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Form **9.90-PF**Department of the Treasury

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

OMB No 1545-0052

9010

Inte	mal Re	evenue Service	Note	. The found	dation may t	e able to use a d	copy of the	is return to sati	sfy state rep	orting	requirements	<u> </u>	
Fo	or cal	endar year 2010,	or ta	x year beg	ginning			, 2010,	and endin	g	-	, 20	
G	Che	ck all that apply		Initial re	turn	Initia	l return c	of a former pu	iblic charity	,	}	Final return	
		•		Amende	ed return		Addres	ss change	۲	Na	ne change	_	
Na	me o	f foundation									Employer identi	fication number	_
В	ARN	ABAS FAMILY	FOU	NDATION	Į						26-	-4297010	
Νu	ımbeı	and street (or PO I	box nur	mber if mail is	s not delivered	to street address)		 	Room/suit	e B	Telephone number	(see page 10 of the instructions	 ;)
									}			, , ,	
1	231	GLENN EAGLE	LA	NE					}		() –	
_		own, state, and ZIP							L_,,	С	If exemption applica	ation is	٦
	•	,									pending, check hen	►	ㅓ
S	т :	ALBANS, MO 6	307	3						P	Foreign organiza		
		ck type of organiz			oction 5010	c)(3) exempt p	musto for	ındatıan			Foreign organiza85% test, check		\neg
'n	_	• • •						vate foundati			computation .	▶ ∟	
÷		ection 4947(a)(1) no								— E	If private foundation	status was terminated	\neg
•		market value of a				ounting method:		asn Acc	rual		under section 507(b	o)(1)(A), check here . 🕨 🗀	
	-	ear (from Part II, o				other (specify) , column (d) mi				F		n a 60-month termination	\neg
		▶ \$,666.		` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` 	ist be on	i casii basis j	<u>'</u>		under section 507(t	o)(1)(B), check here	ᆚ
Ŀ	art .	Analysis of Rev				(a) Revenue	e and	(b) Net inve	estment	(c)	Adjusted net	(d) Disbursements for charitable	
		may not necessar	ılv equ	ial the amoi	unts in ´	expenses		incom		(0)	income	purposes	
_		column (a) (see pa	age 11	of the insti	ructions))	books		-				(cash basis only)	_
	1	Contributions, gifts, grants	s, etc , n	eceived (attach	schedule) .		6,000.						
	2	Check ▶ ☐ If the	e round ch Sch	lation is not	required to								
-	3	Interest on savings an	d temp	orary cash in	rvestments		34.		34.			ATCH 1	
	4	Dividends and inter	rest fro	om secuntie	s							•	
	5 a	Gross rents											
	b	Net rental income or (loss) _										
		Net gain or (loss) from		of assets not	on line 10								
릵	ь	Gross sales price for a assets on line 6a	ali								•		
Revenue	7	Capital gain net inc	ome (from Part I\	√. line 2)								
۲	8	Net short-term capi											
	9	Income modification	_										
ı	10 a	Gross sales less retur and allowances											
	b	Less Cost of goods s											
	С	Gross profit or (loss	s) (atta	ach schedul	le)								
	11	Other income (attach			٠٠٠٠								
ŀ	12	T-4-1 A -1-1 1-1-1	1.0	cn	:Y::::		6,034.		34.				
П	13	Opmpensation of office	ers_dr	ectors, truste	esl etc		0.						_
	14	Other employee sa	laries	and wane	ő\								_
စ္က	15	Pension plans, emi	กไกปี้คอ	Penefits	<u> </u>							-	
န္တု		Legal fees (attach	schedi		7 ,								_
흷		Accounting fees (a	_										_
۵I		Other professional			rdula)								_
.≊					duic)							-	_
ğ	17					-				_			
Ē	18	Taxes (attach schedu		-		<u></u>							_
힘	19	Depreciation (attac		-	-								
٩	20	Occupancy				-							_
	21	Travel, conference										 	_
	22	Printing and publica											
Ĕ,	23	Other expenses (at		•									
Operating	24	Total operating an		ninistrative	expenses.		_						
ڄ		Add lines 13 through					0.					-	
٦	25	Contributions, gifts	, grant	ts paid			5,400.					5,40	
4	26	Total expenses and dis-	bursem	ents. Add line	s 24 and 25	ļ	5,400.					5,40	<u>00</u>
	27	Subtract line 26 fro	m line	: 12									
		Excess of revenue over					634.				·		
	Ь	Net investment inc	come	(if negative	e, enter -0-)				34.				
		A .II			-1 0\	I .	,	I	T			1	

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

For Paperwork Reduction Act Notice, see page 30 of the instructions.

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В	art II,	Attached schedules and amounts in the Balance Sheets description column should be for end-of-year	Beginning of year	End o	f year
	-	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
- {	1	Cash - non-interest-bearing	3,032.	3,666.	3,666.
	2	Savings and temporary cash investments			
1	3	Accounts receivable			
		Less. allowance for doubtful accounts			
		Pledges receivable			
		Less allowance for doubtful accounts			
		Grants receivable			
		Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see page 15 of the instructions)			
-		Other notes and loans receivable (attach schedule)			
- 1					
- 1		Less: allowance for doubtful accounts			
ş		Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
۲		Investments - U S and state government obligations (attach schedule)			
ŀ		Investments - corporate stock (attach schedule)			
	11	Investments - corporate bonds (attach schedule)			
		Less accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13 14	Investments - other (attach schedule)			
	14	equipment, basis			
ľ		equipment basis Less accumulated depreciation (attach schedule)			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the			
\Box		instructions Also, see page 1, item l)	3,032.	3,666.	3,666.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ab.	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe			
					•
	23	Total liabilities (add lines 17 through 22)		0.	
\exists		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
es	24 25 26 27	Unrestricted			
anc	25	Temporarily restricted			
3al	26	Permanently restricted			
P		Foundations that do not follow SFAS 117,			
5		check here and complete lines 27 through 31. $\blacktriangleright X$			
-	27	Capital stock, trust principal, or current funds			
ţ	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	3,032.	3,666.	
Ř	30	Total net assets or fund balances (see page 17 of the			
Net		instructions)	3,032.	3,666.	
	31	Total liabilities and net assets/fund balances (see page 17			
		of the instructions)	3,032.	3,666.	
P	art II	Analysis of Changes in Net Assets or Fund		0,0001	
_		net assets or fund balances at beginning of year - Part		must agree with	
•		of-year figure reported on prior year's return)		• •	3,032.
2		and a second forms. Don't I have 07-		_	634
		r increases not included in line 2 (itemize)			
A	Dune	4 OIO		1 - 1	3,666.
		eases not included in line 2 (itemize)			
6	Total	net assets or fund balances at end of year (line 4 minus line	5) - Part II column (b) li	ne 30 6	3,666.
<u>~</u>	· Otal	not access or rand balances at one of year fillie 4 milius line	oj - r arcii, colullii (b), li	ne 30 6	Form 990-PF (2010)

		he kind(s) of property soluse, or common stock, 2			acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
la							
b							
С							
d							
e							
(e) Gross sales price	(f) I	Depreciation allowed (or allowable)		or other basis bense of sale		(h) Gain or (lo (e) plus (f) mini	
<u>a</u>					<u> </u>		
<u>b</u>							
С							
d							
e Commission and for an		n in column (b) and sum	ad by the foundation or	40/04/80			
Complete only for as		n in column (h) and owne	Í			Gains (Col (h) g (k), but not less t	
(i) F M V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		ess of col. (i)		Losses (from co	
<u>a</u>							
b							
<u>C</u>							
d e			-				
~	gain or (loss) a art I, line 8, coli		and 17 of the instru	in Part I, line 7	} 2		
		ction 4940(e) for R			ncome		-
If section 4940(d)(2) app Was the foundation liable If "Yes," the foundation c	e for the section	ı 4942 tax on the distri		• •	e period?		Yes X No
1 Enter the appropriate	amount in eac	h column for each yea	r, see page 18 of the	e instructions befo	re making	any entries	
(a) Base penod years Calendar year (or tax year beginni	ngın) Adjus	(b) ted qualifying distributions	Net value of non	(c) chantable-use assets		(d) Distribution ra (col (b) divided by	
2009		2,000		3,956.			0.505561
2008							
2007					_		
2006							
2005							
2 Total of line 1, colum		<i>.</i>			. 2		0.505561
3 Average distribution	ratio for the 5-y	and the contract of the contra					
number of years the	foundation has	ear base period - divid been in existence if le		oy 5, or by the	. 3		0.252781
·		· ·	ss than 5 years .	•	. 3		3,298.
4 Enter the net value of	f noncharitable	been in existence if le	ss than 5 years .		. 4		-
4 Enter the net value of Multiply line 4 by line	f noncharitable	been in existence if le	ss than 5 years rom Part X, line 5		. 4		3,298.
4 Enter the net value of 5 Multiply line 4 by line 6 Enter 1% of net inve	f noncharitable	been in existence if le	ss than 5 years rom Part X, line 5		. 5		3,298.

Part IV Capital Gains and Losses for Tax on Investment Income

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the ins	tructi	ons)	
1a	Exèmpt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			
	here ► X and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			
3	Add lines 1 and 2			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
5	Tax based on Investment income. Subtract line 4 from line 3. If zero or less, enter -0-			
6	Credits/Payments Credits/Payments			
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a			
þ	Exempt foreign organizations-tax withheld at source			
c	Tax paid with application for extension of time to file (Form 8868) 6c 0.			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	_		0.
	Enter the amount of line 10 to be Credited to 2011 estimated tax Refunded 11			0.
	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	İ		
	of the instructions for definition)?	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
C	Did the foundation file Form 1120-POL for this year?	1c		X
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$			١
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	_2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	_		١,,
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		Х
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		
_	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	- 1		
	By language in the governing instrument, or By language in the governing instrument, or By lateta languages, that affectively amends the government as that he mandatany directions that			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	ایا	Х	
7	conflict with the state law remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	6 7	X	
7	· · · · · · · · · · · · · · · · · · ·	-		
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) \blacktriangleright MO,		!	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
D	(or designate) of each state as required by General Instruction G?lf "No," attach explanation	. I	х	
۵		_8b		
9	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			
	· · · · · · · · · · · · · · · · · · ·	9	١	х
40	27)? If "Yes,"complete Part XIV	3		<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	10		х
	names and addresses	.0		L

Oilli	20 4237010			Page 3
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			1
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	_
	Website address N/A			
14	The books are in care of KEVIN J WILLIAMS Telephone no			
•	The books are in care of ► KEVIN J WILLIAMS Located at ► 120 S CENTRAL STE 1800 ST. LOUIS, MO ZIP+4 ► 63105			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here · · · · · · · · · · · · · · · · · ·			TT.
	and enter the amount of tax-exempt interest received or accrued during the year			_
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter		'	
	the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	1		L
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
4.	During the year did the foundation (either directly or indirectly).	 	163	140
Ta				
	(1) Engage in the state of executing of property that a disqualities person			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	uisquaimed person.			
	(c) I difficulty a disease, so these, or has made to (c) description in sum, a disease person.			
	(4) Tay compensation to, or pay or reimburse the expenses or, a disqualmed person.	}		
	(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)?			
	the benefit of about a dioqualified persony.	1		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	1		•
	foundation agreed to make a grant to or to employ the official for a period after			ŀ
	termination of government service, if terminating within 90 days)			•
t	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			ŀ
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		:	٠
	were not corrected before the first day of the tax year beginning in 2010?	_1c		X
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 2010, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2010?			
	If "Yes," list the years			
t	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see page 22 of the instructions)	2b		X
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	>			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
t	olf "Yes," did it have excess business holdings in 2010 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 2010)	3b		
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b		Х

Par	t VII-B Statements Regarding Activities for	Which Form 47	20 May Be Requi	red (continued)		
5a	Duning the year did the foundation pay or incur any amount	to	•			
	(1) Carry on propaganda, or otherwise attempt to influence		945(e))?	Yes X No	,	
	(2) Influence the outcome of any specific public election (se	ee section 4955); or to	o carry on,			
	directly or indirectly, any voter registration drive?			Yes X No	,	
	(3) Provide a grant to an individual for travel, study, or other				,	
	(4) Provide a grant to an organization other than a chantab					
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (se	•		Yes X No	,	
	(5) Provide for any purpose other than religious, charitable	. •				
	purposes, or for the prevention of cruelty to children or			Yes X No	,	
h	If any answer is "Yes" to 5a(1)-(5), did any of the transa					
	Regulations section 53.4945 or in a current notice regard		•		5b	
	Organizations relying on a current notice regarding disaster	-		, – –		
	If the answer is "Yes" to question 5a(4), does the foundation					
·				Yes No		
	because it maintained expenditure responsibility for the gra		• • • • • • • • • • •	. Lies Line	'	
_	If "Yes," attach the statement required by Regulations section	• •				
6 a	Did the foundation, during the year, receive any funds, direct	•	• •	Yes X No		
L	on a personal benefit contract?			. Yes X No		v
D	Did the foundation, during the year, pay premiums, directly	or indirectly, on a pen	sonal benefit contract?	• • • • • • • • •	6b	X
_	If "Yes" to 6b, file Form 8870.			□ □		
	At any time during the tax year, was the foundation a party	•	•	Yes X No		
	If "Yes," did the foundation receive any proceeds or have an Information About Officers, Directors				7b	
Pal	Information About Officers, Directors and Contractors	, Trustees, Four	idation wanagers	, mignly Pald Emp	loyees,	
1	List all officers, directors, trustees, foundation man			ge 22 of the instructi	ions).	
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans	(e) Expens	
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)		(e) Expens other allo	
		(b) Title, and average hours per week devoted to position	-0-)	employee benefit plans and deferred compensation		owances
AT	(a) Name and address TACHMENT 2	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	employee benefit plans		
AT		(b) Title, and average hours per week devoted to position	-0-)	employee benefit plans and deferred compensation		owances
AT		(b) Title, and average hours per week devoted to position	-0-)	employee benefit plans and deferred compensation		owances
AT		(b) Title, and average hours per week devoted to position	-0-)	employee benefit plans and deferred compensation		owances
AT		(b) Title, and average hours per week devoted to position	-0-)	employee benefit plans and deferred compensation		owances
AT		(b) Title, and average hours per week devoted to position	-0-)	employee benefit plans and deferred compensation		owances
	TACHMENT 2	hours per week devoted to position	0.	employee benefit plans and deferred compensation O.	other alk	owances
	TACHMENT 2 Compensation of five highest-paid employees (other	hours per week devoted to position	0.	employee benefit plans and deferred compensation O.	other alk	owances
	TACHMENT 2	hours per week devoted to position	0.	employee benefit plans and deferred compensation O.	other alk	owances
2	TACHMENT 2 Compensation of five highest-paid employees (other	hours per week devoted to position r than those include (b) Title, and average hours per week	0.	employee benefit plans and deferred compensation 0. age 23 of the instruction (d) Contributions to employee benefit	other allo	0 e account,
2	TACHMENT 2 Compensation of five highest-paid employees (other finance, enter "NONE."	hours per week devoted to position	0 .	employee benefit plans and deferred compensation 0. age 23 of the instruction (d) Contributions to	other allo	0 e account,
2	Compensation of five highest-paid employees (other if none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position r than those include (b) Title, and average hours per week	0 .	employee benefit plans and deferred compensation 0. (d) Contributions to employee benefit plans and deferred	other allo	0 e account,
2	TACHMENT 2 Compensation of five highest-paid employees (other finance, enter "NONE."	hours per week devoted to position r than those include (b) Title, and average hours per week	0 .	employee benefit plans and deferred compensation 0. (d) Contributions to employee benefit plans and deferred	other allo	0 e account,
2	Compensation of five highest-paid employees (other if none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position r than those include (b) Title, and average hours per week	0 .	employee benefit plans and deferred compensation 0. (d) Contributions to employee benefit plans and deferred	other allo	0 e account,
2	Compensation of five highest-paid employees (other if none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position r than those include (b) Title, and average hours per week	0 .	employee benefit plans and deferred compensation 0. (d) Contributions to employee benefit plans and deferred	other allo	0 e account,
2	Compensation of five highest-paid employees (other if none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position r than those include (b) Title, and average hours per week	0 .	employee benefit plans and deferred compensation 0. (d) Contributions to employee benefit plans and deferred	other allo	0 e account,
2	Compensation of five highest-paid employees (other if none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position r than those include (b) Title, and average hours per week	0 .	employee benefit plans and deferred compensation 0. (d) Contributions to employee benefit plans and deferred	other allo	0 e account,
2	Compensation of five highest-paid employees (other if none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position r than those include (b) Title, and average hours per week	0 .	employee benefit plans and deferred compensation 0. (d) Contributions to employee benefit plans and deferred	other allo	0 e account,
2	Compensation of five highest-paid employees (other if none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position r than those include (b) Title, and average hours per week	0 .	employee benefit plans and deferred compensation 0. (d) Contributions to employee benefit plans and deferred	other allo	0 e account,
2	Compensation of five highest-paid employees (other if none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position r than those include (b) Title, and average hours per week	0 .	employee benefit plans and deferred compensation 0. (d) Contributions to employee benefit plans and deferred	other allo	0 e account,
2	Compensation of five highest-paid employees (other if none, enter "NONE." Name and address of each employee paid more than \$50,000	hours per week devoted to position r than those include (b) Title, and average hours per week	0 .	employee benefit plans and deferred compensation 0. (d) Contributions to employee benefit plans and deferred	other allo	0 e account,

26-4297010

Pai	Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ and Contractors (continued)				
3	Five h	ghest-paid independent contractors for professional services (see page	23 of the instructions). If n	one, enter "NONE."	
		(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation	
	NONE				
				,	
Tota	1 numbe	r of others receiving over \$50,000 for professional services		NONE	
Pa	t IX-A	Summary of Direct Charitable Activities			
		lation's four largest direct charitable activities during the tax year Include relevant statistical and other beneficianes served, conferences convened, research papers produced, etc	information such as the number of	Expenses	
1	N/A				
2					
- .					
3					
-					
4 .					
Pa	t IX-B	Summary of Program-Related Investments (see page 24 of the ins	structions)		
		wo largest program-related investments made by the foundation during the tax year on lines 1 and		Amount	
1	NONE				
2 .				-	
Ali	other prog	am-related investments. See page 24 of the instructions			
3	NONE				
•					

Pa	 Minimum Investment Return (All domestic foundations must complete this part. Foreignsee page 24 of the instructions.) 	n foundation	ıs,
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	
b	Average of monthly cash balances	1b	3,348.
С		1c	0.
d		1d	3,348.
е	Reduction claimed for blockage or other factors reported on lines 1a and		,
	1c (attach detailed explanation)	1 1	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,348.
4	Cash deemed held for chantable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	50.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,298.
6	Minimum investment return. Enter 5% of line 5	6	165.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private foundations and certain foreign organizations check here ▶ and do not complete this p	e operating	
1	Minimum investment return from Part X, line 6	1	165.
2 a	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) 2b	1	
С	• • • • • • • • • • • • • • • • • • • •	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	165.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	165.
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	165.
Pa	art XII Qualifying Distributions(see page 25 of the instructions)	, -	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a		1a	5,400.
b	Decrees related in restments, total from Doct IV D	40.	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	nurnoses	2	0.
3	Amounts set aside for specific charitable projects that satisfy the	-	
а		3a	0.
b	Cook distribution took (attack the provinced askedula)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	5,400.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		<u> </u>
•	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	
6	Additional description of the Additional Conference from Figure 1	6	5,400.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		
	qualifies for the section 4940(e) reduction of tax in those years	iculating when	nei de lourdation

Pa	rt XIII Undistributed Income (see page	26 of the instruction	าร)		
1	Distributable amount for 2010 from Part XI,	(a) Corpus	(b) Years pnor to 2009	(c) 2009	(d) 2010
	line 7				165.
2	Undistributed income, if any, as of the end of 2010				
a					
	Total for pnor years 20 08 ,20 07 ,20 06				
3	Excess distributions carryover, if any, to 2010				
a	_ i i i i				
b	From 2006				
<u>د</u>	From 2007				
d	From 2008				
_		1,803.			
f	Total of lines 3a through e	1,003.			
4	Qualifying distributions for 2010 from Part XII,				
	line 4· ▶ \$ 5, 400.		1		
а	Applied to 2009, 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)				1.55
d	Applied to 2010 distributable amount				165.
e	Remaining amount distributed out of corpus	5,235.			
5	Excess distributions carryover applied to 2010				
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:	7 020			
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	7,038.			-
þ	Prior years' undistributed income Subtract				
c	Enter the amount of pnor 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				
Α.	amount - see page 27 of the instructions Undistributed income for 2009 Subtract line				
·	4a from line 2a Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2010 Subtract lines				
	4d and 5 from line 1 This amount must be				
7	distributed in 2011				
•	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
8	instructions)				-
•	applied on line 5 or line 7 (see page 27 of the instructions)				
9	Excess distributions carryover to 2011.				
	Subtract lines 7 and 8 from line 6a	7,038.			
10	Analysis of line 9				
а	Excess from 2006				
b	Excess from 2007				
C	Excess from 2008				
d	Excess from 2009 1,803.				
е	Excess from 2010 5, 235.]		

Pa	rt XIV Private Oper	ating Foundations	(see page 27 of the	instructions and Pa	art VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has	_		at it is a private ope	~ 1	
ь	foundation, and the ruling Check box to indicate whe		•	on decombed in continu		1/2) 05 4042(1)(5)
_ `		Tax year	invale operating foundation	Pnor 3 years	4942()(3) or 4942(J)(5)
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
	For the minimum investment return from Part X for each					
	year listed					
b	85% of line 2a		<u>-</u>			
C	Qualifying distributions from Part					
d	XII, line 4 for each year listed . Amounts included in line 2c not				 	<u> </u>
u	used directly for active conduct					
e	of exempt activities					
_	directly for active conduct of					
	exempt activities 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					
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					
C	"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)	,	•			
	(3) Largest amount of sup-					
	port from an exempt organization					
	(4) Gross investment income	and Information (C	 	anh. if the favor	1-4: h	
Pě		ary information (C during the year - se			dation had \$5,000	or more in assets
1	Information Regarding	Foundation Manager	s:			
а	List any managers of before the close of any	the foundation who I	nave contributed mor	e than 2% of the tot	al contributions received	ed by the foundation
	_		ley have contributed	more than \$5,000) (See Section 507(d)(2))	
_	LAWRENCE CO		400/	£ 41		
Ð	List any managers of ownership of a partner					/ large portion of the
	, , , , , , , , , , , , , , , , , , , ,	,		9		
	N/A			_		
2	Information Regarding			• •		
	Check here ► X if t unsolicited requests f organizations under of	or funds If the foun	dation makes gifts,	grants, etc (see pag	ritable organizations a le 28 of the instruction	and does not accept ons) to individuals or
a	The name, address, an	······································		 	addressed:	
b	The form in which appli	cations should be sub	mitted and information	and materials they sh	ould include	
c	Any submission deadling	nes.				-
d	Any restrictions or li factors.	mitations on awards	, such as by geogr	aphical areas, chant	able fields, kinds of	institutions, or other

3 Grants and Contributions Paid Duri	ng the Year or Appr	oved for l	Future Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				
MISSOURI BAPTIST UNIVERSITY			EDUCATION	5,400.
ONE COLLEGE PARK DR.				
ST. LOUIS, MO 63141				
		•		
			:	
Total			▶ 3a	5,400.
b Approved for future payment				
•				
				

Form 99	0-PF (2	010)			26-	-4297010	Page 12
Part 2	XVI-A	Analysis of Income-Produ	ucing Act	ivities			
Enter g	ross a	mounts unless otherwise indicated.	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e)
1 Pro	ogram s	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
	_						
d							
е							
f							<u> </u>
_		nd contracts from government agencies			-		
		hip dues and assessments savings and temporary cash investments			14	34.	
		and interest from securities					
		income or (loss) from real estate:				,	
		inanced property					
		ebt-financed property					
		ncome or (loss) from personal property	t				
7 Oth	ner invi	estment income					
	-	ss) from sales of assets other than inventory					
		ne or (loss) from special events					
		fit or (loss) from sales of inventory			-		
		enue a	<u> </u>				
			ı		-		
e							
12 Sut	btotal	Add columns (b), (d), and (e)				34.	
		d line 12, columns (b), (d), and (e)				13	34.
		eet in line 13 instructions on page 29 to					
		Relationship of Activities	•				
Line I	No.	Explain below how each activit accomplishment of the foundation					
•	'	instructions)	oo o,	re purpossos (surer una	oy providing	, rando for oddir parpoo	00) (000 page 20 01 ale
			-				
			· · · · · · · · · · · · · · · · · · ·				
		· · · · · · · · · · · · · · · · · · ·	_		···· · · · · · · · · · · · · · · · · ·		
-				· -			
-				<u> </u>			
			· ·				
		·					
					-		
						<u> </u>	
		····	-			.	
							
			-	.			

	•	Exempt Orga	inizations								
1	Did the	e organization directly	or indirectly e	ngage in any of	f the following	with a	ny other org	anization describ	ed	Yes	No
	ın sect	tion 501(c) of the C	ode (other than	section 501(c)(3)	organizations	or in s	section 527,	relating to politic	al		
	organiz									}	
а		rs from the reporting fou									,,
		sh									X
		ner assets	• • • • • • • • •	• • • • • • • • •	· · · · · · · ·	· • • • • ·		• • • • • • • • •	1a(2)		X
Ь		ransactions						•			,
		es of assets to a noncha								ļ	X
		chases of assets from a								ļ	X
		ntal of facilities, equipme								<u> </u>	X
		mbursement arrangeme							- 1	 	X
		ans or loan guarantees							1		X
		formance of services or						• • • • • • • • •			X
		of facilities, equipment,								<u> </u>	X
a		answer to any of t						-			
		of the goods, other									
(a) [ne no	in any transaction or (b) Amount involved		ement, snow in ncharitable exempt org				s, otner assets, rs, transactions, and s			
(a) Li	ne no	N/A	(c) Name of no	incriantable exempt org	ganizauon	N/A	arption of transfe	rs, transactions, and s	maning arrai	igemer	its
		N/A				N/A		-			
-	-						·				
	-										
				<u> </u>	-						
									-		
					-						 -
		<u>-</u>									
		· · ·									
								·			
2a	Is the	foundation directly	or indirectly affi	liated with or i	related to or	ne or mo	ore tax-exemn	ot organizations			
		ed in section 501(c) of	•				•	•		es 🗔	No.
b		" complete the following			,,, с сссдол	·					
		(a) Name of organization		(b) Type of	f organization			c) Description of relat	ionship		
		······							<u> </u>		
		•									
		er penalty s of penjury, I de	eclare that I have ex	amined this return, ii	ncluding accomp	anying sche	edules and state	ments, and to the b	est of my k	nowled	ge and
Sigi) pelle	f, it is tide, correct, and cor	npiete Declaration o	proparer (other than	taxpayer or tiduci	1 1	_	on of which prepares	has any kn	owledg	е
Here Jamme a Callett, hundet 5/2/2011							fundi	≭			
		ignature of officer or trustee	•		Date		Tit	le	_		
		Print/Type preparer's	name	Preparer's signa	ature		Date		PTIN		
Paid		0.0	N					Check	ıf		
		[Michael Dambace C. Mione)					14/27	self-employe	P002	3912	23
	parer		D, LLP				··	Firm's EIN ▶ 44	-01602	60	
Use	Only	Firm's address ▶ 21	1 N. BROADW	AY, SUITE 6	00				-		
			ST. LO			631	102-2733	Phone no 314	-231-5	544	
											(2040)

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

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

Employer identification number Name of the organization BARNABAS FAMILY FOUNDATION 26-4297010 Organization type (check one) Filers of: Section: X 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule [X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II 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, aggregate contributions of more than \$1,000 for use exclusively for religious, chantable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III. 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 Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF) For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Page of of Pa

Name of organization BARNABAS FAMILY FOUNDATION

Employer identification number

^	_		^	^	_	^	-	^	
4	6-	4	2	y	1	U	Τ	U	

		r · ·	
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1_	LAWRENCE COLLETT 1231 GLEN EAGLE LANE P.O. BOX 410 ST. ALBANS, MO 63073	\$6,000.	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
		\$	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
		\$	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)

ATTACHMENT 1

FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

REVENUE AND

EXPENSES

DESCRIPTION PER BOOKS

INTEREST INCOME 34.

TOTAL 34.

ATTACHMENT 2

•						
EXPENSE ACCT AND OTHER ALLOWANCES	·	Ö	· o	Ö	.0	0.
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	.0	·	· o	· o	.0	0.
COMPENSATION	.0	o	·o	o	.0	.0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT, TREASURER, DIRECTOR 1.25	V-PRES., SECRETARY, DIRECTOR 2.50	DIRECTOR .75	DIRECTOR ,75	DIRECTOR .75	GRAND TOTALS
NAME AND ADDRESS	LAWRENCE A. COLLETT 1231 GLENN EAGLE LANE ST. ALBANS, MO 63073	SHARON L. COLLETT 1231 GLENN EAGLE LANE ST. ALBANS, MO 63073	MICHELE COLLET LINHOFF 279 CHERRY HILLS MEADOWS DR. WILDWOOD, MO 63040	MICHAEL L. COLLETT 1442 W. GEORGE CHICAGO, IL 60657	NICOLE R. WILKERSON 225 PERIWINKLE DR. SEBASTIAN, FL 32958-6217	