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SCANNED OCT 27 2011

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
on may be able to use a copy of this return to satisfy state rer

OMB No 1545-0052 2010

	calendar year 2010,			· · · ·	1-4-1-1-1		, and end			, 20
اک ق	neck all that apply	Initial retur				of a former p	oudlic cha T	<u> </u>	lama shares	Final return
Name	of foundation	Amended r	return		X Addr	ess change			Vame change	ifection number
i valile	e of foundation								A Employer ident	meadon number
M.G	. O'NEIL FOUN	DATTON							34	1-6516968
	er and street (or P O be		t doluges	d to street a	ddrass)	<u> </u>	Room/su	ute		er (see page 10 of the instruction
1401111	ici and succi (b) F O bi	ox number ii maii is no	il delivere	u to street a	uuless)		11001111130		g (oropiisite trains	ar (dad page to at mic michies
P.0	. BOX 5303								(3	30) 650-6302
	r town, state, and ZIP of	code							C If exemption appl	
•									pending, check he D 1 Foreign organia	<u> </u>
FAI	RLAWN, OH 443	34							_	zations meeting the
H Ch	eck type of organiza	tion X Section	on 501(c)(3) exe	mpt private	foundation				k here and attach
$\overline{}$	Section 4947(a)(1) no					rivate founda	tion			
	ir market value of all			unting m	ethod X	Cash Acc	rual			ion status was terminated (b)(1)(A), check here .
of	year (from Part II, col	(c), line	Ot	her (spe	cify)			[F If the foundation	is in a 60-month termination
16) ▶ \$ 95	56,956.	(Part I,	column (d) must be o	n cash basıs)			under section 507	(b)(1)(B), check here . >
Part	Analysis of Reve	nue and Expense	es (The	(a) Re	venue and	(b) Net inve	stment		c) Adjusted net	(d) Disbursements for charitable
	total of amounts in co may not necessarily	equal the amounts	in'	expe	nses per	incom		,,	income	purposes
	colúmn (a) (see page	e 11 of the instruction	ons))	b	ooks	,				(cash basis only)
1	Contributions, gifts, grants,	etc , received (attach sche oundation is not requi	edule) .		0	<u> </u>			· · · · · · · · · · · · · · · · · · ·	
2	Check ► attach	Sch B	• • • •	·		 	,		· `	
3	Interest on savings and	•			6,318	 	6,318.			ATCH 1
4	Dividends and interes				0,310	1	0,310.			X X X
5 a			• • • •	Salaha.		1 7 7		`,,.		12 / 2 / 3
1 .	Net rental income or (los			.) [200 - 10 m	1, 4, 4, -	- 5	· · · · · · · · · · · ·	Learning to the second
ba		sale of assets not on lir	ne 10	• 4				7 1	222	1 2 2
6 a b	assets on line 6a	na Hrom Bart IV lug	20 21	** *	 ,					10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
8	Capital gain net incor	MED "	, , , , ,		1 1	5 , 51-41	- ; , , , -	<u> </u>	 	N 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
9	Income-modifications	101				3 (0. 5.3.5)				11 12 1
	Gross sales less returns	191 110cl A	F							
b	Gross sales less returns and allowances CT · 2: Less (Cost of goods sold	# FA11 SS		• • •		- ` `				
						1 1 1 1	10 10			40, 4
11	Gross profit-or-(loss) (schedule)	\		453,390					ATCH 2
12	Total Add lines 1 thr				459,708	<u> </u>	6,318.			<u> </u>
13	Compensation of officers	s, directors, trustees, e	etc		0					
14	Other employee salar	•								
15	Pension plans, emplo				360					3
	Legal fees (attach sch			 -	300					+
þ	Accounting fees (atta									
1	Other professional fee									
17	Interest						-			
18 19	Taxes (attach schedule) (Depreciation (attach s	· -	' Г			-				
20	•	,	· r							
17 18 19 20 21 22 23 24	Occupancy Travel, conferences, a				- -					
22	Printing and publication	-	1							
23	Other expenses (attac				286.		194.			
24	Total operating and a	•								
	Add lines 13 through	-			646.		194.			4:
25	Contributions, gifts, g				0.		,			
26	Total expenses and disburse	•			646.		194.			4
27	Subtract line 26 from	line 12				'	,			
i	Excess of revenue over expe		–		459,062.		- 10.			
	Net investment incon	· =	· -				5,124.		<u> </u>	
	Adjusted net income	(if negative, enter -i	いり							ı <i>[].</i>

Part II		Ralance Shoots	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End of	year
_	ai t ii	- Datance Stiects	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ing	2,510.		
	2	Savings and temporary	cash investments	125,995.	581,262.	581,262.
-	3	Accounts receivable ▶				
		Less allowance for dou	btful accounts ▶			
	4					
		Less allowance for dou				
	5					
	6		officers, directors, trustees, and other			
	•		ach schedule) (see page 15 of the instructions)			
	7	• •	receivable (attach schedule)			,,
	•					
ţ	8					
Assets	9		leferred charges			
٨			te government obligations (attach schedule)			
			e stock (attach schedule)			
	11 °	Investments - land, building	e bonds (attach schedule)			
	12	Investments - mortgage	loans			
	13	Investments - other (atta	ach schedule) ATCH 4	238,346.	244,651.	375,694.
	14	Land, pullulings, and	ation			
	15	Other assets (describe	>)			
	16		completed by all filers - see the			
		instructions Also, see p	page 1, item l)	366,851.	825,913.	956,956.
_	17		accrued expenses			
	18					
Ś	19					
Liabilities	20		ors, trustees, and other disqualified persons			
豆	21		otes payable (attach schedule)			
2:	22		e ►)		 ·	
	~~	Other habilities (accomb	·			
	23	Total liabilities (add line	es 17 through 22)		0.	
_			llow SFAS 117, check here ▶			
s		and complete lines	24 through 26 and lines 30 and 31.			
JCe	24 25 26					
alai	25					
ä	26	•				
P		Foundations that do	not follow SFAS 117,		İ	
Ĭ.			nplete lines 27 through 31. X			
			ncipal, or current funds			
ets	28	Paid-in or capital surplus, of	or land, bldg , and equipment fund	266 251	005 013	
Net Assets	29	• .	nulated income, endowment, or other funds	366,851.	825,913.	
it /	30	Total net assets or	fund balances (see page 17 of the	255 254	205 212	
ž		instructions)		366,851.	825,913.	
	31		et assets/fund balances (see page 17	255 254	225 212	
_				366,851.	825,913.	
			anges in Net Assets or Fund			
1			palances at beginning of year - Part			266 251
			ed on prior year's return)			366,851.
2	Ente	r amount from Part I,	line 27a		2	459,062.
3	Othe	er increases not includ	ded in line 2 (itemize) ▶	=	3	
4	Add	lines 1, 2, and 3				825,913
5	Dec	reases not included in	ı lıne 2 (ıtemıze) ▶		5	
6	Tota	I net assets or fund b	alances at end of year (line 4 minus	line 5) - Part II, column (b)	, line 30 6	825,913.
						Form 990-PF (2010)

Part IV Capital Gains	s and Losses for Tax on Inve	estment Income			<u> </u>
	nd describe the kind(s) of property sold (e prick warehouse, or common stock, 200 s		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a					
<u>b</u>		·-·		_	
<u>C</u>					
d		****			
<u>e</u>	T	() () ()		<u> </u>	<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
<u>a</u>					
			i		
<u>c</u>		<u> </u>			
_d					<u> </u>
Complete only for coasts	showing coin in column (b) and coins	d by the foundation on 40/24/60	<u> </u>		<u> </u>
Complete only for assets	showing gain in column (h) and owned	(k) Excess of col (i)		Gains (Col (h) g (k), but not less	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	over col (j), if any		Losses (from co	
<u>a</u>	-				
<u>b</u>					
<u>C</u>			<u> </u>		
<u>d</u>					
<u>e</u>	ı ıf	gain, also enter in Part I, line 7			
2 Capital gain net income of		(loss), enter -0- in Part I, line 7	2		
3 Net short-term capital gail	יי n or (loss) as defined in sections 12	,			
	I, line 8, column (c) (see pages 13		1		
-	line 8		3		
Part V Qualification	Under Section 4940(e) for Red	duced Tax on Net Investment I	ncome		
	the section 4942 tax on the distrib		ase perio	d?	Yes X No
	not qualify under section 4940(e)		-fl		
1 Enter the appropriate am	nount in each column for each year	l .	erore mar	(d)	
Base period years	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution r	
Calendar year (or tax year beginning in) 2009	27,895.	400,620.		(col (b) divided by	0.069630
2008	480,064.	617,632.	 		0.777265
2007	514,567.	1,166,933.	 		0.440957
2006	371,448.	1,306,907.			0.284219
2005	363,028.	1,552,157.			0.233886
2 Total of line 1, column (d)		2		1.805957
3 Average distribution ratio	for the 5-year base period - divide	the total on line 2 by 5, or by the			•
number of years the four	ndation has been in existence if less	s than 5 years	3		0.361191
4 Enter the net value of no	ncharitable-use assets for 2010 fro	m Part X, line 5	4		492,897.
5 Multiply line 4 by line 3			5		178,030.
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)	•	6		61.
	,				
7 Add lines 5 and 6			7		178,091.
8 Enter qualifying distribution	ons from Part XII, line 4		ا و ا		452
If line 8 is equal to or gi Part VI instructions on pa	ons from Part XII, line 4	in Part VI, line 1b, and complete	that part	using a 1% ta	x rate See the

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of th	e inst	ructio	ns)		
1a	Exempt 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		1	22.		
	here and enter 1% of Part I, line 27b					
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of $\mathcal J$					
	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		1	22.		
3	Add lines 1 and 2					
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4					
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			22.		
6	Credits/Payments 2010 estimated tax payments and 2009 overpayment credited to 2010 6a 1,551.					
	2010 communica tax payments and 2000 crosspayment organization (2010)					
	Exempt foreign organizations-tax witimed at source					
	Tax paid with application for extension of time to file (Form 8868)					
7 7	Total credits and payments Add lines 6a through 6d		1,5	51.		
8	Enter any penalty for underpayment of estimated tax. Check here					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1,4	29.		
11	Enter the amount of line 10 to be Credited to 2011 estimated tax ▶ 1,429. Refunded ▶ 11					
Par	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		_ <u>X</u> _		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19					
	of the instructions for definition)?	1b		<u>X</u>		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	ł				
	published or distributed by the foundation in connection with the activities			v		
С	Did the foundation file Form 1120-POL for this year?	1c		<u> </u>		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation \$\ \\$ \ (2) On foundation managers \$\ \\$	İ				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
_	on foundation managers. \$	2		Х		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	-	-			
3	If "Yes," attach a detailed description of the activities Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of					
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	,	х		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х		
b	If "Yes," has it filed a tax return on Form 990-T for this year?			Х		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х		
	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:	.				
	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 law remain in the governing instrument?	6	<u> X</u>			
7	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	7	X			
8 a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the					
	instructions) > OH,					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		х			
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	Λ	<u> </u>		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			1		
	4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page	9		x		
	27)? If "Yes," complete Part XIV	3		1		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	10		x		
	names and addresses	.,,	L	<u> </u>		

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	X	X
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	X	
,	X	
August 17, 2008?	х	
······································	X	<u> </u>
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		
Website address N/A		
14 The books are in care of CBIZ MHM, LLC Telephone no S30-668-6500) 	
The books are in care of ► CB12 MM, BBC Telephone no Located at ► 4040 EMBASSY PARKWAY, SUITE 100 AKRON, OH ZIP+4 ► 44333		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	. .	
and enter the amount of tax-exempt interest received or accrued during the year		
	'es	No
over a bank, securities, or other financial account in a foreign country?		_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		
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required		
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	/es	No
1a During the year did the foundation (either directly or indirectly)	1	
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	į	
disqualified person?		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	ĺ	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No		
(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)?		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		
foundation agreed to make a grant to or to employ the official for a period after		
termination of government service, if terminating within 90 days)	1	
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	į	
section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?		
Organizations relying on a current notice regarding disaster assistance check here	1	
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	j	Х
were not corrected before the first day of the tax year beginning in 2010?		
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	ļ	
operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a 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 20102		
oc, i at Athy for tax year (c) segmining serior zero	ļ	
If "Yes," list the years		
b 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	- 1	Х
an years instead, answer two and attach statement - see page 22 of the instructions), , , , , , , , , , , , , , , , , , ,		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	l	
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		
at any time during the year? Yes^_ No b If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or	İ	
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)	1	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
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? 4b		X

2	Compensation of five highest-paid employees (oth	er than those inc	luded on line 1 - se	e page 23 of the instructions)
	If none, enter "NONE."			

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000 .				▶

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Part VIII Information About Officers, Directors, Trustees, Foundat and Contractors (continued)	ion Managers, Highly Paid Emplo	ees,
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If no	one, enter "NONE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		-
Total number of others receiving over \$50,000 for professional services	· · · · · · · · · · · · · · · · · · ·	NONE
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant organizations and other beneficianes served, conferences convened, research papers produced, etc.	t statistical information such as the number of	Expenses
1 N/A		
2		
<u> </u>		
3		-
·		
4		
Part IX-B Summary of Program-Related Investments (see page 24	4 of the instructions)	<u> </u>
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2	Amount
1 N/A		
2		
All other program-related investments See page 24 of the instructions		
3 NONE		
2 HONE		10
	-	

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Pa	see page 24 of the instructions)	in toundatio	ns,
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	500,403.
b	Average of monthly cash balances	1b	
C	Average of monthly cash balances Fair market value of all other assets (see page 25 of the instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	500,403.
е	Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	0.111106111	3	500,403.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25 of		
	the instructions) Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	4	7,506.
5		5	492,897.
6	Minimum investment return. Enter 5% of line 5	6	24,645.
Pa	rt XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) prival foundations and certain foreign organizations check here ▶ □ and do not complete this p	te operating art)	
1	Minimum investment return from Part X, line 6	1	24,645.
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010 (This does not include the tax from Part VI) 2b 2b		
С	Add lines 2a and 2b	2c	122.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	24,523.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	24,523.
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	24,523.
Pa	rt XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	452.
b	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	0.
b	Cash distribution test (attach the required schedule)	3b	0.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	452.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	452.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when cal qualifies for the section 4940(e) reduction of tax in those years	culating whe	ether the foundation

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Pa	rt XIII Undistributed Income (see page	26 of the instruction	ns)	· · · · · · · · · · · · · · · · · · ·	r age o
	· · · · · · · · · · · · · · · · · · ·	(a)	(b)	(c)	(d)
1	Distributable amount for 2010 from Part XI,	Corpus	Years prior to 2009	2009	2010
	line 7				24,523.
2	Undistributed income, if any, as of the end of 2010				
а	Enter amount for 2009 only		1		
b	Total for prior years 20_08 ,20_07 ,20_06				
2	Excess distributions carryover if any to 2010				
а	From 2005 297, 351. From 2006 327, 071. From 2007 463, 714. From 2008 452, 528.				
b	From 2006 327, 071.				
С	From 2007 463,714.				
d	From 2008 452,528.				
е	From 2009 7, 991.				
f	Total of lines 3a through e	1,548,655.			
4	Qualifying distributions for 2010 from Part XII,				
	line 4 ▶ \$				
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)				
С	Treated as distributions out of corpus (Election				
	required - see page 26 of the instructions)				450
	Applied to 2010 distributable amount				452.
	Remaining amount distributed out of corpus	0.			24 071
5	Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same	24,071.			24,071.
	amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:	1,524,584.			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,524,504.			
b	Prior years' undistributed income Subtract				
С	line 4b from line 2b Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been				
	issued, or on which the section 4942(a) tax has been previously assessed				
	Subtract line 6c from line 6b Taxable				
a	amount - see page 27 of the instructions				
е	Undistributed income for 2009 Subtract line				
	4a from line 2a Taxable amount - see page 27 of the instructions				
_					
T	Undistributed income for 2010 Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2011				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)	·			
8	Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the				
	instructions)	273,280.			
9	Excess distributions carryover to 2011.				
	Subtract lines 7 and 8 from line 6a	1,251,304.			
	Analysis of line 9				
а	Excess from 2006 327, 071.				
b					
	Excess from 2009 7,991.				
<u>e</u>	Excess from 2010	<u> </u>			Form 990-PF (2010)

Pa	rt XIV Private Oper	ating Foundations (see page 27 of the	instructions and Par	t VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has foundation, and the ruling				ating	
b	Check box to indicate wh				. 4942()	(3) or 4942(j)(5)
_		Tax year	private operating realis	Prior 3 years	[] 10120	
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
	I or the minimum investment return from Part X for each					
	year listed					
b	85% of line 2a					
C	Qualifying distributions from Part					
	XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c.					
3	2d from line 2c Complete 3a, b, or c for the					
а	alternative test relied upon "Assets" alternative test - enter					
•	(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 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 securities					
	loans (section 512(a)(5)),					
	or royalties) (2) Support from general				<u> </u>	
	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.				<u> </u>	<u> </u>
Pa	st any time	ary Information (C during the year - se	omplete this part	only if the found: structions)	ation had \$5,000	or more in assets
1	Information Regardin			structions.)		
a	List any managers of	•		e than 2% of the tota	I contributions receiv	ed by the foundation
	before the close of any	y tax year (but only if th	ney have contributed i	more than \$5,000) (S	ee section 507(d)(2))	•
	NONE					
b	List any managers of					large portion of the
	ownership of a partne	rship or other entity) o	f which the foundation	n has a 10% or greater	· interest	
	NONE					
2	Information Regardin	g Contribution, Grant	, Gift, Loan, Scholars	hip, etc., Programs:		
	Check here ▶ ☐ If 1	the foundation only	makes contributions	to preselected charr	table organizations a	and does not accept
	unsolicited requests	for funds If the foun	dation makes gifts, g	grants, etc (see page		
	organizations under of	ther conditions, compl	ete items 2a, b, c, and	l d		
а	The name, address, a ATTACHM	•	of the person to who	m applications should b	e addressed	
b	The form in which app	olications should be su	bmitted and informati	on and materials they	should include	
	WRITTEN RE	QUESTS-NO SPEC	IAL FORMAT			
С	Any submission dead	ines	•			
	NONE					
d	Any restrictions or I factors	ımıtatıons on awards	, such as by geogr	aphical areas, charita	able fields, kinds of	institutions, or other
	NONE					

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid Dur	ing the Year or App	roved for F	uture Payment	
3 Grants and Contributions Paid Dur Recipient Name and address (home or business)	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Purpose of grant or contribution	Amount
a Paid during the year	S. SESSIE MAI SOMMER			
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Total	<u> </u>		▶ 3a	
b Approved for future payment			1	
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Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e)	
			(a)	(b)	(c)	(d)	Related of exempt function income
1	Program	service revenue	Business code	Amount	Exclusion code	Amount	(See page 28 of the instructions)
	a						
	-						
	f						
	g Fees a	and contracts from government agencies					
2	_	ship dues and assessments					
		n savings and temporary cash investments					
		s and interest from securities			14	6,318.	
		al income or (loss) from real estate				· ·	<u> </u>
		financed property					
		ebt-financed property		"			
6		income or (loss) from personal property					
		vestment income					
		oss) from sales of assets other than inventory					
	•	me or (loss) from special events					
		ofit or (loss) from sales of inventory.					
	•	venue a	-				
	е	<u> </u>					
12		Add columns (b), (d), and (e)				6,318.	
		Id line 12, columns (b), (d), and (e)			'	13	6,318.
		eet in line 13 instructions on page 29					
Р	art XVI-	3 Relationship of Activities	to the Ac	complishment of Ex	empt Purp	oses	
$\overline{}$	ine No.	Explain below how each activit	y for whic	h income is reported i	n column (e) of Part XVI-A contrib	uted importantly to the
_	1	accomplishment of the foundation					
	▼	instructions)					
				•			
		-					
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				· · · · · · · · · · · · · · · · · · ·			
							· · · · · · · · · · · · · · · · · · ·
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_						11-11-11-11	
_				<u>., ., ., </u>			
_						·	
_		L				 	Form 990-PE (2010)

orm 990)-PF (20	010)				34	1-651696	8		Ра	ge 13'
Part X	(VII	Information F Exempt Orga		ransfers To and T	ransact	ions ai	nd Relation	onships With I	Nonc	harit	able
ın		on 501(c) of the Co		engage in any of the section 501(c)(3) organ	_					Yes	No_
a Tr	ansfer	s from the reporting fo	oundation to a no	ncharitable exempt organiz	ation of						
									1a(1)		X
									1a(2)		<u>X</u>
		ansactions									х
				ganization							$\frac{\lambda}{X}$
				empt organization					1		X
										-	X
											Х
				undraising solicitations							Х
				ner assets, or paid employe					1		Х
đ lf	the	answer to any of t	he above is "\	es," complete the follo	owing sch	edule C	olumn (b) :	should always show	v the	fair r	narket
		•	•	ces given by the repo	•						
				ement, show in columi							
(a) Line	no	(b) Amount involved N/A	(c) Name of n	oncharitable exempt organizat		N/A	ption of transfe	ers, transactions, and sha	ring arra	ingeme	nts
		N/A				N/A					
							-				
									_		
		·									
	-										
	_					••		·-			
				***		·				_	
			-	filiated with, or related			e tax-exemp	ot organizations			X _{No}
		complete the following	•	nan section 501(c)(3)) or in	i section 5.	217			ш т	es L	טאו 🔄
<u> </u>	165,	(a) Name of organization	1	(b) Type of organ	ızatıon			(c) Description of relation	nship		
							<u> </u>		<u> </u>		
 Sign				examined this return, including preparer (other than taxpaying)							
_	1	6.2	RIGHT		1 1	. 21 -	1/ -	Sugar	o. 1		
Here	Si	gnature of officer or truste	$\frac{\cdot \cdot \cdot \sim \chi^{-}}{e}$		Date	~ 6	<u> </u>	<i>DECRETAN</i> tle	7		
	1 31	Print/Type preparer's		Preparer's signature			Date		PTIN		
Daid		۱ ۸.		, , , , , ,	 .		MAY 20	2011 Check if			
Paid		Hlan J.	Tobin	Illan 1	del		IMI & V	self-employed			38
Prepa			SIZ MHM, LI					Firm's EIN ▶ 34-	1513	062	
Use C	nly	Firm's address ▶ 40		PARKWAY SUITE	100						
			AKRON,	ОН		443	33-8354	Phone no 330-			
									Form 9	90-PF	(2010)

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M.G. O'NEIL FOUNDATION

NET INVESTMENT INCOME	13.	6,318.
REVENUE AND EXPENSES PER BOOKS	13.	6,318.
DESCRIPTION	FEDERATED GOVERNMENT CASH TRUST ACCOUNT VANGUARD	TOTAL

ATTACHMENT 1

FORM 990PF, PART I - OTHER INCOME

REVENUE AND EXPENSES

PER BOOKS 453,390.

DESCRIPTION
DISTRIBUTION FROM M G O'NEIL IRA

452.2

TOTALS

453,390.

- OTHER EXPENSES PART I FORM 990PE,

M.G. O'NEIL FOUNDATION

POSTAGE
ષ્ઠ
DESCRIPTION P.O. BOX RENTAL INVESTMENT FEES

NET	INVESTMENT	INCOME	H	18	
AND	EXPENSES	PER BOOKS	57.	229.	

REVENUE

CHARITABLE PURPOSES	46.	

286.

194.

11. 183.

DESCRIPTION

VANGUARD INDEX TRUST 500 PORT

ENDING BOOK VALUE

ENDING FMV

TOTALS

244,651.

244,651.

375,694.

375,694.

S ACCT THER INCES		. 0		·	. 0	
S EXPENSE ACCT AND OTHER ALLOWANCES						·
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	· o	Ö	O	·	·	.0
COMPENSATION	0	.0	.0	.0	.0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	SECRETARY & DIRECTOR	PRESIDENT & DIRECTOR	VICE PRESIDENT & DIRECTOR	DIRECTOR	DIRECTOR	DIRECTOR
NAME AND ADDRESS	E.R. DYE P.O. BOX 5303 FAIRLAWN, OH 44334	M.G. O'NEIL JR P.O. BOX 5303 FAIRLAWN, OH 44334	SHAWN O'NEIL P.O. BOX 5303 FAIRLAWN, OH 44334	DR. NANCY O'CONNOR P.O. BOX 5303 FAIRLAWN, OH 44334	SEAN O'CONNOR P.O. BOX 5303 FAIRLAWN, OH 44334	JANETTE COOK P.O. BOX 5303 FAIRLAWN, OH 44334

ATTACHMENT 5 (CONT'D)	EXPENSE ACCT AND OTHER ALLOWANCES	.0
ATTACI	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	.0
	COMPENSATION	0
FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	TREASURER & DIRECTOR
FORM 990PF, PART VIII - LIST	NAME AND ADDRESS	JULIE O'NEIL 1744 FIXLER ROAD WADSWORTH, OH 44281-8412

GRAND TOTALS

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

ED DYE P.O. BOX 5303 FAIRLAWN, OH 44334 330-650-6302

Form 8868

(Rev. January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To the an Exempt Organization Return

File a separate application for each return

OMB No 1545-1709

 If you are filing for an Automatic 3-Month Extension, complete only Part 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) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed) A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Name of exempt organization Employer identification number Type or 34-6516968 M.G. O'NEIL FOUNDATION print Number, street, and room or suite no. If a P.O. box, see instructions File by the due date for filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions return See instructions HUDSON, OH 44236 Enter the Return code for the return that this application is for (file a separate application for each return) Application Return Application Return Is For Code Is For Code Form 990 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 990-EZ Form 4720 09 03 Form 990-PF Form 5227 10 04 Form 990-T (sec 401(a) or 408(a) trust) Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 The books are in the care of ► CBIZ MHM, LLC Telephone No ► 330 668-6500 FAX No ▶ 330 666-8789 If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 08/15 , 20 11 , to file the exempt organization return for the organization named above. The extension is for the organization's return for ▶ X calendar year 2010 or tax year beginning ______, 20____, and ending If the tax year entered in line 1 is for less than 12 months, check reason | Initial return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 122. 3a \$ b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 3b \$ 1,551. 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 Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions For Paperwork Reduction Act Notice, see Instructions Form 8868 (Rev 1-2011)

		γ		()					
		v 1-2011)	<u>'</u>	·		Page 2			
• If y	you are	filing for an Additional (Not Automatic) 3-Mc	nth Exten	sion, complete only Part II and che	ck this box	▶ <u>X</u>			
		omplete Part II if you have already been gran							
• If y	you are	filing for an Automatic 3-Month Extension, c	omplete o	nly Part I (on page 1)					
Pari		Additional (Not Automatic) 3-Month Ex			copies needed)				
Гуре	or	Name of exempt organization			Employer identification	number			
orint		M.G. O'NEIL FOUNDATION			34-6516968				
ile by		Number, street, and room or suite no. If a P.O. box	c, see instruc	tions					
	ended P.O. BOX 5303								
	g your City, town or post office, state, and ZIP code. For a foreign address, see instructions								
	IM See FATEL NUMBER OIL 44224								
nstruc	tions	THE THE THE TENT							
		to a second of the Heavy and the Mark Heavy and the Heavy			.	0 4			
nter	tne Re	eturn code for the return that this application i	s for (file a	separate application for each return)	. [] 4			
A 13			5.4	A 15 A2		Determ			
	ication		Return	Application		Return			
s Fo			Code	ls For		Code			
orm	990		01			•			
orm	990-BI	T	02	Form 1041-A		08			
orm	990-E	7	03	Form 4720		09			
orm	990-PF	·	04	Form 5227		10			
orm	990-T	(sec 401(a) or 408(a) trust)	05	Form 6069	<u> </u>	11			
orm	990-T	(trust other than above)	06	Form 8870		12			
STOF	اد Do ne	ot complete Part II if you were not already (granted an	automatic 3-month extension on a	a previously filed Forn	n 8868.			
Th	e book	s are in the care of CBIZ MHM, LLC				_			
Te	lephone	e No ▶ 330 66 8-6500	F	AX No ▶ 330 666-8789					
		anization does not have an office or place of t	_			▶ □			
		or a Group Return, enter the organization's fou				is is			
		e group, check this box	-			ach a			
		names and EINs of all members the extension		3 17	• • • • • • • • • • • • • • • • • • • •				
		st an additional 3-month extension of time un		11/15 ,	20 11				
	-	endar year <u>2010</u> , or other tax year beginnii		, 20 , and ending		20 .			
		ax year entered in line 5 is for less than 12 m			Final return	·			
•		hange in accounting period	oriaio, orioc	mila retain	_ r inar rotarr				
7	State	n detail why you need the extension ADDIT	TONAL T	TME IS NEEDED IN ORDER	TO GATHER				
		NFORMATION NECESSARY TO PREPA							
		Wildian Wilder William Co. Linding	11. 00						
9.0	If this	application is for Form 990-BL, 990-PF, 99	O.T. 4720	or 6060 optor the tentative tax	lose any				
			0-1, 4/20	, or ooos, enter the tentative tax	- 1 1	122.			
		undable credits See instructions	4720	6060 antas any rafijindahla ar	8a \$	122.			
		application is for Form 990-PF, 990-T,							
		ted tax payments made Include any pri	or year o	verpayment allowed as a credit		1 661			
		t paid previously with Form 8868			8b \$	1,551.			
		e Due. Subtract line 8b from line 8a Include		ent with this form, if required, by us	- I I.	0			
	(Electro	onic Federal Tax Payment System) See instru			8c \$	0.			
		_		d Verification					
		of perjury, I declare that I have examined this form, if and complete, and that I am authorized to prepare this for	-	ompanying schedules and statements, and t	to the best of my knowled	ge and belief,			
is trut	s, conect		A		1	1			
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ıgnatu	ıre ▶	- July 1 1 Co	7 0	Title >	Date ► 0 / C)			