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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

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

OMB No 1545-0052

2010

7/01 6/30 . 2010, and ending 2011 For calendar year 2010, or tax year beginning Initial Return of a former public charity G Check all that apply Initial return Final return X Address change Amended return Name change Employer identification number THE HILB FAMILY FOUNDATION 36-4417758 C/O JOSEPH PEDOTA Telephone number (see the instructions) 1315 W. 22ND STREET, SUITE 305 (630) 990-0355 OAK BROOK, IL 60523 If exemption application is pending, check here 1 Foreign organizations, check here Check type of organization X Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated Fair market value of all assets at end of year Accounting method | X | Cash under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination (Part I, column (d) must be on cash basis) 1,296,061 under section 507(b)(1)(B), check here Part I Analysis of Revenue and (b) Net investment (c) Adjusted net (d) Disbursements (a) Revenue and Expenses (The total of amounts in for charitable expenses per books income income columns (b), (c), and (d) may not necessarily equal the amounts in column (a) purposes (cash basis only) (see the instructions) ) Contributions, gifts, grants, etc. received (att sch) <u>108,</u> 790 If the foundn is not req to att Sch B Interest on savings and temporary 8,781 8,781 N/A cash investments Dividends and interest from securities 130 42,130 5a Gross rents **b** Net rental income or (loss) -106 6a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 61,685 0 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10 a Gross sales less returns and **b** Less Cost of goods sold c Gross profit/(loss) (att sch) 11 Other income (attach schedule) Total. Add lines 1 through 11 159.595 50,911 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) 6,400.SEE ST 1 3,200. 3,200 **b** Accounting fees (attach sch) SEE ST 2  $\overline{7,287}$ . 7,287. c Other prof fees (attach sch) 13 Taxes (attach scheduleX see instr.) SEE STM 3 13. Depreciation (attach sch) and depletion Occupancy 21 Travel, conferences, and meetings 4,471 2,236 Printing and publications 22 Other expenses (attach schedule) SEE STATEMENT 4 21 8 13. Total operating and administrative 18,192 12,744 5,448. expenses. Add lines 13 through 23 Contributions, gifts, grants paid PART XV 76,000 76,000. Total expenses and disbursements. 94.192 12,744 81,448. Add lines 24 and 25 Subtract line 26 from line 12: a Excess of revenue over expenses 65,403 and disbursements 38,167 b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0)



Dart	11 8	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End	of year
1.41.0	<u> </u>	(See instructions )	(a) Book Value	<b>(b)</b> Book Value	(c) Fair Market Value
ļ		Cash — non-interest-bearing			<u> </u>
	2	Savings and temporary cash investments	178,640.	62,275	. 62,275.
1	3	Accounts receivable	· · · · · · · · · · · · · · · · ·	Tau wasana ka samara ka wa sa	
		Less allowance for doubtful accounts ▶		·	<del></del>
	4	Pledges receivable			1
	_	Less allowance for doubtful accounts			<del> </del>
ì	5	Grants receivable			<del></del>
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)			
	7	Other notes and loans receivable (attach sch)	- 	عديد منصدد أدمدديد	التقشيد للشادات الأحادات
ŝ		Less: allowance for doubtful accounts ▶			
ASSET		Inventories for sale or use			<del> </del>
Ţ		Prepaid expenses and deferred charges			<del></del>
S		Investments – U.S and state government obligations (attach schedule)			
		Investments — corporate stock (attach schedule) STATEMENT 5	713,906.	945,931	
		: Investments — corporate bonds (attach schedule) STATEMENT 6	169,863.	119,606	. 125,809.
	11	Investments – land, buildings, and equipment, basis			المناسطات بالمستحد الماسك
	l	Less: accumulated depreciation (attach schedule)			
	12	Investments - mortgage loans			
	13	Investments — other (attach schedule)			<u></u>
	14	Land, buildings, and equipment basis		د ودر د همید میدود در م <b>دد در</b> د ودر د همید میدود در م <b>دد در</b>	المستقد المستقدمات
		Less: accumulated depreciation (attach schedule)		· · · · · · · · · · · · · · · · · · ·	
		Other assets (describe			<u> </u>
	16	Total assets (to be completed by all filers — see instructions. Also, see page 1, item l)	1,062,409.	1,127,812	. 1,296,061.
Ļ	17	Accounts payable and accrued expenses			r -ty to kilot ta
Å	18	Grants payable			
A B	19	Deferred revenue			
Ĺ	20	Loans from officers, directors, trustees, & other disqualified persons			
ļ	21	Mortgages and other notes payable (attach schedule)			
<u>i</u>	22	Other liabilities (describe			* ,
E S	23	Total liabilities (add lines 17 through 22)	o.	0	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
N F	24	Unrestricted	1,062,409.	1,127,812	
EU	25	Temporarily restricted	ļ	<del></del>	
A D	26	Permanently restricted			
A B A L A	Ì	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			7.77 s.,
EL	27	Capital stock, trust principal, or current funds	 		
SNC	28	Paid-in or capital surplus, or land, building, and equipment fund		·	
OE	29	Retained earnings, accumulated income, endowment, or other funds			
RS	30	Total net assets or fund balances (see the instructions)	1,062,409.	1,127,812	
	31	Total liabilities and net assets/fund balances (see the instructions)	1,062,409.	1,127,812	
Par	t III	Analysis of Changes in Net Assets or Fund Balance			<del></del>
1	Tota	I net assets or fund balances at beginning of year — Part II, colu	umn (a), line 30 (must a	gree with	
_	end-	of-year figure reported on prior year's return)	•	1	<del></del>
2		er amount from Part I, line 27a		2	
3		increases not included in line 2 (itemize).		3	<del></del>
4		lines 1, 2, and 3		4	<del></del>
5		eases not included in line 2 (itemize).  If net assets or fund balances at end of year (line 4 minus line 5).	)	ino 30	<del></del>
6_	iota	it tiet assets of Turiu balances at erio of year (line 4 minus line 5	) — Mart II, column (b),	line 30 <b>6</b>	1,127,812.

Part IV   Capital Gains ar	nd Losses for Tax on Investmer	it Income				
(a) List and desc	cribe the kind(s) of property sold (e.g., nouse, or common stock, 200 shares Mi	eal estate, LC Company)	(b) How acq P — Purch D — Dona	ase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a 250 T J X COS INC			P		4/21/10	12/13/10
<u><b>b</b> 50,000 BOEING CAR</u>		11/15/01	3/01/11			
c CAPITAL GAIN DIV	IDENDS					<u> </u>
	<del></del>		ļ			
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa			(h) Gain or (e) plus (f) m	
a 11,07	72.	1	1,534.			-462.
<b>b</b> 50,00			0,257.	-		-257.
С						
d						
<u>e</u>		<u></u>				
	howing gain in column (h) and owned b				(I) Gains (Colu	
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a		g tha	ain minus column (k in -0-) <b>or</b> Losses (fr	om column (h))
	<del></del>		<del></del>			-462.
a	·					-257.
c						613.
d						
е						
2 Capital gain net income or	(net capital loss) — If gain, also	o enter in Part I, line 7 iter -0- in Part I, line 7	-	2		-106.
3 Net short-term capital gain	or (loss) as defined in sections 1222(5)	) and (6)	ĺ			
If gain, also enter in Part I in Part I, line 8	, line 8, column (c) (see the instructions	) If (loss), enter -0-	- {	3		-462.
	der Section 4940(e) for Reduce	d Tax on Net Investm	ent Inco	me	<u> </u>	<u></u>
(For optional use by domestic pr	ivate foundations subject to the section	4940(a) tax on net investm	ent income	)		
If section 4940(d)(2) applies, lea Was the foundation liable for the If 'Yes,' the foundation does not	e section 4942 tax on the distributable are qualify under section 4940(e). Do not co	mount of any year in the bar	se period?		Yes	X No
If section 4940(d)(2) applies, lead Was the foundation liable for the If 'Yes,' the foundation does not 1 Enter the appropriate amo	exection 4942 tax on the distributable as qualify under section 4940(e). Do not count in each column for each year, see the	mount of any year in the bar	se period?			X No
If section 4940(d)(2) applies, lea Was the foundation liable for the If 'Yes,' the foundation does not	e section 4942 tax on the distributable are qualify under section 4940(e). Do not co	mount of any year in the bar	se period?	ies_	Yes  (d)  Distribution  umn (b) divided	ratio
Was the foundation liable for the If 'Yes,' the foundation does not  1 Enter the appropriate amo  (a)  Base period years Calendar year (or tax year	e section 4942 tax on the distributable are qualify under section 4940(e). Do not count in each column for each year, see the holist of the column for each year, see the holist of the column for each year.	mount of any year in the bar omplete this part ne instructions before makin (c) Net value of noncharitable-use as	ng any entrosets	ies_	(d) Distribution	n ratio by column (c)) 0.046821
Was the foundation liable for the If 'Yes,' the foundation does not  1 Enter the appropriate amo  (a)  Base period years Calendar year (or tax year beginning in)	e section 4942 tax on the distributable are qualify under section 4940(e). Do not count in each column for each year, see to (b).  Adjusted qualifying distributions.  52,493. 90,036.	mount of any year in the bar omplete this part ne instructions before makin (c) Net value of noncharitable-use as	se period?  ng any entr  sets  1,144. 1,386.	ies_	(d) Distribution	n ratio by column (c)) 0.046821 0.095642
Was the foundation liable for the If 'Yes,' the foundation does not  1 Enter the appropriate amo  Calendar year (or tax year beginning in)  2009  2008  2007	e section 4942 tax on the distributable are qualify under section 4940(e). Do not count in each column for each year, see to the distributions (b)  Adjusted qualifying distributions 52,493. 90,036. 33,911.	mount of any year in the bar omplete this part ne instructions before makin (c) Net value of noncharitable-use as 1,12	se period?  ng any entr  sets  1,144. 1,386. 4,366.	ies_	(d) Distribution	0.046821 0.095642 0.035909
Was the foundation liable for the If 'Yes,' the foundation does not  1 Enter the appropriate amo  (a)  Base period years Calendar year (or tax year beginning in)  2009  2008  2007  2006	section 4942 tax on the distributable at qualify under section 4940(e). Do not count in each column for each year, see to (b)  Adjusted qualifying distributions  52,493. 90,036. 33,911. 39,329.	mount of any year in the bar omplete this part ne instructions before making (c) Net value of noncharitable-use as 1,12 94 94	se period?  ng any entr  sets  1,144.  1,386.  4,366.  5,288.	ies_	(d) Distribution	0.046821 0.095642 0.035909 0.040326
Was the foundation liable for the If 'Yes,' the foundation does not  1 Enter the appropriate amo  Calendar year (or tax year beginning in)  2009  2008  2007	e section 4942 tax on the distributable are qualify under section 4940(e). Do not count in each column for each year, see to the distributions (b)  Adjusted qualifying distributions 52,493. 90,036. 33,911.	mount of any year in the bar omplete this part ne instructions before making (c) Net value of noncharitable-use as 1,12 94 94	se period?  ng any entr  sets  1,144. 1,386. 4,366.	ies_	(d) Distribution	0.046821 0.095642 0.035909
Was the foundation liable for the If 'Yes,' the foundation does not  1 Enter the appropriate amo  Base period years Calendar year (or tax year beginning in)  2009  2008  2007  2006	section 4942 tax on the distributable at qualify under section 4940(e). Do not count in each column for each year, see to (b)  Adjusted qualifying distributions  52,493. 90,036. 33,911. 39,329.	mount of any year in the bar omplete this part ne instructions before making (c) Net value of noncharitable-use as 1,12 94 94	se period?  ng any entr  sets  1,144.  1,386.  4,366.  5,288.	ies_	(d) Distribution	0.046821 0.095642 0.035909 0.040326
Was the foundation liable for the If 'Yes,' the foundation does not  1 Enter the appropriate amo  Base period years Calendar year (or tax year beginning in)  2009  2008  2007  2006  2005  2 Total of line 1, column (d)  3 Average distribution ratio fermine description in the second	section 4942 tax on the distributable at qualify under section 4940(e). Do not count in each column for each year, see to (b)  Adjusted qualifying distributions  52,493. 90,036. 33,911. 39,329.	nount of any year in the bar omplete this part ne instructions before making (c) Net value of noncharitable-use as 1,12 94 94 97 73	se period?  ng any entr  sets  1,144. 1,386. 4,366. 5,288.	(cole	(d) Distribution	0.046821 0.095642 0.035909 0.040326 0.029142
Was the foundation liable for the If 'Yes,' the foundation does not  1 Enter the appropriate amo  (a)  Base period years Calendar year (or tax year beginning in)  2009  2008  2007  2006  2005  2 Total of line 1, column (d)  3 Average distribution ratio finumber of years the	section 4942 tax on the distributable are qualify under section 4940(e). Do not count in each column for each year, see to (b)  Adjusted qualifying distributions  52,493. 90,036. 33,911. 39,329. 21,560.	nount of any year in the bar omplete this part  (c)  Net value of noncharitable-use as  1,12  94  97  73  otal on line 2 by 5, or by the	se period?  ng any entr  sets  1,144. 1,386. 4,366. 5,288.	(cole	(d) Distribution umn (b) divided	0.046821 0.095642 0.035909 0.040326 0.029142
Was the foundation liable for the If 'Yes,' the foundation does not  1 Enter the appropriate amo  (a)  Base period years Calendar year (or tax year beginning in)  2009  2008  2007  2006  2005  2 Total of line 1, column (d)  3 Average distribution ratio finumber of years the	section 4942 tax on the distributable at qualify under section 4940(e). Do not count in each column for each year, see to (b)  Adjusted qualifying distributions  52,493. 90,036. 33,911. 39,329. 21,560.	nount of any year in the bar omplete this part  (c)  Net value of noncharitable-use as  1,12  94  97  73  otal on line 2 by 5, or by the	se period?  ng any entr  sets  1,144. 1,386. 4,366. 5,288.	(cole	(d) Distribution umn (b) divided	0.046821 0.095642 0.035909 0.040326 0.029142 0.247840 0.049568
Was the foundation liable for the If 'Yes,' the foundation does not 1 Enter the appropriate amo  Base period years Calendar year (or tax year beginning in)  2009 2008 2007 2006 2005  Total of line 1, column (d)  Average distribution ratio f number of years the found  Enter the net value of none  Multiply line 4 by line 3	section 4942 tax on the distributable at qualify under section 4940(e). Do not count in each column for each year, see to (b)  Adjusted qualifying distributions  52,493. 90,036. 33,911. 39,329. 21,560.	nount of any year in the bar omplete this part  (c)  Net value of noncharitable-use as  1,12  94  97  73  otal on line 2 by 5, or by the	se period?  ng any entr  sets  1,144. 1,386. 4,366. 5,288.	(cole 2 3 4	(d) Distribution umn (b) divided	0.046821 0.095642 0.035909 0.040326 0.029142 0.247840 0.049568
Was the foundation liable for the If 'Yes,' the foundation does not 1 Enter the appropriate amo  Base period years Calendar year (or tax year beginning in)  2009 2008 2007 2006 2005  Total of line 1, column (d)  Average distribution ratio f number of years the found  Enter the net value of none  Multiply line 4 by line 3	section 4942 tax on the distributable are qualify under section 4940(e). Do not count in each column for each year, see to (b)  Adjusted qualifying distributions  52,493. 90,036. 33,911. 39,329. 21,560.  For the 5-year base period — divide the tration has been in existence if less than charitable-use assets for 2010 from Para	nount of any year in the bar omplete this part  (c)  Net value of noncharitable-use as  1,12  94  97  73  otal on line 2 by 5, or by the	se period?  ng any entr  sets  1,144. 1,386. 4,366. 5,288.	2 3 4	(d) Distribution umn (b) divided	0.046821 0.095642 0.035909 0.040326 0.029142 0.247840 0.049568 1,249,118. 61,916.
Was the foundation liable for the If 'Yes,' the foundation does not  1 Enter the appropriate amo  (a)  Base period years Calendar year (or tax year beginning in)  2009  2008  2007  2006  2005  2 Total of line 1, column (d)  3 Average distribution ratio finumber of years the found  4 Enter the net value of none  5 Multiply line 4 by line 3  6 Enter 1% of net investment	section 4942 tax on the distributable as qualify under section 4940(e). Do not count in each column for each year, see to (b).  Adjusted qualifying distributions.  52, 493. 90, 036. 33, 911. 39, 329. 21, 560.  for the 5-year base period — divide the tration has been in existence if less than charitable-use assets for 2010 from Parameter in the company of the compa	nount of any year in the bar omplete this part  (c)  Net value of noncharitable-use as  1,12  94  97  73  otal on line 2 by 5, or by the	se period?  ng any entr  sets  1,144. 1,386. 4,366. 5,288.	2 3 4 5	(d) Distribution umn (b) divided	0.046821 0.095642 0.035909 0.040326 0.029142 0.247840 0.049568 1,249,118. 61,916.

Form 990-PF (2010) THE HILB FAMILY FOUNDATION 36-44177			Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the ins	truction	ns)	
1 a Exempt operating foundations described in section 4940(d)(2), check here			
Date of ruling or determination letter (attach copy of letter if necessary - see instr.)			
b Domestic foundations that meet the section 4940(e) requirements in Part V,			<u>382.</u>
check here ► X and enter 1% of Part I, line 27b	-		
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)	_		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			
foundations only Others enter -0-)			0.
3 Add lines 1 and 2			382.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			<u>382.</u>
6 Credits/Payments	٠, -	7 F [	
a 2010 estimated tax pmts and 2009 overpayment credited to 2010	-		-
b Exempt foreign organizations — tax withheld at source 6b		- € 	•
c Tax paid with application for extension of time to file (Form 8868)	- 5	,*	-
d Backup withholding erroneously withheld			٠
7 Total credits and payments Add lines 6a through 6d 7			<u>0.</u>
8 Enter any penalty for underpayment of estimated tax. Check here I 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 SEE STATEMENT 7			<u>397.</u>
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11 Enter the amount of line 10 to be: Credited to 2011 estimated tax			
Part VII-A   Statements Regarding Activities		Vec	T.,
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	<u> </u>	Yes	No X
		<del></del>	<del>  ^•</del> -
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	\ \	1 Б	Х
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published	<sub>1</sub>	2.4	-
or distributed by the foundation in connection with the activities		ء تتأثيداً	
c Did the foundation file Form 1120-POL for this year?		1 c	<u> </u>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation ► \$ 0. (2) On foundation managers. ► \$	0.		<u>.</u>
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	∸1.	- , = =	
foundation managers \$ 0.	1.5		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	نا	2	_X
If 'Yes,' attach a detailed description of the activities	5	- 1	
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			ئە ئىرلىد
of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	نــا	3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	<u> </u>	4 a	X
<b>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?	<u> </u>	4b N	I/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	<u>                                     </u>	5	X
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.	-	3	100
<ul> <li>By language in the governing instrument, or</li> </ul>	1		1
<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict</li> </ul>	د ۔		
with the state law remain in the governing instrument?		6 X	ļ
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	<u> </u> -	7 X	<b>↓</b>
8a Enter the states to which the foundation reports or with which it is registered (see the instructions)	-	. F	-
<u>IL</u>	- ],.		1
<b>b</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		Х 8b Х	
	<u> </u>	8Ы Х	<del>  -</del>
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' complete Part'.	)(5) X/V	9	X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names			<del> </del>

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Form **990-PF** (2010)

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Forn	990-PF (2010) THE HILB FAMILY FOUNDATION	36-	-44177!	58	F	Page !
Par	t VII-A   Statements Regarding Activities (Continued)			_		uge
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 instructions)			11		x
	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?			12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption. Website address  N/A	n applica	ation?	13	X	
	The books are in care of DOSEPH PEDOTA  Located at D315 W. 22ND STREET, SUITE 305 OAK BROOK IL  ZIP + 4	605	( <u>630)</u> 23	990	-035	55
13	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> — Check here and enter the amount of tax-exempt interest received or accrued during the year		15	N/A	<u> </u>	N/A
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other abank, securities, or other financial account in a foreign country?	authority	over a	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the reforeign country ▶	ame of t	he		4. 	-
Par	t VII-B   Statements Regarding Activities for Which Form 4720 May Be Required					L
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.				Yes	No
1 a	During the year did the foundation (either directly or indirectly)			•	٠	Ţ
	<ul><li>(1) Engage in the sale or exchange, or leasing of property with a disqualified person?</li><li>(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a</li></ul>	Yes	X No	-	- 4	,,,
	disqualified person?  (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No	,		1111 <u>-</u>
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No	1		- 1
	(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)?	Yes	XNo	-		
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes	X No		31.174	
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 the instruction	ons)?		1ь	Ñ	Lili. A
	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?			1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section $4942(j)(3)$ or $4942(j)(5)$ )				-± - ," ,	:
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010?  If 'Yes,' list the years   20, 20, 20, 20, 20	Yes	X No		· - , ·	ار این این این
	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942 (all years listed, answer 'No' and attach statement — see the instructions)	a)(2) to		2b	N	/A
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years $^{\bullet}$ 20 , 20 , 20 , 20	nere				<u></u>
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	X No	-	1	-, -
b	If 'Yes,' did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approve by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010)	_		3ь	N	'A

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?
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4b

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

Form 990-PF (2010) THE HILB FAMILY FO	UNDATION		36-44	17758 _ Page <b>6</b>
Part VII-B   Statements Regarding Activiti	es for Which Form	1 4720 May Be Req	uired (contınued)	
5a During the year did the foundation pay or incu	-			
(1) Carry on propaganda, or otherwise attempt	t to influence legislatio	n (section 4945(e))?	Yes X	No   /   -   -   -   -   -   -   -
(2) Influence the outcome of any specific publion, directly or indirectly, any voter registra	ic election (see section tion drive?	n 4955), or to carry	Yes X	No E
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes X	No S
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, oi 4940(d)(2)? (see instri	rganization described uctions)	Yes	No
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes X	No
<b>b</b> If any answer is 'Yes' to 5a(1)-(5), did <b>any</b> of the described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regar	qualify under the excep ding disaster assistance	tions	5b N/A
Organizations relying on a current notice rega	rding disaster assistand	ce check here	▶ [	
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	the foundation claim ex sibility for the grant?	emption from the	N/A Yes	No No
If 'Yes,' attach the statement required by Regi		5-5(d)	,	
6a Did the foundation, during the year, receive ar on a personal benefit contract?	ny funds, directly or ind	lirectly, to pay premium:	s ∏Yes ဩ	(No
<b>b</b> Did the foundation, during the year, pay premi	ums, directly or indirec	ctly, on a personal bene	fit contract?	6b X
If 'Yes' to 6b, file Form 8870				7. 1 5 2 5
7a At any time during the tax year, was the found				No   Land
Part VIII. Information About Officers, D				N/A   7b
and Contractors	irectors, rrustees,	roundation manaç	gers, migning Paid	Employees,
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).	
(a) Name and address	(b) Title and average hours per week		(d) Contributions to employee benefit	(e) Expense account, other allowances
(a) Hame and address	devoted to position		plans and deferred compensation	
SEE STATEMENT 8				
		0.	0	. 0.
2 Compensation of five highest-paid employee				
(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
<u>NONE</u>				
				<del> </del>
		<del> </del>		<del> </del>
			:	
Total number of other employees paid over \$50.00	Q TEE 403061	07/02/10		Form <b>990 BE</b> (2010)

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All other program-related investments. See instructions

Total. Add lines 1 through 3

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	instructions.)	5 part. 1 0161	gii 100	
1 Fair marke	t value of assets not used (or held for use) directly in carrying out charitable, etc, purpo onthly fair market value of securities.			1 110 701
	monthly cash balances	1		1,112,721.
<del>-</del>	•	1		155,419.
	t value of all other assets (see instructions) lines 1a, b, and c)	1		1,268,140.
•	claimed for blockage or other factors reported on lines 1a and 1c	<u>'</u>	<del>-</del>	1,200,140.
	ailed explanation)	0.	İ	
•	indebtedness applicable to line 1 assets		ļ	0
•	ne 2 from line 1d	3		0. 1,268,140.
•		<u> </u>	+	1,200,140.
(for greate	ned held for charitable activities Enter 1-1/2% of line 3 ramount, see instructions)	4		19,022.
5 Net value o	of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line	4 5		1,249,118.
	nvestment return. Enter 5% of line 5	6		62,456.
	tributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) privately		g four	ndations
	certain foreign organizations check here ► and do not comple	te this part.)		
	nvestment return from Part X, line 6	_ 1		62,456.
2a Tax on inv	estment income for 2010 from Part VI, line 5	382.	1	
<b>b</b> Income tax	for 2010. (This does not include the tax from Part VI )			
c Add lines 2	2a and 2b	2	<u>c</u>	382.
	le amount before adjustments Subtract line 2c from line 1	3		62,074.
4 Recoveries	of amounts treated as qualifying distributions	4		
5 Add lines 3	3 and 4	5	<u>.</u>	62,074.
<b>6</b> Deduction	from distributable amount (see instructions)	_ 6		
7 Distributat	ple amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7		62,074.
Part XII Qua	alifying Distributions (see Instructions)			
1 Amounts p a Expenses,	aid (including administrative expenses) to accomplish charitable, etc., purposes contributions, gifts, etc — total from Part I, column (d), line 26	ļ	a	81,448.
<b>b</b> Program-re	elated investments – total from Part IX-B	1	b	
2 Amounts p	aid to acquire assets used (or held for use) directly in carrying out charitable, etc, purp	oses. 2		
3 Amounts s	et aside for specific charitable projects that satisfy the			
a Suitability	et aside for specific charitable projects that satisfy the test (prior IRS approval required)	3	а	
<b>b</b> Cash distri	bution test (attach the required schedule)	3	b	
	distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII,			81,448.
5 Foundation Enter 1% of	ns that qualify under section 4940(e) for the reduced rate of tax on net investment incor of Part I, line 27b (see instructions)	ne		382.
6 Adjusted o	qualifying distributions. Subtract line 5 from line 4	6		81,066.
<b>Note.</b> The qua	amount on line 6 will be used in Part V, column (b), in subsequent years when calcula lifies for the section 4940(e) reduction of tax in those years	ting whether the	found	ation
BAA			Fo	orm <b>990-PF</b> (2010)

## Part XIII Undistributed Income (see instructions)

		(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		2 - 2		62,074.
	Undistributed income, if any, as of the end of 2010.  Enter amount for 2009 only			2,627.	22,074.
t	Total for prior years 20 08, 20 07, 20 06	en de servi	0.		
3	Excess distributions carryover, if any, to 2010				
	From 2005			.2. *	
t	From 2006		<u> </u>		
C	From 2007	[1] (1) 5등 - 출범 (2)			
C	From 2008				
	From 2009	ئے کہا کسا سے اقتمامیس			
	<b>Total</b> of lines 3a through e	0.			
4	Qualifying distributions for 2010 from Part				
	XII, line 4 ► \$ 81,448.				
a	Applied to 2009, but not more than line 2a	i i i i i i i i i i i i i i i i i i i		2,627.	5 -12 × 14 -55 - 1 × 1 3",
t	Applied to undistributed income of prior years (Election required – see instructions)		0.		
c	Treated as distributions out of corpus (Election required – see instructions)	0.			
c	Applied to 2010 distributable amount	en el El La Grand		1	62,074.
€	Remaining amount distributed out of corpus	16,747.		1 F. 1, 52 # F2-	32/0/1.
5	Excess distributions carryover applied to 2010	0.	1 A 8 L + 7	- 4	0.
	(If an amount appears in column (d), the same amount must be shown in column (a) )				17等点的第三人称
	same amount must be shown in column (a)				
6	Enter the net total of each column as		제작한 무취계를		
-	indicated below:	manufactural same			3 / 3
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5	16,747.			
ŀ	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.		
c	Subtract line 6c from line 6b Taxable amount — see instructions		0.		
e	Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount — see instructions		A substitute of the substitute	0.	
f	Undistributed income for 2010 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011				0.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)				
	(see instructions)	0.	* ( , ; ; ; ,		
8	Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions)	0.			
9	Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	16,747.	,		
	Analysis of line 9		7 - 7 - 7 - 7 - 7 - 7	, , _	-
	Excess from 2006				
	Excess from 2007				
	Excess from 2008	**			
	Excess from 2009			Service Service Control	
е	Excess from 2010 16,747.	\$ -41 =1 -			

Form 990-PF (2010) THE HILB FAMILY				36-441//58	
Part XIV Private Operating Foundation					N/A
1a If the foundation has received a ruling or c is effective for 2010, enter the date of the	letermination letter ruling	that it is a private	operating foundation	n, and the ruling	
<b>b</b> Check box to indicate whether the foundat		rating foundation of	described in section	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years	***************************************	
income from Part I or the minimum investment return from Part X for	(a) 2010	<b>(b)</b> 2009	(c) 2008	(d) 2007	(e) Total
each year listed					
<b>b</b> 85% of line 2a			<u> </u>		
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities			<u> </u>		
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets			<del>                                     </del>		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed			<u></u>		
c 'Support' alternative test - enter		_	T		
<ol> <li>Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)</li> </ol>					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information	(Complete this	part only if the	organization ha	ıd \$5,000 or mor	e in
assets at any time during th	<del></del>	structions.)	<del> </del>		· · · · · · · · · · · · · · · · · · ·
Information Regarding Foundation Managers at List any managers of the foundation who is close of any tax year (but only if they have SEE STATEMENT 9	nave contributed m	ore than 2% of the than \$5,000) (See	total contributions resection 507(d)(2))	eceived by the found	dation before the
<b>b</b> List any managers of the foundation who a partnership or other entity) of which the NONE	own 10% or more of foundation has a 1	of the stock of a coo 0% or greater inter	rporation (or an equirest	ally large portion of	the ownership of
2 Information Regarding Contribution, Grade Check here X if the foundation only requests for funds. If the foundation make complete items 2a, b, c, and d	nakes contributions	to preselected cha	arıtable organization	s and does not acce	pt unsolicited er conditions,
a The name, address, and telephone number	er of the person to	whom applications	should be addresse	d	
<b>b</b> The form in which applications should be	submitted and info	mation and materi	als they should inclu	de	
c Any submission deadlines					
d Any restrictions or limitations on awards,	such as by geograf	hical areas short	able fields kinds of	institutions or other-	factors
A ATTY TOSETIONOUS OF HITHERITORS OF AWAIDS,	sacii as by yeogial	ancai arcas, chaffi	abie lielus, killus OT	montunions, or other	IACIUIS

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to any foundation manager or Purpose of grant or contribution status of Amount recipient Name and address (home or business) substantial contributor a Paid during the year SEE ATTACHED CONTRIBUTION EXEMPT ALL GRANTS & 76,000. **SCHEDULE** CONTRIBUTIONS WERE MADE TO BENEFIT WORTHY CHARITABLE, RELIGIOUS, CIVIC, HEALTH OR **EDUCATIONAL** INSTITUTIONS BY SCHOLARSHIPS, GRANTS, GIFTS AND DONATIONS. 76,000. **Total** За **b** Approved for future payment **Total** 3ь

#### Part XVI-A Analysis of Income-Producing Activities

ter gross amounts unless otherwise indicated	Unrelate	ed business income	Excluded	by section 512, 513, or 514	(e)
1. Program conuce reverse	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	<b>(d)</b> Amount	Related or exempt function income (see the instructions)
Program service revenue			code		
ab					
		<del></del>			
_ <del></del>	<del>  -</del>				<del></del>
<u> </u>					
e	<del> </del>				
g Fees and contracts from government agencies			<del>                                     </del>		
2 Membership dues and assessments			$\vdash$		
Interest on savings and temporary cash investments			14	8,781.	<del></del>
Dividends and interest from securities			14	42,130.	
Net rental income or (loss) from real estate:	;			1 13 12 1	
a Debt-financed property			1		
<b>b</b> Not debt-financed property	<del></del>				
Net rental income or (loss) from personal property					
Other investment income				·· · · · · · · · · · · · · · · · · · ·	
Gain or (loss) from sales of assets other than inventory			18	-106.	
Net income or (loss) from special events.			1 - 10		
Gross profit or (loss) from sales of inventory				<del></del>	
Other revenue:		- 12 7-12-			eginerite i gide
		<del></del>	<del>                                     </del>	***	
ab	<del>-</del>		+-+	<del></del>	
				<del></del>	
	<del> </del>		┼──┤	<del></del>	
	<del></del>			<del></del>	<del></del>
e	*. :-			50,805.	
7 Subtotal Add columns (b) (d) and (e)					
2 Subtotal Add columns (b), (d), and (e)					50 005
3 Total. Add line 12, columns (b), (d), and (e).			<u> </u>	13	50,805
3 Total. Add line 12, columns (b), (d), and (e), ee worksheet in line 13 instructions to verify calculated	tions.)			13	50,805
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculate	tions.)	ishment of Exemp		13	50,805
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculate art XVI-B Relationship of Activities to the	tions.) le Accompl		t Purpo	oses	
Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculater XVI-B Relationship of Activities to the	tions.) le Accompl		t Purpo	oses	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the	tions.) le Accompl		t Purpo	oses	
Total. Add line 12, columns (b), (d), and (e) be worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the line No.  Explain below how each activity for which accomplishment of the foundation's exemption.	tions.) le Accompl		t Purpo	oses	
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculate art XVI-B Relationship of Activities to the line No.  Explain below how each activity for which accomplishment of the foundation's exemption.	tions.) le Accompl		t Purpo	oses	
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculate art XVI-B Relationship of Activities to the line No.  Explain below how each activity for which accomplishment of the foundation's exemption.	tions.) le Accompl		t Purpo	oses	
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the line No.  Explain below how each activity for which accomplishment of the foundation's exemption.	tions.) le Accompl		t Purpo	oses	
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the line No.  Explain below how each activity for which accomplishment of the foundation's exemption.	tions.) le Accompl		t Purpo	oses	
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the line No.  Explain below how each activity for which accomplishment of the foundation's exemption.	tions.) le Accompl		t Purpo	oses	
Total. Add line 12, columns (b), (d), and (e) be worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the line No.  Explain below how each activity for which accomplishment of the foundation's exemption.	tions.) le Accompl		t Purpo	oses	
B Total. Add line 12, columns (b), (d), and (e) be worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the line No.  Explain below how each activity for which accomplishment of the foundation's exemption.	tions.) le Accompl		t Purpo	oses	
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the line No.  Explain below how each activity for which accomplishment of the foundation's exemption.	tions.) le Accompl		t Purpo	oses	
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the line No.  Explain below how each activity for which accomplishment of the foundation's exemption.	tions.) le Accompl		t Purpo	oses	
B Total. Add line 12, columns (b), (d), and (e) be worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the line No.  Explain below how each activity for which accomplishment of the foundation's exemption.	tions.) le Accompl		t Purpo	oses	
B Total. Add line 12, columns (b), (d), and (e) be worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the line No.  Explain below how each activity for which accomplishment of the foundation's exemption.	tions.) le Accompl		t Purpo	oses	
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the line No.  Explain below how each activity for which accomplishment of the foundation's exemption.	tions.) le Accompl		t Purpo	oses	
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the line No.  Explain below how each activity for which accomplishment of the foundation's exemption.	tions.) le Accompl		t Purpo	oses	
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculate art XVI-B Relationship of Activities to the line No.  Explain below how each activity for which accomplishment of the foundation's exemption.	tions.) le Accompl		t Purpo	oses	
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculate art XVI-B Relationship of Activities to the line No.  Explain below how each activity for which accomplishment of the foundation's exemption.	tions.) le Accompl		t Purpo	oses	
Total. Add line 12, columns (b), (d), and (e) see worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the line No.  Explain below how each activity for which accomplishment of the foundation's exemption.	tions.) le Accompl		t Purpo	oses	
Total. Add line 12, columns (b), (d), and (e) be worksheet in line 13 instructions to verify calculated art XVI-B Relationship of Activities to the line No.  Explain below how each activity for which accomplishment of the foundation's exemption.	tions.) le Accompl		t Purpo	oses	
Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculate art XVI-B Relationship of Activities to the Line No.  ▼ Explain below how each activity for which accomplishment of the foundation's exemptions.	tions.) le Accompl		t Purpo	oses	
Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculate art XVI-B Relationship of Activities to the Line No.  ▼ Explain below how each activity for which accomplishment of the foundation's exemptions.	tions.) le Accompl		t Purpo	oses	
Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculate art XVI-B Relationship of Activities to the line No.  Explain below how each activity for which accomplishment of the foundation's exemption.	tions.) le Accompl		t Purpo	oses	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculate art XVI-B Relationship of Activities to the line No.  ▼ Explain below how each activity for which accomplishment of the foundation's exemption.	tions.) le Accompl		t Purpo	oses	
3 Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculate art XVI-B Relationship of Activities to the line No.  ▼ Explain below how each activity for which accomplishment of the foundation's exemption.	tions.) le Accompl		t Purpo	oses	

# Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

	-	· · · · · · · · · · · · · · · · · · ·			<del></del>		<del></del> _	<del></del>	V	
de	scribed	rganization directl i in section 501(c) o political organiz	of the Code (ot	ngage in any of the her than section 501	following with a I(c)(3) organiza	any other organizati ations) or in section	ion i 527,		Yes	No
a Tra	ansfers	from the reportin	ng foundation to	a noncharitable exe	mpt organizatio	on of:				'
(1)	) Cash							1a (1)		_X_
(2)	) Other	assets						1a (2)		$\overline{X}$
<b>b</b> Ot	her trai	nsactions.								· · ·
(1)	) Sales	of assets to a no	oncharitable exei	mpt organization				1b(1)		X
(2)	) Purch	nases of assets fro	om a noncharita	ble exempt organiza	ation			1 b (2)		X
(3)	) Renta	al of facilities, equ	upment, or other	assets				1b (3)		X
(4)	) Reim	bursement arrang	gements					1 b (4)		X
(5)	) Loans	s or loan guarante	ees					1 b (5)		X
(6)	) Perfo	rmance of service	es or membershi	p or fundraising soli	ıcıtatıons			1b (6)		X
<b>c</b> Sh	naring c	of facilities, equipr	ment, mailing lis	ts, other assets, or	paid employee:	s		1 c		X
th	e aoods	s, other assets, or	r services diven	bv the reporting foui	ndation If the	foundation received	lways show the fair less than fair mark s, or services receiv	et value in	ue of	
(a) Line	no	(b) Amount involved	(c) Name o	f noncharitable exempt or	ganization	(d) Description of tra	ansfers, transactions, and	sharing arrai	ngement	 :S
N/A										
		<u></u>								
	1									
	7									
	7									
							·			
				-						
		<del></del>				<del></del>				
	'Yes,' o	complete the follo	wing schedule	ated with, or related ther than section 50				Yes	s X	No
37 / 2	(a)	Name of organiza	ation	(b) Type of	organization		(c) Description of re	lationship		
N/A				<del></del>	<del></del>					
		<del></del> .	<del></del>		<del></del>					
						<del></del>				
						<del></del>				
	111		alaan Ahad I baara ayaa				1 A - A b - A - A - A - A - A - A - A - A			
	correct	and complete_Declarate	ion of preparer (other	than taxpayer or fiduciary)	is based on all info	rmation of which preparer	to the best of my knowled has any knowledge	ge and beliet, i	It is true	•
Sign			01 10 1/	1 . /						
Here		, pr	SPIL	elh		14/25/17	▶ TRUSTEE	- P/T		
	Sigi	nature of officer or trust	ee			Date	Title			
		Print/Type preparer's	пате	Preparer's signa	ature O A /	) Date	Check if If	PTIN		
Paid		JOSEPH PED	OTA	Uner	h Total	a 2/29/16	3 self-employed	N/A		
Prepa	rer	Firm's name		GLEY & COMPAN	Y L.L.C.	-	Firm's EIN N/A			
Use C				2ND ST., #305						
USE C	ritty	Firm's address	OAK BROOK,				Phone no 630	-990-03	55	
BAA		<del>'</del>						Form <b>99</b>		(2010)
										(-0,0)

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

Department of the Treasury Internal Revenue Service

#### **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF

OMB No 1545-0047

2010

Name of the organization THE HILB F	AMILY FOUNDATION	Employer identification number
C/O JOSEPH		36-4417758
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organi: 4947(a)(1) nonexempt charitable trust 527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust 501(c)(3) taxable private foundation	treated as a private foundation
Check if your organization is covere <b>Note.</b> Only a section 501(c)(7), (8),	ed by the <b>General Rule</b> or a <b>Special Rule</b> or (10) organization can check boxes for both the Gen	neral Rule and a Special Rule See instructions
General Rule		
	990, 990-EZ, or 990-PF that received, during the year, and II)	\$5,000 or more (in money or property) from any one
Special Rules		
$509(a)(1)$ and $170(b)(1)(A)(v_1)$ .	ation filing Form 990 or 990-EZ, that met the 33-1/3% s and received from any one contributor, during the year m 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Co	r, a contribution of the greater of (1) \$5,000 or
aggregate contributions of more	(10) organization filing Form 990 or 990-EZ, that receive than \$1,000 for use <i>exclusively</i> for religious, charitable dren or animals. Complete Parts I, II, and III	ved from any one contributor, during the year, le, scientific, literary, or educational purposes, or
If this box is checked, enter her purpose Do not complete any complete	(10) organization filing Form 990 or 990-EZ, that receive for religious, charitable, etc, purposes, but these content the total contributions that were received during the of the parts unless the <b>General Rule</b> applies to this org	tributions did not aggregate to more than \$1,000 year for an <i>exclusively</i> religious, charitable, etc, ganization because it received nonexclusively
religious, charitable, etc. contrib	outions of \$5,000 or more during the year	<b>▶</b> \$
990-PF) but it must answer 'No' on	t covered by the General Rule and/or the Special Rules Part IV, line 2 of their Form 990, or check the box on neet the filing requirements of Schedule B (Form 990,	line H of its Form 990-F7 or on line 2 of its Form
BAA For Paperwork Reduction Ac 990EZ, or 990-PF.	ct Notice, see the Instructions for Form 990,	Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

•			
Schedule	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2010)		of 1 of Part I
_	LB FAMILY FOUNDATION	' *	117758
Part I	Contributors (see instructions )		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ROBERT H. HILB  199 NORTH MONTCLAIR AVENUE  GLEN ELLYN, IL 60137	\$45,000.	Person X Payroll Noncash  (Complete Part II if there is a noncash contribution )
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	JANE G. HILB  199 NORTH MONTCLAIR AVENUE  GLEN ELLYN, IL 60137	\$63,790.	Person Payroli Noncash X  (Complete Part II if there is a noncash contribution)
(a) Number	(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) Number	(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) Number	(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) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	1	1	

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2010)

Person Payroll Noncash

(Complete Part II if there is a noncash contribution )

Page

of 1

of Part II

Name of organization
THE HILB FAMILY FOUNDATION

Employer identification number 36-4417758

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	2000SH WILLIS GROUP HOLDINGS PLC (WSH)		
		\$ 63,790.	11/01/10
(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	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
Part I		(see instructions)	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		  \$	

Name of organization

Employer identification number

THE	HILB	FAMILY	FOUNDATION

36-4417758

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 cols (a) through (e) and the following line entry					
	For organizations completing Part III, enter contributions of \$1,000 or less for the year	total of <i>exclusively</i> religious, ch (Enter this information once S	naritable, etc, ee instructions)	► \$	N/A	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gi	ift is held	
	N/A					
		(e)				
	Transferee's name, addres	Transfer of gift	Relation	nship of transferor to tran	nsferee	
(a)	(b)	(c)		(d)		
No. from Part I	Purpose of gift	Use of gift		Description of how gi	ift is held	
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relation	nship of transferor to tra	nsferee	
(a)	(b) Purpose of gift	(c) Use of gift		(d) Description of how gi	ift is held	
Part I					<del></del>	
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relatio	nship of transferor to tra	nsferee	
			<u> </u>			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) . Description of how g	ift is held	
				<del></del>		
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relatio	nship of transferor to tra	nsferee	

2010	FEDERAL STA					PAGE 3
CLIENT 6235	THE HILB FAMILY C/O JOSEPH	FOUNI PEDO	DATION FA			36-4417758
2/29/12						06 46PN
STATEMENT 6 FORM 990-PF, PART II, LINE 10C INVESTMENTS - CORPORATE BOI	NDS					
CORPORATE BONDS			UATION ETHOD _	BOO		AIR MARKET VALUE
50,000 BOEING CAP CORP 6.10 50,000 GENERAL ELECTRIC 4.1 50,000 METLIFE INC. 5.375% 20,000 PITNEY BOWES INC. 4.	5%	MKT MKT	VAL VAL VAL VAL TOTAL	5 1	0. \$ 8,778. 0,979. 9,849. 9,606. \$	0. 51,999. 53,012. 20,798. 125,809.
STATEMENT 7 FORM 990-PF, PART VI, LINE 9 TAX DUE  LATE INTEREST					\$ TOTAL \$	382. 11. 4. 397.
STATEMENT 8 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS,	TITLE AVERAGE	AND HOURS	COI	MPEN-	CONTRI- BUTION TO	ACCOUNT/
NAME AND ADDRESS ROBERT H. HILB 199 NORTH MONTCLAIR AVENUE GLEN ELLYN, IL 60137	PER WEEK I TRUSTEE - 0			O.	<u>EBP &amp; DC</u> \$ 0	<u>OTHER</u> . \$ 0.
JANE G. HILB 199 NORTH MONTCLAIR AVENUE GLEN ELLYN, IL 60137	TRUSTEE - 0	P/T		0.	0	. 0.
NANCY H. BRINKMAN 4210 HOWARD STREET WESTERN SPRINGS, IL 60558	TRUSTEE - 0	P/T		0.	0	. 0.
TRACY H. GANNON 8139 KENTWOOD COURT DARIEN, IL 60561	TRUSTEE - 0	P/T		0.	0	. 0.
CYNTHIA H. THILO 1110 THISTLE LANE CHARLOTTE, NC 28226	TRUSTEE - 0	P/T		0.	0	. 0.

TRUSTEE - P/T 0

TOTAL \$

0. 0.

0.

0.

ROBERT J. HILB 20 LOWER TUCKAHOE ROAD WEST RICHMOND, VA 23238

### HILB FAMILY FOUNDATION FORM 990-PF JUNE 30, 2011 FEIN 36-4417758

#### PART XV - Line 3a - Grants and Contributions Paid

Recipient	Status_	Purpose	Amount
Bosom Buddies Benefit Organization	Public	Contribution	10,000.00
St. Daniel Church	Public	Contribution	15,000.00
St. Francis High School	Public	Contribution	14,000.00
Marionjoy Foundation	Public	Contribution	7,000.00
Marionjoy Rehab Hospital	Public	Contribution	12,000.00
Christopher Lyons Foundation/GHF	Public	Contribution	4,000.00
Tuckahoe YMCA	Public	Contribution	3,000.00
Child Savers	Public	Contribution	1,250.00
Children's Hospital Ball	Public	Contribution	1,250.00
Let Them Shine	Public	Contribution	500.00
Young Life	Public	Contribution	3,000.00
Pillars Community Services	Public	Contribution	2,500.00
HCS Family Services	Public	Contribution	2,500.00
			76,000 00

2010	FEDERAL STATEMENTS THE HILB FAMILY FOUNDATION	PAGE 1	
2/29/12	C/O JOSEPH PEDOTA	<b>36-4417758</b> 06 46PM	
STATEMENT 1 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES		UO 401 IVI	
FRIEDMAN & HUEY ASSOC. LLP	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 6,400. \$ 3,200.  TOTAL \$ 6,400. \$ 3,200.	(D) CHARITABLE PURPOSES \$ 3,200. \$ 3,200.	
STATEMENT 2 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES			
INVESTMENT FEES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 7,287. \$ 7,287.  TOTAL \$ 7,287. \$ 7,287.	(D) CHARITABLE PURPOSES  \$ 0.	
STATEMENT 3 FORM 990-PF, PART I, LINE 18 TAXES			
FOREIGN TAXES W/H ON DIVIDE	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  NDS \$ 13. \$ 13. TOTAL \$ 13. \$ 13.	(D) CHARITABLE PURPOSES  \$ 0.	
STATEMENT 4 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES			
INVESTMENT EXPENSES SUPPLIES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME  \$ 8. \$ 8.  13.  TOTAL \$\frac{1}{5}\$ 21. \$\frac{1}{5}\$ 8.	(D) CHARITABLE PURPOSES  \$ 13. \$ 13.	

• •

2010

#### **FEDERAL STATEMENTS**

PAGE 2

**CLIENT 6235** 

# THE HILB FAMILY FOUNDATION C/O JOSEPH PEDOTA

36-4417758

2/29/12

06 46PM

#### STATEMENT 5 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

2010

### **FEDERAL STATEMENTS**

PAGE 4

**CLIENT 6235** 

THE HILB FAMILY FOUNDATION C/O JOSEPH PEDOTA

36-4417758

2/29/12

06 46PM

STATEMENT 9 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

ROBERT H. HILB JANE G. HILB

## Form **8868** (Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File a separate application for each return.

OMB No 1545 1709

Form 8868 (Rev 1-2011)

If you are	e filing for an Automatic 3-Month Extension, con	nplete only	Part I and check this box		►  X
<ul> <li>If you are</li> </ul>	e filing for an Additional (Not Automatic) 3-Mont	h Extensior	n, complete only Part II (on page 2 of the	s form)	_
Do not com <sub>i</sub>	plete Part II unless you have already been grante	d an autom	atic 3-month extension on a previously f	iled Form 8868	
corporation i request an e Associated \	iling (e-file). You can electronically file Form 8868 required to file Form 990-T), or an additional (not extension of time to file any of the forms listed in With Certain Personal Benefit Contracts, which ming of this form, visit www irs gov/efile and click of	: automatic) Part I or Pa ust be sent	3-month extension of time. You can ele art II with the exception of Form 8870, In to the IRS in paper format (see instruct)	ctronically file Form	n 8868 to or Transfers
Part I A	automatic 3-Month Extension of Time.	niy subm	nit original (no copies needed).		
	on required to file Form 990-T and requesting an a			complete Part I only	, <b>►</b>
-	rporations (including 1120-C filers), partnerships,				
	Name of exempt organization			Employer identification	number
Type or					
print	THE HILB FAMILY FOUNDATION			36-4417758	
File by the	Number, street, and room or suite number. If a P.O. box, see in	nstructions		100	
due date for filing your	199 NORTH MONTCLAIR AVENUE				
return See instructions	City, town or post office, state, and ZIP code. For a foreign add	ress, see instru	ections		
	GLEN ELLYN, IL 60137				
				<del></del>	
Enter the Re	eturn code for the return that this application is fo	or (file a sep	parate application for each return)		04
Application Is For		Return Code	Application Is For	-	Return Code
Form 990		01	Form 990-T (corporation)	<del></del>	07
Form 990-B	iL	02	Form 1041-A		08
Form 990-E		03	Form 4720	<del></del>	09
Form 990-P	<del></del>	04	Form 5227	<del></del>	10
	(section 401(a) or 408(a) trust)	05	Form 6069		11
	(trust other than above)	06	Form 8870	<del></del>	12
Telephor  If the or  If this is check the	he are in the care of JOSEPH PEDOTA  The No (630) 990-0355  The ganization does not have an office or place of but of the Group Return, enter the organization's four box If it is for part of the group, checkension is for	digit Group	ne United States, check this box		
until	lest an automatic 3-month (6 months for a corpor $2/15$ , 20 $12$ , to file the exempt or xtension is for the organization's return for calendar year 20 or $7/01$ , 20 $10$	ganization r	eturn for the organization named above		
_	tax year entered in line 1 is for less than 12 mon hange in accounting period	ths, check i	reason Initial return Fir	nal return	
	application is for Form 990-BL, 990-PF, 990-T, 4 stundable credits. See instructions	720, or 606	9, enter the tentative tax, less any	3a \$	0.
<b>b</b> If this paym	s application is for Form 990-PF, 990-T, 4720, or of ents made. Include any prior year overpayment a	5069, enter illowed as a	any refundable credits and estimated tax credit	1 3blS	0.
EFTP	nce due. Subtract line 3b from line 3a Include you S (Electronic Federal Tax Payment System) See	instruction	s	3c \$	0.
Caution. If payment in	you are going to make an electronic fund withdrastructions	awal with the	is Form 8868, see Form 8453-EO and Fo	rm 8879-EO for	

BAA For Paperwork Reduction Act Notice, see Instructions.

	8 (Rev 1-2011)	th Extension	n complete only Bort II and charles		Page 2	
	are filing for an Additional (Not Automatic) 3-Mon y complete Part II if you have already been grante				► X	
	are filing for an Automatic 3-Month Extension, co		·	siy illea Form oooo		
	Additional (Not Automatic) 3-Month Ext			no conies needed)		
isai (ai.	Name of exempt organization	<u> </u>	Time: Only the the original (	Employer identification number	<del></del>	
_	The same and the s					
Type or print	C/O JOSEPH PEDOTA					
<b>F</b>	C/O JOSEPH PEDOTA   36-4417758   Number, street, and room or suite number. If a P.O. box, see instructions					
File by the extended due date for filing the	GEORGE BAGLEY & COMPANY L.L.C. 1315 W. 22ND ST., #305					
return See	City, town or post office, state, and ZIP code For a foreign addr	ess, see instruct	ions		<del></del>	
	OAK BROOK, IL 60523-2062					
	Return code for the return that this application is	<del></del> _	T		04	
Applicate Is For	on	Return Code	Application Is For		Return Code	
Form 990	)	01			2.7.03F r	
Form 990	)-BL	02	Form 1041-A		08	
Form 990	)-EZ	03	Form 4720			
Form 990	)-PF	04	Form 5227		10	
Form 990	0-T (section 401(a) or 408(a) trust)	05	Form 6069			
	0-T (trust other than above)	06	Form 8870		12	
	o not complete Part II if you were not already gran	ited an autor	matic 3-month extension on a previ	ously filed Form 8868.		
	ooks are in care of JOSEPH PEDOTA					
			(630) 990-0374	-	<del></del>	
	organization does not have an office or place of b		•		▶ [_]	
	is for a Group Return, enter the organization's for				is for the	
•		group, cneck	this box 🕨 🗌 and attach a list w	ith the names and EINs o	ot all	
	s the extension is for quest an additional 3-month extension of time unti	5/15	20 12		<del></del>	
	calendar year, or other tax year beginn			6/30 20 1	1 7	
	ne tax year entered in line 5 is for less than 12 mo			Final return	<u></u>	
	Change in accounting period			i mai return		
7 Sta	, 5	ORGANIZ	ATION RESPECTFULLY REQ	DUESTS AN ADDITIO	ONAT.	
	KTENSION OF TIME TO FILE, DUE TO					
	THE NECESSARY INFORMATION IN O					
8a If ti	his application is for Form 990-BL, 990-PF, 990-T, prefundable credits. See instructions	4720, or 606	9, enter the tentative tax, less any	8a \$	0.	
pay	his application is for Form 990-PF, 990-T, 4720, or yments made Include any prior year overpayment h Form 8868	6069, enter allowed as a	any refundable credits and estimate a credit and any amount paid previo	ed tax was	0.	
c Bal	lance due. Subtract line 8b from line 8a Include yo TPS (Electronic Federal Tax Payment System) Se	our payment ee instruction	with this form, if required, by using	8c \$	0.	
			d Verification		<u>-</u>	
Under pena correct, and	ities of perjury. I declare that I have examined this form, including a complete, and that I am authorized to propore this form.	accompanying sc	hedules and statements and to the best of my k	nowledge and belief, it is true,	1	
Signature	- Sept Selfata Title	·cf	A	Date - 2/L	5/12	
BAA		FIFZ0502	L 11/15/10	. Form <b>8868</b>	(Rev 1-2011)	

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