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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

Ford	aler	idar year 2011 or tax year beginning			, and e	nding			
Nar	Name of foundation						A Employer identification	number	
	JEFF AND SHELLEY SHINN FOUNDATION  umber and street (or P O box number if mail is not delivered to street address)  Room/suit						26-3615824	<u> </u>	
			t address	s)		Room/suite	D Telephone number		
		N WATER ST		····			815-962-23	311	
		own, state, and ZIP code					C If exemption application is p	ending, check here	
		KFORD, IL 61107		7			-		
G C	heck	all that apply: Initial return	느	Initial return of a fo	ormer public o	harity	D 1 Foreign organization	s, check here	
		Final return	느	Amended return			Foreign organizations me	eeting the 85% test	
		Address change		Name change		<del></del>	Foreign organizations me 2 check here and attach co	omputation	
H C	_	type of organization: X Section 501(c)(3) e					E If private foundation sta		
		ction 4947(a)(1) nonexempt charitable trust		taxable private founda			under section 507(b)(1	)(A), check here	
		arket value of all assets at end of year   J Account	•		Accr	ual	F If the foundation is in a		
			other (sp		haa.a 1		under section 507(b)(1	)(B), check here	
		238,872. (Part I, cold						T (4) = .	
Pa	πι	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		a) Revenue and openses per books	( <b>b)</b> Net in		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc., received		30,000.			N/A		
	2	Check If the foundation is not required to attach Sch. B							
	3	Interest on savings and temporary cash investments		3.		3.		STATEMENT 1	
	4	Dividends and interest from securities		7,269.		7,269.		STATEMENT 2	
	5a	Gross rents							
	b	Net rental income or (loss)	ļ						
Θ	6a	Net gain or (loss) from sale of assets not on line 10		5,450.	<del></del>				
enc	b	Gross sales price for all assets on line 6a 16, 266.				<u> </u>			
Revenue	7	Capital gain net income (from Part IV, line 2)				5,450	RECEIVE	<u> </u>	
-	8	Net short-term capital gain					LINE	D	
	9	Income modifications Gross sales less returns	<u> </u>				[D]	2 6	
	10a	and allowances	1				FEB 21 201		
		Less Cost of goods sold	┼		,			<u> </u>	
		Gross profit or (loss)	-				LIGHT. I	F —	
	11	Other income		42,722.	1	2,722.			
	12	Total Add lines 1 through 11	+	42,722.		<u>2,722.</u> 0.		0.	
	13 14	Compensation of officers, directors, trustees, etc Other employee salaries and wages		0.		<u> </u>		<b>.</b>	
	15	Pension plans, employee benefits							
es		Legal fees STMT 3		5,625.		0.		5,625.	
ens		Accounting fees STMT 4		850.		213.		637.	
ďx		Other professional fees		030.		217.		037.	
/e E	17	Interest							
ativ	18	Taxes STMT 5		148.		0.		15.	
and Administrative Expens	19	Depreciation and depletion						1	
Ē	20	Occupancy		-					
Ad	21	Travel, conferences, and meetings							
pui	22	Printing and publications							
ıg a	23	Other expenses							
Operating		Total operating and administrative							
per		expenses Add lines 13 through 23		6,623.		213.		6,277.	
0	25	Contributions, gifts, grants paid		8,192.				8,192.	
		Total expenses and disbursements							
		Add lines 24 and 25		14,815.		213.		14,469.	
	27	Subtract line 26 from line 12:							
	а	Excess of revenue over expenses and disbursements		27,907.					
	b	Net investment income (if negative, enter -0-)			1	2,509.			
		Adjusted net income (if negative, enter -0-)					N/A		
12350	)1 -11	LHA For Paperwork Reduction Act Notice, see	instruc	ctions				Form <b>990-PF</b> (2011)	

Form 990-PF (2011) JEFF AND SHELLEY SHINN		0-PF(2011) JEFF AND SHELLEY SHINN			26-3615824 Page 2		
P	Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End of	<del></del>		
<u>.</u>			(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing	40.550	55 044			
	1	Savings and temporary cash investments	48,578.	55,844.	55,844.		
	3	Accounts receivable -					
		Less: allowance for doubtful accounts					
	4	Pledges receivable ►					
		Less: allowance for doubtful accounts					
	_	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons					
	7	Other notes and loans receivable	1				
		Less: allowance for doubtful accounts					
ets		Inventories for sale or use					
Assets	1	Prepaid expenses and deferred charges					
•		Investments - U.S. and state government obligations	404 405	150 050	102 000		
		Investments - corporate stock STMT 6	131,437.	152,078.	183,028.		
		Investments - corporate bonds					
	11	Investments - land, buildings, and equipment basis	1				
		Less accumulated depreciation					
	12	Investments - mortgage loans					
	13	Investments - other					
	14	Land, buildings, and equipment: basis	_				
		Less accumulated depreciation					
	15	Other assets (describe ►)					
	16	Total assets (to be completed by all filers)	180,015.	207,922.	238,872.		
	Ť T	Accounts payable and accrued expenses		•			
	18	Grants payable					
S	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
abi	21	Mortgages and other notes payable					
Ξ	1	Other liabilities (describe )					
	23	Total liabilities (add lines 17 through 22)	0.	0.			
		Foundations that follow SFAS 117, check here					
		and complete lines 24 through 26 and lines 30 and 31					
Ses	24	Unrestricted					
<u>a</u>	25	Temporarily restricted					
Ba	26	Permanently restricted					
pur		Foundations that do not follow SFAS 117, check here					
Ę		and complete lines 27 through 31					
0	27	Capital stock, trust principal, or current funds	0.	0.			
Set	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.			
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds	180,015.	207,922.			
Ne	30	Total net assets or fund balances	180,015.	207,922.			
		TARRESTA AND AND AND AND AND AND AND AND AND AN	180,015.	207,922.			
	]31	Total liabilities and net assets/fund balances		201,922.			
LP	art	Analysis of Changes in Net Assets or Fund E	Salances				
1		I net assets or fund balances at beginning of year - Part II, column (a), line	e 30		400 01-		
		st agree with end-of-year figure reported on prior year's return)		1	180,015.		
2		r amount from Part I, line 27a		2	27,907.		
3		er increases not included in line 2 (itemize)		3	0.		
4		lines 1, 2, and 3		4	207,922.		
5		reases not included in line 2 (itemize)		5	0.		
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, o	column (b), line 30	6_	207,922.		
					60rm <b>WWI L-P-</b> (90111)		

	2009	6,996.	32,308.		.216543
_	2008	0.	147,772.		.00000
	2007				
_	2006				
2	Total of line 1, column (d)			2	.26722
3	Average distribution ratio for the 5-year base p the foundation has been in existence if less that	• • •	number of years	3	.08907
4	Enter the net value of noncharitable-use assets	for 2011 from Part X, line 5		4	211,439
5	Multiply line 4 by line 3			5	18,834
6	Enter 1% of net investment income (1% of Par	t I, line 27b)		6	125
7	Add lines 5 and 6			7	18,959
8	Enter qualifying distributions from Part XII, line	4		8	14,469

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See the Part VI instructions.

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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.

	n 990-PF (2011) JEFF AND SHELLEY SHINN FOUNDATION 26-3615 art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in			Page 4	
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here   and enter 1%		2	250.	
	of Part I, line 27b				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.	
3	Add lines 1 and 2		2	250.	
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-			250.	
6	Credits/Payments:				
	2011 estimated tax payments and 2010 overpayment credited to 2011  Figure 1 foreign arguments and 2010 overpayment credited to 2011  6a				
	Exempt foreign organizations - tax withheld at source  Tox paid with application for extension of time to tile (Form 9968)				
	Tax paid with application for extension of time to file (Form 8868)  Backup withholding erroneously withheld  6d				
	Total credits and payments. Add lines 6a through 6d			0.	
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			250.	
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
	Enter the amount of line 10 to be. Credited to 2012 estimated tax				
	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No	
	any political campaign?	1a		X	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or				
	distributed by the foundation in connection with the activities				
C	Did the foundation file Form 1120-POL for this year?	1c	<u> </u>	X	
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 .				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. ▶ \$ 0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	-	X	
•	If "Yes," attach a detailed description of the activities		ļ		
3	3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				
A a	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?				
	If "Yes," has it filed a tax return on Form 990-T for this year?  N/A	4a 4b		X	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	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:				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law				
	remain in the governing instrument?	6	Х		
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	Х		
	If "Yes," complete Part II, col (c), and Part XV				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
	IL				
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)		х		
of each state as required by General Instruction G? If "No," attach explanation					
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	9			
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV			X	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X	
	For	11 <b>33</b> 0		(2011)	

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Part VII-B   Statements Regarding Activities for Which I	Form 4720 May Be	Required (contin	ued)		
<ul> <li>5a During the year did the foundation pay or incur any amount to:</li> <li>(1) Carry on propaganda, or otherwise attempt to influence legislation (section)</li> <li>(2) Influence the outcome of any specific public election (see section 4955); or</li> </ul>	, .,		es X No		
any voter registration drive?  (3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio 509(a)(1), (2), or (3), or section 4940(d)(2)?		· · · · · · · · · · · · · · · · · · ·	es X No		·
<ul> <li>(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?</li> <li>b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit</li> </ul>		Ye	es X No		
section 53.4945 or in a current notice regarding disaster assistance (see instru Organizations relying on a current notice regarding disaster assistance check h	ictions)?	iii riegulations	N/A ▶□	5b	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi expenditure responsibility for the grant?  If "Yes," attach the statement required by Regulations section 53 494.	rom the tax because it mainta <b>h</b>	nined <b>1/A</b> Ye	es No		
<ul> <li>6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?</li> <li>b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?</li> </ul>	, , ,	Y6	es X No	6b	x
If "Yes" to 6b, file Form 8870  7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes X No					
b If "Yes," did the foundation receive any proceeds or have any net income attribution and the second of the secon		Hi-b		7b	į
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, roundation wa	anagers, nigni	,		
1 List all officers, directors, trustees, foundation managers and their	compensation.		· · · · · · · · · · · · · · · · · · ·		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) E accou allov	xpense nt, other vances
JEFF SHINN	DIRECTOR				
124 N WATER ST					
ROCKFORD, IL 61107	0.20	0.	0.		0.
	DIRECTOR				
124 N WATER ST		_	_		
ROCKFORD, IL 61107	0.20	0.	0.		0.
2 Compensation of five highest-paid employees (other than those inc	· · · · · · · · · · · · · · · · · · ·	, enter "NONE."	(d) Contributions to		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	accou allov	xpense nt, other vances
NONE					
Total number of other employees paid over \$50,000			<b>&gt;</b>		0

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	IONE."	
(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  Part IX-A Summary of Direct Charitable Activities		<b>▶</b> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistica	Linformation such as the	<del></del>
number of organizations and other beneficiaries served, conferences convened, research papers product	ed, etc.	Expenses
1 N/A		
2	<del></del>	
	· · · · · · · · · · · · · · · · · · ·	
3		<del></del>
		··
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on line	es 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<b>&gt;</b>	0.

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, s	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		<del></del>
a	Average monthly fair market value of securities	1a	182.397.
	Average of monthly cash balances	1b	182,397. 32,262.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	214,659.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	214,659.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,220.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	211,439.
6	Minimum investment return. Enter 5% of line 5	6	10,572.
Ρ	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	10,572.
2a	Tax on investment income for 2011 from Part VI, line 5		•
b	Income tax for 2011. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	250.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	10,322.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	10,322.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	10,322.
	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		14 460
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	14,469.
	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a	<del></del>
b	Cash distribution test (attach the required schedule)	3b	14 460
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	14,469.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		^
_	Income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	14,469.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualities for	the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,				
line 7				10,322.
2 Undistributed income, if any, as of the end of 2011				20,0220
a Enter amount for 2010 only			0.	
<b>b</b> Total for prior years	'			
		0.		
3 Excess distributions carryover, if any, to 2011:				
a From 2006				
<b>b</b> From 2007				
c From 2008				
d From 2009 5,145.				
e From 2010 257.				
f Total of lines 3a through e	5,402.			
4 Qualifying distributions for 2011 from	3/102.			
Part XII, line 4: ►\$ 14,469.				
a Applied to 2010, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior			<u> </u>	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2011 distributable amount	0.			10,322.
e Remaining amount distributed out of corpus	4,147.			10/3221
5 Excess distributions carryover applied to 2011	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	9,549.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				-
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously		_		
assessed		0.		
d Subtract line 6c from line 6b. Taxable		_		
amount - see instructions		0.	<del></del>	
e Undistributed income for 2010. Subtract line			_	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2012				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2006				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012	2 542			
Subtract lines 7 and 8 from line 6a	9,549.			
0 Analysis of line 9:				
a Excess from 2007				
b Excess from 2008				
c Excess from 2009 5,145.				
d Excess from 2010 257.				
e Excess from 2011 4,147.				Form <b>990-PF</b> (2011)

Part XIV Private Operating F	OUNDATIONS (See In			N/A	515824 Page II	
1 a If the foundation has received a ruling of			1	N/A		
foundation, and the ruling is effective fo						
<b>b</b> Check box to indicate whether the found	•	•	Lin section	4942(j)(3) or 4	1942(j)(5)	
2 a Enter the lesser of the adjusted net	Tax year	Touridation described	Prior 3 years	1 4342())(3) 01 3	1542())(5)	
income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total	
investment return from Part X for	(-,	(-,	(-/	(-)	(0)	
each year listed						
b 85% of line 2a			"		-	
c Qualifying distributions from Part XII,					+	
line 4 for each year listed						
d Amounts included in line 2c not						
used directly for active conduct of						
exempt activities						
e Qualifying distributions made directly						
for active conduct of exempt activities.				1		
Subtract line 2d from line 2c						
3 Complete 3a, b, or c for the						
alternative test relied upon:  a "Assets" alternative test - enter:						
(1) Value of all assets						
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)						
b "Endowment" alternative test - enter						
2/3 of minimum investment return shown in Part X, line 6 for each year listed						
c "Support" alternative test - enter:						
(1) Total support other than gross						
investment income (interest, dividends, rents, payments on						
securities loans (section						
512(a)(5)), or royalties)						
(2) Support from general public and 5 or more exempt						
organizations as provided in						
section 4942(j)(3)(B)(III)					<u> </u>	
(3) Largest amount of support from						
an exempt organization						
(4) Gross investment income  Part XV   Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or m	ore in assets	
at any time during t			ii tiio iodiidatioi	. Had 40,000 of H	1010 111 400010	
1 Information Regarding Foundation	on Managers:			<del>,</del> , <u></u> ,		
a List any managers of the foundation where year (but only if they have contributed r	no have contributed more more than \$5,000). (See s	than 2% of the total cor	ntributions received by the	foundation before the cl	ose of any tax	
SEE STATEMENT 7						
b List any managers of the foundation when other entity) of which the foundation has			n (or an equally large porti	on of the ownership of a	partnership or	
NONE						
2 Information Regarding Contribut						
Check here  if the foundation of						
the foundation makes gifts, grants, etc. (see 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:					
	SHELLEY SHINN, 815-962-2311 124 N WATER ST, ROCKFORD, IL 61107					
b The form in which applications should t			should include:		<del></del>	
WRITTEN REQUEST						
c Any submission deadlines:					<u> </u>	
NONE					<del></del>	
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable field:	s, kinds of institutions, or	other factors:		
NONE						
102801 12 02 11					Farm 000 DE (0011)	

**▶** 3b

Total

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

Enter gross amounts unless otherwise indicated.	Unrelated I	business income		by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code		
a	-	<del></del>			<del></del>
	- <del> </del>		<del>  </del>		
c					
			<del>-   -   -  </del>		<del> </del>
e	- <del>  -</del>				
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash			<del></del>		
investments			14	3.	
4 Dividends and interest from securities			14	7,269.	
5 Net rental income or (loss) from real estate:				7,203.	<del></del>
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income	<del></del>				·-·· - <u>·</u>
8 Gain or (loss) from sales of assets other					
than inventory			18	5,450.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
С	1				
d	1				
e		·	1		
12 Subtotal Add columns (b), (d), and (e)		(	J.	12,722.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	12,722.
(See worksheet in line 13 instructions to verify calculations.	)_				

#### Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
122821	

12-02-11

(c) Name of noncharitable exempt organization (b) Amount involved (a) Line no (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this return with the preparer shown below (see instr.)? it is true, correct, and complete. Declaration of preparer (other than taxpayer) is bas ed on all information of which preparer has any knowledge Sign Here TRUSTEE X Yes Signature of officer of trustee Tıtle Date Print/Type preparer's name Check PTIN Date Preparer's signature FEB 0 9 2012 self- employed Paid ROBERT FARRELL P00001555 **Preparer** Firm's name ► CLIFTONLARSONALLEN Firm's EIN ▶ 41-074 **Use Only** Firm's address ► 1639 NORTH ALPINE ROAD ROCKFORD, IL 61107 Phone no. 815-229-1900

123622

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

JEFF AND SHELLEY SHINN FOUNDATION

OMB No 1545-0047

2011

Name of the organization

Employer identification number

26-3615824

Organization type (check one)							
Filers o	f:	Section:					
Form 99	90 or 990-EZ	501(c)( ) (enter number) organization					
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
		527 political organization					
Form 99	90-PF	X 501(c)(3) exempt private foundation					
		4947(a)(1) nonexempt charitable trust treated as a private foundation					
		501(c)(3) taxable private foundation					
		s covered by the <b>General Rule</b> or a <b>Special Rule</b> .  (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions					
Genera	l Rule						
X	For an organization contributor Compl	n filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one lete Parts I and II.					
Special	Rules						
	509(a)(1) and 170(b	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 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%) 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, total contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III						
	contributions for us If this box is check purpose Do not co	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, se exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 ed, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., omplete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions of \$5,000 or more during the year.					
but it m	ust answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization

Employer identification number

## JEFF AND SHELLEY SHINN FOUNDATION

26-3615824

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	I space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JEFF AND SHELLEY SHINN  124 N WATER ST  ROCKFORD, IL 61107	\$30,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

## JEFF AND SHELLEY SHINN FOUNDATION

26-3615824

Part II	Noncash Property (see instructions) Use duplicate copies of Pa	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<b>\$</b>	
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Employer identification number

JEFF ANI	D SHELLEY SHINN FOUND	ATION	26-3615824
	year Complete columns (a) through (e) and the total of exclusively religious, charitable, etc.  Use duplicate copies of Part III if additional	ne following line entry. For organizations, contributions of <b>\$1,000 or less</b> for	)(7), (8), or (10) organizations that total more than \$1,000 for the ons completing Part III, enter the year. (Enter this information once) \$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, ar	(e) Transfer of gif	t 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
_	Transferee's name, address, ar	(e) Transfer of gif	t  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
	Transferee's name, address, ar	(e) Transfer of gif	t  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
	Transferee's name, address, ar	(e) Transfer of gif	Relationship of transferor to transferee

JEFF AND SHELLEY SHINN FOUNDATION 26-3615824

3 Grants and Contributions Paid During the You	<del></del>			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
BOYS & GIRLS CLUB OF ROCKFORD	NONE	PUBLIC CHA	COMMUNITY BETTERMENT	
330 15TH AVENUE				
ROCKFORD, IL 61104				10
BROWN UNIVERSITY SPORTS FOUNDATION	NONE	PUBLIC CHA	COMMUNITY BETTERMENT	
PROVIDENCE RI 02912				30
SURPEE MUSEUM OF NATURAL HISTORY	NONE	PUBLIC CHA	COMMUNITY BETTERMENT	
737 N MAIN ST ROCKFORD, IL 61103	NONE	FORDIC CIR	COMMONITI BETTEMENT	70
COMMUNITY FOUNDATION/LAURENT FOUNDATION	NONE	PUBLIC CHA	COMMUNITY BETTERMENT	
331 FULTON STREET, SUITE 310 PEORIA, IL 61602				1,00
CORONADO PERFORMING ART CENTER 314 NORTH MAIN STREET	NONE	PUBLIC CHA	COMMUNITY BETTERMENT	
ROCKFORD, IL 61101				20
CRUSADER COMMUNITY HEALTH 1100 BROADWAY ROCKFORD, IL 61104	NONE	PUBLIC CHA	COMMUNITY BETTERMENT	5
,				
DISCOVERY CENTER MUSEUM 711 N. MAIN STREET	NONE	PUBLIC CHA	COMMUNITY BETTERMENT	
ROCKFORD, IL 61103				5
FORBES SCHOLARSHIP(UNIVERSITY CLUB OF ROCKFORD SCHOLARSHIP) 945 NORTH MAIN STREET	NONE	PUBLIC CHA	COMMUNITY BETTERMENT	
ROCKFORD, IL 61103				1,00
GOLDEN APPLE FOUNDATION 5050 E. STATE STREET ROCKFORD, IL 61108	NONE	PUBLIC CHA	COMMUNITY BETTERMENT	12
LEADERSHIP INSTITUTE 128 N CHURCH ST	NONE	PUBLIC CHA	COMMUNITY BETTERMENT	
ROCKFORD IL 61101  Total from continuation sheets		1		10 7.59

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient LUEKEMIA LYMPHOMA NONE PUBLIC CHA COMMUNITY BETTERMENT 559 DONOFRIO DR MADISON, WI 61101 200. NICHOLAS CONSERVATORY & GARDENS NONE PUBLIC CHA COMMUNITY BETTERMENT 1354 N. 2ND STREET ROCKFORD, IL 61107 42. NORTHERN ILLINOIS HOSPICE AND GRIEF NONE PUBLIC CHA COMMUNITY BETTERMENT CENTER 4215 NEWBURG ROAD ROCKFORD, IL 61108 50. ON THE WATERFRONT NONE PUBLIC CHA COMMUNITY BETTERMENT 308 W. STATE ST SUITE 115 ROCKFORD, IL 61101 220. PHANTOM REGIMENT PUBLIC CHA NONE COMMUNITY BETTERMENT 5050 E. STATE ST ROCKFORD, IL 61108-2393 50. RAMP NONE PUBLIC CHA COMMUNITY BETTERMENT 202 MARKET ST. ROCKFORD, IL 61107 100. ROCKFORD ART MUSEUM NONE PUBLIC CHA COMMUNITY BETTERMENT 711 N. MAIN ROCKFORD, IL 61103 100. ROCKFORD COSMOPOLITAN CLUB NONE PUBLIC CHA COMMUNITY BETTERMENT 3424 NORTH MAIN STREET ROCKFORD IL 61103 150. ROCKFORD DAY NURSERY NONE PUBLIC CHA COMMUNITY BETTERMENT 2323 S. 6TH ST., #A ROCKFORD IL 61104 260. ROCKFORD MEMORIAL DEVELOPMENT NONE PUBLIC CHA COMMUNITY BETTERMENT FOUNDATION 2400 N. ROCKTON AVENUE ROCKFORD, IL 61103 700. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient ROCKFORD PARK DISTRICT NONE PUBLIC CHA COMMUNITY BETTERMENT 401 S. MAIN ST ROCKFORD, IL 61101 250, ROCKFORD PRO/AM NONE PUBLIC CHA COMMUNITY BETTERMENT 1400 EDDY AVENUE ROCKFORD, IL 61103 500. ROCKFORD PUBLIC LIBRARY NONE PUBLIC CHA COMMUNITY BETTERMENT 215 N WYMAN ST. ROCKFORD IL 61101 400. ROCKFORD VISITING NURSES ASSOCIATION NONE PUBLIC CHA COMMUNITY BETTERMENT 4223 E STATE STREET ROCKFORD, IL 61108 200. PUBLIC CHA ROCKFORD WOMENS CLUB NONE COMMUNITY BETTERMENT 323 PARK AVE ROCKFORD IL 61101 45. SALVATION ARMY NONE PUBLIC CHA COMMUNITY BETTERMENT 1706 18TH AVE. ROCKFORD IL 61104 100. PUBLIC CHA STEADMAN PHILIPPON RESEARCH NONE COMMUNITY BETTERMENT 181 WEST MEADOW DRIVE SUITE 100 VAIL, CO 81657 250. THE HERITAGE FOUNDATION NONE PUBLIC CHA COMMUNITY BETTERMENT 214 MASSACHUSETTS AVE NE WASHINGTON DC 20002-4999 50. TOYS FOR TOT NONE PUBLIC CHA COMMUNITY BETTERMENT 500 SOUTH ROCKFOR AVE WILTON, IL 61104 50. WOUNDED WARRIOR NONE PUBLIC CHA COMMUNITY BETTERMENT P.O. BOX 758516 TOPEKA, KS 66675 100. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient NONE PUBLIC CHA UNITED SERVICE ORGANIZATIONS, INC COMMUNITY BETTERMENT P.O. BOX 96322 WASHINGTON DC 20090-6322 50. RIVERFRONT MUSEUM NONE PUBLIC CHA COMMUNITY BETTERMENT 711 N. MAIN STREET ROCKFORD IL 61103 100. Total from continuation sheets

· · · · · · · · · · · · · · · · · · ·							
FORM 990-PF INTEREST ON SAV	INGS A	AND TEM	PORARY C	ASH II	NVESTMENTS	STATEMENT	1
SOURCE						AMOUNT	
EDWARD JONES							3.
TOTAL TO FORM 990-PF, PART I	, LINE	E 3, CO	LUMN A				3.
FORM 990-PF DIVIDEN	DS ANI	INTER	EST FROM	SECUE	RITIES	STATEMENT	2
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A	.)
EDWARD JONES			7,269.		0.	7,2	69.
TOTAL TO FM 990-PF, PART I,	LN 4		7,269.		0.	7,2	69.
FORM 990-PF		LEGAL	FEES			STATEMENT	3
DESCRIPTION	EXPE	(A) ENSES BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM		
PROFESSIONAL FEES		5,625.	-	0.		5,6	25.
TO FM 990-PF, PG 1, LN 16A		5,625.		0.		5,6	25.
FORM 990-PF	AC	CCOUNTI	NG FEES			STATEMENT	4
DESCRIPTION	EXPE	(A) ENSES BOOKS	(B) NET INV MENT IN		(C) ADJUSTED NET INCOM		
PROFESSIONAL FEES		850.		213.		6	37.
TO FORM 990-PF, PG 1, LN 16B		850.		213.			37.

FORM 990-PF	XAT	ES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL EXCISE TAX IL REGISTRATION FEE	133. 15.			0. 15.
TO FORM 990-PF, PG 1, LN 18	148.	0.		15.
EODA 000 DE	CORRORAM	T. CMOCK		CONTRACTOR (
FORM 990-PF	CORPORAT	E STOCK		STATEMENT (
FORM 990-PF  DESCRIPTION	CORPORAT		OK VALUE	
	CORPORAT		OK VALUE 152,078.	FAIR MARKET
DESCRIPTION				FAIR MARKET VALUE

NAME OF MANAGER

JEFF SHINN SHELLEY SHINN