was treated as paid for the year ended January 31, 2009.

Margaret Bloom Trust  
E.I. # 37-6224584  
Form 990  
Year End January 31, 2010

**Page 1, Part I – Summary and Page 2, Part III – Statement of Program Service Accomplishments**

Line 1 - Organization's Mission

The organization is a charitable trust that was created under the will of Margaret Bloom whose date of death was September 29, 1981. Said trust provides that the assets of the trust are to be held in trust by the trustee for the use and benefit of the University of Illinois Foundation in the providing of scholarships at the University of Illinois, Urbana, Illinois. Income of the trust is to be used solely for the education and maintenance of students at the University of Illinois who meet certain conditions provided in the trust and whose parents are financially unable to provide for their college education.

**Page 2, Part III – Statement of Program Service Accomplishments**

Line 4a - Exempt purpose achievements

For the fiscal year ended January 31, 2010 the Trust distributed \$242,465 to the University of Illinois Foundation for providing scholarships. While the final numbers for the 2009-2010 school year are not yet available, prior years indicate that in any one school year, as many as 384 students received scholarships as a result of this Trust's support.

**Page 6, Part VI, Section A – Governing Body and Management**

Line 1 – Governing Body

The organization is a charitable trust; as such, it does not have any voting members. It is directed and managed by an independent corporate trustee, Busey Trust Company.

**Page 6, Part VI - Governance, Management and Disclosure**

**Section B-Policies**

Lines 12, 13 and 14

Margaret Bloom Trust  
E.I. # 37-6224584  
Form 990  
Year End January 31, 2010

The organization is a charitable trust. Its trustee is Busey Trust Company. Busey Trust Company, as a separate organization, does have a written conflict of interest policy. Its officers, directors and employees are required to disclose annually interests that could give rise to conflicts. The Busey Trust Company regularly and consistently monitors and enforces compliance with this policy through employee education and representation.

Busey Trust Company also has a written whistleblower policy and a written document retention and destruction policy.

## **Page 6, Part VI - Governance, Management and Disclosure**

### **Section B-Policies**

#### **Line 15 - Compensation**

Busey Trust Company, as trustee of the Margaret Bloom Trust, sets its fees based on its standard fee schedule used in assessing fees to all exempt organization clients. Its fee schedule is comparable to industry fee schedules in the area.

## **Page 6, Part VI - Governance, Management and Disclosure**

### **Section C - Disclosures**

#### **Line 18 - Filing of Form 1023**

The Margaret Bloom Trust is a charitable trust. The Trustee is in the process of preparing Form 1023, Application for Recognition of Exemption Under Section 501(c)(3) to request a determination as the Trust's status as an exempt organization under 501(c)(3) and a supporting organization under 509(a)(3). She plans to file this no later than January 31, 2011.

## **Schedule A - Public Charity Status and Public Support**

### **Part I - Reason for Public Charity Status**

#### **Line 11f - Written Determination as to Type III Supporting Organization**

See above re line 18

Margaret Bloom Trust  
E.I. #37-6224584  
Year ended January 31, 2010 Form 990

Page 11, Part X, Line 11  
Investments - Publicly-Traded Securities Statement

Description	Cost or FMV	Beginning of Year	End of Year
Abbott Labs	Cost	-	20,136
Acadian Emerging Mkt Adv Inner Circle	Cost	31,500	63,940
Accenture Ltd Bermuda	Cost	69,327	69,327
Adobe Systems, Inc.	Cost	54,657	59,578
American Europacific	Cost	201,843	201,843
American Express Company	Cost	61,348	61,348
American Express Bk Centurion CD	Cost	-	50,000
Amgen, Inc.	Cost	63,006	63,006
Applied Materials, Inc.	Cost	32,877	32,877
Automatic Data Processing	Cost	37,844	37,844
Best Buy, Inc.	Cost	72,337	-
BHP Billiton	Cost	-	81,392
Blackrock, Inc.	Cost	25,893	25,893
Busey Bank	Cost	50,000	-
Capital One Bank	Cost	100,000	100,000
Capmark Bank Midvale, UT 3.6%, 9/10/09	Cost	15,000	-
Caterpillar, Inc.	Cost	161,114	161,114
Chevron Corp New	Cost	61,569	61,569
Cisco Systems, Inc.	Cost	25,347	45,307
Colgate Palmolive Co.	Cost	5,768	29,135
Conoco Phillips	Cost	129,517	129,517
Covance, Inc.	Cost	85,690	85,690
Cuday Wisconsin 4.05%, 10/01/2016	Cost	-	20,237
Danaher Corp.	Cost	9,763	19,316
Dentsply	Cost	-	17,384
Diageo PLC	Cost	-	28,849
Discover Bank 3.45%, 2/27/09	Cost	95,000	-
Discover Bank 4.3%, 8/20/10	Cost	55,000	55,000
Dreyfus Invst Funds Boston Small Cap Val	Cost	293,396	293,396
East Peoria IL 5.25%, 1/01/15	Cost	160,000	160,000
Eau Claire Wis Area 4.5%, 4/01/2016	Cost	-	65,000
Expeditors Intl Wash, Inc.	Cost	14,374	16,732
Exxon Mobil Corp.	Cost	24,120	33,284
Fidelity Advisor Ser I	Cost	53,500	-
Fidelity Diversified	Cost	-	61,538
Fidelity Small-Cap	Cost	-	75,825

Description	Cost or FMV	Beginning of Year	End of Year
FNMA 5.75%, 3/25/36	Cost	44,324	-
FNMA Gtd Mtg Pool 6.5%, 2/01/31	Cost	11,200	10,924
FNMA CMO 5.5%, 6/15/36	Cost	-	23,997
FGLMC CMO 5.5%, 6/15/35	Cost	-	15,300
General Dynamics Corp	Cost	31,746	-
General Electric	Cost	27,825	30,842
General Electric Cap Corp 4.8%, 5/01/13	Cost	65,180	65,144
General Electric Cap Corp 5.375%, 10/20/16	Cost	-	47,162
General Mills, Inc.	Cost	17,614	17,614
Goldman Sachs Group	Cost	11,653	11,653
GNMA 6.5%, 1/20/29	Cost	5,684	4,722
GNMA 6.5%, 9/20/28	Cost	3,640	2,950
GNMA REMIC Trust 5.5%, 5/20/37	Cost	159,588	-
Greenville, SC 6.18%, 7/01/11	Cost	51,862	51,142
Hewlett Packard Co.	Cost	9,644	-
Home Depot	Cost	69,636	69,636
ITT	Cost	-	16,607
Indiana 4.08%, 1/15/10	Cost	105,000	-
Indiana Univ 3.773%, 12/01/16	Cost	-	100,000
IBM	Cost	30,512	40,334
Investors Cmnty Bank 3.5%, 11/27/09	Cost	95,000	-
Ishares Tr MSCI Eafe Index	Cost	28,690	65,265
Ishares S&P 400	Cost	-	78,138
Ishares Tr S&P Midcap	Cost	23,587	-
Ishares Tr Russell 2000 Index	Cost	60,333	68,818
Ishares Tr US Utilities	Cost	66,482	76,469
Ishares Tr US Telecomm	Cost	95,073	95,073
Ishares Tr DJ US Bas Matl	Cost	91,127	-
Ishares Materials	Cost	-	106,242
Ivy Tech	Cost	-	95,000
Johnson & Johnson	Cost	117,018	117,018
Kraft Foods, Inc. 6.25%, 6/01/12	Cost	78,254	77,382
Lilly, Eli	Cost	-	17,048
Lokheed Martin Corp.	Cost	4,858	-
Marathon Oil Corp.	Cost	50,837	50,837
McDonalds Corp.	Cost	19,341	19,341
Medtronic	Cost	-	17,945
Microsoft Corp.	Cost	125,849	125,849
Mississippi State 6.25%, 2/01/11	Cost	50,057	50,036
Monsanto	Cost	-	13,303
Nashua, NH 6.375%, 7/15/10	Cost	62,095	60,708
National Oilwell, Inc.	Cost	42,786	45,096

Description	Cost or FMV	Beginning of Year	End of Year
Nike, Inc.	Cost	2,143	12,007
Northern Trust	Cost	-	27,588
Omnicom Group, Inc.	Cost	33,759	-
Oracle Corp.	Cost	42,523	47,533
Palatine, IL 5.6%, 12/01/09	Cost	98,035	-
Patronage Stock	Cost	743	906
Peoria Cnty IL, 4.375%, 1/01/15	Cost	-	51,840
PepsiCo, Inc.	Cost	127,457	127,457
Pfizer, Inc.	Cost	152,029	-
Pitney-Bowes	Cost	44,216	-
Procter & Gamble	Cost	-	29,191
Purchased Interest	Cost	-	36
Riverside Nat'l Bank FL 3.6%, 10/12/10	Cost	50,000	50,000
Robert Half Intl, Inc.	Cost	5,003	-
Robinson PA Wtr & Swr 5.25%, 5/15/15	Cost	-	53,051
Sangamon Cnty IL 4%, 2/01/15	Cost	-	25,000
Sei Investments, Co.	Cost	17,657	19,676
Schlumberger, Ltd.	Cost	33,881	43,752
Southern IL Univ 3.625%, 2/01/15	Cost	-	50,462
Staples, Inc.	Cost	535	11,976
Starbucks, Corp.	Cost	539	11,729
State Street Corp.	Cost	17,739	23,357
Sysco Corp	Cost	-	28,081
3M Co.	Cost	60,303	-
T-Rowe Price Mid-Cap Growth	Cost	17,600	77,773
Talladega Cty, AL 5%, 1/01/11	Cost	100,382	100,196
Templeton Tifi Foreign Equity Series	Cost	164,660	164,660
TN Valley Auth 6%, 3/15/13	Cost	51,369	51,093
Teva Pharma	Cost	-	20,059
Transocean, Inc.	Cost	19,410	33,728
United Cent Bank 3.75%, 12/30/09	Cost	25,000	-
United Technologies	Cost	-	16,632
FFCB 3.75%, 4/09/10	Cost	49,687	49,687
FFCB 3.98%, 1/22/15	Cost	99,644	99,644
FFCB 4.875%, 11/16/11	Cost	120,749	122,079
FFCB 4.9%, 12/29/14	Cost	265,975	265,570
FFCB 5.125%, 8/28/13	Cost	55,590	55,483
FFCB 6.0%, 3/07/11	Cost	165,345	165,213
FHLB 3%, 6/24/13	Cost	-	25,446
FHLB 4.42%, 5/28/13	Cost	47,942	-
FHLB 4.75%, 8/13/10	Cost	25,369	25,188
FHLB 4.875%, 6/08/12	Cost	98,813	98,813

Description	Cost or FMV	Beginning of Year	End of Year
FHLB 4.875%, 6/12/15	Cost	56,151	55,996
FHLB 5%, 12/21/2015	Cost	-	37,539
FHLB 5.125%, 9/29/10	Cost	130,160	127,618
FHLB 5.25%, 9/13/13	Cost	-	33,226
FHLB 5.25%, 3/19/14	Cost	9,778	9,813
FHLB 5.25%, 9/12/14	Cost	106,075	160,374
FHLB 5.5%, 12/11/13	Cost	165,160	163,293
FHLB 5.95%, 3/16/09	Cost	55,083	-
FHLB 6.3%, 6/03/09	Cost	40,226	-
FHLMC 4.35%, 6/03/13	Cost	21,927	-
FHLMC Gold 4.5%, 4/01/20	Cost	93,185	73,113
FHLMC Gold 4.5%, 6/01/13	Cost	92,697	60,304
FHLMC 5.5%, 5/15/35	Cost	29,432	-
FHLMC 5.5%, 6/15/35	Cost	48,861	-
FHLMC REMIC Series 5.5%, 4/15/37	Cost	53,637	39,265
Fiserv, Inc.	Cost	32,745	-
Vanguard Mid-Cap	Cost	237,694	237,694
Wal-Mart Stores, Inc.	Cost	12,163	27,669
Walt Disney	Cost	-	11,979
Waste Management	Cost	-	28,684
Wells Fargo	Cost	102,455	102,455
Zions Bancorp	Cost	4,760	-
Total		<u>6,932,571</u>	<u>7,067,600</u>

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

Department of the Treasury  
Internal Revenue Service

► **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*

<b>Type or print</b>  <small>File by the due date for filing your return. See instructions</small>	Name of Exempt Organization <b>MARGARET BLOOM TRUST</b>	Employer identification number <b>37-6224584</b>
	Number, street, and room or suite number. If a P.O. box, see instructions <b>BUSEY TRUST CO., P.O. BOX 260</b>	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions <b>CHAMPAIGN IL 61824-0260</b>	

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

<input checked="" 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 (section 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 type="checkbox"/> Form 990-PF	<input type="checkbox"/> Form 1041-A	<input type="checkbox"/> Form 8870

• The books are in the care of ► BUSEY TRUST COMPANY -----

Telephone No ► (217) 351-2741 ----- 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 Sep 15, 20 10, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- calendar year 20 \_\_\_ or
- tax year beginning Feb 1, 20 09, and ending Jan 31, 20 10

**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>	\$	0.
<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>	\$	0.
<b>c 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>	\$	0.

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

**BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.**

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

**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).

**Part II Additional (Not Automatic) 3-Month Extension of Time.** 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>MARGARET BLOOM TRUST</b>		Employer identification number <b>37-6224584</b>
	Number, street, and room or suite number. If a P.O. box, see instructions. <b>BUSEY TRUST CO., P.O. BOX 260</b>		For IRS use only
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. <b>CHAMPAIGN IL 61824-0260</b>		

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

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

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

- The books are in care of  Busey Trust Company  
Telephone No (217) 351-2837 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

- I request an additional 3-month extension of time until Dec 15, 20 10.
- For calendar year , or other tax year beginning Feb 1, 20 09, and ending Jan 31, 20 10
- If this tax year is for less than 12 months, check reason.  Initial return  Final return  Change in accounting period
- State in detail why you need the extension Additional time is needed to determine effect of Pension Protection Act on the reporting requirements for the Bloom Trust.

<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> \$	4,850.
<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> \$	0.
<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 instrs	<b>8c</b> \$	4,850.

**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 9/14/10