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Form **990-PF**

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

Department of the Treasury Internal Revenue Service

2010

OMB No 1545-0052

Combined of Services and serv	Fo	or c	alen	dar year 2010, or t	ax yea	r beginning			, and er	nding		
Name of foundation DANTEL & CHAYALA GLENNER FOUNDATION Number as server or PO bus number of main a rox celevator to store excloses) 5 45 4 M . PARSO City or twn, tistle, and 2P code SKOKIE , II 60 0.77 H Check type of organization: (X Section 501c(3)) exempt private foundation Far market value of all assets at end of year 3 Accounting method. (X) Cash Accounting from Part II, col. (c), line 16) Far market value of all assets at end of year 3 Accounting method. (X) Cash Accounting from Part II, col. (c), line 16) Far II Analysis of Revenue and toponess Accounting from Part II, col. (c), line 16) A Combibutions, grifts, grants, etc., reserved 61, 4.75 N/A Tombor Account provided Accounting from Part II, collections, grifts, grants, etc., reserved Accounting from Part II, analysis of Revenue and the store of semantine or countries 0, 65 and 60 from your explanations or countries on the store of semantine or countries 0, 65 and 60 from your explanations or countries on the store of semantine or countries on 0, 65 and 60 from your explanations or countries on 0, 65 and 60 from your explanations or countries on 0, 65 and 60 from your explanations or countries on 0, 65 and 60 from your explanations or countries on 0, 65 and 60 from your explanations or countries on 0, 65 and 60 from your explanations or countries on 0, 65 and 60 from your explanations or countries on 0, 65 and 60 from your explanations or countries on 0, 65 and 60 from your explanations or countries on 0, 65 and 60 from your explanations or countries of 0, 65 and 60 from your explanations or countries of 0, 65 and 60 from your explanations or countries or countrie	G	C	heck	all that apply:			Initi		•	harity	1	rn
DANTEL & CHAYALA GLENNER FOUNDATION Number and street ip P D No unther if mile not determined to street address) S454 W. PARGO City or town, state, and ZP Code SKOKIB, IL 60 077 H Check bye of organization: XI Section 501(c)(3) exempt private foundation Section 497(c)(1) increasempt charitable trust. Use in Stoke here Section 497(c)(1) increasempt charitable trust. Use in Stoke here Section 497(c)(1) increasempt charitable trust. Use in Stoke here Section 497(c)(1) increasempt charitable trust. Use in Stoke here Section 497(c)(1) increasempt charitable trust. Use in Stoke here Section 497(c)(1) increasempt charitable trust. Use in Stoke here Section 497(c)(1) increasempt charitable trust. Use in Stoke here Section 497(c)(1) increasempt charitable trust. Use in Stoke here A 0, 2.2.1. Part I, Coultme (c) must be on cash bases) Part II Analysis of Revenue and Exponses 1 Contribution, gritty, grants, and Sick and (s) many net increases and stoke here 1 Contribution, gritty, grants, and Sick and (s) many net increases and stoke here 1 Contribution, gritty, grants, and stoke here 1 Contribution, gritty, grants, and Sick and (s) many net increases and stoke here 1 Contribution, gritty, grants, and stoke here 1 Contribution, gritty, grants and stoke here 1 Contribution, gritty, grants, and stoke here 1 Contribution, gritty, grants and stoke here 1 Contribution, gritty, grants, and stoke here 1 Contribution, gritty, grants and stoke here 1 Contribution, gritty, grants and stoke here 1 Contribution, gritty, grants and stoke here 1 Contributions, gritty, grants paid 2 Contributions, gritty, grants	г			formulation	لــا	Amended return		Address chan	ge		<u> </u>	an aumhar
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City or town, state, and ZIP code SKOKTE T. L 6 0 0 77	\	MUM	oer a	•			auuressj			HOOM/SUITE		-5454
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c Adjusted net income (if negative, enter -0-)			a	Excess of revenue over	er expe	nses and disbursements		40,221.				
C Adjusted net income (if negative, enter -0-) N/A O23501 Line To Programmy Reduction Act Nation and the income (if negative, enter -0-)										0	I	
	07	2350)1	·			<u></u>				I N/A	Form 000 PE (0040)

Page 2

Г	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	
L	ai t	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		40,221.	40,221.
	2	Savings and temporary cash investments			
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶		*	
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
s	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
As		Investments - U.S. and state government obligations			
		Investments - corporate stock			
		Investments - corporate bonds			· · · · · · · · · · · · · · · · · · ·
	١	·			
	11	Investments - land, buildings, and equipment basis	`	* *	÷
	40	Less accumulated depreciation	_		
		Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis		-	
	4.	Less accumulated depreciation			·
	15	Other assets (describe)			
	۱,	Table and the beginning that the state of th	0.	40,221.	40,221.
_	_	Total assets (to be completed by all filers)		40,221.	40,221.
	l	Accounts payable and accrued expenses		<u> </u>	
	18	Grants payable			
<u>ies</u>	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ā	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)			`
	l		_	_	
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
ç		and complete lines 24 through 26 and lines 30 and 31.			,
ည	l	Unrestricted			•
ajai		Temporarily restricted			
B	26	Permanently restricted			
ڃ		Foundations that do not follow SFAS 117, check here			
ğ		and complete lines 27 through 31.			
Net Assets or Fund Balances	27	Capital stock, trust principal, or current funds	0.	0.	
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	1	
Ā	29	Retained earnings, accumulated income, endowment, or other funds	0.	40,221.	
ž	30	Total net assets or fund balances	0.	40,221.	
				40 001	
_	31	Total liabilities and net assets/fund balances	0.	40,221.	
Р	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	0.
		r amount from Part I, line 27a		2	40,221.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	40,221.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	40,221.

Page 3

		nd(s) of property sold (e.g or common stock, 200 sh			(b)1	How ac - Purch - Dona	nase į '	c) Date a (mo., da		(d) Date sold (mo., day, yr.)
1a										<u>.</u>
	NE				_					
C					 		-			
d e				*	\vdash					
(e) Gross sales price	(f) [Depreciation allowed (or allowable)		st or other basis expense of sale	<u>'</u>				ın or (loss) (f) mınus (
a										
b	 		<u> </u>							
d	 	·								
e									-	
Complete only for assets show	ng gain in i	column (h) and owned by	the foundation	on 12/31/69			(1)	Gains (Co	ol. (h) gain i	minus
(i) F.M.V. as of 12/31/69	· -	j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (1) col. (1), if any	_		col. (k), but no	ot less than from col. (I	-0-) or
a										
b					j					
C	<u> </u>									
d	<u> </u>									
<u>e</u>			L		$\overline{}$			_		
2 Capital gain net income or (net c	apıtal loss)	If gain, also ente If (loss), enter -0	r in Part I, line)- in Part I, line	7 7	}	2				
3 Net short-term capital gain or (lo if gain, also enter in Part I, line 8 if (loss), enter -0- in Part I, line 8	, cólumn (d		nd (6):		}	3				
		ection 4940(e) for	Reduced	Tax on Net	Thy	estn	nent Inco	me		
f section 4940(d)(2) applies, leave Was the foundation liable for the set f "Yes," the foundation does not qua-	ction 4942 alify under	tax on the distributable an section 4940(e). Do not co	omplete this pa	art.					_	Yes X No
(a)	Cucii colui	(b)		making any one	(c))			Dinterk	(d) ution ratio
Base period years Calendar year (or tax year beginn	iing in)	Adjusted qualifying dis	stributions	Net value of no			use assets	(col. (b) div	ution ratio ided by col. (c))
2009			0.				0 .			.00000
2008										
2007										
2006								 		
2000	L			<u>l</u>						
2 Total of line 1, column (d)								2		.00000
3 Average distribution ratio for the	5-year bas	se period - divide the total	on line 2 by 5,	or by the number	r of ye	ears				
the foundation has been in exist	ence if less	than 5 years						3		.00000
4 Enter the net value of noncharita	ıble-use as	sets for 2010 from Part X,	line 5					4		10,296
5 Multiply line 4 by line 3								5		0
6 Enter 1% of net investment inco	me (1% of	Part I, line 27b)						6		0
7 Add lines 5 and 6								7	<u></u>	0
8 Enter qualifying distributions fro	m Part XII,	, line 4						8		21,254
If line 8 is equal to or greater that See the Part VI instructions	ın line 7, cl	neck the box in Part VI, line	e 1b, and com	plete that part usi	ng a 1	% tax	rate			

Forn		7-1386			Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	48 - see	nstru	ction	าร)
1a	a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.		4. 4.47	s (
	Date of ruling or determination letter: (attach conv. of letter if paceagging an instructions)		7.7	~ .	,
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1		1	0.
		Section Control		٠,	•
c	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		٠.		
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2		-	0.
	Add lines 1 and 2	3			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
5		5			0.
6					
	a 2010 estimated tax payments and 2009 overpayment credited to 2010				
	b Exempt foreign organizations - tax withheld at source				
	c Tax paid with application for extension of time to file (Form 8868)				
	d Backup withholding erroneously withheld				
	Total credits and payments. Add lines 6a through 6d	7			0.
8	orani di	8			<u> </u>
9	o en la filia di casa di filia di casa	9			0.
10		10			
	Enter the amount of line 10 to be: Credited to 2011 estimated tax	11			
	art VII-A Statements Regarding Activities	<u>''' </u>			
	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		т	Yes	No
10	any political campaign?		1a		X
,	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		10		X
١	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	or	H"		
	· · · · · · · · · · · · · · · · · · ·	OI .			
	distributed by the foundation in connection with the activities		ا ۱۰		х
	c Did the foundation file Form 1120-POL for this year?		1c		
(d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$				
•	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ 0 •				1
			2		X
Z	2 Has the foundation engaged in any activities that have not previously been reported to the IRS?				
	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 incorporation, or		3		X
4.	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		4a		X
	 b If "Yes," has it filed a tax return on Form 990-T for this year? 	N/A	4b		
		11/21	5		X
J	5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		۲-		<u> </u>
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
0	, , , , , , , , , , , , , , , , , , , ,				
	 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state k 	2147	1		
	remain in the governing instrument?	7 AA	6		x
7			7	Х	<u> </u>
′	7 Did the foundation have at least \$5,000 in assets at any time during the year? ## "You " complete Part II, only (c), and Part YV				
0	If "Yes," complete Part II, col. (c), and Part XV				
o.	Ba Enter the states to which the foundation reports or with which it is registered (see instructions)				
	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)				
			8b	х	
•	of each state as required by General Instruction G? If "No," attach explanation	dar	00	<u>^</u>	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calend year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV	uai	9		х
	VEGI ZUTU ULTUE LAKADIE VEGI DEURHINIU III ZUTU LISEE INSTRUCTIONIS IUL FALL KIV)! 11 TES. COMDIELE FALL KIV		1 3	ı	1 4

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

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

Put the foundation hold more than a 20% direct or indirect interest in one house contempore at any time.

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

Yes X No

b If "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)

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

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?

Form **990-PF** (2010)

X

Х

3b

4a

N/A

2b

statement - see instructions.)

Form 990-PF (2010) DANIEL & CHAYALA GLENNER			2 <u>7-13862</u>	49 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)	
 5a During the year did the foundation pay or incur any amount to: Carry on propaganda, or otherwise attempt to influence legislation (section Influence the outcome of any specific public election (see section 4955); or any voter registration drive? Provide a grant to an individual for travel, study, or other similar purposes? Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)? Provide for any purpose other than religious, charitable, scientific, literary, 	4945(e))? r to carry on, directly or indirectly on described in section	Ye Ye Ye	s X No	
the prevention of cruelty to children or animals?	or occasionar parposos, or .		s X No	
 b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance (see instru Organizations relying on a current notice regarding disaster assistance check h c If the answer is "Yes" to question 5a(4), does the foundation claim exemption frexpenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945 	ctions)? ere om the tax because it maintal N	-		5b
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on			1 6 8 2
 a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a p If "Yes" to 6b, file Form 8870. 	ersonal benefit contract?			5b X
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	s X No	· * * · _ i
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Truston Paid Employees, and Contractors	ees, Foundation Ma	inagers, Highly	<i>'</i>	
List all officers, directors, trustees, foundation managers and their	compensation.			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
DANIEL GLENNER	DIRECTOR			
5454 W. FARGO				
SKOKIE, IL 60077	1.00	0.	0.	0.
	DIRECTOR			
5454 W. FARGO	1 00			0
SKOKIE, IL 60077	1.00 DIRECTOR	0.	0.	<u>0.</u>
SIDNEY GLENNER 5454 W. FARGO	DIRECTOR			
SKOKIE, IL 60077	1.00	0.	0.	0.
			0.	
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions	/al Evenence
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000		<u> </u>	<u> </u>	0

Form 990-PF (2010) DANIEL & CHAYALA GLENNER FOUNDAT	'ION 27-3	1386249 Page 7
Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	_	
	4	
	\dashv	
Total number of others receiving over \$50,000 for professional services		D
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist	tical information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers prod		Expenses
1 N/A		· · · · · · · · · · · · · · · · · · ·
2		
3		
_ 	<u>_</u>	
4		
Part IX-B Summary of Program-Related Investments		
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 instructions.	1	
3		

Total. Add lines 1 through 3

Page 8

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Part X Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 0. a Average monthly fair market value of securities 1a b Average of monthly cash balances 1b 10.453. 1c c Fair market value of all other assets 10,453. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 157. 10,296. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 515. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here
and do not complete this part.) 515. Minimum investment return from Part X, line 6 Tax on investment income for 2010 from Part VI, line 5 2a 2b b Income tax for 2010. (This does not include the tax from Part VI.) 2c c Add lines 2a and 2b 3 Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 515. 5 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 0. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 515. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 21,254. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 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., purposes Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a 3b b Cash distribution test (attach the required schedule) 21,254 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 5 income. Enter 1% of Part I, line 27b 6 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

Form **990-PF** (2010)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Pa	<u> </u>	,		
line 7				515.
2 Undistributed income, if any, as of the end of	2010			
a Enter amount for 2009 only			0.	
b Total for prior years:				
. ,		0.		
3 Excess distributions carryover, if any, t	o 2010:			
a From 2005		,		
b From 2006			İ	
c From 2007	*	ļ.`		
d From 2008	• ,			À
e From 2009				
f Total of lines 3a through e				
4 Qualifying distributions for 2010 from	25. 3. 3			
	254.		,	`
a Applied to 2009, but not more than line	*		0.	^ *
b Applied to undistributed income of prior	<u> </u>			
years (Election required - see instruction	i	0.		
c Treated as distributions out of corpus	,,,,,,			
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount				515.
e Remaining amount distributed out of c	orpus 20,739			
5 Excess distributions carryover applied to 2019	^			0.
(if an amount appears in column (d), the same	• •	<u> </u>		
must be shown in column (a)) 6 Enter the net total of each column as	*		:	
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line		•		
b Prior years' undistributed income. Sub	tract			
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notic deficiency has been issued, or on which the section 4942(a) tax has been previous.	h in			
assessed	ously	0.		*
d Subtract line 6c from line 6b. Taxable				<u> </u>
amount - see instructions		0.		
e Undistributed income for 2009. Subtra	ct line			
4a from line 2a. Taxable amount - see	ınstr.		0.	
f Undistributed income for 2010. Subtra	ct			
lines 4d and 5 from line 1. This amoun		1		
be distributed in 2011				0.
7 Amounts treated as distributions out o	f			
corpus to satisfy requirements impose	ed by			
section 170(b)(1)(F) or 4942(g)(3)	0	.		
8 Excess distributions carryover from 20	005			
not applied on line 5 or line 7	0	.		
9 Excess distributions carryover to 201	1.			
Subtract lines 7 and 8 from line 6a	20,739	.		
10 Analysis of line 9:	,			
a Excess from 2006				
b Excess from 2007				
c Excess from 2008			1	
d Excess from 2009				
	739.			
			1	

	& CHAYALA G			27-138	36249 Page 10
Part XIV Private Operating F	oundations (see in:	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo	r 2010, enter the date of t	he ruling	▶	_	
b Check box to indicate whether the found	dation is a private operatir	ng foundation described i	n section	4942(j)(3) or 494	12(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for				1	
each year listed			* 		
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not	-				
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:				1	
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter.					
 Total support other than gross investment income (interest, 					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt		:			
organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income Part XV Supplementary Info		 	CALL CALL	- l l (CC 000	
Part XV Supplementary Info			ir the foundation	n nad \$5,000 or mo	re in assets
1 Information Regarding Foundation		'			
a List any managers of the foundation wh	•	than 2% of the total cont	ributions received by the	e foundation before the close	e of any tax
year (but only if they have contributed r					, o. a, a
NONE					
b List any managers of the foundation wh	o own 10% or more of th	e stock of a corporation (or an equally large port	ion of the ownership of a pa	rtnership or
other entity) of which the foundation ha	s a 10% or greater interes	st.			
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan	Scholarship, etc., Pr	ograms:		
Check here ► X if the foundation of	only makes contributions	to preselected charitable	organizations and does	not accept unsolicited reque	sts for funds If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	riduals or organizations u	nder other conditions, o	complete items 2a, b, c, and	d.
a The name, address, and telephone num	ber of the person to who	n applications should be	addressed:		
				· · · · · · · · · · · · · · · · · ·	_
b The form in which applications should be	oe submitted and informa	tion and materials they st	iould include;		
c Any submission deadlines:					
A American Control of the Control of			hada ak a ta	-0-7-1	
d Any restrictions or limitations on award	s, such as by geographic	ai areas, charitable fields,	kinds of institutions, or	otner factors:	

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Yo	ear or Approved for 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		
a Paid during the year SEE ATTACHED LIST	NONE	501(C)(3)	GENERAL USE	21,254.
Total		1	<u>▶ 3a</u>	21,254.
b Approved for future payment				
NONE				
NONE				
Total			▶ 3b	0.

5	Enter gross amounts unless otherwise indicated.		usiness income		Excluded by section 512, 513, or 514		
Dragram		(a) Business	(b) Amount	Exclu- sion code	(d) Amount	(e) Related or exemp function income	
•	service revenue:	code		1000	-		
å				+-			
<u> </u>				┼	-		
с d		- 		+			
· —		_		+-			
e —		-		+			
- 	and contracts from government agencies	_		-			
-	and contracts from government agencies ship dues and assessments			+			
	on savings and temporary cash						
ınvestme							
	s and interest from securities	1					
	I income or (loss) from real estate:	 		+			
	financed property	 				<u>.</u>	
					<u></u>		
	lebt-financed property il income or (loss) from personal			+			
property	vestment income			+			
	loss) from sales of assets other						
than inve	-		-	+			
	me or (loss) from special events			 			
Other rev	ofit or (loss) from sales of inventory			 			
a b		-		+			
		-		+			
	· · · · · · · · · · · · · · · · · · ·	_		+			
. —				+			
d				+		<u> </u>	
d			Ω	.	1 11.	i	
d e Subtotal.	. Add columns (b), (d), and (e)		0	<u>. </u>	0.	<u> </u>	
d e Subtotal. Total. Ac	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e)		0	•	13_	<u> </u>	
e Subtotal. Total. Ac e worksh	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculations.				13_		
e Subtotal. Total. Ac	. Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculations.				13_		
e Subtotal. Total. Ace worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculations. N-B Relationship of Activities	s to the Accon	nplishment of E	xemp	ot Purposes		
d e Subtotal. Total. Ace worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculations. TI-B Relationship of Activities Explain below how each activity for which in	s to the Accon	nplishment of E	xemp	ot Purposes		
e Subtotal. Total. Acte worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculations. N-B Relationship of Activities	s to the Accon	nplishment of E	xemp	ot Purposes		
d e Subtotal. Total. Ace worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculations. TI-B Relationship of Activities Explain below how each activity for which in	s to the Accon	nplishment of E	xemp	ot Purposes		
d e Subtotal. Total. Ac e worksh art XV ne No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculations. TI-B Relationship of Activities Explain below how each activity for which in	s to the Accon	nplishment of E	xemp	ot Purposes		
d e Subtotal. Total. Ac e worksh art XV ne No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculations. TI-B Relationship of Activities Explain below how each activity for which in	s to the Accon	nplishment of E	xemp	ot Purposes		
d e Subtotal. Total. Ac e worksh art XV ne No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculations. TI-B Relationship of Activities Explain below how each activity for which in	s to the Accon	nplishment of E	xemp	ot Purposes		
d e Subtotal. Total. Ac e worksh art XV ne No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculations. TI-B Relationship of Activities Explain below how each activity for which in	s to the Accon	nplishment of E	xemp	ot Purposes		
d e Subtotal. Total. Ac e worksh art XV ne No.	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculations. TI-B Relationship of Activities Explain below how each activity for which in	s to the Accon	nplishment of E	xemp	ot Purposes		
d e Subtotal. Total. Ace worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculations. TI-B Relationship of Activities Explain below how each activity for which in	s to the Accon	nplishment of E	xemp	ot Purposes		
d e Subtotal. Total. Ace worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculations. TI-B Relationship of Activities Explain below how each activity for which in	s to the Accon	nplishment of E	xemp	ot Purposes		
e Subtotal. Total. Acee worksh Part XV	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculations. TI-B Relationship of Activities Explain below how each activity for which in	s to the Accon	nplishment of E	xemp	ot Purposes		
e Subtotal. Total. Acee worksh	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculations. TI-B Relationship of Activities Explain below how each activity for which in	s to the Accon	nplishment of E	xemp	ot Purposes		
d e Subtotal. Total. Acee worksh Part XV	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculations. TI-B Relationship of Activities Explain below how each activity for which in	s to the Accon	nplishment of E	xemp	ot Purposes		
d e Subtotal. Total. Acee worksh Part XV	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculations. TI-B Relationship of Activities Explain below how each activity for which in	s to the Accon	nplishment of E	xemp	ot Purposes		
d e Subtotal. Total. Acee worksh Part XV	Add columns (b), (d), and (e) dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculations. TI-B Relationship of Activities Explain below how each activity for which in	s to the Accon	nplishment of E	xemp	ot Purposes		

Pa	rt XVII Information Regarding Transfers To and Transactions and Relationships With Noncharita Exempt Organizations	able	
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of	Yes	No

the Co	de (other than section 501(c))(3) organizations) or in section 52	?7, relating to political organiz	ations?		
a Transf	ers from the reporting founda	ation to a noncharitable exempt or	ganization of:			
(1) Ca	ash				1a(1)	X
(2) Other assets						
b Other t	transactions.					
(1) Sa	ales of assets to a noncharital	ble exempt organization			1b(1)	X
(2) Pt	urchases of assets from a noi	ncharitable exempt organization			1b(2)	X
(3) Re	ental of facilities, equipment,	or other assets			1b(3)	X
(4) Re	eimbursement arrangements				1b(4)	X
(5) Lo	oans or loan guarantees				1b(5)	X
(6) Pe	erformance of services or me	embership or fundraising solicitation	ons		1b(6)	X
c Sharın	g of facilities, equipment, ma	uling lists, other assets, or paid em	ployees		1c	X
	-	-		ays show the fair market value of the goo		S,
				in any transaction or sharing arrangeme	ent, show in	
		other assets, or services received.		1 40		
(a)Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of transfers, transactions	, and sharing arran	gements
		N/A				
			 			
			·			
						
						
2a Is the	foundation directly or indirec	tly affiliated with, or related to, one	or more tax-exempt organiza	ations described		
		r than section 501(c)(3)) or in sec			Yes	X No
	," complete the following sch					
	(a) Name of org	ganization	(b) Type of organization	(c) Description of rela	tionship	
	N/A					
					<u> </u>	
		e that I have examined this return, includated that I have examined this return, includated that I have a that I h		statements, and to the best of my knowledge a reparer has any knowledge	nd belief, it is true,	correct,
Sign	$M \setminus M$		alsell	1,		
Here			19/26/	DIRECTOR		
	Signature of officer or tru		Date	Title		
	Print/Type preparer's na	ame Preparer's s	signature		TÍÑ	
D=:-!	01135150 -	DIGGUED / // =	VolV a D.	self- employed		
Paid	CHARLES J.		ules Jusiker	9/26/11		
Prepare		MCGLADREY INC	IJ	Firm's EIN ►		
Use On		TE COTIMU MACKED	DOTUE CUTER	900		
		IE SOUTH WACKER			2-634-3	400
	L CH	IICAGO, IL 60606	1-3374	Phone no 31	Eorm 990-	

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

Employer identification number

	DANIEL & CHAYALA GLENNER FOUNDATION	27-1386249
Organization type (chec	k one)·	
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 chantable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
General Rule X For an organiza	I(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special F ition filing Form 990, 990 EZ, or 990-PF that received, during the year, \$5,000 or more (in mplete Parts I and II	
Special Rules		
509(a)(1) and 1	01(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the re 70(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of th on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II.	~
aggregate cont	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one con ributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary of cruelty to children or animals Complete Parts I, II, and III.	
contributions for If this box is ch purpose. Do no	01(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one con or use exclusively for religious, chantable, etc., purposes, but these contributions did not a ecked, enter here the total contributions that were received during the year for an exclusivation complete any of the parts unless the General Rule applies to this organization because able, etc., contributions of \$5,000 or more during the year.	aggregate to more than \$1,000 vely religious, charitable, etc.,
•	in that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV. line 2 of its Form 990. or check the box on line H of its Form 990-EZ. or on line	• • • • • • • • • • • • • • • • • • • •

LHA 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)

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

	1	1	of Par
age	⊥ of		or Pan

1	!4'	

Name of organization

Employer identification number

DANIEL & CHAYALA GLENNER FOUNDATION

27-1386249

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	SIDNEY & LISA GLENNER FOUNDATION 5454 WEST FARGO CHICAGO, IL 60077	\$50,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	DANIEL GLENNER 5454 WEST FARGO CHICAGO, IL 60077	\$\$	Person X Payroll
(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)
023452 12-2	3-10	Scheanle R (Form ;	990, 990-EZ, or 990-PF) (2010)

of Part II

Name of organization

Page of of Employer identification number

DANIEL & CHAYALA GLENNER FOUNDATION

27-1386249

Part II No	ncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_ =		\$	
(a) No. 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

Schedule B (Form 990, 990-EZ, or 990-PF) (2010) Page Name of organization Employer identification number 27-1386249 DANIEL & CHAYALA GLENNER FOUNDATION Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions) > \$ (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

Form **8868**

(Rev. January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

• If you a	are filing for an Automatic 3-Month Extension, complet	te only Pa	rt I and check this box			X
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).						
	omplete Part II unless you have already been granted a				m 8868.	
	ic filing (e-file). You can electronically file Form 8868 if y					ration
	to file Form 990-T), or an additional (not automatic) 3-mor					
	file any of the forms listed in Part I or Part II with the exc					
	Benefit Contracts, which must be sent to the IRS in pap					
	rirs gov/efile and click on e-file for Chanties & Nonprofits		(600 1.00 0.00 1.00			,
Paret			bmit onginal (no copies needed).		•	
	ation required to file Form 990-T and requesting an autor			plete		
Part I only	•					
All other	corporations (including 1120-C filers), partnerships, REM ome tax returns.					
Type or	Name of exempt organization			Empl	oyer identification	number
print				_		
File by the	DANIEL & CHAYALA GLENNER FO			2	7-1386249	
due date for	Number, street, and room or suite no. If a P.O. box, s	ee instruct	tions.			
filing your return See	5454 W. FARGO				· · · · · · · · · · · · · · · · · · ·	
instructions	City, town or post office, state, and ZIP code. For a fo	oreign add	ress, see instructions.			
	SKOKIE, IL 60077				" " "	
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)		· · · · · · · · · · · · · · · · · · ·	04
Applicati	ion	Return	Application			Return
Is For		Code	Is For			Code
Form 990)	01	Form 990-T (corporation)			07
Form 990		02	Form 1041-A			08
Form 990)·EZ	03	Form 4720			09
Form 990)-PF	04	Form 5227			10
Form 990	D-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	0-T (trust other than above)	06	Form 8870			12
	DANIEL GLENNER					
	ooks are in the care of $ ightharpoonup$ 5454 W. FARGO	- SKOI	KIE, IL 60077			
Telepl	hone No. ► <u>(847) 674-5454</u>		FAX No. 🕨			
	organization does not have an office or place of busines					Ш
	is for a Group Return, enter the organization's four digit					
box 🕨					ers the extension is	for.
1 Ire	equest an automatic 3-month (6 months for a corporation				_	
	AUGUST 15, 2011 , to file the exemp	t organiza	tion return for the organization named a	above.	The extension	
	or the organization's return for:					
>	X calendar year 2010 or					
>	tax year beginning	, an	d ending		<u>·</u>	
2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return						
L	Change in accounting period					
20 lf t	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069 e	nter the tentative tax less any			
	nrefundable credits. See instructions.	J. 0000, 6	The time termination tan, 1000 arry	3a	s	0.
	timated tax payments made. Include any prior year overp			3b	s	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,						
	by using EFTPS (Electronic Federal Tax Payment System). See instructions 3c \$ 0.					
	Caution, If you are come to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.					

Form 8	868 (Rev. 1-2011)					Page 2
	u are filing for an Additional (Not Automatic) 3-Month	Extension, o	complete only Part II and check this bo	ЭX	>	X
Note.	Only complete Part II if you have already been granted a	n automatic	3-month extension on a previously filed	Form 8	8868.	
	u are filing for an Automatic 3-Month Extension, comp			·- ·-		
Part	II Additional (Not Automatic) 3-Month	Extension	n of Time. Only file the original (no c	opies n	needed).	
Туре	or Name of exempt organization			Empl	loyer identification	number
print	DANTEL & CHAIALA GLENNER FOUNDATION					
File by th extended due date	Number, street, and room or suite no. If a P.O. box for IS 4.5.4. W. FARGO	, see instruc	tions.			
filing you return Si instruction	City, town or post office, state, and ZIP code. For a	a foreign add	lress, see instructions.			
Enter t	he Return code for the return that this application is for	(file a separa	te application for each return)			04
			T	<u>.</u>		
Applic	ation	Return	Application			Return
Is For		Code	Is For			Code
Form 9		01	Form 1041-A			08
Form 9		03	Form 4720			09
Form 9		03	Form 5227	·····		10
	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
	990-T (trust other than above)	06	Form 8870			12
	Do not complete Part II if you were not already grant			ıslv file	ed Form 8868.	
Tele If the lifth box 4 15 5 16	request an additional 3-month extension of time until For calendar year $\underline{2010}$, or other tax year beginning f the tax year entered in line 5 is for less than 12 months $\underline{\hspace{1cm}}$ Change in accounting period	ess in the Ur git Group Exe and atta NOVEM	FAX No inted States, check this box emption Number (GEN) If the sch a list with the names and EINs of all BER 15, 2011, and ending ion: Initial return		ers the extension is	
1	f this application is for Form 990-BL, 990-PF, 990-T, 472 nonrefundable credits. See instructions if this application is for Form 990-PF, 990-T, 4720, or 606			8a	\$	0.
tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.				8b	\$	0.
	Balance due. Subtract line 8b from line 8a. Include your		th this form, if required, by using		•	0.
	EFTPS (Electronic Federal Tax Payment System) See in Sig		nd Verification	8c	\$	
Under p	penalties of perjury, I declare that I have examined this form, inc e, correct, and complete, and that I am authorized to prepare thi	:luding accomj		e best o	of my knowledge and b	elief,
Signati	re ▶ Title ▶	► DIREC	TOR	Date	•	

; , ,