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Form **990-PF**  
 Department of the Treasury  
 Internal Revenue Service

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

OMB No 1545-0052  
**2010**

**Note.** The foundation may be able to use a copy of this return to satisfy state reporting requirements

**For calendar year 2010, or tax year beginning 04-01-2010 , and ending 03-31-2011**

**G** Check all that apply  Initial return  Initial return of a former public charity  Final return  
 Amended return  Address change  Name change

Name of foundation JOHN C PROCTOR ENDOWMENT		<b>A Employer identification number</b> 37-0662595
Number and street (or P O box number if mail is not delivered to street address) Room/suite 2724 W RESERVOIR BLVD		<b>B Telephone number</b> (see page 10 of the instructions) (309) 685-6580
City or town, state, and ZIP code PEORIA, IL 61615		<b>C</b> If exemption application is pending, check here <input type="checkbox"/> <b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> <b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) <b>\$</b> 21,869,531	<b>J</b> Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	

<b>Part I Analysis of Revenue and Expenses</b> (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) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc , received (attach schedule)	56,044			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
	<b>3</b> Interest on savings and temporary cash investments	2,996	2,996	2,996	
	<b>4</b> Dividends and interest from securities . . . . .	264	264	264	
	<b>5a</b> Gross rents . . . . .	599,375	599,375	599,375	
	<b>b</b> Net rental income or (loss) _____ 599,375				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	-90,611			
	<b>b</b> Gross sales price for all assets on line 6a _____ 498,918				
	<b>7</b> Capital gain net income (from Part IV, line 2) . . . . .		0		
	<b>8</b> Net short-term capital gain . . . . .			0	
	<b>9</b> Income modifications . . . . .				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less Cost of goods sold . . . . .					
<b>c</b> Gross profit or (loss) (attach schedule) . . . . .					
<b>11</b> Other income (attach schedule) . . . . .	4,916,545	58	4,916,545		
<b>12 Total.</b> Add lines 1 through 11 . . . . .	5,484,613	602,693	5,519,180		
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc	233,033	25,191	159,768	73,264
	<b>14</b> Other employee salaries and wages . . . . .	3,471,379	20,294	2,254,871	1,216,507
	<b>15</b> Pension plans, employee benefits . . . . .	1,624,996	19,646	1,059,111	565,886
	<b>16a</b> Legal fees (attach schedule) . . . . .	10,859	1,174	7,445	3,414
	<b>b</b> Accounting fees (attach schedule) . . . . .	30,234	3,268	20,729	9,505
	<b>c</b> Other professional fees (attach schedule) . . . . .				
	<b>17</b> Interest . . . . .				
	<b>18</b> Taxes (attach schedule) (see page 14 of the instructions)	32,213	0	20,858	11,355
	<b>19</b> Depreciation (attach schedule) and depletion . . . . .	206,298	201	206,298	
	<b>20</b> Occupancy . . . . .	414,923	571	268,864	146,059
	<b>21</b> Travel, conferences, and meetings . . . . .				
	<b>22</b> Printing and publications . . . . .				
	<b>23</b> Other expenses (attach schedule) . . . . .	1,526,813	337	988,729	538,083
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	7,550,748	70,682	4,986,673	2,564,073
	<b>25</b> Contributions, gifts, grants paid . . . . .	0			0
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	7,550,748	70,682	4,986,673	2,564,073	
<b>27</b> Subtract line 26 from line 12					
<b>a Excess of revenue over expenses and disbursements</b>	-2,066,135				
<b>b Net investment income</b> (if negative, enter -0-)		532,011			
<b>c Adjusted net income</b> (if negative, enter -0-)			532,507		

Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

<b>Part II Balance Sheets</b>		Beginning of year			End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .		184,515		248,198		248,198
	<b>2</b> Savings and temporary cash investments . . . . .		180,636		256,806		256,806
	<b>3</b> Accounts receivable ▶ <u>51,849</u>						
	Less allowance for doubtful accounts ▶ _____		16,911		51,849		51,849
	<b>4</b> Pledges receivable ▶ _____						
	Less allowance for doubtful accounts ▶ _____						
	<b>5</b> Grants receivable . . . . .						
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions) . . . . .						
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____						
	Less allowance for doubtful accounts ▶ _____						
	<b>8</b> Inventories for sale or use . . . . .						
	<b>9</b> Prepaid expenses and deferred charges . . . . .						
	<b>10a</b> Investments—U S and state government obligations (attach schedule)						
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .						
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .						
	<b>11</b> Investments—land, buildings, and equipment basis ▶ <u>415,512</u>						
Less accumulated depreciation (attach schedule) ▶ _____		486,016		415,512		20,380,390	
<b>12</b> Investments—mortgage loans . . . . .							
<b>13</b> Investments—other (attach schedule) . . . . .		278,666		184,126		184,126	
<b>14</b> Land, buildings, and equipment basis ▶ <u>2,086,915</u>							
Less accumulated depreciation (attach schedule) ▶ <u>1,578,325</u>		595,768		508,590		508,590	
<b>15</b> Other assets (describe ▶ _____)		263,835		239,572		239,572	
<b>16 Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)		2,006,347		1,904,653		21,869,531	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .		53,533		58,746		
	<b>18</b> Grants payable . . . . .						
	<b>19</b> Deferred revenue . . . . .		19,099,981		19,063,373		
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons						
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .						
	<b>22</b> Other liabilities (describe ▶ _____)						
<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .		19,153,514		19,122,119			
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow SFAS 117, check here</b> ▶ <input checked="" type="checkbox"/>						
	<b>and complete lines 24 through 26 and lines 30 and 31.</b>						
	<b>24</b> Unrestricted . . . . .		-19,397,166		-19,467,465		
	<b>25</b> Temporarily restricted . . . . .						
	<b>26</b> Permanently restricted . . . . .		2,249,999		2,249,999		
	<b>Foundations that do not follow SFAS 117, check here</b> ▶ <input type="checkbox"/>						
	<b>and complete lines 27 through 31.</b>						
	<b>27</b> Capital stock, trust principal, or current funds . . . . .						
	<b>28</b> Paid-in or capital surplus, or land, bldg, and equipment fund						
<b>29</b> Retained earnings, accumulated income, endowment, or other funds							
<b>30 Total net assets or fund balances</b> (see page 17 of the instructions) . . . . .		-17,147,167		-17,217,466			
<b>31 Total liabilities and net assets/fund balances</b> (see page 17 of the instructions) . . . . .		2,006,347		1,904,653			

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b>	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	-17,147,167
<b>2</b>	Enter amount from Part I, line 27a . . . . .	<b>2</b>	-2,066,135
<b>3</b>	Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	2,413,404
<b>4</b>	Add lines 1, 2, and 3 . . . . .	<b>4</b>	-16,799,898
<b>5</b>	Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	417,568
<b>6</b>	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	<b>6</b>	-17,217,466

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
<b>1a</b>	See Additional Data Table			
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
<b>a</b>	See Additional Data Table			
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		
<b>a</b>	See Additional Data Table			
<b>b</b>				
<b>c</b>				
<b>d</b>				
<b>e</b>				
<b>2</b>	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	<b>2</b>	-90,611
<b>3</b>	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8		}	<b>3</b>

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?  Yes  No  
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year, see page 18 of the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2009			
2008			
2007			
2006			
2005			
<b>2</b>	<b>Total</b> of line 1, column (d).		
<b>3</b>	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years		
<b>4</b>	Enter the net value of noncharitable-use assets for 2010 from Part X, line 5.		
<b>5</b>	Multiply line 4 by line 3.		
<b>6</b>	Enter 1% of net investment income (1% of Part I, line 27b).		
<b>7</b>	Add lines 5 and 6.		
<b>8</b>	Enter qualifying distributions from Part XII, line 4.		

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

Table with 11 rows for excise tax calculations. Includes sub-rows 6a-6d for credits and payments. Values include 0, N/A, and 0.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Includes Yes/No columns. Questions cover political activities, tax returns, and substantial contributors.

**Part VII-A Statements Regarding Activities (continued)**

<b>11</b> 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).	<b>11</b>		<b>No</b>
<b>12</b> Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	<b>12</b>		<b>No</b>
<b>13</b> Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>N/A</b>	<b>13</b>	<b>Yes</b>	
<b>14</b> The books are in care of <b>JOHN SAHN</b> Telephone no <b>(309) 685-6580</b> Located at <b>2724 W RESERVOIR BLVD PEORIA IL</b> ZIP+4 <b>61615</b>			
<b>15</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year.	<b>15</b>		<input type="checkbox"/>
<b>16</b> At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	<b>16</b>		<b>No</b>

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.			Yes	No
<b>1a</b> During the year did the foundation (either directly or indirectly)				
<b>(1)</b> Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>(2)</b> Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>(3)</b> Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
<b>(4)</b> Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
<b>(5)</b> Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>(6)</b> Agree to pay money or property to a government official? ( <b>Exception.</b> 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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>b</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)? Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	<b>1b</b>			<b>No</b>
<b>c</b> 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?	<b>1c</b>			<b>No</b>
<b>2</b> 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))				
<b>a</b> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>20__</b> , <b>20__</b> , <b>20__</b> , <b>20__</b>				
<b>b</b> 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).	<b>2b</b>			
<b>c</b> If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here <b>20__</b> , <b>20__</b> , <b>20__</b> , <b>20__</b>				
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>b</b> If "Yes," did it have excess business holdings in 2010 as a result of <b>(1)</b> 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 if the foundation had excess business holdings in 2010.</i> )	<b>3b</b>			
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>			<b>No</b>
<b>b</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?	<b>4b</b>			<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

**5a** During the year did the foundation pay or incur any amount to

**(1)** Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

**(2)** Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?  Yes  No

**(3)** Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

**(4)** Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions).  Yes  No

**(5)** Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  Yes  No

**b** If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 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.  **5b**

**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  Yes  No  
If "Yes," attach the statement required by Regulations section 53.4945–5(d).

**6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  Yes  No

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  Yes  No  
If "Yes" to 6b, file Form 8870. **6b** **No**

**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?  Yes  No **7b**

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).**

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				

**2 Compensation of five highest-paid employees (other than those included on line 1—see 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	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
CHERYL DEYOUNG 208 W SOUTH ST BARTONVILLE, IL 61604	ASST DIR NURSING 40 00	64,290	13,324	0
PHYLLIS MCCABE 8618 S COATS RD GLASFORD, IL 61533	DIR OF NURSING 40 00	72,594	535	0
MALINDA KELLER 2801 N PEORIA PEORIA, IL 61603	DIR OF BUILDING SER 40 00	59,125	13,859	0
<b>Total</b> number of other employees paid over \$50,000.				0

**Part VIII 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. . . . . **0**

**Part IX-A 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 beneficiaries served, conferences convened, research papers produced, etc	Expenses
<b>1</b> DURING THE COURSE OF THE YEAR, THE FOUNDATION PROVIDED A HOME FOR THE AGED THE AVERAGE NUMBER OF RESIDENTS DURING THE YEAR WAS 200	2,564,073
<b>2</b>	
<b>3</b>	
<b>4</b>	

**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
<b>1</b> NONE	0
<b>2</b>	
<b>3</b> All other program-related investments See page 24 of the instructions	

**Total.** Add lines 1 through 3. . . . . **0**

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	231,396
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	435,078
<b>c</b>	Fair market value of all other assets (see page 24 of the instructions). . . . .	<b>1c</b>	19,069,595
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	19,736,069
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	19,736,069
<b>4</b>	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25 of the instructions). . . . .	<b>4</b>	296,041
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	<b>5</b>	19,440,028
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	972,001

**Part XI Distributable Amount** (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	
<b>2a</b>	Tax on investment income for 2010 from Part VI, line 5. . . . .	<b>2a</b>	
<b>b</b>	Income tax for 2010 (This does not include the tax from Part VI). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	
<b>3</b>	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	<b>3</b>	
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	
<b>6</b>	Deduction from distributable amount (see page 25 of the instructions). . . . .	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	<b>7</b>	

**Part XII Qualifying Distributions** (see page 25 of the instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
<b>a</b>	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	<b>1a</b>	2,564,073
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	<b>2</b>	639,664
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	3,203,737
<b>5</b>	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). . . . .	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	3,203,737

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

**Part XIII Undistributed Income** (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
<b>1</b> Distributable amount for 2010 from Part XI, line 7				
<b>2</b> Undistributed income, if any, as of the end of 2010				
<b>a</b> Enter amount for 2009 only. . . . .				
<b>b</b> Total for prior years 20___, 20___, 20___				
<b>3</b> Excess distributions carryover, if any, to 2010				
<b>a</b> From 2005. . . . .				
<b>b</b> From 2006. . . . .				
<b>c</b> From 2007. . . . .				
<b>d</b> From 2008. . . . .				
<b>e</b> From 2009. . . . .				
<b>f</b> <b>Total</b> of lines 3a through e. . . . .				
<b>4</b> Qualifying distributions for 2010 from Part XII, line 4 ▶ \$ _____				
<b>a</b> Applied to 2009, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required—see page 26 of the instructions)				
<b>c</b> Treated as distributions out of corpus (Election required—see page 26 of the instructions). . . . .				
<b>d</b> Applied to 2010 distributable amount. . . . .				
<b>e</b> Remaining amount distributed out of corpus				
<b>5</b> Excess distributions carryover applied to 2010 <i>(If an amount appears in column (d), the same amount must be shown in column (a).)</i>				
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5				
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b. . . . .				
<b>c</b> 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. . . . .				
<b>d</b> Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions. . . . .				
<b>e</b> Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions. . . . .				
<b>f</b> Undistributed income for 2010 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2011. . . . .				
<b>7</b> 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). . . . .				
<b>8</b> Excess distributions carryover from 2005 not applied on line 5 or line 7 (see page 27 of the instructions). . . . .				
<b>9</b> <b>Excess distributions carryover to 2011.</b> Subtract lines 7 and 8 from line 6a. . . . .				
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2006. . . . .				
<b>b</b> Excess from 2007. . . . .				
<b>c</b> Excess from 2008. . . . .				
<b>d</b> Excess from 2009. . . . .				
<b>e</b> Excess from 2010. . . . .				

**Part XIV Private Operating Foundations** (see page 27 of the instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling. . . . .

**b** Check box to indicate whether the organization is a private operating foundation described in section  4942(j)(3) or  4942(j)(5)

	Tax year	Prior 3 years			<b>(e) Total</b>
	<b>(a) 2010</b>	<b>(b) 2009</b>	<b>(c) 2008</b>	<b>(d) 2007</b>	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .	0				0
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .	3,203,737	3,361,330	3,222,059	2,729,380	12,516,506
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .	0	0	0	0	0
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c . . . . .	3,203,737	3,361,330	3,222,059	2,729,380	12,516,506
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .	648,001	557,445	507,825	468,387	2,181,658
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see page 27 of the instructions.)**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

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**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

---

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

---

**a** The name, address, and telephone number of the person to whom applications should be addressed

---

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

---

**c** Any submission deadlines

---

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

**Part XV** **Supplementary Information** (continued)

**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
<b>Total</b> . . . . .				▶ <b>3a</b> 0
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .				▶ <b>3b</b> 0





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

**Schedule of Contributors**

OMB No 1545-0047

▶ Attach to Form 990, 990-EZ, or 990-PF.

**2010**

Department of the Treasury  
Internal Revenue Service

**Name of organization**  
JOHN C PROCTOR ENDOWMENT

**Employer identification number**  
37-0662595

**Organization type** (check one)

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule—**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33<sup>1</sup>/<sub>3</sub>% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990, or 990-EZ, that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. . . . ▶ \$ \_\_\_\_\_

**Caution.** An Organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

**Name of organization**  
JOHN C PROCTOR ENDOWMENT

**Employer identification number**

37-0662595

**Part I** Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	DOROTHY BLACKBURN BLACKBURN FOUNDAT 2724 W RESERVOIR BLVD  PEORIA, IL 61615	\$ 8,392	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
2	ESTATE OF MARION BOHNER 2724 W RESERVOIR BLVD  PEORIA, IL 61615	\$ 20,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
3	MERNA PATTERSON 2724 W RESERVOIR BLVD  PEORIA, IL 61615	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
—		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
—		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
—		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )

**Name of organization**  
JOHN C PROCTOR ENDOWMENT

**Employer identification number**

37-0662595

**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
—	_____ _____ _____	\$ _____	_____
—	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	_____ _____ _____	\$ _____	_____
—	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	_____ _____ _____	\$ _____	_____
—	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	_____ _____ _____	\$ _____	_____
—	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	_____ _____ _____	\$ _____	_____
—	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—	_____ _____ _____	\$ _____	_____

<b>Name of organization</b> JOHN C PROCTOR ENDOWMENT	<b>Employer identification number</b> 37-0662595
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**Part III** *Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year.* (Complete columns (a) through (e) and the following line entry.)  
For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ \$

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____		_____ _____ _____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____		_____ _____ _____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____		_____ _____ _____	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
—	_____ _____ _____	_____ _____ _____	_____ _____ _____
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
_____ _____		_____ _____ _____	

## Additional Data

**Software ID:**

**Software Version:**

**EIN:** 37-0662595

**Name:** JOHN C PROCTOR ENDOWMENT

### Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

	<b>(a)</b> List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	<b>(b)</b> How acquired P—Purchase D—Donation	<b>(c)</b> Date acquired (mo , day, yr )	<b>(d)</b> Date sold (mo , day, yr )
A	ROSENAK - 1815 LAMONT, PEORIA	P	2009-12-22	2010-05-20
B	HARKLESS - 47 FORESTVIEW, MORTON	P	2008-11-20	2010-07-19
C	KEHL-SUN LIFE OF CANADA	P	2010-08-19	2010-09-07
D	HASSELBACHER - 2707 WAR MEMORIAL	P	2009-04-08	2011-02-18
E	NOTT - 2417 WRICHWOODS	P	2010-09-17	2010-11-02
F	ZIERKE - 3004 N WESTERN, PEORIA	P	2009-12-17	2010-03-04

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h**

	<b>(e)</b> Gross sales price	<b>(f)</b> Depreciation allowed (or allowable)	<b>(g)</b> Cost or other basis plus expense of sale	<b>(h)</b> Gain or (loss) (e) plus (f) minus (g)
A	113,090		125,464	-12,374
B	176,395		221,297	-44,902
C	21,520		20,993	527
D	116,367		150,738	-34,371
E	71,546		70,770	776
F			267	-267

**Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l**

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69		<b>(l)</b> Gains (Col (h) gain minus col (k), but not less than -0-) <b>or</b> Losses (from col (h))	
<b>(i)</b> F M V as of 12/31/69		<b>(j)</b> Adjusted basis as of 12/31/69	<b>(k)</b> Excess of col (i) over col (j), if any
A			-12,374
B			-44,902
C			527
D			-34,371
E			776
F			-267

**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

<b>(a)</b> Name and address	<b>(b)</b> Title, and average hours per week devoted to position	<b>(c)</b> Compensation <b>(If not paid, enter -0-)</b>	<b>(d)</b> Contributions to employee benefit plans and deferred compensation	<b>(e)</b> Expense account, other allowances
HARRY C STONE MD 8913 N GALENA RD PEORIA,IL 616159744	CHAIRMAN 1 00	0	0	0
DAVID HIGGS 1200 W WOODSIDE DR DUNLAP,IL 61525	TRUSTEE 1 00	0	0	0
ARLYN RUBASH 2908 W BROOKSIDE DR PEORIA,IL 61615	TRUSTEE 1 00	0	0	0
JOHN B WAHLFELD 116 E COVENTRY LN PEORIA,IL 61614	TRUSTEE 1 00	0	0	0
ANDREW P STONE C/O MCDERMOTT WILL EMERY LLP 227 W MONROE CHICAGO,IL 606065906	TRUSTEE 1 00	0	0	0
SARA K STONE 8913 N GALENA RD PEORIA,IL 616159744	TRUSTEE 1 00	0	0	0
JOHN F GILLIGAN 634 NORTHERN OAKS DR GROVELAND,IL 61535	TRUSTEE 1 00	0	0	0
JOHN SAHN 4943 N GRANDVIEW DR PEORIA HEIGHTS,IL 61616	PRESIDENT/SECRETARY/ASST TREASURY 40 00	157,643	535	0
MIKE TOMLIN 20 TECUMSEH CT SPARLAND,IL 61565	ASST SECRETARY/TREAS 40 00	75,389	13,859	0

## TY 2010 Accounting Fees Schedule

**Name:** JOHN C PROCTOR ENDOWMENT

**EIN:** 37-0662595

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING	30,234	3,268	20,729	9,505

# TY 2010 General Explanation Attachment

**Name:** JOHN C PROCTOR ENDOWMENT

**EIN:** 37-0662595

Identifier	Return Reference	Explanation
STATEMENT REGARDING SELF DEALING	FORM 990-PF, PART VII-B, LINE 1	COMMERCE BANCSHARES, WHICH MAY BE A DISQUALIFIED PERSON, PROVIDES ENDOWMENT, THROUGH ITS WHOLLY-OWNED SUBSIDIARY COMMERCE BANK, WITH CHECKING AND SAVINGS ACCOUNT SERVICES SUCH SERVICES ARE BELIEVED NOT TO BE ACTS OF SELF-DEALING SINCE THEY ARE BELIEVED TO BE GENERAL BANK FUNCTIONS WITHIN THE MEANING OF REGULATION 53 4941(D)-2 (C)(4) THE ENDOWMENT COMPENSATES ITS SECRETARY FOR THE PERFORMANCE OF PERSONAL SERVICES SUCH PAYMENT IS NOT AN ACT OF SELF-DEALING UNDER CODE SECTION 4941(D)(2)(E), SINCE THE SERVICES ARE REASONABLE AND NECESSARY TO THE CARRYING OUT OF THE ENDOWMENT'S EXEMPT PURPOSE AND THE COMPENSATION IS NOT EXCESSIVE
STATEMENT REGARDING STATUS AS AN OPERATING FOUNDATION	FORM 990-PF, PART XIV	UNDER THE PROVISION OF SECTION 4942(J)(5) OF THE INTERNAL REVENUE CODE, JOHN C PROCTOR ENDOWMENT QUALIFIES AS A PRIVATE OPERATING FOUNDATION WITH THE ENACTMENT OF SECTION 4942(J)(5) BY THE REVENUE ACT OF 1978, LONG-TERM CARE FACILITIES SUCH AS JOHN C PROCTOR ENDOWMENT ARE NO LONGER REQUIRED TO MEET THE 85% DISTRIBUTION TEST JOHN C PROCTOR ENDOWMENT MEETS THE "ENDOWMENT TEST" REQUIREMENT FOR EXEMPTION, SINCE THE ORGANIZATION DISTRIBUTED AT LEAST 2/3 OF ITS MINIMUM INVESTMENT RETURN
STATEMENT REGARDING BUSINESS ACTIVITIES	FORM 990-PF, PART XVI-B	THE JOHN C PROCTOR ENDOWMENT WAS ESTABLISHED SO ADEQUATE CARE COULD BE PROVIDED FOR THE AGED TO ACCOMPLISH THESE OBJECTIVES, THOSE INDIVIDUALS WHO ARE RESIDENTS OF PROCTOR HOME MUST HELP PROVIDE SOME CAPITAL TO COVER EXPENDITURES THE GROSS RECEIPTS FROM BUSINESS ACTIVITIES, INCOME FROM PROGRAM SERVICES AND MISCELLANEOUS INCOME REPRESENT FUNDS PROVIDED BY RESIDENTS AND THUS CONTRIBUTE IMPORTANTLY TO THE ENDOWMENT'S EXEMPT PURPOSES

**TY 2010 Investments - Land Schedule**

**Name:** JOHN C PROCTOR ENDOWMENT

**EIN:** 37-0662595

Category/ Item	Cost/Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
REAL ESTATE	415,512	0	415,512	20,380,390

**TY 2010 Investments - Other Schedule**

**Name:** JOHN C PROCTOR ENDOWMENT

**EIN:** 37-0662595

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
OTHER INVESTMENTS	AT COST	184,126	184,126

**TY 2010 Land, Etc. Schedule**

**Name:** JOHN C PROCTOR ENDOWMENT

**EIN:** 37-0662595

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
BUILDINGS AND FURNISHINGS	2,086,915	1,578,325	508,590	508,590

**TY 2010 Legal Fees Schedule**

**Name:** JOHN C PROCTOR ENDOWMENT

**EIN:** 37-0662595

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
LEGAL	10,859	1,174	7,445	3,414

## TY 2010 Other Assets Schedule

**Name:** JOHN C PROCTOR ENDOWMENT

**EIN:** 37-0662595

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
INVENTORY OF FARM CROPS	41,945	9,658	9,658
INVESTMENT IN INSURANCE GROUP	199,890	207,914	207,914
FOOD INVENTORY	22,000	22,000	22,000

**TY 2010 Other Decreases Schedule**

**Name:** JOHN C PROCTOR ENDOWMENT

**EIN:** 37-0662595

Description	Amount
TRANSFER TO RELATED ORGANIZATION	417,568

# TY 2010 Other Expenses Schedule

**Name:** JOHN C PROCTOR ENDOWMENT

**EIN:** 37-0662595

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOOD	524,934	0	339,895	185,039
DRUGS & INFIRMARY SUPPLIES	104,149	0	67,436	36,712
MEDICAL AND DENTAL	28,877	0	18,698	10,179
SUPPLIES	163,610	0	105,938	57,673
INSURANCE	116,657	0	75,535	41,121
HOSPITAL AND AMBULANCE	1,389	0	899	490
CONSULTANT FEES	109,315	0	70,781	38,533
RESIDENT ACTIVITIES	27,797	0	17,999	9,799
MISCELLANEOUS	43,658	0	28,267	15,390
TELEPHONE/CABLE	24,248	0	15,701	8,548
REPAIRS AND MAINTENANCE	326,682	337	211,645	115,036
AUTO EXPENSE	12,345	0	7,994	4,352
DUES & SUBSCRIPTIONS	10,352	0	6,703	3,649
TRAINING	13,627	0	8,824	4,804
DISPOSAL SERVICES	19,173	0	12,414	6,758

**TY 2010 Other Income Schedule**

**Name:** JOHN C PROCTOR ENDOWMENT

**EIN:** 37-0662595

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
GROSS SALES	4,766,375		4,766,375
ROYALTIES	58	58	58
MISCELLANEOUS INCOME	150,112		150,112

**TY 2010 Other Increases Schedule**

**Name:** JOHN C PROCTOR ENDOWMENT

**EIN:** 37-0662595

Description	Amount
TRANSFER FROM RELATED ORGANIZATION	2,413,404

**TY 2010 Taxes Schedule**

**Name:** JOHN C PROCTOR ENDOWMENT

**EIN:** 37-0662595

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
NURSING HOME TAXES	32,213	0	20,858	11,355