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For calendar year 2010, or tax year beginning 01-01-2010

OMB No 1545-0052

2010

Internal Revenue Service

Department of the Treasury

#### **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

, and ending 12-31-2010

<b>G</b> C1	neck a		n of a former public ch	•	turn	
Nam	e of for	A mended return Address cha	inge <b>I</b> Name	change A Employer id	dentification numb	er
		ramily foundation NFP			acitimeation numb	C.
				35-2274063	umbor (200 n=== 10	of the instructions
		d street (or P O box number if mail is not delivered to street addres ARD DRIVE	s) Room/suite	· ·	umber (see page 10 o	oi the instructions)
		· · · · · · · · · · · · · · · · · · ·		(309) 664-181	4	
		n, state, and ZIP code		<b>C</b> If exemption	n application is pendin	ng, check here 🕨 🦵
BLOC	MINGI	ON, IL 61701		<b>D 1.</b> Foreign o	rganizations, check h	ere ▶ □
H Ch	eck ty	ype of organization	ate foundation	<b>2.</b> Foreign o	organizations meeting	the 85% test,
_		1 4947(a)(1) nonexempt charitable trust Other tax		on	re and attach comput	
			▼ Cash		undation status was t on 507(b)(1)(A), chec	
		from Part II, col. (c),  *\$ 3,212,683	_		ation is in a 60-mont	
		(, a,, e,, a,, a,, a,, a,, a,, a,, a,, a,	t de on cash dasis.)	under section	on 507(b)(1)(B), ched T	
Рa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions)	(a) Revenue and expenses per books	( <b>b)</b> Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	399,900			
	2	Check ► ┌ if the foundation is <b>not</b> required to attach Sch B				
	3	Interest on savings and temporary cash investments	50,823	50,823		
Reveilue	4	Dividends and interest from securities	43,458	42,166		
	5a	Gross rents	62,220	62,220		
	ь	Net rental income or (loss)59,262				
	6a	Net gain or (loss) from sale of assets not on line 10	965,503			
	ь	Gross sales price for all assets on line 6a 992,213				
	7	Capital gain net income (from Part IV, line 2)		965,503		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	ь	Less Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)				
	12	Total. Add lines 1 through 11	1,521,904			
	13	Compensation of officers, directors, trustees, etc	0	0		0
yr.	14	Other employee salaries and wages				
Expenses	15	Pension plans, employee benefits				
8	16a	Legal fees (attach schedule)	<b>05</b> € 11 500	11 502		0
	Ь	Accounting fees (attach schedule)	11,583	11,583		1
tίγe	_ c	Other professional fees (attach schedule)				
and Administrative	17	Interest	2,368	0		0
ΞS	18 19	Depreciation (attach schedule) and depletion	2,670			
Ē		Occupancy	2,370	2,070		
Α	20	Travel, conferences, and meetings				
3nd	22	Printing and publications				
	23	Other expenses (attach schedule)	<b>%</b> 356	341		15
Operating	24	Total operating and administrative expenses.				1
ğ		Add lines 13 through 23	16,977	14,594		15
ŏ	25	Contributions, gifts, grants paid	109,025			109,025
	26	Total expenses and disbursements. Add lines 24 and 25	126,002			109,040
	27	Subtract line 26 from line 12	•	, 		
	a	Excess of revenue over expenses and disbursements	1,395,902			
	b	Net investment income (If negative, enter -0-)		1,106,118		
	c	Adjusted net income (If negative, enter -0-)				
For I	<u> </u>	y Act and Paperwork Reduction Act Notice, see page 30	of the instructions.	Cat No 11289X	Form	n <b>990-PF</b> (2010)

De.	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		End o	f year
•		Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book		(c) Fair Market Value
	1	Cash—non-interest-bearing	9,830		2,722	
	2	Savings and temporary cash investments	127,177		108,748	108,748
		Accounts receivable				
		Less allowance for doubtful accounts 🟲				
		Pledges receivable 🟲				
		Less allowance for doubtful accounts 🟲				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see page 15 of the				
		ınstructions)				
	7	Other notes and loans receivable (attach schedule) 🟲				
		Less allowance for doubtful accounts 🟲				
ssets	8	Inventories for sale or use				
ŭ V		Prepaid expenses and deferred charges				
٦.		Investments—U S and state government obligations (attach schedule)				
		Investments—corporate stock (attach schedule)	1,946,661	46:1	1,585,686	1,585,686
	_	Investments—corporate bonds (attach schedule)	569,074		572,214	ļ
		Investments—land, buildings, and equipment basis   945,983	303,071	<u> </u>	3,2,211	372,211
		Less accumulated depreciation (attach schedule) 2,670		<b>图</b>	943,313	943,313
		Investments—mortgage loans		<u> </u>	713,313	313,313
		Investments—other (attach schedule)				
		Land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)				
		· · · · · · · · · · · · · · · · · · ·	<b>%</b> 801	<b>4</b> ≨-1		<b>%</b>
		Total assets (to be completed by all filers—see the		729		
	16	instructions Also, see page 1, item I)	2,653,543		3,212,683	3,212,683
	47	Accounts payable and accrued expenses	2,033,343	•	3,212,003	3,212,003
		Grants payable				
ا م.	18 19	Deferred revenue				
<u>&amp;</u>		Loans from officers, directors, trustees, and other disqualified persons				
	20	Mortgages and other notes payable (attach schedule)				
ල 		, , , , , , , , , , , , , , , , , , , ,				
_	22	Other liabilities (describe)				
	23	Total liabilities (add lines 17 through 22)	0		0	
		Foundations that follow SFAS 117, check here				
		and complete lines 24 through 26 and lines 30 and 31.				
or Fund Balances	24	Unrestricted				
욁		Temporarily restricted				
훒		Permanently restricted				
<b>=</b>		Foundations that do not follow SFAS 117, check here				
되		and complete lines 27 through 31.				
-	27	Capital stock, trust principal, or current funds	0		0	
		Paid-in or capital surplus, or land, bldg , and equipment fund	0		0	
Assets		Retained earnings, accumulated income, endowment, or other funds	2,653,543	:	3,212,683	
Æ	30	Total net assets or fund balances (see page 17 of the	, ,			
ĕ		instructions)	2,653,543	:	3,212,683	
_	31	Total liabilities and net assets/fund balances (see page 17 of			<u> </u>	
		the instructions)	2,653,543	:	3,212,683	
		_	, ,		, ,	
Pa	rt II	Analysis of Changes in Net Assets or Fund Balances				
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must ac	ree		
					1	2,653,543
2		Enter amount from Part I, line 27a			2	1,395,902
3		Other increases not included in line 2 (itemize)		F	3	0
4		Add lines 1, 2, and 3			4	4,049,445
5		Decreases not included in line 2 (itemize)			5	836,762
6		Total net assets or fund balances at end of year (line 4 minus line 5)—F		ne 30	6	3,212,683

	00-PF (2010)					Page <b>3</b>
Part 1	Capital Gains an	d Losses for Tax on Inve	stment Incon		.1	T
		e kınd(s) of property sold (e g , re se, or common stock, 200 shs M		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	( <b>d)</b> Date sold (mo , day, yr )
1 a	24,000 SHARE COMME	ERCE BANCSHARES		D	2007-02-01	2010-03-17
b	FRONTIER COMMUNIC	CATIONS		Р	2009-10-19	2010-07-02
	ALLIANCE BERNSTEIN	N INCOME FUND		Р	2010-04-21	2010-11-03
d	15 SHARE COMMERC	E BANCSHARE		D	2007-02-10	2010-12-31
	e) Gross sales price	<b>(f)</b> Depreciation allowe (or allowable)		st or other basis expense of sale		or (loss) ) minus (g)
а	984	,000	·	18,48		965,517
b		2			2	0
	8	,205		8,22	5	-20
d		6		· · · · · · · · · · · · · · · · · · ·		6
<u> </u>						
	mnlate only for assets sho	owing gain in column (h) and owne	d by the foundati	on on 12/31/69	(I) Gains (Col	(h) gain minus
	·	(j) Adjusted basis		xcess of col (i)		(h) gaın mınus less than -0-) <b>or</b>
(i)	FM V as of 12/31/69	as of 12/31/69	, , ,	rcol (j), if any		om col (h))
а						965,517
						0
С						-20
d						6
е						
	Capital gain net income	or (net capital loss)		er in Part I, line 7   0 - in Part I, line 7		
3	Net short-term capital g	ا gain or (loss) as defined in sectio		J	2	965,503
	If gain, also enter in Pai If (loss), enter -0- in Pa	rt I, line 8, column (c) (see pages art I, line 8	13 and 17 of the	e instructions)	} } 3	
Part	V Qualification Un	der Section 4940(e) for R	Reduced Tax o	n Net Investme	nt Income	
		vate foundations subject to the se				
	on 4940(d)(2) applies, lea	-	. ,		·	
		section 4942 tax on the distribut qualify under section 4940(e) Do			eriod?	Γ Yes <b>Γ</b> No
<b>1</b> Ent	ter the appropriate amount	t in each column for each year, s	ee page 18 of the	ınstructions before	making any entries	
	(a)		· · ·		(d)	
	period years Calendar	<b>(b)</b> Adjusted qualifying distributions		c) naritable-use assets	Distribution	n ratio
year (c	or tax year beginning in)			1 077 041	(col (b) divided	
	2009	56,300		1,977,041		0 028477
	2008	90,272		1,626,753		0 053492
	2006	0		1,339,779		0 032202
	2005	<u> </u>		-		0 0
_					_	
2		d)		<del>-</del>	2	0 136171
3	<del>-</del>	io for the 5-year base period—div foundation has been in existence			3	0 034043
4	Enter the net value of no	oncharitable-use assets for 2010	) from Part X, line	5	4	3,003,385
5	Multiply line 4 by line 3				5	102,244
6	Enter 1% of net investn	nent income (1% of Part I, line 2	7b)		6	11,061
7	Add lines 5 and 6				7	113,305
8		itions from Part XII, line 4		<u> </u>	8	109,040
	If line 8 is equal to or gi the Part VI instructions	reater than line 7, check the box on page 18	ın Part VI, lıne 1t	o, and complete that	part using a 1% tax	rate See

1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1	10 01 1110 111	structio	113/	
14	Date of ruling or determination letter (attach copy of letter if necessary–see				
	instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V , check	1		2	2,122
	here ► Tand 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			0
3	Add lines 1 and 2	3		2	2,122
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	5		2	2,122
6	C redits/P ayments				
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 1,480				
b	Exempt foreign organizations—tax withheld at source 6b				
c	Tax paid with application for extension of time to file (Form 8868)  6c				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d	7			1,480
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		20	0,642
LO	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
l1	Enter the amount of line 10 to be Credited to 2011 estimated tax	11			
-	t VII-A Statements Regarding Activities			1	
La	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		-	Yes	No
_	It participate or intervene in any political campaign?		. 1a		No
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see pag		۱.,		
	the instructions for definition)?		. 1b		No
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials				
_	published or distributed by the foundation in connection with the activities.  Did the foundation file Form 1120-POL for this year?		1c		No
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		1		140
u	(1) On the foundation \$\bigs \$ 0 (2) On foundation managers \$\bigs \$ 0				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impo	sed			
	on foundation managers $\blacktriangleright$ \$0	J 0 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		. 2		No
	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, a	rtıcles			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		. 3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		No
ь	If "Yes," has it filed a tax return on Form 990-T for this year?		4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		. 5		No
	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	5			
	that conflict with the state law remain in the governing instrument?		. 6	Yes	
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	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the				
	ınstructions) ▶ <u>IL</u>				
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) of each state as required by General Instruction G? If "No," attach explanation .		8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j				
	or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XI	V on			ļ <u>.</u> .
	page 27)? If "Yes," complete Part XIV		. 9		No
LO	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and address	oco	10	1 !	No

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		No
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ►N/A			l
14	The books are in care of ▶JACK SNYDER	664-	1814	
	Located at 1 BRICKYARD DRIVE BLOOMINGTON IL  ZIP+4 161701	, 004	1014	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here			<b>P</b>
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over			
10	a bank, securities, or other financial account in a foreign country?	16		No
				110
	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			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V 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) A gree to pay money or property to a government official? (Exception. Check "No"			
	ıf the foundatıon agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days ) Yes 🔽 No			
b	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 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 were not corrected before the first day of the tax year beginning in 2010?	1c		No
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 🕨 20, 20, 20			
Ь	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see page 20 of the instructions )	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
_	▶ 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
1-	enterprise at any time during the year?			
Ь	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, <b>(2)</b> 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 <b>(3)</b> the lapse of the 10-, 15-, or 20-year first phase holding period? <i>(Use Schedule C, Form 4720, to determine</i>			
	If the foundation had excess business holdings in 2010.).	3ь		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
4a b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	a		110
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b		No

	-PF (2010)	udina Astivitias for	. Which Forms 472	May De Deguired (sent	·i	Page <b>6</b>
				) May Be Required <i>(cont</i>	inuea)	т т
	ing the year did the foundatior			0.45( ))0	<del>,</del>	
• •	Carry on propaganda, or other	·	,		NO	
	Influence the outcome of any				<del>-</del>	
	on, directly or indirectly, any					
	Provide a grant to an individua -	, , ,	, ,	Yes √	/ No	
	Provide a grant to an organiza					
				instructions) T Yes	/ No	
	Provide for any purpose other	= :			_	
					/ No	
				er the exceptions described in		
				e (see page 22 of the instruction	_	+-+-
				ere		
	ie answer is "Yes" to question				_	
				Yes 「	No	
If "Y	es," attach the statement requi	red by Regulations section	n 53.4945–5(d).			
	the foundation, during the yea			·		
prer	niums on a personal benefit c	ontract?		...... 「Yes 「	No	
<b>b</b> Dıd	the foundation, during the yea	r, pay premiums, directly	y or indirectly, on a per	sonal benefit contract?	. 6b	No
If "Y	es" to 6b, file Form 8870.					
<b>7a</b> Ata	ny time during the tax year, w	as the foundation a party	y to a prohibited tax sh	elter transaction? <b>Tyes F</b>	No	
<b>b</b> If ye	es, did the foundation receive	any proceeds or have an	ny net income attributat	ole to the transaction?	. 7b	
Dowk VI	Information About	Officers, Directors	s, Trustees, Found	lation Managers, Highly	Paid Emp	oloyees,
Part VI	— and Contractors					
1 List a	all officers, directors, trustees			(see page 22 of the instruction	ns). 	
(;	a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans	1	se account,
		devoted to position	-0-)	and deferred compensation	otheral	lowances
JACK SNYDE	ER	DIRECTOR		0 0		0
	ARD DRIVE	0 00				
	NGTON,IL 61701					
DAVID FEDO		DIRECTOR 0 00		0		0
	'ARD DRIVE NGTON,IL 61701					
	<u>'</u>	 	 these included on line 1	 .—see page 23 of the instruction	\	
	one, enter "NONE."	employees (other than	those included on line 1	.—see page 23 or the instruction	ons).	
		(b) Title, and aver	age	(d) Contributions to		
	ie and address of each employ paid more than \$50,000	hours per week	- I	ion employee benefit plans and deferred		se account, Iowances
	paid more than \$50,000	devoted to positi	on	compensation	Other ar	lowalices
NONE						
		<del></del>				
	ber of other employees paid o					

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)  3. Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE".  (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE  Total number of others receiving over\$50,000 for professional services.     O	Form 990-PF (2010)		Page <b>7</b>
(c) Compensation  NONE  Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.   Total number of others receiving over \$50,000 for professional services.		rustees, Foundation Managers, Highly	Paid Employees,
Total number of others receiving over \$50,000 for professional services.     Description   Descripti	3 Five highest-paid independent contractors for professional serv	vices (see page 23 of the instructions). If none, e	:nter "NONE".
Total number of others receiving over \$50,000 for professional services.  Del the foundation's four largest direct charitable Activities  List the foundation's four largest direct charitable activities during the lax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  1  2  3  4  Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  1  Amount  Total. Add lines 1 through 3.	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Dart IX-B Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  1 A mount	NONE		
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Dart IX-B Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  1 A mount			
Dart IX-B Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  1 A mount			
Dart IX-B Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  1 A mount			
Dart IX-B Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  1 A mount			
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Dart IX-B Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  1 A mount		1	
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Dart IX-B Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  1 A mount		1	
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List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  All other program-related investments. See page 24 of the instructions.			
Total. Add lines 1 through 3	Summary of Direct Charitable Activities		
2  Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  All other program-related investments See page 24 of the instructions  3  Total. Add lines 1 through 3.   • 0	List the foundation's four largest direct charitable activities during the tax year. Including any other hanging research page.	ude relevant statistical information such as the number of	Expenses
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3.		15 produced, etc	
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3.	-		•
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3.			-
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3.			
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  All other program-related investments See page 24 of the instructions  All other program-related investments See page 24 of the instructions			1
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  All other program-related investments See page 24 of the instructions  All other program-related investments See page 24 of the instructions			•
Part IX-B Summary of Program-Related Investments (see page 24 of the instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  All other program-related investments See page 24 of the instructions  All other program-related investments See page 24 of the instructions	2		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3	<u></u>		•
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3			•
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3	*		1
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Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  A mount  All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3	Part IV P. Summary of Program-Polated Investme	nte (see page 24 of the instructions)	
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All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3		9 , ,	- Timount
All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3			•
All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3			-
All other program-related investments See page 24 of the instructions  Total. Add lines 1 through 3	2		
3	•		-
3			•
3	All other program-related investments. See page 24 of the instru	ctions	
Total. Add lines 1 through 3		ctions	
Total Add Illies I tillough St	<u> </u>		1
Total Add Illies I tillough St			1
Total Add Illies I tillough St		_ 1	
	Iotal. Add lines 1 through 3		

Pa	see page 24 of the instructions.)	reign	roundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	2,175,169
ь	A verage of monthly cash balances	1b	215,388
С	Fair market value of all other assets (see page 24 of the instructions)	1c	658,565
d	Total (add lines 1a, b, and c)	1d	3,049,122
е	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	Subtract line 2 from line 1d	3	3,049,122
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25		
	of the instructions)	4	45,737
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V , line 4	5	3,003,385
6	Minimum investment return. Enter 5% of line 5	6	150,169
Pai	<b>Distributable Amount</b> (see page 25 of the instructions) (Section 4942(j)(3) and (j)(		
	foundations and certain foreign organizations check here 🕨 📗 and do not complete t		
1	Minimum investment return from Part X, line 6	1	150,169
2a	Tax on investment income for 2010 from Part VI, line 5 2a 22,122		
Ь	Income tax for 2010 (This does not include the tax from Part VI) 2b	4	
С	Add lines 2a and 2b	2c	22,122
3	Distributable amount before adjustments Subtract line 2c from line 1	3	128,047
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	128,047
6	Deduction from distributable amount (see page 25 of the instructions)	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	128,047
Par	Qualifying Distributions (see page 25 of the instructions)		
1	A mounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	109,040
b	Program-related investments—total from Part IX-B	1b	0
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
ь	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	109,040
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	109,040
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth	her the	e foundation qualifies for

P	undistributed Income (see page	26 of the instruct	ions)		
		(a) Corpus	(b) Years prior to 2009	<b>(c)</b> 2009	( <b>d</b> ) 2010
1	Distributable amount for 2010 from Part XI, line 7				128,047
2	Undistributed income, if any, as of the end of 2010				
	Enter amount for 2009 only			4,356	
ь	Total for prior years 20, 20, 20		0		
	Excess distributions carryover, if any, to 2010				
	From 2005				
	From 2006				
	From 2007				
	From 2008				
e	From 2009				
	Total of lines 3a through e	0			
	Qualifying distributions for 2010 from Part				
	XII, line 4 🕨 \$ 109,040				
а	Applied to 2009, but not more than line 2a			4,356	
Ь	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)		0		
c	Treated as distributions out of corpus (Election required—see page 26 of the instructions)	o			
d	Applied to 2010 distributable amount				104,684
e	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2010	0			0
	(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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
b	Prior years' undistributed income Subtract line 4b from line 2b		0		
c	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		0		
d	Subtract line 6c from line 6b Taxable				
	amount—see page 27 of the instructions		0		
e	Undistributed income for 2009 Subtract line				
	4a from line 2a Taxable amount—see page 27			0	
_	of the instructions			0	
f	Undistributed income for 2010 Subtract lines 4d and 5 from line 1 This amount must				
	be distributed in 2011				23,363
7	A mounts treated as distributions out of				
-	corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see page 27	0			
	of the instructions)	0			
8	Excess distributions carryover from 2005 not				
	applied on line 5 or line 7 (see page 27 of the instructions)	0			
۵	Excess distributions carryover to 2011.				
•	Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9				
	Excess from 2006				
b	Excess from 2007				
С	Excess from 2008				
d	Excess from 2009				
e	Excess from 2010				

b The form in which applications should be submitted and information and materials they should include

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

c Any submission deadlines

factors

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of A mount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 109,025 **b** Approved for future payment

	PF (2010)  I-A Analysis of Income-Produc	ing Activitie	<u> </u>			Page <b>1</b> 2
	s amounts unless otherwise indicated		ısıness income	Excluded by section	512, 513, or 514	(e)
	m service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	Related or exemp function income (See page 28 of the instructions)
b	and contracts from government agencies ership dues and assessments			14 14 14	50,823 43,458 59,262 965,503	
9 Net inc 10 Gross 11 Other b c d	come or (loss) from special events profit or (loss) from sales of inventory. revenue a				,	
	al Add columns (b), (d), and (e).			)	1,119,046	
	Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 2			1	3	1,119,046
Line No.	Explain below how each activity for whithe accomplishment of the organization page 28 of the instructions )					

	00-PF (2 <b>XVII</b>	Information Re			nd Transa	actions and Relati	onships With		Pa	ge <b>13</b>
■ Did t	he organiz	Noncharitable			ny other omai	nization described in section			Yes	No
_	_	Code (other than section		-	-				res	NO
		om the reporting four			_	-				
				·				  1a(1)		No
	er trans:							1a(2)		No
			ritable aver	ent organization				16/1)		No
								<del>- ` `</del>		No
										No
										No
								1b(4)		
		<del>-</del>								No
										No
						es.    .   .   .  .  . Column <b>(b)</b> should alw				No
of th	ne goods ny trans	, other assets, or se	rvices giver angement, s	by the reporting fou	indation If ne value of	the foundation received the goods, other assets	less than fair marke	et value ed	<b>!</b>	nte
(a) Line	NO I	(b) Amount involved	(C) Name of	Tionenantable exempt of	ganization	(d) Description of transi	ers, transactions, and sna	illig alla	ngemei	11.5
-										
-										
des	cribed in		ne Code (oth schedule	er than section 501		ore tax-exempt organiz		.FY6	es F	No
	the be based	st of my knowledge a on all information of ****	and belief, it which prepa	is true, correct, and	complete	including accompanyii Declaration of preparer 2011-05-02	other than taxpaye			
	Sig	nature of officer or t	rustee			Date	Title			
Sign Here	» ـِـ	Preparer's BRUG	CE W BREIT	WEISER		Date	Check if self- employed ►	PTIN		
S	Paid Preparer? Use Only	Firm's name 🕨		DUNBAR BREITV	VEISER & C	OMPANY LLP	Fırm's EIN ▶			
	P. S. S.			202 NORTH CEN	TER STRE	ET				
	_	Firm's address 🕨		BLOOMINGTON,	IL 61701		Phone no (309	) 827-	0348	

Schedule B	Schedule of Contributors		OMB No 1545-0047
(Form 990, 990-EZ, or 990-FF) ► Attach to Form 990, 990-EZ, or 990-PF.			2010
Department of the Treasury Internal Revenue Service			
Name of organization ONYDER FAMILY FOUNDATION	N NFP		entification number
<b>Organization type</b> (che	eck one)	I 35-227406	3
ilers of:	Section:		
Form 990 or 990-EZ	「 501(c)( ) (enter number) organization		
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private found	dation	
	527 political organization		
Form 990-PF	√ 501(c)(3) exempt private foundation		
		n	
	501(c)(3) taxable private foundation		
	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or in ny one contributor. Complete Parts I and II	note (iii fibriley of	
under sections 5	1(c)(3) organization filing Form 990 or 990-EZ, that met the 33 <sup>1</sup> /3% support test 09(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during th, 000 or <b>(2)</b> 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-E	ie year, a contributi	
during the year, a	1(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from a aggregate contributions of more than \$1,000 for use exclusively for religious, contributions of more than \$1,000 for use exclusively for religious, contribution of cruelty to children or animals. Contribution of cruelty to children or animals.	harıtable,	
during the year, of not aggregate to the year for an e applies to this org	1(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from a contributions for use exclusively for religious, charitable, etc., purposes, but the more than \$1,000 if this box is checked, enter here the total contributions that exclusively religious, charitable, etc., purpose. Do not complete any of the parts ganization because it received nonexclusively religious, charitable, etc., contributions.	ese contributions d w ere received duri unless the <b>Gener</b> a utions of \$5,000 or	id ing <b>al Rule</b> more
990-EZ, or 990-PF), but r	on that is not covered by the General Rule and/or the Special Rules does not file timust answer "No" on Part IV, line 2 of its Form 990, or check the box on lin H2 of its Form 990-PF, to certify that it does not meet the filing requirements of Sc	l of its	

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93491124000041

Name of organization SNYDER FAMILY FOUNDATION NFP Employer identification number

35-2274063

Part I	Contributors (see Instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	JACK JEAN SNYDER  1 BRICKYARD DRIVE  BLOOMINGTON, IL 61701	\$\$	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
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person   Payroll   Noncash   Payroll   Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person

Name of organization SNYDER FAMILY FOUNDATION NFP Employer identification number

35-2274063

Part II	Noncash Property (see Instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_1_	10,000 SHARES OF COMMERCE BANCSHARES, INC	\$399,900	2010-03-15
(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
—		- - - - - -	

Name of organization SNYDER FAMILY FOUNDATION NFP **Employer identification number** 

3<u>5-2</u>274063

F	ggregating more than \$1,000 for the goor organizations completing Part III, enter to ontributions of \$1,000 or less for the year	he total of exclu	<i>isi vel y</i> religious, charita	ble, etc,
(a) No. from Part I	(b) Purpose of gift		(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, an		(e) Fransfer of gift Relatio	onship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift		(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, an		(e) Fransfer of gift Relatio	onship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift		(c) Use of gift	(d) Description of how gift is held
<del>-</del>	Transferee's name, address, an		(e) Fransfer of gift Relatio	onship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift		(c) Use of gift	(d) Description of how gift is held
—   <u>-</u> - -	Transferee's name, address, an		(e) Fransfer of gift Relatio	onship of transferor to transferee
_				

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations

# Software ID: Software Version:

**EIN:** 35-2274063

Name: SNYDER FAMILY FOUNDATION NFP

#### Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	A mount
a Paid during the year	or substantial contributor			
ST JOHNS HOSPICE 800 EAST CARPENTER ST SPRINGFIELD, IL 62769	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	100
MAITLAND-WARNER SCHOLARSHIP FUND 1029 S FOURTH ST SPRINGFIELD,IL 62703	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	100
FIRST PREBYTERIAN CHURCH OF DESTIN 154 CALHOUN AVE DESTIN,FL 32541	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	50
THE CARRIAGE ASSOCIATION OF AMERICA 3915 JAY TRUMP RD LEXINGTON,KY 40511	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	100
UNIVERSITY OF ILLINOIS FOUNDATION 1305 WEST GREEN ST URBANA,IL 618012962	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	50
THE BABY FOLD 612 OGLESBY AVE NORMAL,IL 617611888	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	100
ADVOCATE BROMENN MEDICAL CENTER PO BOX 2850 BLOOMINGTON,IL 617022850	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	50
YMCA 602 SOUTH MAIN ST BLOOMINGTON,IL 61701	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	4,300
MAKE A WISH FOUNDATION 640 N LASALLE DR CHICAGO,IL 606543754	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	1,000
MILLER PARK ZOOLOGICAL SOCIETY 1020 S MORRIS BLOOMINGTON,IL 61701	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	500
BLOOMINGTON HIGH SCHOOL 300 E MONROE BLOOMINGTON,IL 61701	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	50
MAYO CLINIC 200 FIRST STREET ROCHESTER,MN 55905	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	50,000
AUTISM SOCIETY OF MCLEAN COUNTY 2404 EAST EMPIRE BLOOMINGTON,IL 61704	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	250
MILESTONE EARLY LEARNING CENTER 315 N STILLWELL ST BLOOMINGTON,IL 61701	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	400
OSF ST JOSEPH FOUNDATION 2200 E WASHINGTON ST BLOOMINGTON,IL 61701	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	250
Total				109,025

## Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	show any relationship to status of contribution		A mount	
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
MUSCULAR DYSTROPHY ASSOCIATION PO BOX 79071 PHOENIX,AZ 850629071	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	125
NORMAL PUBLIC LIBRARY 206 W COLLEGE NORMAL,IL 61761	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	50
AMERICAN LIVER ASSOCIATION 75 MAIDEN LANE SUITE 603 NEW YORK,NY 10038	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	50
THE DIVERSITY PROJECT 202 N PROSPECT ROAD BLOOMINGTON,IL 61704	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	500
COMMUNITY CANCER CENTER FOUNDATION 407 EAST VERNON AVE NORMAL,IL 61761	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	250
EASTER SEALS 2404 EAST EMPIRE BLOOMINGTON,IL 61704	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	100
AMERICAN RED CROSS OF THE HEARTLAND ONE WESTPORT CT BLOOMINGTON,IL 61704	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	1,050
ALZEIMER'S ASSOCIATION PO BOX 806457 CHICAGO,IL 606804125	NONE PUBLIC SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE		ORGANIZATION'S	100
BOY SCOUTS OF AMERICA - WD BOYCE 614 NE MADISON PEORIA,IL 61603	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	3,500
CHILDREN'S HOMEAID CHILDREN'S FOUNDATION 403 SOUTH STATE STREET BLOOMINGTON,IL 617015556	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	2,500
COMMUNITY HEALTH CARE CLINIC 902 FRANKLIN AVENUE NORMAL,IL 61761	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	200
FIRST CHRISTIAN CHURCH 401 WEST JEFFERSON BLOOMINGTON,IL 617013899	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	12,050
GIRL SCOUTS OF CENTRAL ILLINOIS 3020 BAKER DRIVE SPRINGFIELD,IL 62703	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	100
GOOD FELLOW FUND 301 W WASHINGTON ST BLOOMINGTON,IL 61701	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	100
GULF COAST SCHOLASTIC SHOOTERS INC PO BOX 802 NOKOMIS, FL 342740802	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	1,000
Total				109,025

### Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
HOME SWEET HOME MINISTRIES INC 410 N MAIN STREET BLOOMINGTON,IL 617013914	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	300
ILLINOIS WESLEYAN UNIVERSITY PO BOX 2900 BLOOMINGTON,IL 617022900	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	10,050
MISHAWAKA FOUNDATION CO STEPHEN SNYDER 1 BRICKYARD DRIVE BLOOMINGTON,IL 61701	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	3,000
SECOND PRESBYTERIAN CHURCH 313 NORTH EAST STREET BLOOMINGTON,IL 61701	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	15,150
SPECIAL OLYMICS 605 EAST WILLOW STREET NORMAL,IL 617612682	NONE	ORGANIZATION'S CHARITABLE PURPOSE		200
THE SALVATION ARMY 611 WEST WASHINGTON STREET BLOOMINGTON,IL 61701	NONE			1,200
THE SMILE TRAIN 41 MADISON AVE FLOOR 28 NEW YORK,NY 10010	NONE PUBLIC SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE		ORGANIZATION'S	100
BIG BROTHERS BIG SISTERS 117 N MAIN DECATUR,IL 62523	NONE	PUBLIC	SUPPORT OF ORGANIZATION'S CHARITABLE PURPOSE	50
Total				109,025

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**Depreciation and Amortization** 

(Including Information on Listed Property)

DLN: 93491124000041

OMB No 1545-0172

Department of the Treasury

Form 4562

Attachment

See separate instructions. Attach to your tax return. Sequence No 67 Internal Revenue Service (99) Name(s) shown on return Business or activity to which this form relates **Identifying number** SNYDER FAMILY FOUNDATION NFP FARM LAND PIN 17-15-400-001, MARTIN TOWN 35-2274063 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Maximum amount See the instructions for a higher limit for certain businesses 1 2 Total cost of section 179 property placed in service (see instructions) 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 2,000,000 4 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (b) Cost (business use 6 (a) Description of property (c) Elected cost only) 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2009 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2011 Add lines 9 and 10, less line 12 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property ) (See instructions ) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 **15 15** Property subject to section 168(f)(1) election **16** Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2010 17 18 If you are electing to group any assets placed in service during the tax year into one or more . 📂 general asset accounts, check here Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (a) Classification of (d) Recovery (g)Depreciation year placed in (business/investment (e) Convention (f) Method period property deduction service use only—see instructions) 19a 3-year property **b** 5-year property c 7-year property d 10-year property 53,400 150 150 DB e 15-year property 2.670 f 20-year property g 25-year property 25 yrs S/L 27 5 yrs ММ S/L h Residential rental property 27 5 yrs мм S/L 39 yrs мм S/L i Nonresidential real property ΜМ S/L Section C—Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System 20a Class life S/L **b** 12-year 12 yrs S/L **c** 40-year ММ S/L 40 yrs Part IV **Summary** (see instructions) 21 Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here 22 2,670 and on the appropriate lines of your return Partnerships and S corporations—see instructions 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Part V
Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depre	ciation a	nd Other I	nforma	tion (C	Caution	: See	the i	nstruct	tions fo	or limi	its fo	or pa	sseng	er au	tomot	iles.)
<b>24a</b> Do you have evider	nce to support	the business/inv	estment u	ise claime	d? <b>┌</b> Yes	Гпо		24	<b>lb</b> If "Ye	s," is th	e ev i	dence	written?	Гүе	sГN	)
<b>(a)</b> Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d Cost or bas	rother	(busines	(e) r deprecia ss/investr se only)		<b>(f)</b> Recovery period	( <b>c</b> Meth Conve	nod/	С	<b>(h</b> ) Depreck deduc	ation/		(i) Electe section 1 cost	179
<b>25</b> Special depreciation allo 50% in a qualified busi			rty placed	ın service (	during the	tax year	and u	ised more	e than	25						
<b>26</b> Property used more	e than 50%		business	use												
		%												+-		
		%														
<b>27</b> Property used 50%	orless in a		ıness us	е					la u							
		%							S/L - S/L -					-		
		%							S/L -							
28 Add amounts in c	olumn (h), lır	nes 25 throug	h 27 En	ter here a	and on lı	ne 21, <sub>l</sub>	page	1 .	28							
29 Add amounts in c	olumn (ı), lın	e 26 Enterhe	ere and o	n line 7,	page 1							29				
				_Infor												
Complete this section If you provided vehicles to														e vehic	les	
30 Total business/in	vestment mi	les driven dur	una the	_	a)		<b>)</b>		(c)		(d)	-	-	<b>≘</b> )		f)
year ( <b>do not</b> inclu			•	Vehi	ıcle 1	Vehi	cle 2	V e	hicle 3		ehic	le 4	Vehi	cle 5	Vehi	cle 6
<b>31</b> Total commuting	milas drivan	during the ve	25							+						
32 Total other person																
33 Total miles driver	•															
through 32																
<b>34</b> Was the vehicle a	vaılable for p	ersonal use		Yes	No	Yes	No	Yes	No	Ye	es	No	Yes	No	Yes	No
during off-duty ho	urs? .															
35 Was the vehicle u		by a more the	nan 5%													
owner or related p <b>36</b> Is another vehicle		r porconal uc	• •		1						$\dashv$					+
		stions for		vore W	ho Dro	vida \	/ohi	clas f	or He	hy 7	Γha	ir En	anlov			
Answer these questio 5% owners or related	ns to determ	ine if you mee	et an exc												<b>not</b> mo	re thai
<b>37</b> Do you maintain a employees?		y statement											our •	Y	es	No
30 D											I			_		
<b>38</b> Do you maintain a employees? See t												, our				
39 Do you treat all us	se of vehicle:	s by employee	es as per	sonal us	e? .											
<b>40</b> Do you provide movehicles, and reta		•	•	oyees, o	btaın ınfo	ormatio •	n froi	m your e	employe	ees ab	out t	he us	e of the	3		
<b>41</b> Do you meet the r	equirements	concerning q	ualified a	automobi	ıle demoi	nstratio	n us	e? (See	ınstruc	tions )	) .					
<b>Note:</b> If your ansv	ver to 37, 38	, 39, 40, or 4	1 is "Yes	s," do no	t comple	te Sect	ion E	for the	covere	d vehi	cles					
	rtization	, , ,		,	•											
(a) Description of c		(b) Date amortization begins	1	(c A mort a mo	ızable		(	( <b>d)</b> Code ection	p.	(e) ortizat eriod o rcentai	r			( <b>f</b> ) rtızatıc hıs yea		
42 A mortization of co	sts that beg		ur 2010	tax year	(see ins	truction	ns)									
				•	-		-									
43 A mortization of co	sts that beg	an before you	ır 2010 t	ax year		•				4	3					
44 Total. Add amoun	ts ın column	(f) See the in	nstructio	ns for wh	ere to re	port				4	4					

#### **TY 2010 Accounting Fees Schedule**

Name: SNYDER FAMILY FOUNDATION NFP

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	11,583	11,583		0

DLN: 93491124000041

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

#### **TY 2010 Depreciation Schedule**

Name: SNYDER FAMILY FOUNDATION NFP

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
164 ACRES FARM LAND, MARTIN TWONSHIP,	2010-04-12	892,583		L		0	0		
TILE	2010-04-12	53,400		150DB	15 000000000000	2,670	2,670		

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# **TY 2010 Investments Corporate Bonds Schedule**

Name: SNYDER FAMILY FOUNDATION NFP

Name of Bond	End of Year Value		End of Year Fair Market Value
AMERICAN EXPRESS		54,377	54,377
GE CAP CORP MEDIUM TERM		50,617	50,617
CITIGROUP INC.		52,448	52,448
GOLDMAN SACHS GROUP INC.		50,081	50,081
JOHNSON CONTROLS		50,058	50,058
WHIRLPOOL CORP.		51,140	51,140
RR DONNELLEY		51,202	51,202
DOW CHEMICAL		55,359	55,359
FORTUNE BRANDS, INC.		51,708	51,708
HORACE MANN		26,615	26,615
COUNTRYWIDE FINANCIAL		51,275	51,275
MARRIOTT		27,334	27,334

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# **TY 2010 Investments Corporate Stock Schedule**

Name: SNYDER FAMILY FOUNDATION NFP

FIN: 35-2274063

EIN: 35-22/4063					
Name of Stock	End of Year Book Value	End of Year Fair Market Value			
COMMERCE BANCSHARES	1,055,547	1,055,547			
JP MORGAN CHASE & CO.	55,100	55,100			
PRUDENTIAL FINANCIAL INC.	54,980	54,980			
BB&T CAPITAL TRUST	54,900	54,900			
AMEREN CORP	28,190	28,190			
DUKE ENERGY	26,715	26,715			
VERIZON	30,592	30,592			
MFS INTERMEDIATE INC.	22,085	22,085			
NEXTERA ENERGY CAP HLDG	55,880	55,880			
METLIFE	49,600	49,600			
MORGAN STANLEY	55,107	55,107			
MORGAN STANLEY	29,350	29,350			
JPM CHASE CAPITAL	25,540	25,540			
NUVEEN EQUITY PREM	12,880	12,880			
POWERSHARES CEF INCOME	12,690	12,690			
BLACKROCK INCOME OPPORTUNITY	14,535	14,535			
FRONTIER COMMUNICATIONS	1,995	1,995			

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#### **TY 2010 Investments - Land Schedule**

Name: SNYDER FAMILY FOUNDATION NFP

Category/ Item	Cost/Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
164 ACRES FARM LAND, MARTIN TWONSHIP,	892,583	0	892,583	0
TILE	53,400	2,670	50,730	0

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#### **TY 2010 Other Assets Schedule**

Name: SNYDER FAMILY FOUNDATION NFP

Description	Beginning of Year -	End of Year - Book	End of Year - Fair
	Book Value	Value	Market Value
ACCRUED INTEREST	801		

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#### **TY 2010 Other Decreases Schedule**

Name: SNYDER FAMILY FOUNDATION NFP

Description	Amount
UNREALIZED LOSS ON INVESTMENTS DURING 2010	836,762

### **TY 2010 Other Expenses Schedule**

Name: SNYDER FAMILY FOUNDATION NFP

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	53	53		0
REGISTRATION FEES	15	0		15
INSURANCE	288	288		0

#### **TY 2010 Taxes Schedule**

Name: SNYDER FAMILY FOUNDATION NFP

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
990PF	2,368	0		0