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

OMB No 1545-0052

| Department of the Treasury Internal Revenue Service Note: The foundation may | | | | Treated as a Private Foundation be able to use a copy of this return to satisfy state reporting requirements | | | | | s | 20 | U9 | | | | |
|--|--------------------------|-----------|---------------------------------------|--|--------------------------------------|-----------|--------------------|--------------------|-----------------------|---------------------------------------|-------------|--|--|----------------|--|
| F | or ca | lendar | | | tax year begin | | ··· | | ^{'01} , 2009 | | | | | 06/30 |) , 20 10 |
| | | | hat apply. | | Initial return | | Initia | | of a former p | | | | Fin | al retur | n . |
| | | | , | | Amended re | eturn | Address change | | | —∸i | Name change | | | | |
| _ | | | Name of fo | unda | | | | | <u> </u> | <u> </u> | | A Employer iden | tification | number | |
| | lea ti | he IRS | | | FAMILY FO | radnu | CION | | | | | | | | |
| | label. C/O BRUCE E. HUEY | | | | | | | | | | 3 | 6-441 | 7758 | | |
| | | rwise, | | | eet (or PO box r | number if | mail is not delive | red to street | address) | Room/su | ute | B Telephone number | | | ections) |
| | pr | int | l manneor an | u 0 | 001 (01.1 0 00.1 | | mail to mot donvo | | | ''' | | C verepriene name | (000 p= g 0 | | , |
| | or t | ype. | P.O. BC | ν 1 | 1055 | | | | | | | (| 708) | 799-6 | 5800 |
| See Specific City or town, state, and ZIP code | | | · · · · · · · · · · · · · · · · · · · | | | l | | C If exemption app | | | 7000 | | | | |
| ı | nstru | ctions. | City of town | 11, 510 | ate, and zir cou | 5 | | | | | | pending, check h | nere | • • • • | · [|
| HOMEWOOD, IL 60430 | | | | | | | | | | D 1 Foreign organizations, check here | | | | | |
| _ | | | | | | 5046 | | | | | | 2 Foreign organizations meeting the 85% test, check here and attach | | | |
| Н | | | - | | Sectio | • | | - | | | | computation | | | . ▶∟_ |
| 1 | | | | | empt charitable | | | | ivate founda | | | E If private founds | ation status | was termin | nated |
| ı | | | t value of a | | | | unting metho | | ash Acc | crual | | under section 50 |)7(b)(1)(A), | check here | . ▶∐ |
| | • | • | m Part II, co | | | | ther (specify) | | - | | 1 | F If the foundation is in a 60-month termination | | | |
| _ | | ▶ \$ | 1,1 | | | | column (d) m | ust be on | cash basis) | | | under section 50 | - 1 | | |
| Li | art | Analy | sis of Rev | enue | e and Expense | S (The | (a) Revenu | e and | (b) Net inve | estment | (c) | Adjusted net | , , , , | Disburs | |
| | | | | | nns (b), (c), and ual the amounts | | expenses | s per | incon | | (0) | income | | purpos | |
| _ | | | | | 1 of the instruction | | books | | | | , | | (c | ash bas | |
| | 1 | Contribut | tions, gifts, grants | s, etc , | received (attach sche | edule) . | 10 | 4,005. | | | | | | | |
| | 2 | Check | | | dation is not requi | | | | | | | | | | |
| | 3 | Interest | | | porary cash invest | | | 58. | | 58. | | | | | |
| | 4 | Divider | nds and inter | est fi | rom securities . | | 3 | 4,546. | 3 | 34,546. | | | | | |
| | 5 a | Gross r | ents | | | | | | | | | | | | |
| | b | Net rent | tal income or (I | oss) _ | | | | | | | | | | | |
| ø | | | | n sale | of assets not on lu | ne 10 | | 8,124. | | | <u> </u> | _ · · · _ · · · | | | |
| Š | b | | ales price for a | II | 238, | 987. | | | | | | | | | |
| Revenue | 7 | | | ome | (from Part IV, IIr | ne 2) . | | | 8 | 9,813. | | • | | | |
| Ř | 8 | • | • | | ain | , | | | | | | | | | |
| | 9 | | | | | | | | | • " | | | | | |
| | _ | Gross sa | ales less returns wances | s | i | | | | · | | | | | | |
| | ь | | ost of goods so | | | | | | | | | | | | |
| | | | = | | ach schedule) | | | | | | | En 1 42 | | | ¬ |
| | ,11 | | | | hedule) | | | | | | i | 2 🐧 - 1 . | | | i |
| | 13 | | | | gh 11 | | 14 | 6,733. | 12 | 4,417. | 100 | | | ij | i l |
| | 13 | | • | | rectors, trustees, e | | | 0. | | | 16 | | 5 201 | | |
| | 14 | | | | and wages | 1 | | | | | 10. | 1 | ~ 491 | SS | |
| es | 15 | | | | e benefits | | | | | | 1 | <u> </u> | | _ } | |
| and Administrative Expenses | 16a | | | | ule) | | | - | | | 1 | | * . | ,,, | |
| × | i o a | | | | schedule) | | | | | | | | | | ' |
| e H | | | | | (attach schedule | | | 6,942. | | 6,942. | | | _ | | |
| ₹ | С 17 | | | | | | | , | | , | | | | | |
| ita | | | | | | -11- | | 268. | | 68. | | · | + | | |
| ij | 18 | | | , , | page 14 of the instru | , | | | | | · | | + | | |
| Ē | 19 | • | • | | nedule) and depl | | | | | | | | | | |
| ¥ | 20 | | | | | | | 1,878. | | | | | | | 1,878 |
| ī | 21 | | | | I meetings | | | _, _, _, | | | | | | | |
| S B | 22 | Printing | g and publica | ations | S ATC | H 3 | | 115. | | | | | + | | 115 |
| Operating | 23 | | | | schedule) ATC | | | 117. | | | | | - | | 113 |
| era | 24 | | | | ministrative exp | | | 0 202 | | 7 010 | | | | | 1 000 |
| ď | | | | | 3 | | | 9,203. | | 7,010. | | ··· - ·- ··· | | | 1,993 |
| _ | 25 | | = | _ | nts paid | | | 0,500. | | 7 010 | | | \perp | | 50,500 |
| _ | 26 | | _ | | ents Add lines 24 | and 25 | 5 | 9,703. | | 7,010. | | | \perp | | 52,493 |
| | 27 | | ct line 26 fro | | | | _ | 7 000 | | | | | | | |
| | | | | | es and disbursemer | | 8 | 7,030. | | B | | | | | |
| | b | Net inv | estment inc | ome | (if negative, ent | er -0-) | | | 11 | 7,407. | | | | | |

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. * ATCH 1 JSA ** ATCH 2 9E1410 2 0000 5BD2UB A285 2/8/2011 10:54:03 AM V 09-9.1 HI410-01

c Adjusted net income (if negative, enter -0-). .

Form **990-PF** (2009)

| | art II | Ralance Shoots | Attached schedules and amounts in the description column should be for end-of-year | Beginning of year | End o | f year |
|-------------|--|--|--|-------------------------------|----------------|-----------------------|
| | art II | Dalance Sneets | amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bear | ing | | | |
| | | | cash investments | 147,081. | 178,640. | 178,640. |
| | 3 | Accounts receivable - | | | | |
| | | Less allowance for dou | btful accounts | | | · |
| | 4 | Pledges receivable ▶_ | | | | |
| | | Less allowance for dou | btful accounts ▶ | | | |
| Ì | 5 | Grants receivable | | | | |
| | | | officers, directors, trustees, and other | | | |
| | | disqualified persons (atta | ach schedule) (see page 16 of the instructions) | | | |
| | 7 | Other notes and loans | receivable (attach schedule) | | | |
| | | | btful accounts | | | |
| S | 8 | | e | | | |
| Assets | 9 | | leferred charges | | | |
| Ass | | • | e government obligations (attach schedule) | | | |
| • | | | stock (attach schedule) ATCH 4 | 569,366. | 713,906. | 775,978. |
| | | | bonds (attach schedule) ATCH 5 | 256,932. | 169,863. | 178,973. |
| | 11 | Investments - land, building and equipment basis | | | | |
| | | Less accumulated deprecia | ation > | | | |
| | 12 | (attach schedule) Investments - mortgage | loans | | | |
| | 13 | Investments - other (att | ach schadula) | | | |
| | 14 | Land, buildings, and | • | | | |
| | | Less accumulated deprecia | ation | | | |
| | 15 | Other assets (describe | >) | | | |
| | | | pleted by all filers - see the | | | |
| | | | page 1, item I) | 973,379. | 1,062,409. | 1,133,591. |
| | | • • • | accrued expenses | | | |
| | 18 | | | | | |
| S | | | | | | |
| Liabilities | 20 | | ors, trustees, and other disqualified persons | | | |
| abil | 21 | | otes payable (attach schedule) | | | |
| Ë | 22 | | e ▶) | | | |
| | | • | | | | |
| | 23 | Total liabilities (add line | es 17 through 22) | | _ | |
| | | Foundations that fol | low SFAS 117, check here ► X | | | |
| | | | 24 through 26 and lines 30 and 31. | | | |
| es | 24 | Unrestricted | | 973,379. | 1,062,409. | |
| and | 25 | | | | | |
| Bal | 26 | | | | | |
| 힏 | 24 25 26 27 28 29 30 | - | not follow SFAS 117, | | | |
| Ξ | | | plete lines 27 through 31. ▶ | | | |
| ō | 27 | Capital stock, trust prin | cipal, or current funds | | | |
| ţs | 28 | Paid-in or capital surplus, o | r land, bldg , and equipment fund | | | |
| SS (| 29 | Retained earnings, accum | ulated income, endowment, or other funds | | | |
| t A | 30 | Total net assets or fun- | d balances (see page 17 of the | | | |
| Š | | instructions) | | 973,379. | 1,062,409. | |
| | 31 | Total liabilities and ne | t assets/fund balances (see page 17 | | | |
| | | of the instructions) | <u></u> | 973,379. | 1,062,409. | |
| Р | art II | Analysis of Cha | anges in Net Assets or Fund | Balances | | |
| | | | alances at beginning of year - Part II | | t agree with | |
| | | | d on prior year's return) | | | 973,379. |
| 2 | | | | | | 87,030. |
| 3 | Othe | r increases not includ | line 27a ed in line 2 (itemize) ▶Attach | ment 6 | 3 | 2,000. |
| 4 | Add | lines 1, 2, and 3 | | | 4 | 1,062,409. |
| | | eases not included in | line 2 (itemize) ▶ | | 5 | |
| 6 | Total | I net assets or fund ba | alances at end of year (line 4 minus | line 5) - Part II, column (b) | , line 30 6 | 1,062,409. |
| | | - | · · · · · · · · · · · · · · · · · · · | | | Form 990-PF (2009) |

| (a) List and 2-story bi | (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.) | | | | | | |
|---|---|---|--|--------------------------------------|---------------------------|--|--|
| 1a SEE PART IV SCHE | DULE | | | | | | |
| <u>b</u> | | | | | | | |
| <u>c</u> | | | - | | | | |
| _d | | - | _ | | | | |
| <u>e</u> | (D. Danas sietus allement | (g) Cost or other basis | | (h) Corp or (le | <u> </u> | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | plus expense of sale | | (h) Gain or (lo (e) plus (f) mini | • | | |
| | (0.000000000000000000000000000000000000 | | - | | | | |
| b | | | | | | | |
| C | | | | | | | |
| d | | | | | | | |
| e | | | | | | | |
| | howing gain in column (h) and ow | ned by the foundation on 12/31/69 | <u>"</u> | Gains (Col. (b) o | ain minus | | |
| (I) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col (ı) over col (j), ıf any | (I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) | | | | |
| a | | | | | | | |
| b | | | 1 | | | | |
| С | | | ļ | | | | |
| d | | | | | | | |
| е | | | ļ <u>.</u> | | | | |
| 2 Capital gain net income or | (not capital loce) | gain, also enter in Part I, line 7 | | | 00 013 | | |
| | (" | (loss), enter -0- in Part I, line 7 | 2 | | 89,813. | | |
| | or (loss) as defined in sections 12 | 1 | | | | | |
| | line 8, column (c) (see pages 13 | · · · · · · · · · · · · · · · · · · · | | | | | |
| Part V Qualification Ur | line 8 | uced Tax on Net Investment Inc | 3 | | | | |
| | the section 4942 tax on the distrib | outable amount of any year in the b | ase period | d? |] Yes 🗓 No | | |
| | not qualify under section 4940(e) | | oforo mole | una ony ontron | | | |
| 1 Enter the appropriate amo | | r, see page 18 of the instructions be | elore mak | (d) | <u> </u> | | |
| Base penod years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | | Distribution ratio | | | |
| 2008 | 90,036. | 941,386. | | (cor (b) divided by | 0.095642 | | |
| 2007 | 33,911. | 944,366. | | | 0.035909 | | |
| 2006 | 39,329. | 975,288. | <u> </u> | | 0.040326 | | |
| 2005 | 21,560. | 739,815. | | | 0.029142 | | |
| 2004 | 24,183. | 649,588. | | | 0.037228 | | |
| | | | | | | | |
| 2 Total of line 1, column (d) | | | 2 | | 0.238247 | | |
| | for the 5-year base period - divide | e the total on line 2 by 5, or by the | | | | | |
| | | s than 5 years | 3 | | 0.047649 | | |
| • | | | | | | | |
| 4 Enter the net value of non | charitable-use assets for 2009 fro | om Part X, line 5 | 4 | 1, | 121,144. | | |
| | | | | | | | |
| 5 Multiply line 4 by line 3 | | | 5 | | 53,421. | | |
| | | | | | | | |
| 6 Enter 1% of net investme | nt income (1% of Part I, line 27b) | | 6 | | 1,174. | | |
| | | | [| | | | |
| 7 Add lines 5 and 6 | · • • • • • • • • • • • • • • • • • • • | | 7 | | 54,595. | | |
| | | | | | 50 .5- | | |
| 8 Enter qualifying distribution if line 8 is equal to or green Part VI instructions on page | ons from Part XII, line 4 | in Part VI, line 1b, and complete t | 8 hat part | using a 1% ta | 52,493. x rate See the | | |

| b C b C c A 2 T 3 A 4 S 5 T 6 C a 2 b E 7 T 8 E 9 T 10 C 11 E Part | Exempt operating foundations described in section 4940(d)(2), check here | 1a | 2,3 2,3 2,3 1,9 | 0. 48. |
|--|---|-----------|--------------------------|------------------|
| b C A O O O O O O O O O O O O O O O O O O | Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ and enter 1% of Part I, line 27b 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-) | 1a | 2,3 | 48. 0. 48. |
| b C A O O O O O O O O O O O O O O O O O O | Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ and enter 1% of Part I, line 27b 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-) | 1a | 2,3 | 48. 0. 48. |
| C A C C C C C C C C C C C C C C C C C 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 Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- Credits/Payments 2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1,250. Exempt foreign organizations-tax withheld at source Tax paid with application for extension of time to file (Form 8868) 6c 700. Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d 7 Enter any penalty for underpayment of estimated tax Check here if Form 2220 is attached 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Attachment 7 9 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Enter the amount of line 10 to be Credited to 2010 estimated tax | 1a | 1,9 | 0. 48. 50. |
| C A C C C C C C C C C C C C C C C C C 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 Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- Credits/Payments 2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1,250. Exempt foreign organizations-tax withheld at source Tax paid with application for extension of time to file (Form 8868) 6c 700. Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d 7 Enter any penalty for underpayment of estimated tax Check here if Form 2220 is attached 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Attachment 7 9 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Enter the amount of line 10 to be Credited to 2010 estimated tax | 1a | 1,9 | 0. 48. 50. |
| 2 T 3 A 4 S 5 T 6 C a 2 b E c T d E 7 T 8 E 9 T 10 C 11 E Part | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | 1a | 1,9 | 0. 48. 50. |
| 3 | Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | 1a | 1,9 | 0. 48. 50. |
| 4 S 5 T 6 C a 2 b E c T d E 7 T 8 E 9 T 10 C 11 E | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | 1a | 1,9 | 0. 48. 50. |
| 5 T 6 C a 2 b E c T d E 7 T 8 E 9 T 10 C 11 E | Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0- Credits/Payments 2009 estimated tax payments and 2008 overpayment credited to 2009 Exempt foreign organizations-tax withheld at source Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Attachment 7 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2010 estimated tax VII-A Statements Regarding Activities During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | 1a | 1,9 | 50. |
| 6 C a 2 b E c T d E 7 T 8 E 9 T 10 C 11 E | Credits/Payments 2009 estimated tax payments and 2008 overpayment credited to 2009 Exempt foreign organizations-tax withheld at source Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Attachment 7 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2010 estimated tax O Refunded TOTAL Statements Regarding Activities During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | 1a | 1,9 | 50. |
| a 2 b E c T d E 7 T 8 E 9 T 10 C 11 E | 2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1, 250. Exempt foreign organizations-tax withheld at source 6b 0. Tax paid with application for extension of time to file (Form 8868) 6c 700. Backup withholding erroneously withheld 6d 700. Total credits and payments Add lines 6a through 6d 700. Enter any penalty for underpayment of estimated tax Check here 1f Form 2220 is attached 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Attachment 7 9 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Enter the amount of line 10 to be Credited to 2010 estimated tax O Refunded 11 VII-A. Statements Regarding Activities During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | 1a | 4 | 06. |
| b E c T d E F T T T T T T T T T T T T T T T T T T | Exempt foreign organizations-tax withheld at source Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d Enter any penalty for underpayment of estimated tax Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Attachment 7 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2010 estimated tax VII-A. Statements Regarding Activities During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | 1a | 4 | 06. |
| c T d E 7 T 8 E 9 T 10 C 11 E | Tax paid with application for extension of time to file (Form 8868). Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d | 1a | 4 | 06. |
| d E 7 T 8 E 9 1 10 C 11 E | Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d | 1a | 4 | 06. |
| 7 T 8 E 9 T 10 C 11 E | Total credits and payments Add lines 6a through 6d | 1a | 4 | 06. |
| 8 E 9 1 10 C 11 E | Enter any penalty for underpayment of estimated tax. Check here | 1a | 4 | 06. |
| 9 1 10 0 11 E | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Attachment 7 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2010 estimated tax OREGUNDED 10 VII-A. Statements Regarding Activities During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | 1a | | |
| 10 C 11 E Part | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 0 Refunded ▶ 11 VII-A. Statements Regarding Activities During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | 1a | | |
| 11 E | Enter the amount of line 10 to be Credited to 2010 estimated tax O Refunded 11 VII-A. Statements Regarding Activities During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | 1a | Yes | No |
| Part | VII-A Statements Regarding Activities During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | 1a | Yes | No. |
| | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? | 1a | Yes | No. |
| | participate or intervene in any political campaign? | 1a | Yes | No |
| | | 1a | | |
| | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 | | | X |
| | | | | 17 |
| | of the instructions for definition)? | 1 b | | X |
| 1 | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | |
| ı | published or distributed by the foundation in connection with the activities | | | v |
| | Did the foundation file Form 1120-POL for this year? | 1 c | | <u>X</u> |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | | |
| | (1) On the foundation ►\$ (2) On foundation managers ►\$ | | | |
| | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | | i | |
| | on foundation managers > \$ | | | Х |
| | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | |
| | If "Yes," attach a detailed description of the activities | | | |
| | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of | | | Х |
| | incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | 3 | | X |
| | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4 a | | |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | | | X |
| | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | _ 5 | | |
| | If "Yes," attach the statement required by General Instruction T | | | |
| | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either | | | |
| | By language in the governing instrument, or By state language in the defeatively amonds the government on that are mondature dispatched that | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that and the state legislation that allow agreements in the governing instruments? | 6 | X | |
| | conflict with the state law remain in the governing instrument? | 7 | X | |
| | | | | |
| | Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) \triangleright IL, | | | |
| | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | | | |
| | | 8ь | х | |
| | (or designate) of each state as required by General Instruction G? If "No," attach explanation | 00 | | |
| | 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page | | | |
| | 27)? If "Yes," complete Part XIV | 9 | | Х |
| | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | _ <u></u> | | |
| | names and addresses | 10 | | Х |

Form 990-PF (2009)

| _ | 330-7-7 (2003) | | <u> </u> | -ago e |
|-----|--|------|-----------|--------|
| Par | t VII-A Statements Regarding Activities (continued) | | | |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the | | | |
| | meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions) | 11 | | X |
| 12 | Did the foundation acquire a direct or indirect interest in any applicable insurance contract before | | | |
| | August 17, 2008? | 12 | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | X | |
| | NI / 70 | | | |
| 14 | Website address \blacktriangleright N/A The books are in care of \blacktriangleright BRUCE E. HUEY Located at \blacktriangleright 1313 W. 175TH ST, HOMEWOOD, IL ZIP + 4 \blacktriangleright 60430 | 99-6 | 300 | |
| | Located at \triangleright 1313 W. 175TH ST, HOMEWOOD, IL ZIP+4 \triangleright 60430 | | . | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | | ▶ | |
| | and enter the amount of tax-exempt interest received or accrued during the year | | | |
| Par | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1a | During the year did the foundation (either directly or indirectly) | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a | | | |
| | disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available for | | | |
| | the benefit or use of a disqualified person)? | ı | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" if | | | |
| | the foundation agreed to make a grant to or to employ the official for a period after | | | |
| | termination of government service, if terminating within 90 days) | | | |
| _ | termination of government convicts, in terminating vitaline convergence of the convergenc | | | |
| D | If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | 1 b | | Х |
| | section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? | | | |
| | Organizations relying on a current notice regarding disaster assistance check here | | | |
| С | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that | 1 c | | Х |
| _ | were not corrected before the first day of the tax year beginning in 2009? | 16 | | |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private | | | |
| | operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | | |
| а | At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e. Part XIII) for tax year(s) beginning before 2009? Yes X No | | | |
| | oc, Tart Arry Tot tax year(a) beginning before 2000 1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1. | | | |
| | If "Yes," list the years | ĺ | j i | |
| Þ | 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) | 2 b | | |
| | to all years listed, answer "No" and attach statement - see page 20 of the instructions) | 20 | | |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | |
| _ | P | | | |
| 3 a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | | | |
| | | | | |
| þ | If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or | | | |
| | disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the | | | |
| | Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse | | | |
| | of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the | | | |
| | foundation had excess business holdings in 2009) | 3 b | | |
| 4a | 1.1 | 4a | \vdash | |
| b | | 1 | | Х |
| | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009? | 4 D | | ^ |

(b) Title, and average

hours per week devoted to position

(c) Compensation

Form 990-PF (2009)

NONE

(e) Expense account,

other allowances

employee benefit

compensation

(a) Name and address of each employee paid more than \$50,000

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

| Part VIII | Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emploand Contractors (continued) | oyees, |
|----------------|---|------------------|
| 3 Five highe | est-paid independent contractors for professional services (see page 23 of the instructions). If none | , enter "NONE." |
| | (a) Name and address of each person paid more than \$50,000 (b) Type of service | (c) Compensation |
| | | |
| | | |
| | | |
| | | |
| Total numbe | r of others receiving over \$50,000 for professional services | ▶ NONE |
| Part IX-A | Summary of Direct Charitable Activities | |
| | ation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number ins and other beneficiaries served, conferences convened, research papers produced, etc. | Expenses |
| 1 N/A | | |
| | | |
| 2 | | |
| 3 | | |
| | | |
| 4 | | |
| Part IX-B | Summary of Program-Related Investments (see page 23 of the instructions) | |
| Describe the | two largest program-related investments made by the foundation during the tax year on lines 1 and 2 | Amount |
| 1 NONE | | |
| 2 | | |
| All other pro- | ram related investments. See page 24 of the instructions | |
| 3 NONE | ram-related investments. See page 24 of the instructions | |
| Total, Add I | nes 1 through 3 | |

| Pa | Minimum Investment Return (All domestic foundations must complete this part. Forei see page 24 of the instructions.) | gn founda | tions, |
|----|--|---------------|--------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes | | |
| а | Average monthly fair market value of securities | 1a | 985,121. |
| b | Average of monthly cash balances | 1b | 153,096. |
| С | | 1c | 0. |
| d | | 1 d | 1,138,217. |
| е | | | |
| | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 1,138,217. |
| 4 | Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25 | | |
| | | 4 | 17,073. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 | 5 | 1,121,144. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 56,057. |
| Pa | Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privation foundations and certain foreign organizations check here and do not complete this page 25. | ite operating |) |
| _ | | art / | 56,057. |
| 1 | Minimum investment return from Part X, line 6 | | 30,037. |
| | | | |
| b | , , , , , , , , , , , , , , , , , , , | | 2,348. |
| C | Add lines 2a and 2b | 2c | 53,709. |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 2,000. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | 55,709. |
| 6 | Deduction from distributable amount (see page 25 of the instructions) | 6 | |
| 7 | Distributable amount as adjusted. Subtract line 6 from line 5. Enter nere and on Part XIII, | | rr 700 |
| | line 1 | 7 | 55,709. |
| Pa | art XII Qualifying Distributions (see page 25 of the 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 | 52,493. |
| b | | 1b | 0. |
| 2 | Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. | | |
| | purposes | 2 | 0. |
| 3 | Amounts set aside for specific charitable projects that satisfy the | | |
| а | Suitability test (prior IRS approval required) | 3a | 0. |
| b | | 3b | 0. |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 52,493. |
| 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 (see page 26 of the instructions) | 5 | N/A |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 52,493. |
| • | Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w | | |
| | qualifies for the section 4940(e) reduction of tax in those years | | iodilidation |

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36-4417758

| Pa | rt XIII Undistributed Income (see page | e 26 of the instruction | ns) | | |
|----|---|-------------------------|----------------------------|-------------|--------------|
| | 5 | (a) Corpus | (b) Years prior to 2008 | (c) 2008 | (d) 2009 |
| 1 | Distributable amount for 2009 from Part XI, | Corpus | Tears prior to 2000 | 2008 | 55,709. |
| | line 7 | | | | 33,709. |
| 2 | Undistributed income, if any, as of the end of 2009 | | | | |
| a | Enter amount for 2008 only | | | | |
| þ | Total for pnor years 20 07 .20 06 .20 05 | | | | |
| 3 | Excess distributions carryover, if any, to 2009 | | | | |
| а | From 2004 0. | | | | |
| þ | From 2005 0 . | | | | 1 |
| C | From 2006 0 . | | | | |
| d | From 2007 | | | | |
| е | From 2008 | | | | |
| f | Total of lines 3a through e | 589. | | | |
| 4 | Qualifying distributions for 2009 from Part XII, | | | | • |
| | line 4 ▶ \$ 52,493. | | | | |
| а | Applied to 2008, but not more than line 2a | | | | |
| b | Applied to undistributed income of prior years (Election | | | | |
| _ | required - see page 26 of the instructions) | | | | |
| c | Treated as distributions out of corpus (Election | | | | |
| | required - see page 26 of the instructions) | | | | 52,493. |
| | Applied to 2009 distributable amount | 0. | | | 32,493. |
| | Remaining amount distributed out of corpus | 589. | | | F.0.0 |
| 5 | Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same | 589. | | ····· | 589. |
| | amount must be shown in column (a)) | | | | |
| 6 | Enter the net total of each column as | | i | | |
| | indicated below: | | | | |
| a | Corpus Add lines 3f, 4c, and 4e Subtract line 5 | | | | |
| b | Prior years' undistributed income Subtract | | | | |
| | line 4b from line 2b | | | | |
| С | 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 | | | | |
| d | Subtract line 6c from line 6b Taxable | | | | |
| | amount - see page 27 of the instructions | | | | |
| е | Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page | | | | |
| | 27 of the instructions | | | | |
| f | Undistributed income for 2009 Subtract lines | | | | |
| • | 4d and 5 from line 1 This amount must be | | | | |
| | distributed in 2010 | | | | 2,627. |
| 7 | Amounts treated as distributions out of corpus to satisfy requirements imposed by section | | | | |
| | 170(b)(1)(F) or 4942(g)(3) (see page 27 of the | | | | |
| | instructions) | | | | |
| 8 | Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the | | | | |
| | instructions) | | | | |
| 9 | Excess distributions carryover to 2010. | | | | |
| | Subtract lines 7 and 8 from line 6a | | | | |
| | Analysis of line 9 | | | | |
| а | Excess from 2005 | | | | |
| b | Excess from 2006 | | | | |
| C | Excess from 2007 | | | | |
| d | | | | | |
| е_ | Excess from 2009 | | | | |

| _ | art XIV Private Oper | | | | | NOT APPLICABL |
|-----|--|------------------------|---------------------------|-----------------------|---|---|
| 1 a | If the foundation has | | | | • I | |
| _ | foundation, and the rulin | | | | | (j)(3) or 4942(j)(5) |
| b | Check box to indicate wh | Tax year | a private operating found | Prior 3 years | on49420 | (J)(3) or 4942(J)(5) |
| 2 a | Enter the lesser of the ad- justed net income from Part | (a) 2009 | (b) 2008 | (c) 2007 | (d) 2006 | (e) Total |
| | I or the minimum investment | | (2,200 | (0) 2001 | (=, = 0.00 | |
| | return from Part X for each year listed | | | | | |
| b | 85% of line 2a | | | | | |
| c | Qualifying distributions from Part | | | | | |
| | XII, line 4 for each year listed | | | | | |
| d | Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| е | Qualifying distributions made directly for active conduct of exempt activities Subtract line | | | | | |
| 3 | 2d from line 2c | | | - | | |
| а | "Assets" alternative test - enter | | | | | |
| | (1) Value of all assets (2) Value of assets qualifying under section | | | | | |
| b | 4942(j)(3)(B)(i) "Endowment" alternative test- | | | | | - |
| | enter 2/3 of minimum invest- | | | | | |
| | ment return shown in Part X, line 6 for each year listed | | | | | |
| С | "Support" alternative test - enter | | | | | |
| | (1) Total support other than gross investment income | | | | | |
| | (interest, dividends, rents, | | | | | |
| | payments on secunties 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) | | | | - - | |
| | port from an exempt organization | | | | | |
| _ | (4) Gross investment income | | | | | |
| Pa | | | | | dation had \$5,000 | or more in assets |
| | | during the year - se | <u> </u> | structions.) | | |
| 1 | Information Regardin List any managers of | | | e than 2% of the tot | tal contributions recei | ved by the foundation |
| a | before the close of any | | | | | |
| _ | | | 100/ or more o | f the stock of a cor | noration (or an aquall | v lorgo portion of the |
| D | List any managers of ownership of a partner | | | | | y large portion or the |
| | NONE | | | | | |
| 2 | Information Regardin | g Contribution, Grant | , Gift, Loan, Scholars | hip, etc., Programs: | | |
| | Check here ► X if t unsolicited requests f organizations under ot | or funds If the foun | dation makes gifts, 🤉 | grants, etc (see pag | ritable organizations age 28 of the instructi | and does not accept ons) to individuals or |
| а | The name, address, a | nd telephone number | of the person to who | m applications should | be addressed | |
| b | The form in which app | lications should be su | bmitted and informati | on and materials the | y should include | |
| | Any submission deadle | nes | | | | |
| | | | | | | |
| d | Any restrictions or li factors | mitations on awards | , such as by geogr | aphical areas, charif | table fields, kinds of | institutions, or other |
| | | | | | | |

| Part XV Supplementary Information (co | Part XV Supplementary Information (continued) | | | | | | | | | |
|---|--|------------|----------------------------------|----------|--|--|--|--|--|--|
| 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contribution Purpose of grant or contribution Amount Amount Amount Purpose of grant or contribution Purpose of grant or contribution | | | | | | | | | | |
| Recipient | If recipient is an individual, show any relationship to | Foundation | Purpose of grant or contribution | Amount | | | | | | |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | contribution | | | | | | | |
| a Paid during the year | | | | | | | | | | |
| | | | | | | | | | | |
| Attachment 9 | | | | | | | | | | |
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| | | | | | | | | | | |
| Total | | l <u></u> | ▶ 3a | 50,500. | | | | | | |
| b Approved for future payment | <u> </u> | <u> </u> | | | | | | | | |
| b Approved for fatale payment | | | | | | | | | | |
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| | l <u></u> | | L | | | | | | | |
| Total | <u></u> | <u>.</u> . | | <u> </u> | | | | | | |

| nter gross amounts unless otherwise indicated | Unrela | ated business income | Excluded by | section 512, 513, or 514 | (e) |
|--|----------------------|----------------------|-----------------------|--------------------------|---|
| Program service revenue | (a) Business code | (b) Amount | (c) Exclusion code | (d) | Related or exempt function income (See page 28 of the instructions) |
| a | | | · - | | , |
| b | | - | i | | |
| c | | | | | |
| d | | | | | |
| е | | | | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| Membership dues and assessments | | | | | |
| Interest on savings and temporary cash investments | | | 14 | 58. | |
| Dividends and interest from securities | | · | 14 | 34,546. | |
| Net rental income or (loss) from real estate | | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | = |
| Net rental income or (loss) from personal property . | | | | | |
| Other investment income | | | | | |
| Gain or (loss) from sales of assets other than inventory | | | 18 | 8,124. | |
| Net income or (loss) from special events | | | | | . |
| Gross profit or (loss) from sales of inventory | | | | | |
| Other revenue a | | | | | |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | 10 700 | |
| Subtotal Add columns (b), (d), and (e) | | | <u> </u> | 42,728. | 10.70 |
| Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions on page 28 to | | | | 13 | 42,728 |
| ne No. Explain below how each active the accomplishment of the for page 29 of the instructions) | | | | | |
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| | | NOW ADDITIONS | | | |
| | | NOT APPLICABL | E | · · | |
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| | | | Regarding 1 nizations | Fransfers To and 1 | Fransactions | and Relati | onships | With N | lonc | harit | able |
|-----------|--------------------------------|---|--------------------------|---|---------------------|---------------------------------|-----------------|---------------------------|-------------|--------|--------|
| | | | | engage in any of the n section 501(c)(3) orga | | | | | | Yes | No |
| | | 62 | | oncharitable exempt organiz | | • | J | • | | | |
| | | , | | | | | | | 1a(1) | | X |
| | / | | | | | | | | 1a(2) | | X |
| | / - | transactions | aritable evemnt i | organization | | | | | 1b(1) | | x |
| / | | | | exempt organization | | | | | 1b(1) | | X |
| | | | | ets | | | | | 1b(3) | | Х |
| | | | | | | | | | 1b(4) | | X |
| | | | | · · · · · · · · · · · · · · · · · · · | | | | | 1b(5) | | X |
| c | | | | fundraising solicitations in the fundraising solicitations in the fundraising | | | | | 10(6) 1c | | X |
| d | | | | Yes," complete the foll | | | | | | fair n | narket |
| | | · | | vices given by the repo | - | | | - | | | |
| | value | in any transaction or | sharing arran | gement, show in colum | n (d) the value | of the good | s, other a | ssets, or | service | es rec | eived: |
| /a\ | Line no | (b) Amount involved | (c) Name of | noncharitable exempt organiza | tion (d) Des | scription of transf | ere transactio | one and shan | no arra | naemer | |
| (4) | Line no | N/A | (c) Name of | monenantable exempt organiza | N/A | scription of transi | ers, transactio | ons, and shan | ing ana | ngemei | |
| | | | | | | | | | | | |
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| | la tha | foundation dispetty of | indicatly offilia | stad with as related to | | avamet argani | rotione doe | oribod in | | | |
| 28 | | | | ated with, or related to, of 501(c)(3)) or in section 527 | | exempt organiz | zations des | | Υe | s X | No |
| b | | s," complete the following | | | | | · · · · · · | | | | |
| | | (a) Name of organization | | (b) Type of organ | ization | (c) Description of relationship | | | | | |
| | | <u> </u> | | | | | | | | | |
| | | | | | | | | <u> </u> | | | |
| | | | | | | | | | | | |
| | | | - | | | | | | | | |
| | | | | amined this return, including of preparer (other than taxpa) | | | | | | | |
| | | Cant | w. He | el | 2-10 | 2-// | 70 | | , | | |
| ي ا | Sı | gnature of officer or trustee | | | Date | <u> </u> | Title | <i>7</i> 2 / * | | | |
| Sign Here | | | | | Date | Check if | | Preparer's | dentify | /ing | |
| g | چ چ | Preparer's |) | \mathcal{L} \mathcal{L} | 0/1/11 | self-employe | | number (Sec | ne instr | | |
| σ | Paid Preparer's Use Only | Signature Signature | FRIEDI | MAN & HUEX ASSOC | 2/8/" C. LLP | | EIN > 3 | P000247 | | | |
| | Prep Use | Firm's name (or yours if self-employed), address, | 1313 V | | | - - | EIN ► 3 | 0-3302 | | | |
| | | and ZIP code | HOMEW | | | 430 | Phone no | 708-79 | 9-6 | 800 | |
| | | | | | | | | | - QQ | O-DE | (2009) |

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

| Name of the organization | VIVIDA MI COL | Employer identification number |
|---|--|---|
| THE HILB FAMILY FO C/O BRUCE E. HUEY | UNDATION | 36-4417758 |
| Organization type (check or | ne) | 30 1117730 |
| 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 p | rivate foundation |
| | 501(c)(3) taxable private foundation | |
| · · | s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the Genera | l Rule and a Special Rule See |
| General Rule | | |
| | n filing Form 990, 990-EZ, or 990-PF that received, during the y one contributor. Complete Parts I and II | ear, \$5,000 or more (in money or |
| Special Rules | | |
| sections 509(a)(1) | (c)(3) organization filing Form 990 or 990-EZ that met the 331/39 and 170(b)(1)(A)(vi), and received from any one contributor, dual 2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form | uring the year, a contribution of the greater |
| the year, aggrega | (c)(7), (8), or (10) organization filing Form 990 or 990-EZ that rete contributions of more than \$1,000 for use exclusively for religiouses, or the prevention of cruelty to children or animals. Complete | ous, charitable, scientific, literary, or |
| the year, contribut aggregate to more year for an <i>exclusi</i> applies to this org | (c)(7), (8), or (10) organization filing Form 990 or 990-EZ that response for use exclusively for religious, charitable, etc., purposes, be than \$1,000. If this box is checked, enter here the total contributely religious, charitable, etc., purpose. Do not complete any of the anization because it received nonexclusively religious, charitable. | out these contributions did not utions that were received during the he parts unless the General Rule , etc., contributions of \$5,000 or more |
| 990-EZ, or 990-PF), but it m | at is not covered by the General Rule and/or the Special Rules dust answer "No" on Part IV, line 2 of its Form 990, or check the PF, to certify that it does not meet the filing requirements of Sch | box on line H of its Form 990-EZ, |
| For Privacy Act and Paperwork Refor Form 990, 990-EZ, or 990-PF. | duction Act Notice, see the Instructions | Schedule B (Form 990, 990-EZ, or 990-PF) (2009) |

| ie | of | of | Part I |
|----|----|----|--------|
| | | | |

Name of organization THE HILB FAMILY FOUNDATION C/O BRUCE E. HUEY

Employer identification number 36-4417758

| Part I | Contributors (| (see instructions) |
|--------|----------------|--------------------|
| art r | | |

| (a) | (b) | (c) | (d) |
|-----|--|-----------------------------|---|
| No. | Name, address, and ZIP + 4 | Aggregate contributions | Type of contribution |
| 1 | ROBERT H. HILB 199 NORTH MONTCLAIR AVENUE GLEN ELLYN, IL 60137 | \$15,315. | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) | (b) | (c) Aggregate contributions | (d) |
| No. | Name, address, and ZIP + 4 | | Type of contribution |
| 2 | ROBERT H. HILB 199 NORTH MONTCLAIR AVENUE GLEN ELLYN, IL 60137 | \$88,690. | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) | (b) | (c) | (d) |
| No. | Name, address, and ZIP + 4 | Aggregate contributions | Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) | (b) | (c) | (d) |
| No. | Name, address, and ZIP + 4 | Aggregate contributions | Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) | (b) | (c) | (d) |
| No. | Name, address, and ZIP + 4 | Aggregate contributions | Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |
| (a) | (b) | (c) | (d) |
| No. | Name, address, and ZIP + 4 | Aggregate contributions | Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II if there is a noncash contribution) |

Page_

of Part II

Name of organization THE HILB FAMILY FOUNDATION C/O BRUCE E. HUEY

Employer Identification number 36-4417758

of

Part II Noncash Property (see instructions)

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---------------------------|--|--|----------------------|
| 2 | 3,500 SHS WILLIS GROUP HOLDINGS PLC | _ | |
| | | \$ 88,690. | 09/02/2009 |
| (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 |
| | | <u> </u> | |
| (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 |
| | | | |

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

- OTHER PROFESSIONAL FEES PART I FORM 990PF,

| | NET | INVESTMENT | INCOME | 6,942. | 6.942 |
|---------|-----|------------|-------------|---------------|--------|
| REVENUE | AND | EXPENSES | PER BOOKS | 6,942. | 6.942 |
| | | | | | TOTALS |
| | | | DESCRIPTION | WHITNELL & CO | |

FORM 990PF, PART I - TAXES

| NET INVESTMENT INCOME | . 89 | .89 |
|---|--|--------|
| REVENUE AND EXPENSES PER BOOKS | 68. | 268. |
| DESCRIPTION | FOREIGN TAXES FEDERAL EXCISE TAX-CURRENT YR | TOTALS |

- OTHER EXPENSES PART I FORM 990PF,

DESCRIPTION FILING FEES

REVENUE AND EXPENSES PER BOOKS

 $\frac{11}{5}$. CHARITABLE PURPOSES

115.

TOTALS

Page 23

SHS

200

200

500

200

300

200

700 400

SHS SHS SHS 5BD2UB A285

SHS

1,500

SHS

3,000

1,000

10518.106

1,045

400

400

4,670.561

| ENDING <u>FMV</u> | 51,734. 52,290. 53,627. 21,322. 0. 0. |
|-------------------------|--|
| ENDING BOOK VALUE | 50,257. 48,778. 50,979. 19,849. 0. |
| BEGINNING BOOK VALUE | 50,257. 48,409. 51,341. 19,794. 51,983. 35,148. |
| DESCRIPTION | 50,000 BOEING CAP CORP 6.10% 50,000 GENERAL ELECTRIC 4.15% 50,000 METLIFE INC. 5.375% 20,000 PITNEY BOWES INC. 4.625 50,000 GTE NORTH INC. 6.375% 35,000 AMERICAN ELECTRIC 5.375 |

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

PRIOR PERIOD ADJUSTMENT

2,000.

TOTAL

2,000.

FORM 990-PF - PART IV
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

| Kind of Pr | roperty | | Desc | ription | | 0.0 | Date acquired | Date sold |
|--|---------------------------------------|---------------------------------------|--------------------------|--------------------------------|------------------------------|-----|----------------------|------------|
| Gross sale price less expenses of sale | Depreciation allowed/ allowable | Cost or other basis | FMV as of 12/31/69 | Adj basis as of 12/31/69 | Excess of FMV over adj basis | ľ | Gain or (loss) | |
| | | TOTAL CAPIT | AL GAIN DIS | STRIBUTIONS | · | | 405. | |
| | | 1,000 SHS N | | | FUND | P | 06/09/2008 | 08/19/200 |
| 6,952. | | PROPERTY TY 10,417. | PE: SECURIT | TLS | | | -3,465. | |
| | | 2,000 SHS N PROPERTY TY | | | FUND | Р | 11/07/2008 | 08/19/200 |
| 13,904. | | 20,834. | II. DECORT | . 1 0 0 | | | -6,930. | |
| | | 500 SHS LTC PROPERTY TY | | | | P | 11/14/2003 | 08/19/2009 |
| 11,806. | | 5,722. | | | | | 6,084. | |
| | | 500 SHS NEW PROPERTY TY | | | | | 03/23/2009 | 06/19/200 |
| 6,781. | | 3,567. | | | | | 3,214. | |
| | | 3,500 SHS W PROPERTY TY | | | PLC | D | 09/02/2009 | 09/09/200 |
| 92,543. | | 7,000. | | | | | 85,543. | |
| 50,000. | | 50,000 PV G PROPERTY TY 50,000. | | | R F 6.37 | P | 11/18/2002 | 02/15/201 |
| 35,000. | | 35,000 PV A PROPERTY TY 35,000. | | | ER SR NO | P | 11/18/2005 | 03/15/201 |
| | | 1,300 SHS I PROPERTY TY | | | - MERGER | P | 12/02/2005 | 06/02/201 |
| 21,594. | | 16,634. | | | | | 4,960. | |
| | | WINDSTREAM PROPERTY TY | | | LIEU | Р | 12/02/2005 | 06/03/201 |
| 2. | | 0. | | | | | 2. | |
| OTAL GAIN(LC | oss) | | | | | | 89,813. | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

HI410-01

| CONTRIBUTIONS EXPENSE ACCT TO EMPLOYEE AND OTHER BENEFIT PLANS ALLOWANCES | 0.0 | .0 | .0 | .0 | .0 | .0 | 0. |
|---|--|--|--|--|--|---|--------------|
| COMPENSATION | · o | Ö | Ö | .0 | Ö | Ö | 0 |
| TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION | TRUSTEE - PART TIME | TRUSTEE - PART TIME | TRUSTEE - PART :IME | TRUSTEE - PART TIME | TRUSTEE - PART TIME | TRUSTEE - PART TIME | GRAND TOTALS |
| NAME AND ADDRESS | ROBERT H. HILB 199 NORTH MONTCLAIR AVENUE GLEN ELLYN, IL 60137 | JANE G. HILB 199 NORTH MONTCLAIR AVENUE GLEN ELLYN, IL 60137 | NANCY H. BRINKMAN 4210 HOWARD STREET WESTERN SPRINGS, IL 60558 | TRACY H. GANNON 8139 KENTWOOD COURT DARIEN, IL 60561 | CYNTHIA H. THILO 1110 THISTLE LANE CHARLOTTE, NC 28226 | ROBERT J. HILB 20 LOWER TUCKAHOE ROAD WEST RICHMOND, VA 23238 | |

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Attachment 9 (Cont'd)

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

| | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND | | • |
|---|---|----------------------------------|--------|
| RECIPIENT NAME AND ADDRESS | FOUNDATION STATUS OF RECIPIENT | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT |
| PILLARS COMMUNITY SERVICES 333 NORTH LAGRANGE ROAD LAGRANGE PARK, IL 60526 | NONE PUBLIC | GENERAL | 3,000 |
| YOUNG LIFE 420 N CASCADE AVENUE COLORADO SPRINGS, CO 80903 | NONE PUBLIC | GENERAL | 4,000 |
| BOSTON COLLEGE 140 COMMONWEALTH AVENUE CHESTNUT HILL, MA 02467-3817 | NONE PUBLIC | GENERAL | 2,000. |
| BRIDGE COMMUNITIES, INC 460 N MAIN STREET, SUITE 300 GLEN ELLYN, IL 60137 | NONE PUBLIC | GENERAL | 200 |
| MEMORIAL CHILD GUIDANCE CLINIC (CHILDSAVERS) 200 N 22ND STREET RICHMOND, VA 23233 | NONE PUBLIC | GENERAL | 1,500 |
| CATHOLIC CHURCH EXTENSION SOCIETY OF USA 150 SOUTH WACKER DRIVE, 20TH FLOOR CHICAGO, IL 60606 | NONE PUBLIC | GENERAL | 1,000 |

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36-4417758

Attachment 9 (Cont'd)

FORM 990PE, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

| | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR | | |
|-------------------------------------|---|----------------------------------|--------|
| | AND | | • |
| RECIPIENT NAME AND ADDRESS | FOUNDATION STATUS OF FECIPIENT | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT |
| CENTRAL DUPAGE HOSPITAL ASSOCIATION | NONE | GENERAL | 3,000 |
| 25 NORTH WINFIELD ROAD | PUBLIC | | |
| WINFIELD, IL 60190 | | | |
| | | | |
| DEPAUL UNIVERSITY | NONE | GENERAL | 1,000 |
| 1 E. JACKSON BLVD | PUBLIC | | |
| CHICAGO, IL 60604 | | | |
| | *** | | , |
| DUPAGE COMMUNITY FOUNDATION | NONE | GENERAL | 1,000 |
| 104 E. ROOSEVELT ROAD, SUITE 204 | PUBLIC | | |
| WHEATON, IL 60187 | | | |
| | | | |
| EISENHOWER MEDICAL CENTER | NONE | GENERAL | 1,000 |
| 39000 BOB HOPE DRIVE | PUBLIC | | |
| RANCHO MIRAGE, CA 92270 | | | |
| | | | |
| ESSE ADULT DAY CARE CENTER | NONE | GENERAL | 1,000 |
| 515 SOUTH WHEATON AVENUE | PUBLIC | | |
| WHEATON, IL 60187 | | | |
| | | | |

TOTAL CONTRIBUTIONS PAID

50,500

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2/8/2011

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