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

Treated as a Private Foundation

OMB No 1545-0052

Depa	rtment*	of the Treasury				su as a riivale					20.0
		enue Service				to use a copy of this	return t	to satisfy sta	te reporting	requirements	L
		dar year 2010, or t				and ending				-1 <u>-</u> :	
GC	heck a	all that apply	Initial return X Amended re		_	turn of a former pu	blic ct	·		Final return	
			X Amended re	eturn	Add	Iress change		Name	change	lavor idontification mu	
Na	me or re	oundation							•	loyer identification nui -2616038	nber
.T	они	FAMILY F	OTPACION	N						phone number (see page	10 of the instructions)
— <u> </u>		nd street (or P O box			etroot addro	nca)	Poor	m/suite	B relep	onone number (see page	TO OF the mistractions;
		COUNTY L		ot delivered to :	succi addic	:33)	Nooi	Ivsuite	C If exe	emption application is pen	ding check here
		vn, state, and ZIP code		 					1	oreign organizations, chec	<u>_</u>
		TELD	•	PA 17	889					,	
		type of organization	n. X Section 5			e foundation			1	oreign organizations meet 5% test, check here and a	· .
		n 4947(a)(1) nonex	_			le private foundation	n		E If priv	rate foundation status was	s terminated under
	Fair market value of all assets at J Accounting method						Accrua	al		on 507(b)(1)(A), check he	▶ 1
er	d of y	ear (from Part II, c			specify)			-	F If the	foundation is in a 60-mor	nth termination _
	e 16)					be on cash basis)			unde	r section 507(b)(1)(B), cho	eck here E
P	field		enue and Expe			(a) Revenue an	1				(d) Disbursements
		amounts in column	ns (b), (c), and (d) m	ay not necessa	anly equal	expenses per		(b) Net in		(c) Adjusted net	for chantable
		the amounts in coli	umn (a) (see page 1	1 of the instruc	ctions))	books	_]_	inco	niie	income	purposes (cash basis only)
	1	Contributions, gifts,	grants, etc., receive	ed (attach sche	dule)	250,7					
	2	Check ▶ ☐ if th	e foundation is not	required to atta	ach Sch. B						
	3	Interest on saving	14,0	_		14,009	14,009	THE PERSONNEL PROPERTY AND PROPERTY AND PERSONS ASSESSED.			
	4	Dividends and int	terest from secur	136,2	87	1	36,287	136,287			
	5a	Gross rents	•			The state of the s	roses acc				
ne	b	Net rental income	` ' -	<u> </u>				ve refue	7.5		and the second
en	6a	Net gain or (loss) from s		•	•	142,9	87日	72 m	7V - V9		Company of the second
Revenue	b	Gross sales price for all	-		2,502			# 12 M			
OC.	7	Capital gain net ii	•	t IV, line 2)	•	Co. 10.000 (202.5.1)			8,958	0	
	8 9	Net short-term ca Income modificat							-7 3 47 3 9		
	10a	Gross sales less ret	•	1 ⁻	• •		27 A 2 2				
	b	Less. Cost of goo									Color Value Color
@	c	Gross profit or (lo		tule)		tangan sami kadili da ambali na mahili balan				en elektri der en service en er en	
<i>V</i> ₽	11	Other income (att		Stmt	. 2	10,9	81	డుకోమెళ్కేషనులు	6-2-2-3-50-Y AR	10,981	
	12	Total. Add lines 1			- •	555,0	_	1	59,254	161,277	and the second state of the second
Se	13	Compensation of		s, trustees, e	tc.		0				
<u>38</u> €	14	Other employees			•						
<u>.</u>	15	Pension plans, er	mployee benefits	•					/- ·	٠	
Expe	16a	Legal fees (attach	h schedule)						Í	CENTRIVE	
	b	Accounting fees (•				63		ios.		70
,≩	С	Other professional fe	ees (attach schedule	e) Stm	t 4	13,5	06		(2) (2)	الله من الله	89
istra	17	Interest			: _				4 - 1 - 1 - 1	6 201	I "rol"
and Administrative	18	Taxes (attach schedule)	·		t 5	3,5	40		#	(Ashira	93
Ξ	19	Depreciation (attach	schedule) and depl	letion		·	\dashv		-	CODEM TI	
Ad	20	Occupancy									'\
P	21	Travel, conference	_	5			-				
ē	22	Printing and publi					87				
Operating	23 24	Other expenses (att. sch	•	iva avnassi			+				
rat	24	Total operating a		ive expenses	s.	17,7	اء		ام	0	
be	25	Contributions, gift	-	•		254,6	200				254,67
0	26	Total expenses ar		Add lines 24 :	I and 25	272,4		1.5	0	A CONTRACTOR OF THE PARTY OF TH	254,67
	27	Subtract line 26 fi		, Aug IIIGS 24 (טווע בט	- / - / -		Charles			234,37
	a	Excess of revenue		and disburser	nents	282,5	75	7			
	b	Net investment i	•					1.	9,254		
	C	Adjusted net inc	•	•	.	A Commence of the Commence of	-	FW.		161.277	Contract of the second second second

Form 990-PF (2010) JOHN FAMILY FOUNDATION

	Dariel	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End o	
_	HT PARTO	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	199,016	114,046	114,046
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
	1	Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	•	disqualified persons (attach schedule) (see page 15 of the			
		instructions)			
	7	Other notes and loans receivable (att. schedule)			
	′	Less. allowance for doubtful accounts	Granifica Was September	data di Afrika di Maria da Ma	4 (5) (1) (62 (3) (4) (6) (4) (4) (6) (6) (6) (6) (6) (6) (6) (6) (6) (6
S	8	Inventories for sale or use			
Assets	ů	• • • •			····
155	9	Prepaid expenses and deferred charges			
٨	'	Investments—U.S and state government obligations (attach schedule)	0.55 0.70		
	b	Investments—corporate stock (attach schedule) See Stmt 6	961,078	905,021	1,407,266
	C	Investments—corporate bonds (attach schedule)	STANTONICTORIES OF THE STANTON OF THE		
	11	Investments—land, buildings, and equipment. basis	the state of the state of the state of	a segregation of a constant of the second	Care care no care con
		Less accumulated depreciation (attach sch)			
	12	Investments—mortgage loans	102,488	102,488	102,488
	13	Investments—other (attach schedule) See Statement 7	4,048,867	4,472,469	4,665,557
	14	Land, buildings, and equipment basis			A SAN WARRANTA AND
	ŀ	Less accumulated depreciation (attach sch.)			
	15	Other assets (describe ▶			
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	5,311,449	5,594,024	6,289,357
	17	Accounts payable and accrued expenses	, , , , , , , , , , , , , , , , , , ,		of the state of the stage
	18	Grants payable			
Liabilities	19	Deferred revenue			
Ξ	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable (attach schedule)			
	22	Other lightlities (describe			
	23	Total liabilities (add lines 17 through 22)	0		
\exists		Foundations that follow SFAS 117, check here		<u> </u>	
Ø		and complete lines 24 through 26 and lines 30 and 31.			Harris Barrell
nces	24				
ar	ł	Unrestricted			
39	25	Temporarily restricted			
핑	26	Permanently restricted			
Net Assets or Fund Bala		Foundations that do not follow SFAS 117, check here			ति । विश्व के प्रियम् । विश्व । विश्व विश्व विश्व विश्व । विश्व विश्व विश्व ।
Ľ		and complete lines 27 through 31.]		心思 医生殖性 对身
ō	27	Capital stock, trust principal, or current funds			
ध्र	28	Paid-in or capital surplus, or land, bldg., and equipment fund	<u> </u>		
386	29	Retained earnings, accumulated income, endowment, or other funds	5,311,449	5,594,024	
ĕ	30	Total net assets or fund balances (see page 17 of the			
e		instructions)	5,311,449	5,594,024	A STATE OF THE STA
Z	31	Total liabilities and net assets/fund balances (see page 17			
		of the instructions)	5,311,449	5,594,024	
][前华	Analysis of Changes in Net Assets or Fund Balances	- / - <u></u> - /)		en de la completa de
		net assets or fund balances at beginning of year—Part II, column (a), line 30 (mus	st agree with	T	
Ĭ		f-year figure reported on prior year's return)	A agree wat		5,311,449
2		amount from Part I, line 27a		$\cdot \cdot \cdot \mid \frac{1}{2} \mid$	
		increases not included in line 2 (itemize)	••• ••	2	282,575
		increases not included in line 2 (itemize)		. 3	E 504 001
		eases not included in line 2 (itemize)	•	4	5,594,024
				5	F 504 001
_0	rotal	net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	5,594,024

Partily Capital Gains a	nd Losses for Tax on Investm	ent Income				
(a) List and describ 2-story brick ware	be the kind(s) of property sold (e.g., real estate, shouse; or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date a (mo , da		(d) Date sold (mo , day, yr)
1a FSC SECURITIES						
b LPL						
С						·
d						
<u>e</u>						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis bense of sale		(h) Gain (e) plus (f)	minus (g)
a 197						197
ь 8,761						8,761
<u>c</u>						
						
Complete only for assets shown	g gain in column (h) and owned by the fo	undation on 12/31	1/60			
Complete only for assets showin						(h) gain minus ess than -0-) or
			ess of col (ı) ol (ı), ıf any		Losses (fro	
а			•			197
b					•	8,761
C						<u> </u>
d						,
е						
2 Capital gain net income or (net c	apital loss) If gain, also enter in If (loss), enter -0- in	.		2	-	8,958
3 Net short-term capital gain or (los	ss) as defined in sections 1222(5) and (6	_		_		
	, column (c) (see pages 13 and 17 of the	*		ľ		
If (loss), enter -0- in Part I, line 8			ĺ	3		
Part Qualification U	nder Section 4940(e) for Reduc	ed Tax on Ne	t investment inco	ome		
If section 4940(d)(2) applies, leave the	foundations subject to the section 4940 are part blank.	(a) tax on net inve	stment income.)			
	tion 4942 tax on the distributable amoun lify under section 4940(e). Do not comple		base period?			Yes X No
1 Enter the appropriate amount in	each column for each year; see page 18	of the instructions	before making any en	ries.		· · · · ·
(a) Base penod years	(b)		(c)		D1-1	(d)
Calendar year (or tax year beginning	in) Adjusted qualifying distribution	s Net valu	e of nonchantable-use ass	ets		bution ratio vided by col. (c))
2009		, 358				
2008		,112				
2007		,000	5,982,0			0.058174
2006		, 639	5,491,6			0.104821
2005	393	, 527	4,954,8	345		0.079423
2 Total of line 1, column (d)				2		0.242418
	5-year base period—divide the total on li		e			
number of years the foundation h	as been in existence if less than 5 years			3		0.080806
4 Enter the net value of noncharital	ble-use assets for 2010 from Part X, line	5		. 4		0
5 Multiply line 4 by line 3						
· Manpy line 4 by line 5			• • • •	5		
6 Enter 1% of net investment incon	ne (1% of Part I, line 27b)			. 6		1,593
7 Add lines 5 and 6				7		1,593
8 Enter qualifying distributions from	•••			8		254,670
	n line 7, check the box in Part VI, line 1b,	and complete tha	t part using a 1% tax ra	ite. See the	I.	
Part VI instructions on page 18						

If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

(or designate) of each state as required by General Instruction G? If "No," attach explanation

Form 990-PF (2010)

X

8b | X

instructions) ► None

27)? If "Yes," complete Part XIV

names and addresses

Form 990-PF (2010)

om	1990-PF (2010) JOHN FAMILI FOUNDATION	23-2	01000		Pag	e o
PE	Statements Regarding Activities for Which Form	4720 May Be I	Required (co	ntinued)		
5a	During the year did the foundation pay or incur any amount to:					
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	🗆	Yes X No		
	(2) Influence the outcome of any specific public election (see section 4955); or	to carry on,	_			
	directly or indirectly, any voter registration drive?		🗆	Yes X No		,
	(3) Provide a grant to an individual for travel, study, or other similar purposes?			Yes X No		-: :
	(4) Provide a grant to an organization other than a charitable, etc., organization	described in				
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the inst	ructions)		Yes X No		7 y
	(5) Provide for any purpose other than religious, charitable, scientific, literary, o	•		_		Z.
	purposes, or for the prevention of cruelty to children or animals?			Yes X No		
ь	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	er the exceptions d	escribed in			
	Regulations section 53.4945 or in a current notice regarding disaster assistance			N/A	5b	
	Organizations relying on a current notice regarding disaster assistance check he		, .	▶ []		25 V.
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from					11,50
•	because it maintained expenditure responsibility for the grant?		N/A	Yes No		
	If "Yes," attach the statement required by Regulations section 53.4945-5(d).		,	.50		Y.G.
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pa	ov nremiims				
va	on a personal benefit contract?	ay promisins		Yes X No		5 . 1 5
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a pe	reanal benefit conti	-act2	162 140	6b	X
U	If "Yes" to 6b, file Form 8870.	rsonar benent conti	actr	••		
70	•	alter transaction?	[]	Voc X No		1
	At any time during the tax year, was the foundation a party to a prohibited tax sh		📖	Yes X No	7b	1. 16
15 77 5 5	If Yes, did the foundation receive any proceeds or have any net income attribute Information About Officers, Directors, Trustees, Fo					
el Mi	and Contractors	Juliuation Mai	ayers, myn	iy Faid Ellipid	yees,	
1 1	ist all officers, directors, trustees, foundation managers and their compens	ation (eee nage 2	2 of the instruc	tione)		
•	ist an onicers, anoctors, trastices, roundation managers and their compens	audii (See page 2.	e or the mande		.	
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit		unt,
	(a) Name and address	devoted to position	-0-)	plans and deferred compensation	other allowance	łS.
10.70	III D TOUN	DDECTDENM		Componduon		
	UL R JOHN WINFIELD	PRESIDENT				^
	55 COUNTY LINE ROAD PA 17889	1.00		U	0	
-	IDRED D JOHN WINFIELD	V. PRESIDENT				_
36	55 COUNTY LINE ROAD PA 17889	1.00		0	0	0
		 		-	-	
	• •					
_		<u> </u>		<u> </u>	_1	
2	Compensation of five highest-paid employees (other than those included of	on line 1 — see pa	ge 23 of the ins	tructions).		
	If none, enter "NONE."			T		
	(a) Name and address of such assalance and such that OCO 000	(b) Title, and average	(-) ()	(d) Contributions to employee benefit		unt.
	(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		
		<u> </u>		compensation		
NC	NE					
					-	
					-	
					ļ	
					<u> </u>	
ota	number of other employees paid over \$50,000	•				$\overline{}$

Form 990-PF (2010) JOHN FAMILY FOUNDATION 2	3-2616038	<u> </u>	age /
Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	Managers, Highly Paid Em	ployees,	
3 Five highest-paid independent contractors for professional services (see page 23 of the	instructions). If none, enter "NC	NE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensat	ion
NONE			,
· · · · · · · · · · · · · · · · · · ·			
· · · · · · · · · · · · · · · · · · ·			
Total number of others receiving over \$50,000 for professional services		<u> </u>	<u>C</u>
Summary of Direct Charitable Activities			
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical informationganizations and other beneficiaries served, conferences convened, research papers produced, etc	on such as the number of	Expenses	
1 NONE			
2			
3			
4			
Summary of Program-Related Investments (see page 24 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 N/A			
2			
All other program-related investments See page 24 of the instructions			
3			
	i i		

Form **990-PF** (2010)

Total. Add lines 1 through 3

Form 990-PF (2010) JOHN FAMILY FOUNDATION Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.) Fair-market value of assets not used (or held for use) directly in carrying out charitable, etc., Average monthly fair market value of securities ō Average of monthly cash balances 0 Fair market value of all other assets (see page 25 of the instructions) С 0 Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 0 2 Acquisition indebtedness applicable to line 1 assets 0 3 Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 11/2 % of line 3 (for greater amount, see page 25 of the instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 0 5 Minimum investment return. Enter 5% of line 5 0 Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here > | | and do not complete this part) Minimum investment return from Part X, line 6 1,593 2a Tax on investment income for 2010 from Part VI, line 5 b Income tax for 2010. (This does not include the tax from Part VI.) 1,593 C Add lines 2a and 2b 3 Distributable amount before adjustments. Subtract line 2c from line 1. 3 4 Recoveries of amounts treated as qualifying distributions Add lines 3 and 4 5 6 Deduction from distributable amount (see page 25 of the instructions) 6 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 STEPTIC VALUE Qualifying Distributions (see page 25 of the instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26 254,670 1a b Program-related investments—total from Part IX-B 1b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 3 Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) Cash distribution test (attach the required schedule) 3b 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 254,670 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) Adjusted qualifying distributions. Subtract line 5 from line 4 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

qualifies for the section 4940(e) reduction of tax in those years.

Form 990-PF (2010)

Form	990-PF (2010) JOHN FAMILY	FOUNDATION		23-26160	38	Page 9
	Undistributed Income		the instructions)			
Designation.			(a)	(b)	(c)	(d)
1	Distributable amount for 2010 from Part	XI,	Corpus	Years pnor to 2009	2009	2010
	line 7					0
2	Undistributed income, if any, as of the ei	nd of 2010:				
а	Enter amount for 2009 only					ا المحصول والمراجع المحاورة المراجع المحاورة
b	Total for prior years: 20 , 20	, 20				
3	Excess distributions carryover, if any, to	2010:				
а	From 2005	148,731			÷.	
b	From 2006	305,778				4.
C	From 2007	56,160				
d	From 2008	512,208	17			
е	From 2009	362,044				
f	Total of lines 3a through e		1,384,921	le sa Kenduk Larak d Karama s ajar a atau ma		to the same of the
4	Qualifying distributions for 2010 from Pa	rt XII,				
	line 4: ▶ \$ 254,670					
	Applied to 2009, but not more than line 2				र्गातकर जा प्राप्तिकेतुम्बद्धाः स्टब्स्ट्रेस्ट्रिस्ट	
b	Applied to undistributed income of prior					
	(Election required—see page 26 of the ii	· ·		gjar i geljaksen i senak		
С	Treated as distributions out of corpus (E					
	required—see page 26 of the instruction	s)				tali da ana anaka take na katata (
a	Applied to 2010 distributable amount Remaining amount distributed out of cor		254 670		render a second	NO PROPERTY OF STREET
5	Excess distributions carryover applied to	·	234,010			reller and arthur and the second and an extension of the second and the second and the second and the second a
•	(If an amount appears in column (d), the					
	amount must be shown in column (a).)	Sume				and the second of the second
6	Enter the net total of each column as					
_	indicated below:					
а	Corpus. Add lines 3f, 4c, and 4e. Subtra-	ct line 5	1,639,591			
b	Prior years' undistributed income. Subtra	•				The Mary Mary
	line 4b from line 2b					
С	Enter the amount of prior years' undistrib	outed .				
	income for which a notice of deficiency h	as				
	been issued, or on which the section 494	\$2(a)	44.		in a feet was the second of a	and the state of t
	tax has been previously assessed		ja Angeles and services en en especial		and a factor on a same	
d	Subtract line 6c from line 6b. Taxable					
	amount—see page 27 of the instructions		وند. وند بــــ و بــــ «ساس د ساس د د د د د	er en de m ili de la companya de la		5-21
е	Undistributed income for 2009 Subtract					kulon da inggan da nggan. Kabupatan pangan basa baga
	4a from line 2a Taxable amount—see p	age				
_	27 of the instructions		adequate against a secured			
T	Undistributed income for 2010. Subtract					
	4d and 5 from line 1. This amount must i	oe e				
7	distributed in 2011	·	<u>ش کا با دید مید کا در داد کا سعوانا</u>	kan kanala kanala da	الموجوج فيدونها الريبية فيأما أمر فايعا إجريق	
•	Amounts treated as distributions out of c to satisfy requirements imposed by secti	· ·				
	170(b)(1)(F) or 4942(g)(3) (see page 27					
	instructions)	01 1116	·			
8	Excess distributions carryover from 2005	· · · · · · · ·				
•	applied on line 5 or line 7 (see page 27 o	1				eks er ann en angar in de del K
	instructions)	,, the	148,731			
9	Excess distributions carryover to 201	·		igen jeft om sen et i sjene skj	n no transfer in the second	منيست مفقم والمستدر والأفتعة
•	Subtract lines 7 and 8 from line 6a	"	1,490,860			
10	Analysis of line 9		_ , ,			
а	Excess from 2006	305,778				
b	Excess from 2007	56,160				· ·
С	Excess from 2008	512,208			1	
d	Excess from 2009	362,044	q - 1			
ее	Excess from 2010	254,670				

\sim	~		2	_	4	_	^	•	^
•	-	_	_	•		•	11	•	-

Page 10

' Forr	n 990-PF (2010) JOHN FAMILY	FOUNDATION		23-2616	38	Page 1
12	Private Operating For	undations (see p	age 27 of the ins	tructions and Pa	rt VII-A, question 9	
1a	If the foundation has received a ruling or					···
	foundation, and the ruling is effective for			•		
b	Check box to indicate whether the found			bed in section 4	942(j)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years	<u> </u>	
	income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
	investment return from Part X for	(4) 2010	(5) 2003	(0) 2000	(0) 2001	
					1	
	each year listed				 	· · · · · · · · · · · · · · · · · · ·
b	85% of line 2a				 	
C	Qualifying distributions from Part XII,					
	line 4 for each year listed					
ď	Amounts included in line 2c not used directly					
	for active conduct of exempt activities					
0	Qualifying distributions made directly					
	for active conduct of exempt activities.		ļ			
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon:					
а	"Assets" alternative test—enter.					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)			l		
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in					
	Part X, line 6 for each year listed					
C	"Support" alternative test—enter:					
	(1) Total support other than gross					
	investment income (interest,				1	
	dividends, rents, payments on					
	securities loans (section					
	512(a)(5)), or royalties)				-	
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization		i			
	(4) Gross investment income					
	Supplementary Inform	nation (Complete	this part only if	the foundation b	ad \$5,000 or mor	e in assets at
	any time during the ye				40,000 01 1110.	o 4000to 4t
1	Information Regarding Foundation Ma					
а	List any managers of the foundation who		e than 2% of the total of	contributions received	by the foundation	
	before the close of any tax year (but only					
	PAUL R. AND MILDRED		, , , , , , , , , , , , , , , , , , ,	(000 3000011 307 (4)(2	J· <i>J</i>	
b	List any managers of the foundation who		he stock of a comorati	on (or an equally lame	nortion of the	· · · · · · · · · · · · · · · · · · ·
	ownership of a partnership or other entity				portion of the	
	N/A	, or minor the reality	on nao a 1070 or great	er interest.		
2	Information Regarding Contribution, G	irant Gift Loan Sch	olarship etc Progra	me.		
			to preselected charitab		loos not accont	
	unsolicited requests for funds. If the found					
	organizations under other conditions, con			or the instructions) to	individuals of	
	The name, address, and telephone numb			d be addressed		
u	JOHN FAMILY FOUNDATI	CN	on applications should	o de adoressed.		
	3855 COUNTY LINE ROA		ח 17000			
b						
U	The form in which applications should be See Statement 8	submitted and informa	auon and materials the	y snould include:		
					·	
С	Any submission deadlines: NONE					
			alama atawa ta a	and the second second		
d	Any restrictions or limitations on awards,	such as by geographic	ai areas, charitable fie	eias, Kinds of institution	ns, or other	
	factors:					
	NONE					

Form 990-PF (2010) JOHN FAMILY FOUNDATION Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation Recipient Purpose of grant or **Amount** status of contribution recipient Name and address (home or business) Paid during the year SEE SCHEDULE 254,670 Total 254,670 ▶ 3a Approved for future payment N/A Total **▶** 3b

Fo	rm 990-PF (2	010) JOHN FAMILY FOUNDATION	ī	23-2	26160	38	Page 12
		Analysis of Income-Producing Ac					
		ounts unless otherwise indicated		d business income	Exclude	d by section 512, 513, or 514	(e)
	•		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
1	_	rvice revenue:					Die ilisuddolis)
					-		
					 		
					 		
	f				ŀ		
	g Fees an	d contracts from government agencies					
2	Membership	dues and assessments					
3	Interest on s	savings and temporary cash investments					14,009
4	Dividends a	nd interest from securities					136,287
5		come or (loss) from real estate:					
		anced property	<u> </u>		ļ		
		t-financed property			-		· · · · · · · · · · · · · · · · · · ·
		come or (loss) from personal property			<u>.</u>		
		ment income					
		s) from sales of assets other than inventory			ļ		142,987
		or (loss) from special events			-		
		or (loss) from sales of inventory					
11	Other reven				 		10.050
		DIVIDEND DISTRIBUTIONS	ļ		 		10,958
		TITUTE PAYMENT			 		23
				<u>-</u>	-		
12	6	d columns (b), (d), and (e)				0	304,264
		ine 12, columns (b), (d), and (e)					304,264
		in line 13 instructions on page 29 to verify calculation		• • • •	••	13 <u> </u>	304,204
繭	ATTIX VIEB	Relationship of Activities to the A		ent of Everent P	Purnos		
	Line No.	Explain below how each activity for which income			•		
	▼	accomplishment of the foundation's exempt purpoinstructions.)					
	N/A						
_							
_							
_							
							····
							·
_				·			
			<u>.</u> . <u> </u>				- <u></u>
						_ 	
_							
							
							
_						·	
_							
_						 	············
_			· · · · · · · · · · · · · · · · · · ·				

Form 9	90-PF (20	10) JOHN FAM:	ILY FO	UNDATION		23-2616038	}		Pag	ge 13
Per	DAVI)	Information Reg Exempt Organiz		ransfers To a	nd Transactio	ons and Relationships	With Noncharit	able		
4 5	and the era			an in any of the fe	llaurian with any	-there are a section decorbed			Yes	No
						other organization described			105	NO
			er tnan sect	ion 501(c)(3) orga	nizations) or in se	ection 527, relating to political			, , ,	
0	rganizatio	ns?								
a T	ransfers f	rom the reporting found	dation to a n	oncharitable exen	npt organization o	ıf:		100		
('	1) Cash							1a(1)		X
(2	2) Other a	issets		•	••••	•	• • •	1a(2)		X
ь С	ther trans	actions.	•		•			797.00		1
		of assets to a noncharit	ahle evemn	t organization				1b(1)		Х
		ses of assets from a ne				•	• •			X
								1b(2)		X
		of facilities, equipment		sets				1b(3)		
		ursement arrangements	s	•				1b(4)		X
(\$	5) Loans	or loan guarantees						1b(5)		_X
(6	Perform	nance of services or me	embership d	or fundraising solic	atations			1b(6)		X
c S	haring of	facilities, equipment, m	ailing lists, o	other assets, or pa	aid employees		•	1c		X
			-	-		mn (b) should always show the	fair market			
						the foundation received less th				
		_	-		•					
	Line no					the goods, other assets, or se				
	Line no	(b) Amount involved	(c) Name	of nonchantable exe	empt organization	(d) Description of transfers,	transactions, and share	ng arrange	ements	
N/A										
						<u> </u>				
		<u> </u>	1				<u></u>			
	• •	 	 							
			<u> </u>							
		ļ <u> </u>								
			L							
			 					-		
					-					
		<u></u>								
2a Is	the found	lation directly or indirec	tly affiliated	with, or related to	, one or more tax	exempt organizations				
		section 501(c) of the						☐ Ye	s X	Nο
		mplete the following sci			-/(-// -:		•	··	• ==	
) Name of organization	nogalo.	(b) Type of	organization	(a) Dogg	antion of colotionship			
N/		, realite of organization		(b) Type of	organization	(c) Desc	nption of relationship			
	A									
	Lindor no	Observations I dealers								
	belief, it	rnances or penjury, I declare is true, correct, and comple	e tnat i nave e ete Declaratio	xamined this return, i fixof preparer (other i	including accompan	ying schedules and statements, and ciary) is based on all information of	to the best of my know	ledge and	_	
Sign	N		7-7	()	I	Gary) is based on all illioning on or	And A Carry		c .	
Here		Mull	<u>~ </u>	<u>~~</u>			eerdent			
	Sign	nature of officer or trustee			Date	Title				
	Pnnt/T	ype preparer's name	7		Preparer's signa	hire	Date			$\overline{\neg}$
Paid		AL - bishmisi o liquio	,		i reputer a signa		Date	l'	Check	n
	_	TAURUT 1111A11							self-emp	royed
-repare	BL T. W	ICHAEL HUGHES			T. MICHAE	L HUGHES	106/2	21/11		

Rogers Huber & Associates

Firm's address > 973 Lycoming Mall Dr Muncy, PA 17756

570-546-2238 Form **990-PF** (2010)

Firm's EIN ▶23-2081028

PTIN

Phone no

P01044029

Use Only

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

2010

Name of the organization

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

JOHN FAMILY F	JOHN FAMILY FOUNDATION								
Organization type (check or	ne)·								
Filers of:	Section:								
Form 990 or 990-EZ	501(c)() (enter number) organization								
	4947(a)(1) nonexempt charitable trust not treated as a private foundation								
	527 political organization								
Form 990-PF	X 501(c)(3) exempt private foundation								
	4947(a)(1) nonexempt charitable trust treated as a private foundation								
	501(c)(3) taxable private foundation								
	covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	ı. See							
General Rule									
_	iling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in mone contributor. Complete Parts I and II.	ey or							
Special Rules									
sections 509(a)(1) ar	3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulated 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Con	of the							
the year, aggregate of	7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, lites, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.								
the year, contribution aggregate to more th year for an exclusive	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.								
990-EZ, or 990-PF), but it me	It is not covered by the General Rule and/or the Special Rules does not file Schedule B (Fust answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 9 certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 9	990-EZ, or on							

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Page 1 of 1 of Part I

Name of organization

JOHN FAMILY FOUNDATION

Employer identification number

23-2616038

示制制 :	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
.1	PAUL AND MILDRED JOHN 3855 COUNTY LINE ROAD WINFIELD PA 17889	\$ 250,777	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b)	(c) Aggregate contributions	(d) Type of contribution
NO.	Name, address, and ZIP + 4	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	· · · · · · · · · · · · · · · · · · ·	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
NG.		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b)	(C)	(d)
	Name, address, and ZIP + 4	Aggregate contributions	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

232616038 JOHN FAMILY FOUNDATION

Federal Statements

23-2616038 FYE: 12/31/2010

		Statemen	14 1 - 1	Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets	t I, Line	6a - Sale c	of Assets			
De	Description			How Received						
Whom Sold	Date Acquired	Date Sold		Sale Price	Cost		Expense	Depreciation	Gair	Net Gain / Loss
LPL	Various	Various	က	Purchase 2,033,544 \$	1,899	1,899,515 \$		\$	တ	134,029
Total			φ.	2,033,544 \$	1,899,515	,515 \$	0	0 \$	\$	134,029
		Stateme	nt 2 -	Statement 2 - Form 990-PF, Part I, Line 11 - Other Income	rt I, Line	11 - Other	r Income			
	Description				Rever Bo	Revenue per Books	Net Investment Income		Adjusted Net Income	Net
NON DIVIDEND DISTRIBUTIONS SUBSTITUTE PAYMENT	UTIONS			₩	10.	10,958 23	w.	, 	10	10,958 23
Total				፞		10,981	ഗ		10	10,981

	Statement 3 - F	orm 990-PF, Pa	990-PF, Part I, Line 16b - Account	nting Fees	
Description		Total	Net Investment	Adjusted Net	Charitable Purpose
Indirect Accounting Fees Total	w w	663	\$	\$	\$

Charitable Purpose	\$	\$
Adjusted Net	s	\$
Net Investment	\$	\$
Total	13,506	13,506
•	တ ျ	\$
Description	INVESTMENT FEES	Total

Statement 4 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Federal Statements

Description 2009 EXCISE TAX FOREIGN TAX PAID	tement T	Total 1,383 2,157	Net 1, 383 \$ 2, 157	t nent	Adjusted Net	Charitable Purpose
ŀ		01010))	.	·

232616038 JOHN FAMILY FOUNDATION

23-2616038 FYE: 12/31/2010

Federal Statements

Statement 6 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Fair Market Value	\$ 1,407,266	\$ 1,407,266
Basis of Valuation	Cost	
End of Year	905,021	905,021
	\$	ς, I
Beginning of Year	961,078	961,078
_	\$	တ္
Description	PUBLICILY TRADED CORPORATE STOCK	Total

Statement 7 - Form 990-PF, Part II, Line 13 - Other Investments

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
PUBLICILY TRADED MUTUAL FUNDS BEHRINGER REIT BEHRINGER HARVARD OPPORTUNITY REIT BEHRINGER HARVARD MULTI FAMILY REIT	\$ 3,748,867 100,000 100,000 100,000	\$ 4,172,469 100,000 100,000 100,000	Cost Cost Cost	\$ 4,365,557 100,000 100,000
Total	\$ 4,048,867	\$ 4,472,469		\$ 4,665,557

232616038 JOHN FAMILY FOUNDATION
23-2616038 Federal Statements

FYE: 12/31/2010

6/21/2011 12:16 PM

Name of Manager	Amount
PAUL R. AND MILDRED D. JOHN	\$
Total	\$ 0
Statement 8 - Form 990-PF, Part XV, Line 2b - Application	ation Format and Required Content
Description	
LETTER SHOULD BE SUBMITTED DETAILING THE PURPOSE REQUEST	E OF
Form 990-PF, Part XV, Line 2c - Sub	omission Deadlines
Description	
NONE	
Form 990-PF, Part XV, Line 2d - Award Re	estrictions or Limitations
Description	
NONE	

PART XV Supplement Page 1

Account # 35D004806 Account Short Nam JOHN

7 10 0 0 11 11 11 11 11 11 11 11 11 11 11		
Date (Date	Activity	- Base Net Amt.
01/26/2010	CHECK NUMBER - 1178 FIRST BAPT CH	-5000
01/27/2010	CHECK NUMBER - 1179 CHILDREN FIRST	-500
02/03/2010	CHECK NUMBER - 1180 GIRL SCOUTS	-2000
03/05/2010	CHECK NUMBER - 1181 SUSQUEHANNA COUNCIL BSA	-5000
03/30/2010	CHECK NUMBER - 1182 SUMMER SEALS DAY CAM P	-1000
04/06/2010	CHECK NUMBER - 1183 THE DAILY ITEM	87.14
04/19/2010	CHECK NUMBER - 1184 1812 SOCIETY	-5000
05/03/2010	CHECK NUMBER - 1185 SUSQUEHANNA UNIVERSITY	-50000
05/05/2010	CHECK NUMBER - 1186 MASONIC TEMPLE ASSN	-5000
05/10/2010	CHECK NUMBER - 1187 FIRST NATL BK	-1383 -
06/02/2010	CHECK NUMBER - 1188 BIG BROTHERS BIG SIS TERS OF	-5000
05/25/2010	CHECK NUMBER - 1189 MIFFLINBERG UM CHURC H	-1000
06/07/2010	CHECK NUMBER - 1190 TOYS FOR TOTS	-1000
06/04/2010	CHECK NUMBER - 1191 UNION CNTY VETERANS 4TH OF	-500
06/03/2010	CHECK/NUMBER - 1192 MARCH OF DIMES	-1000
06/11/2010	CHECK NUMBER - 1193 SUNCOM INDUSTRIES IN C	-500
06/15/2010	CHECK NUMBER - 1194 AMERICAN RED CROSS	-5000
06/16/2010	CHECK NUMBER - 1195 RONALD MCDONALD HOUS E	-1000
06/21/2010	CHECK NUMBER - 1196 ROGERS HUBER + ASSOC	-662.8
07/12/2010	CHECK NUMBER - 1197 SVC	-1700
07/27/2010	CHECK NUMBER - 1198 SUN HOME HEALTH SVCS INC	-2000
08/11/2010	CHECK NUMBER - 1199 EVANGELICAL COMM HOS P	-30000
08/12/2010	ÇHECK NUMBER - 1200 DAV	-1000
09/01/2010	CHECK NUMBER - 1202 CENT SUSQUEHANNA SIG HT SVC	-2000
09/09/2010	CHECK NUMBER - 1203 SNYDER CO LIBRARIES	-1000

124,200

part XV Syploment Pege 2

Premier Plus Year-End Account Summary

LACK

PREMIER PLUS CHECKING ACTIVITY Category: Unassigned

Date	Check Number	Рауев	Category	Amount
10/07/10 1001	1001	SUSQUEHANNA UNIVERSITY	UNASSIGNED	-50,000.00
10/08/10	1002	GREATER SUSQUEHANNA VALLEY UNI	UNASSIGNED	-2,000 00
10/18/10	1003	AMERICAN CANCER SOCIETY	UNASSIGNED	-1,000 00
10/26/10	1004	MIFFLINBURG UMC	UNASSIGNED	-5,000 00
11/01/10	1006	HABITAT FOR HUMANITY	UNASSIGNED	-5,000 00
11/04/10	1007	AMERICAN CANCER SOCIETY	UNASSIGNED	-3,470 00
11/30/10	1008	THE SMILE TRAIN	UNASSIGNED	-1,000 00
11/24/10	1009	AMERICAN RED CROSS	UNASSIGNED	-2,000 00
12/08/10	1010	NATIONAL MULTIPLE SCLEROSIS SO	UNASSIGNED	-2,000.00
12/08/10	1011	U M HOME FOR CHILDREN	UNASSIGNED	-5,000.00
12/15/10	1012	RONALD MCDONALD HOUSE	UNASSIGNED	-5,000 00
12/13/10	1013	GEISINGER HEALTH SYSTEM	UNASSIGNED	-10,000,00
12/16/10	1014	AM HEART ASSOC	UNASSIGNED	-10,000.00
12/10/10	1015	BIG BROTHER BIG SISTERS	UNASSIGNED	-5,000.00
12/15/10	1016	MARCH OF DIMES	UNASSIGNED	-1,000.00
12/15/10	1017	SALVATION ARMY	UNASSIGNED	-15,000 00
12/21/10	1018	MIFFINBURG BUGGY MUSEUM	UNASSIGNED	-1,000.00
12/13/10 1019	1019	SVWIT	UNASSIGNED	-5,000 00
TOTAL Unassigned	assigned			-\$128,470.00

-\$128,470.00

TOTAL PREMIER PLUS CHECKING ACTIVITY