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Form **990-PF**

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

	Depa Inter	artme nal R	ent of the Treasury evenue Service		Note . The fou	indation may	Treated as a Priva be able to use a copy of thi	te Founda s return to sati	ation sty state repo	ortina requirements.	2011
	For	cale	ndar year 2011 o	r tax yea	r beginning			, and e		<u> </u>	
	Na	me c	of foundation							A Employer identification	number
	15	דגי	ore w c	TITD/	~ T	V (20)	(D.C. DAIDING				
	EARLE M. & VIRGINIA M. O						BS FOUNDATIO	ON	I 6	36-6168454	
	2384 OAK HILL RD.						t address)		Room/suite	B Telephone number 312-922-3900	
			town, state, and Z						<u> </u>		
			RINGTON		6061	0				C If exemption application is p	ending, check here
	G (Chec	k all that apply:		Initial returi	1	Initial return of a f	ormer public o	harity	D 1. Foreign organizations	s, check here
				<u> </u>	Final return		Amended return				
		.			Address ch		Name change			Foreign organizations me 2. check here and attach co	mputation beta
	<u> </u>	_	k type of organiza ection 4947(a)(1)				xempt private foundation			E If private foundation sta	tus was terminated
	L Fá		arket value of all a				Other taxable private found ing method: X Cash	ation Accr	uol	under section 507(b)(1)	
			Part II, col (c), I		ond or your		ther (specify)	L ACCI	uai	F If the foundation is in a under section 507(b)(1)	60-month termination
		-\$		7,7Ś7			ımn (d) must be on cash	basis)		under Section 507(b)(1)	(b), check here
	Pa	art	Analysis of Re (The total of amounecessarily equal	venue ar unts in colu the amoun	nd Expenses mns (b), (c), and ts in column (a	d (d) may not	(a) Revenue and expenses per books	(b) Net in	vestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
		1	Contributions, g	ıfts, gran	ts, etc., recer	ved	40,000.	,		N/A	(Cash basis Only)
		2	Check Interest on savings		n is not required to	attach Sch B				₹	
		3	cash investments	•	•		46,351.		6,351.		STATEMENT 1
C4		4 5	Dividends and ir Gross rents	nterest fro	m securities		36,309.	3	6,309.		STATEMENT 2
2012		Ι.	Net rental income o	or (lose)				, , , ,	- 2	3	57
		Ι.	Net gain or (loss) fro	· · -	assets not on it	ne 10	22,814.		<u> </u>	* ***	, , ,
•	ğ	l t	Gross sales price for assets on line 6a	or all		,487.	, , , ,			. 1	* *
\geq	Revenue	7	Capital gain net inc	ome (from	Part IV, line 2)		·	10	0,412.	83	* * : 42
NOV 0 5	ъ.	8	Net short-term o		n		A,		·		*
		9	Income modifica Gross sales less re				* * * * * * * * * * * * * * * * * * *	. ,	* <i>//</i>		**
SCANNED		10a	and allowances Less Cost of good:	s sold			95, S. A.	; k	<u> </u>	<u>*</u>	*** /
2			Gross profit or (•		<u> </u>	<u>* * * * * * * * * * * * * * * * * * * </u>		
Ş		11	Other income	•			4,257.	<3	8,892.	>	STATEMENT 3
W		12	Total. Add lines	<u> </u>			149,731.	14	4,180.		A
		13	Compensation of o			, etc	0.		0.		0.
		14 15	Other employee Pension plans, e		-						
	ses		Legal fees	inployee	benenta						
	Sens	_		PA (#	ST	MT-4-	11,850.		0.		11,850.
	Administrative Expenses		Other profession	al fees 🔾	CEIV	ED					
	ıtive		Interest			S					
	stra	18 19	Taxes Depreciation and	NO	∀ 0 2 2	012 9					
	ië	20	Occupancy			RS-0S(
	Ā	21	Travel, conference	ceOG	neetimoN	IIT	5,280.		0.		5,280.
	and	22	Printing and pub	lications							3,200.
	ing	23	Other expenses			MT 5	22,077.		44.		22,001.
	Operating	24	Total operating				20 005				
	8	25	expenses. Add I		•		39,207. 344,248.		44.		39,131. 344,248.
	ı		Total expenses			-	344,240.				344,248.
			Add lines 24 and				383,455.		44.	ļ	383,379.
-	\neg	27	Subtract line 26 f	from line	12:						
	İ		Excess of revenue of				<233,724.			<u></u>	
			Net investment i					144	1,136.		F
7	2350 2-02		Adjusted net inc LHA For Pape							N/A	
1	2-02	- 11	LIM IVITAPE	WUIK IN	AGE HOLL ACE	MULICE, 566	nsuucuons,				Form 990-PF (2011)

F	orm 9	90-PF(2011) EARLE M. & VIRGINIA M.		ION 36-	-6168454 Page 2
П	Part	Balance Sheets Attached schedules and amounts in the description	Beginning of year		of year
		column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing	34,876.	31,142	31,142.
	2	Savings and temporary cash investments	145,924.	294,825.	
	3	Accounts receivable -			234,023.
		Less: allowance for doubtful accounts		NA	
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7				
	1	Less: allowance for doubtful accounts			
s	1 8	Inventories for sale or use	 		<u></u>
Assets	وا	Prepaid expenses and deferred charges			
As	100	Investments - U.S. and state government obligations			
			455 056		
			455,076.	358,232.	
		Investments - corporate bonds STMT 7	848,560.	525,723.	550,457.
	1''	Investments - land, buildings, and equipment basis	The AR Service on Ame	to the state of th	
	1.	Less accumulated depreciation			A Second of Assert
		Investments - mortgage loans			
		Investments - other STMT 8	4,200,446.	4,241,385.	5,145,130.
	14	Land, buildings, and equipment basis		, ,	у , ј
		Less accumulated depreciation		Anger way on the Annual of the	* * ****** *** * * * * * * * * * * * *
	15	Other assets (describe ► ORGANIZATION COSTS)	449.	449.	449.
_	16	Total assets (to be completed by all filers)	5,685,331.	5,451,756.	7,757,117.
	17	Accounts payable and accrued expenses			· * *
	18	Grants payable			
es	19	Deferred revenue			
≝	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
_	22	Other liabilities (describe			
		· · · · · · · · · · · · · · · · · · ·			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
	ĺ	and complete lines 24 through 26 and lines 30 and 31.			
ĕ	24	Unrestricted]		, , ,
ᇤ	25	Temporarily restricted			
Ba	26	Permanently restricted			
Fund Balances		Foundations that do not follow SFAS 117, check here			`
	ľ	and complete lines 27 through 31.			i .
ō		Capital stock, trust principal, or current funds	5,685,331.	E 451 750	, ,
Assets		Paid-in or capital surplus, or land, bldg., and equipment fund	0.	5,451,756.	
AS	29	Retained earnings, accumulated income, endowment, or other funds	0.		•
let	30	Total net assets or fund balances		0.	3
_			5,685,331.	5,451,756.	
	31	Total liabilities and net assets/fund balances	E COE 221	- 4-44	,
			5,685,331.	5,451,756.	<u> </u>
P	art I	Analysis of Changes in Net Assets or Fund Bar	alances		
Γ.	Total	net assets or fund balances at beginning of year - Part II, column (a), line 3			
٠,	(must	agree with end-of-year figure reported on prior year's return)	30	i i	
, ,	Enter:	agree with end-or-year figure reported on prior year's return) amount from Part I, line 27a	-	. 1	5,685,331.
)]] =================================	2	<233,724.>
, ,	ouici Ouici	increases not included in line 2 (itemize) PRIOR PERIOR nes 1, 2, and 3	ADJUSTMENT	3	149.
		ases not included in line 2 (itemize)		4	5,451,756.
				5	0.
_	otail	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (b), line 30	6	5,451,756.
235	11				Form 990-PF (2011)

		ses for Tax on In		Income	17631		2			
		d(s) of property sold (e.g. r common stock, 200 shs			(0) I P D	How ac - Purc - Dona	quired hase ition		acquired lay, yr.)	(d) Date sold (mo., day, yr.)
1a										
b SEE ATTACHED	STAT	EMENT								
<u>c</u>										
d					<u> </u>					
е	40.0				Ц,					
(e) Gross sales price		epreciation allowed (or allowable)		t or other basis xpense of sale					ain or (loss) s (f) minus (
<u>a</u>										
b										
d				_						
e 708,085.				607,67	7		<u>.</u>			100,412.
Complete only for assets showing	ng gain in co	olumn (h) and owned by t	he foundation					Caine (C	Col. (h) gain	
		Adjusted basis		cess of col. (I)			col.	(k), but r	not less than	1 -0-) or
(i) F.M.V. as of 12/31/69		is of 12/31/69		col. (j), if any				Losses	(from col. (h)) ´
a										
b										
C					一					 _
d								<u> </u>		
е				<u> </u>						100,412.
		∫ If gain, also enter	ın Part I, line	7	\Box					
2 Capital gain net income or (net ca	apıtal loss)	f (loss), enter -0-	· ın Part I, Iıne	7	儿	2				100,412.
3 Net short-term capital gain or (los			d (6):		١,					
If gain, also enter in Part 1, line 8,	column (c)				١				37/3	
If (loss), enter -0- in Part I, line 8 Part V Qualification U	nder Sc	ction 4940(a) for	Poducod	Tay on Not	ال	3	ont Inc	<u> </u>	N/A	
							ient inc	OIIIE		
(For optional use by domestic private	e toundation	is subject to the section 4	1940(a) tax on	net investment in	come) .)				
If section 4940(d)(2) applies, leave the	hıs part blar	ık.								
Was the foundation liable for the sec	tion 4942 ta	x on the distributable am	ount of any ve	ar in the hace ner	chor					Yes X No
If "Yes," the foundation does not qua					100:					163 [21] NU
1 Enter the appropriate amount in	each colum	n for each year; see instru	ictions before	making any entri	es.					
(a) Base period years		(b)			(c)				Dietrib	(d) ution ratio
Calendar year (or tax year beginni	ng in)	Adjusted qualifying dist		Net value of no	nchar	rtable-	use assets		(col. (b) div	ided by col. (c))
2010			7,288.				0,936			.050953
2009			7,498.				6,702			.053307
2008			5,331.				1,134			.053326
2007		48	4,094.				9,183			.048413
2006		4.3	1,353.	<u> </u>	9	<u>,51</u>	5,282	┵—		.045333
9. Total of line 1 column (d)										251222
2 Total of line 1, column (d)3 Average distribution ratio for the	E voor boos		on long O by E	hthh	-6			2		.251332
the foundation has been in existe			iii iiile 2 by 5,	or by the number	or yea	ars		,		.050266
the foundation has been in existe	1100 11 1033 11	ian o years		•				_3_		.030200
4 Enter the net value of noncharitat	le-use asse	ts for 2011 from Part X. I	ine 5					4		7,329,416.
		,								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
5 Multiply line 4 by line 3								5		368,420.
6 Enter 1% of net investment incon	ne (1% of P	art I, line 27b)						6		1,441.
7 Add lines 5 and 6								7		369,861.
8 Enter qualifying distributions from	•	•						_ 8		383,379.
If line 8 is equal to or greater than							_4_			

	m 990-PF (2011) EARLE M. & VIRGINIA M. COM		36-	6168454		Page 4
Pa	art VI Excise Tax Based on Investment Income (Section	on 4940(a), 4940(b), 4940(e), or	4948	- see instru	uctio	ns)
. 1a	a Exempt operating foundations described in section 4940(d)(2), check here	and enter "N/A" on line 1.	T			
	Date of ruling or determination letter: (attach copy of let	tter if necessary-see instructions)				
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check		1		1,4	41.
	of Part I, line 27b					
C	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations	enter 4% of Part I, line 12, col. (b).				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations		2		* ** **	0.
	Add lines 1 and 2		3		1,4	41.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation	ns only. Others enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter		5		1,4	41.
6						
а	a 2011 estimated tax payments and 2010 overpayment credited to 2011	6a 5,181				F
	b Exempt foreign organizations - tax withheld at source	6b	1			
C	Tax paid with application for extension of time to file (Form 8868)	6c	1			ŧ
	d Backup withholding erroneously withheld	6d	1			,
7	Total credits and payments. Add lines 6a through 6d		7	6	5.1	81.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 222	20 is attached	8			
		•	9			
10		erpaid	10		3.7	40.
11	Enter the amount of line 10 to be: Credited to 2012 estimated tax	3,740 • Refunded ▶	11		- , .	0.
	art VII-A Statements Regarding Activities				-	_ <u>_</u>
1a	During the tax year, did the foundation attempt to influence any national, state, or k	ocal legislation or did it participate or interven	e in		Yes	No
	any political campaign?	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1a		X
b	b Did it spend more than \$100 during the year (either directly or indirectly) for politic	al purposes (see instructions for definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activ		ned or		4.	
	distributed by the foundation in connection with the activities.	, , , , , , , , ,		1862.	* %	
C	Did the foundation file Form 1120-POL for this year?			1c		x
d	f Enter the amount (if any) of tax on political expenditures (section 4955) imposed d	uring the year:				
	(1) On the foundation. ▶ \$ 0 . (2) On foundation m			.		4.
е	Enter the reimbursement (if any) paid by the foundation during the year for political		-	\$		9. 3.
	managers. ►\$ 0.	, , , , , , , , , , , , , , , , , , , ,		ļ .	×.	
2	Has the foundation engaged in any activities that have not previously been reported	d to the IRS?		2	284	X.
	If "Yes," attach a detailed description of the activities.				-	
3	Has the foundation made any changes, not previously reported to the IRS, in its go	verning instrument, articles of incorporation,	or	*		ŝ
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the			3	w.	X
4a	a Did the foundation have unrelated business gross income of \$1,000 or more during			4a	X	
	o If "Yes," has it filed a tax return on Form 990-T for this year?			4b	X	\vdash
5	Was there a liquidation, termination, dissolution, or substantial contraction during t	the year?		5		X
	If "Yes," attach the statement required by General Instruction T.				Ł	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) sa	atisfied either:				
	By language in the governing instrument, or			,		1
	By state legislation that effectively amends the governing instrument so that no management is a state of the state o	nandatory directions that conflict with the sta	e law			
	remain in the governing instrument?	•		6	X	•
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	If "Yes," complete Part II, col (c), and Part XV.					$\overline{}$
8a	Enter the states to which the foundation reports or with which it is registered (see if	nstructions)				1
	IL					1
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF	to the Attorney General (or designate)				
	of each state as required by General Instruction G? If "No," attach explanation	, , ,		8b	~ x	
9	Is the foundation claiming status as a private operating foundation within the meaning		endar	"		<u> </u>
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If			9		X
	Did any persons become substantial contributors during the tax year? if "Yes," attach			10		X

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Pa	art`VII-A Statements Regarding Activities (continued)			
. 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
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u> </u>
	Website address ► N/A	~~~		-
14	The books are in care of ► EARLE M. COMBS III Telephone no. ► (312)	922		00
		0610		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		, , ▶	•
10	and enter the amount of tax-exempt interest received or accrued during the year	<u>N</u>	/A	
10	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country			ı
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	Ь		Ь
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	T^{-1}	Yes	No
1a	During the year did the foundation (either directly or indirectly):	-	.03	1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			į
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			l
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			1
	(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			1
	termination of government service, if terminating within 90 days.)			1
b	olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			Í
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		X
	Organizations relying on a current notice regarding disaster assistance check here			1
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2011?	1c		X.
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			400
	defined in section 4942(j)(3) or 4942(j)(5)):			1
a	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			5004
	before 2011? Yes X No		,	1
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			1
L	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)	-	- +	i
	,,	2b		
	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			-
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			suppoper spans
	during the year?		`	1
b	of "Yes," did it have excess business holdings in 2011 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 approved by the Commissioner under section 4943(c)(7)) to dispose			,
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2011) N/A	3b	- 1	,
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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 2011?	4b		X

Form 990-PF (2011) EARLE M. & VIRGINIA M. C			36-61684 ued)	54 P	age 6
 5a During the year did the foundation pay or incur any amount to: Carry on propaganda, or otherwise attempt to influence legislation (section) Influence the outcome of any specific public election (see section 4955); or any voter registration drive? Provide a grant to an individual for travel, study, or other similar purposes? Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)? Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals? If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance (see instru Organizations relying on a current notice regarding disaster assistance check his lift the answer is "Yes" to question 5a(4), does the foundation claim exemption for expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945 Did the foundation, during the year, receive any funds, directly or indirectly, on a personal benefit contract? Did the foundation, during the year, pay premiums, directly or indirectly, on a per "Yes" to 6b, file Form 8870 At any time during the tax year, was the foundation a party to a prohibited tax set of the foundation About Officers, Directors, Trusto Paid Employees, and Contractors 	4945(e))? If to carry on, directly or indirectly or educational purposes, or factorial described of the exceptions described of the tax because it maintates. 5-5(d). Day premiums on ersonal benefit contract? The transaction?	ectly, Ye Ye Ye Ye Ye or Ye or Ye in Regulations ined Ye Ye	SS X NO SS X NO SS X NO SS NO SS NO SS X NO	5b X 6b	<u>x</u>
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) Expe account, allowan	nse other ces
SEE STATEMENT 9		0.	0.		0.
	hadadaa Baada Maaa	- A- INIONE II			
Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000 NONE	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expe account, allowan	nse other ces
Total number of other employees paid over \$50,000		<u> </u>	_ ▶	L	0

		168454 Pa	age 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	y		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."			
(a) Name and address of each person paid more than \$50,000 (b) Type of serv	rice	(c) Compens	sation
NONE			
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u> </u>	0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ļ	Expenses	
1 N/A	- 		
	-+		
2	-+	 -	
	\neg		
3			
4			
Dort IV P. Communication of December 11 Property of December 12 Property of De			
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount	
1 N/A		Allount	
			0.
2	-+		
All other program-related investments. See instructions.	$\neg \uparrow$		
3			
Total. Add lines 1 through 3	•		0.
		Form 990-PF (2	2011)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	s, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	Т	
	Average monthly fair market value of securities	1a	7,296,271.
	Average of monthly cash balances	1b	144,760.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	7,441,031.
	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	7,441,031.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	111,615.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	7,329,416.
6	Minimum investment return. Enter 5% of line 5	6	366,471.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certai	
1	Minimum investment return from Part X, line 6	1	366,471.
2a	Tax on investment income for 2011 from Part VI, line 5 Income tax for 2011. (This does not include the tax from Part VI.) 2a 1,441. 2b 990.	ζ <u>ζ</u>	
b	Income tax for 2011. (This does not include the tax from Part VI.) 2b 990.	3.4	
C	Add lines 2a and 2b	2c	2,431.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,431. 364,040.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	364,040.
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	364,040.
_	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	18.	202 250
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	383,379.
	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:		
	Surtability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3b	303 350
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	383,379.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	1 441
_	Income. Enter 1% of Part I, line 27b	5	1,441. 381,938.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	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.	qualifies	for the section

Form **990-PF** (2011)

Part XIII	Undistributed Income (see	e instructions)			
<u> </u>		(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributat	ole amount for 2011 from Part XI,				
line 7	, i				364,040
2 Undistribute	ed income, if any, as of the end of 2011				
a Enter amo	unt for 2010 only			341,287.	
b Total for p	rior years:				
	, ,		0.		
3 Excess dis	stributions carryover, if any, to 2011:				
a From 2000	3				
b From 2007	7				
c From 2008	3				
d From 2009	9				
e From 2010)				
f Total of In	nes 3a through e	0.			
	distributions for 2011 from				
	ne 4: ▶\$ 383,379.		1		
	2010, but not more than line 2a			341,287.	
	undistributed income of prior				
• •	ction required - see instructions)	1	0.		
	distributions out of corpus				
	equired - see instructions)	0.			
,	2011 distributable amount				42,092
• • •	amount distributed out of corpus	0.1			,000
5 Excess distr	ributions carryover applied to 2011	0.1			0.
(If an amoun	t appears in column (d), the same amount	,			
_	net total of each column as				
2 Corpus Add	l lines 3f, 4c, and 4e Subtract line 5	0.	1		
b Prior years	s' undistributed income. Subtract				
line 4b fro	m line 2b		0.		
undistribu deficiency	amount of prior years' ted income for which a notice of has been issued, or on which ha 4942(a) tax has been previously		0.		
d Subtract li	ne 6c from line 6b. Taxable				
amount - s	see instructions		0.		
e Undistribu	ted income for 2010. Subtract line				
4a from lir	ne 2a. Taxable amount - see ınstr.			0.	
f Undistribu	ted income for 2011. Subtract				
lines 4d ar	nd 5 from line 1. This amount must				
be distribu	ted in 2012				321,948.
7 Amounts t	reated as distributions out of				
corpus to	satisfy requirements imposed by		i		
section 17	0(b)(1)(F) or 4942(g)(3)	0.			
8 Excess dis	tributions carryover from 2006		·		
not applied	d on line 5 or line 7	0.			
9 Excess dis	stributions carryover to 2012.				
Subtract II	nes 7 and 8 from line 6a	0.			
10 Analysis o	f line 9:				
a Excess fro	m 2007				
b Excess fro					
c Excess fro	m 2009			İ	
d Excess fro			ļ		
e Excess fro	m 2011			1	

Part XIV Private Operating Form	oundations (assure				68454 Page 10
<u>-</u>	_ 		A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for	•	•	▶ L	40.40()(0) 1 14	140(1)(5)
b Check box to indicate whether the found		ig foundation described in		4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2011	(b) 2010	Prior 3 years (c) 2009	(d) 2008	(e) Total
income from Part I or the minimum	(2)2011	(0)2010	(6) 2003	(u) 2000	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a	ļ				
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	1]	Ì
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					
alternative test relied upon:	ļ			Į.	
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					İ
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:	\			\	
 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	1				
organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					<u> </u>
Part XV Supplementary Info			if the foundation	had \$5,000 or m	ore in assets
at any time during t		uctions.)			
1 Information Regarding Foundation	•				
a List any managers of the foundation wh year (but only if they have contributed in			ibutions received by the	toundation before the clo	se of any tax
	ιοιο ιπαιτ φο,σσο μ. (σσο 3	oction 507 (d)(2).)			
NONE	400/f th				
b List any managers of the foundation wh other entity) of which the foundation has			or an equally large portion	in of the ownership of a p	artnership or
NONE	ou to to di gradioi intoloc	-			
		0.1.1.1.			 _
2 Information Regarding Contribution Check here ► X if the foundation o				-1	and the tendent
the foundation makes gifts, grants, etc.					
	`				
a The name, address, and telephone num $\mathbf{N/A}$	DEL OF THE PERSON TO MUOT	n applications should be	auuresseu.		
N/A					
h The form in which applications of sold h	a outhorited and info	tion and materials the section	ould include:		
b The form in which applications should b $\mathbf{N/A}$	ie submitted and informat	tion and materials they sh	ioula include:		
c Any submission deadlines:					
N/A	a auch as bussess and	deren element ()	lunda af cost to t	Ab 6 4a	
d Any restrictions or limitations on awards	s, such as by geographica	ai areas, charitable fields,	kinds of institutions, or c	itner factors:	
N/A					
122601 10 00 11					Farm 000 DE (0044)
123601 12-02-11					Form 990-PF (2011)

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Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation show any relationship to Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) recipient or substantial contributor a Paid during the year A ROCHA USA INC NONE PUBLIC CHARITY RELIGIOUS P.O. BOX 6761 ANNAPOLIS, MD 21401 500. ADLER PLANETARIUM NONE PUBLIC CHARITY EDUCATION 1300 S LAKE SHORE DR CHICAGO, IL 60605 6,872. AMBASSADOR FOR CHRIST NONE PUBLIC CHARITY RELIGIOUS P.O. BOX 315, FIJI LAUTOKA 500. AMERICAN FRIENDS OF TYNDELE HOUSE NONE PUBLIC CHARITY RELIGIOUS P.O. BOX 4920 ORLANDO, FL 32802-4920 1,000. ARMONIA NONE PUBLIC CHARITY GENERAL EXEMPT PURPOSE 114 SATSUMA DRIVE ALTAMONTE SPRINGS, FL 32714 5,000. SEE CONTINUATION SHEET(S) 344,248. **▶** 3a **b** Approved for future payment NONE Total **▶** 3b

EARLE M. & VIRGINIA M. COMBS FOUNDATION 36-6168454 [Part XV] Supplementary Information

Part XV Supplementary Information	on			
3 Grants and Contributions Paid During the	Year (Continuation)			
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome or business)	or substantial contributor	recipient		
BAKKE INSTITUTE	NONE	PUBLIC CHARITY	EDUCATION	
1013 8TH AVE				
SEATTLE, WA 98104				1,000.
BREAKTHROUGH MINISTRIES	NONE	PUBLIC CHARITY	RELIGIOUS	
P.O. BOX 47200				
CHICAGO, IL 60647		<u> </u>		1,000.
		[
BUSINESS PROFESSIONAL NETWORK	NONE	PUBLIC CHARITY	EDUCATION	
P.O. BOX 1842				
LAKE OSWEGO, OR 97035		ļ <u>.</u>		5,000.
		}	}	
BY THE HAND	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
1635 N LASALLE				
CHICAGO, IL 60614				1,000.
CAMP MANITOWISH YMCA, INC	NONE	PUBLIC CHARITY	RELIGIOUS	
P.O. BOX 246				
BOULDER JUNCTION, WI 54512				11,950.
			}	
CAMPUS CRUSADE FOR CHRIST, INC	NONE	PUBLIC CHARITY	RELIGIOUS	
100 LAKE HART DR				
ORLANDO, FL 32832	<u> </u>			4,650.
CHICAGO ART INSTITUTE	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
3650 WABASH				
CHICAGO, IL 60603-2925				380.
	,			
CHICAGO HOPE ACADEMY	NONE	PUBLIC CHARITY	EDUCATION	
2189 W. BOWLER ST.				
CHICAGO, IL 60612				3,000.
CHICAGO SYMPHONY ORCHESTRA	NONE	PUBLIC CHARITY	PERFORMING ARTS	
220 S. MICHIGAN AVE.		1	1	
CHICAGO, IL 60604		 		9,409.
CHRISTIAN LEADERS FOR AFRICA, INC	NONE	PUBLIC CHARITY	RELIGIOUS	
P.O. BOX 1642		1		
INDIANAPOLIS, IN 46206		1		7,000.
Total from continuation sheets				330,376.

EARLE M. & VIRGINIA M. COMBS FOUNDATION 36-6168454 Part XV | Supplementary Information

Part XV Supplementary Informatio 3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
CHRISTIAN LITERATURE	NONE	PUBLIC CHARITY	RELIGIOUS	2 500
SYDNEY AUSTRALIA		 		3,500
CIRCLE FELLOWSHIP P.O. BOX 22256	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
LEXINGTON , KY 40502-2250		<u> </u>		1,350
CITY CENTERAL 3861 S 35TH STREET	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
TACOMA, WA 98409		 	-	300.
CLEARWATER CAMP FOUNDATION 7490 CLEARWATER RD.	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
MINOCQUA, WI 54548				_6,000.
COMMON HOPE P.O. BOX 14298	NONE	PUBLIC CHARITY	RELIGIOUS	
ST PAUL, MN 55114	 	 	 	4,000.
CROSSWORLD ENDOWMENT FUND 306 BALA AVE. BALACYNWYD, PA 19004	NONE	PUBLIC CHARITY	RELIGIOUS	1,000.
		 		<u>, , , , , , , , , , , , , , , , , , , </u>
D M STREAMS MISSION FUND P.O. BOX 1578	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
NORTH WALES, PA 19454	- 			2,200
EAST WEST MINISTRIES P.O. BOX 868050	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
PLANO, TX 75086-8050	<u> </u>			500
EVANGELICAL FREE CHURCH OF AMERICA 901 E. 78TH ST	NONE	PUBLIC CHARITY	RELIGIOUS	
MINNEAPOLIS, MN 55420	 	 		1,200
F. I. MISSION 555 S. 24TH ST	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
ALLENTOWN, PA 18104-6666		<u></u>		1,100
Total from continuation sheets				

EARLE M. & VIRGINIA M. COMBS FOUNDATION 36-6168454

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to status of contribution Amount any foundation manager or substantial contributor Name and address (home or business) recipient FAITH FREE CHURCH NONE PUBLIC CHARITY GENERAL EXEMPT PURPOSE P.O. BOX 2059 WOODRUFF, WI 54568 5,000. NONE FORT WILDERNESS MINISTRIES PUBLIC CHARITY RELIGIOUS INCORPORATED P.O. BOX 715 MCNAUGHTON, WI 54543 22,577. FULLER THEOLOGICAL SEMINARY NONE PUBLIC CHARITY RELIGIOUS 135 N. OAKLAND AVENUE PASADENA, CA 91182 1,000. HERITAGE HILL NONE PUBLIC CHARITY GENERAL EXEMPT PURPOSE 2640 SOUTH WEBSTER AVENUE GREEN BAY, WI 54301 1,500. INNER CITY IMPACT NONE PUBLIC CHARITY YOUTH DEVELOPMENT 2704 W NORTH AVE CHICAGO, IL 60647 2,500. INTER-VARSITY CHRISTIAN FELLOWSHIP NONE PUBLIC CHARITY RELIGIOUS 6400 SCHROEDER DR MADISON, WI 53707 4,200. INTERNATIONAL CHRISTIAN CYCLE CLUB NONE PUBLIC CHARITY GENERAL EXEMPT PURPOSE 4921 ROYAL OAKES HOPKINS, MN 55343 1,500. INTERNATIONAL FOUNDATION NONE PUBLIC CHARITY RELIGIOUS P.O. BOX 23813 ARLINGTON, VA 20026 2,400. INTERNATIONAL TEAMS NONE PUBLIC CHARITY GENERAL EXEMPT PURPOSE 411 W. RIVER ROAD ELGIN, IL 60123 7,360. IRON MEN FOUNDATION NONE PUBLIC CHARITY GENERAL EXEMPT PURPOSE 1600 E MAIN ST BARRINGTON, IL 60010 500. Total from continuation sheets

EARLE M. & VIRGINIA M. COMBS FOUNDATION 36-6168454

Part XV Supplementary Informatio				
3 Grants and Contributions Paid During the		т		
Name and address (home or husiness)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
JOHN STOTT MINISTRIES	NONE	PUBLIC CHARITY	RELIGIOUS	
1050 CHESTNUT ST, STE 203				90 600
MENLO PARK, CA 94025		-		90,600.
JOST VAN DYKE PRESERVATION SOCIETY	NONE	PUBLIC CHARITY	EDUCATION	
326 FIRST ST, STE 378				
ANNAPOLIS, MD 21403				1,000.
JUDSON COLLEGE A BAPTIST INSTITUTE	NONE	PUBLIC CHARITY	EDUCATION	
1151 N. STATE		}		
ELGIN, IL 60123	 	<u> </u>		6,500.
KENYA CHILDRENS FUND	NONE	PUBLIC CHARITY	YOUTH DEVELOPMENT	
P.O. BOX 4159 HOPKINS, MN 55343				500.
MOTATION, PAR 33343				
LATIN AMERICA MISSION	NONE	PUBLIC CHARITY	PET.TCTOUS	
P.O. BOX 52-7900	HONE	FUBBLIC CHARITI	REDIGIOUS	
MIAMI, FL 33152				1,600.
LIFE FOR INDIA	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
215 N. ARLINGTON HEIGHTS RD				
ARLINGTON HEIGHTS, IL 60004	 	<u> </u>		250.
		}		
LIGHT HOUSE OF FAITH AND LOVE	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
6146 SO. ASHLAND AVENUE CHICAGO, IL 60636				1,000.
LUIS PALAU EVANGELISTIC ASSOCIATION	NONE	PUBLIC CHARITY	RELIGIOUS	
1500 NW 167TH PL				
BEAVERTON, OR 97006		<u> </u>		8,000.
MASTER WORKS FESTIVAL	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
1001 COLLEGE AVE				4 000
WINONA LAKE, IN 46590	 	+	 	1,000.
NEMPO CUITCACO VOLUMY POR CURTOM	MONE	DUDI TO CUADITY	DEL TOTOUS	
METRO CHICAGO YOUTH FOR CHRIST 324 EAST ROOSEVELT RD	NONE	PUBLIC CHARITY	KEDIGIOOS	
WHEATON, IL 60187	1	1	}	5,000.
Total from continuation sheets		<u> </u>	·	

EARLE M. & VIRGINIA M. COMBS FOUNDATION 36-6168454 [Part XV] Supplementary Information

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y		T		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
MOODY BIBLE INSTITUTE OF CHICAGO	NONE	PUBLIC CHARITY	PRITCIONS	
820 NORTH LASALLE BLVD	HONE	TODDIC CIDECITI	REBIGIOUS	
CHICAGO, IL 60610				2,000.
NAVIGATORS	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
P.O. BOX 6000				
COLORADO SPRINGS, CO 80904		<u> </u>		2,000.
NEWLIFE INTERNATIONAL	NONE	PUBLIC CHARITY	RELIGIOUS	
6764 S BLOOMINGTON TRAIL				
LENDERWOOD, IN 47177				1,000.
NORTHERN BAPTIST SEMINARY	NONE	PUBLIC CHARITY	RELIGIOUS	
660 E. BUTTERFIELD RD				
LOMBARD, IL 60148		<u> </u>		32,500.
OPERATION BOOTSTRAP - AFRICA	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
122 W. FRANKLIN AVE, ROOM 206				
MINNEAPOLIS, MN 55404				1,000.
OPPORTUNITY INTERNATIONAL	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
2122 YORK RD, STE 340				E 000
OAK BROOK, IL 60523	 		 	5,000.
PACIFIC GARDEN MISSION 1458 S. CANAL ST	NONE	PUBLIC CHARITY	RELIGIOUS	
CHICAGO, IL 60607				1,000.
PALM MISSIONARY MINISTRIES	NONE	PUBLIC CHARITY	RELIGIOUS	
1702 PARKS LAKE RD				
LAKE WALES, FL 33898				1,700.
PHD - SOCIETY FOR THE PRESERVATING OF	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
HUMAN DIGNITY				
37 N. PLUM GROVE RD				
PALATINE, IL 60067		 	-	1,000.
RAVI ZACHARIAS INTERNATIONAL	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
MINISTRIES		ļ		
4725 PEACHTREE CORNERS CIRCLE		1		
NORCROSS, GA 30092	I	1	1	1,500.

EARLE M. & VIRGINIA M. COMBS FOUNDATION 36-6168454 Part XV Supplementary Information

Part XV Supplementary Information				
3 Grants and Contributions Paid During to	he Year (Continuation)			
Recipient Name and address (home as business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
		1		
REV DR. JOSEPH MUNGU	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
KAFUE GEORGE			}	
MAZABUKA, ZAMBIA		 		1,250.
RIM	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
P.O. BOX 688			1	
ROUND LAKE, IL 60073		ļ		1,000.
			ì	
ROMANIA FOR JESUS	NONE	PUBLIC CHARITY	RELIGIOUS	
P.O. BOX 370385]	
DENVER, CO 80237		<u> </u>		1,800.
RUSSIAN LEADERSHIP MINISTRIES -	NONE	PUBLIC CHARITY	PELICIOUS	
MOSCOW SEMINARY	10112		KEEFOFOOD	
P.O. BOX 226				
WHEATON, IL 60187		<u> </u>		8,000.
SEND MINISTRIES	NONE	PUBLIC CHARITY	RELIGIOUS	
P.O. BOX 513				
FARMINGTON, MN 48332				500.
SHEDD AQUARIUM SOCIETY	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
1200 SOUTH LAKE SHORE DRIVE				
CHICAGO, IL 60605		 		2,500.
THE GATHERING	NONE	PUBLIC CHARITY	RELIGIOUS	
601 SHELLEY DR., SUITE 201		1		
TYLER, TX 75701		 		1,000.
THE WORLD AT WORK	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
1400 WOLFIN AVE				
AMAERELLO, TX 79109		ļ	 - 	2,500.
TIMBERLEE CHRISTIAN CENTER	NONE	PUBLIC CHARITY	RELIGIOUS	
N8705 S COURT RD.		1		
EAST TROY, WI 53120			 	3,000.
			1	
TIMOTHY TRAINING INTERNATIONAL	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
PO BOX 795			1	
PLAINFIELD, IL 60544		L	L	1,200.
Total from continuation sheets				

EARLE M. & VIRGINIA M. COMBS FOUNDATION 36-6168454 [Part XV] Supplementary Information

Part XV Supplementary Informati				
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
TOMAHAWK LAKE ASSOCIATION INC.	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
P.O. BOX 535				
MINOCQUA, WI 54548				1,000.
TOPIC	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
P.O. BOX 965				
ELKHORN, NC				2,000.
TRINITY FORUM, INC	NONE	PUBLIC CHARITY	RELIGIOUS	
P.O. BOX 9464	\			
MCLEAN, VA 22012				1,000.
	}			
TRINITY INTERNATIONAL UNVERSITY	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
2065 HALF DAY ROAD				
DEERFIELD, IL 60015				1,000.
TRODUCT UNIVERSAL AND TANCE	1017	DVIDLEG GWADEW	ANTERNA DINESCO.	
TROPICAL HEALTH ALLIANCE P.O. BOX A	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
BRYN MAWR, CA 92318			[1,000.
		 		
VILLAGE CHURCH OF BARRINGTON AN	NONE	PUBLIC CHARITY	RELIGIOUS	
EVANGELICAL FREE CHURCH		ľ		
1600 E MAIN ST BARRINGTON, IL 60010			ļ	10,800.
BERRINGTON, 12 00010		 	 	10,000.
WATER STONE	NONE	PUBLIC CHARITY	EDUCATION	
2925 PROFESSIONAL PLACE COLORADO SPRINGS, CO 80904	j	ì		2,000.
COLORED BININGS, CO COST				2,000.
		1		
WHEATON COLLEGE	NONE	PUBLIC CHARITY	EDUCATION	
501 COLLEGE AVE WHEATON, IL 60187				2,000.
WHEATON, IB 00107		 	 	
WISE INTERNATIONAL	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
P.O. BOX 1332 DYERSRIEG TN 38025	i i			2 000
DYERSBURG, TN 38025	- 	 	 	2,000.
	ł	1		
WOODDALE CHURCH	NONE	PUBLIC CHARITY	GENERAL EXEMPT PURPOSE	
6630 SHADY OAK RD	}	1		1 700
EDEN PRAIRIE, MN 55344 Total from continuation sheets			! 	1,700.
Loral from Continuation Silents				

EARLE M. & VIRGINIA M. COMBS FOUNDATION 36-6168454

Part XV Supplementary Information				
3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	if recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
WORLD MINISTRIES	NONE	PUBLIC CHARITY	RELIGIOUS	
P.O.BOX 1757				-
BOONE, NC 28607	 	<u> </u>		2,400
WYCLIFFE BIBLE TRANSLATORS	NONE	PUBLIC CHARITY	RELIGIOUS	
P.O. BOX 628200		}	Ì	ì
ORLANDO, FL 32862	 	 		2,500
	}	}		
				
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		1		1
		<u> </u>	<u> </u>	<u> </u>
Total from continuation sheets				<u> </u>

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.		siness income		section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue;	code	Amount	sion	Amount	function income
a					
b					
C					
d		-			
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments	\		14	46,351.	
4 Dividends and interest from securities			14	36,309.	
5 Net rental income or (loss) from real estate:				,	* "
a Debt-financed property			 		
b Not debt-financed property			 		
6 Net rental income or (loss) from personal			 		
property					
7 Other investment income	525990	2,875.	14	1,382.	
8 Gain or (loss) from sales of assets other			 		
than inventory	525990	6,410.	18	16,404.	
9 Net income or (loss) from special events		0,1100	 		
10 Gross profit or (loss) from sales of inventory			 		
11 Other revenue:			 		
a a			1		
. 					
b	-		 		
4	-		 		
е			 		
12 Subtotal. Add columns (b), (d), and (e)	— 	9,285.	3.	100,446.	0.
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>	<u> </u>		13	109,731.
(See worksheet in line 13 instructions to verify calculations	١			" 	105,751.
Part XVI-B Relationship of Activitie	s to the Accomp	olishment of Ex	kempt Pi	urposes	
Line No. Explain below how each activity for which i	ncome is reported in col	umn (e) of Part XVI-A	contributed	importantly to the accomi	nlishment of
the foundation's exempt purposes (other th			, oona ibatoa	importantly to the accomp	SHOTH OF
N/A					
					
	 .				

Form **990-PF** (2011)

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of

	organization directly or indi					1011 30 1(C) 01	1 1	165	140
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?								ļ	
a Transfe	rs from the reporting found	ation to a noncharital	ble exempt or	ganization of:					
(1) Cas							1a(1)		<u> </u>
(2) Oth	ner assets	-					1a(2)		X
b Other tr	ansactions:								
(1) Sal	es of assets to a noncharita	ble exempt organizat	เเอก				16(1)		X
(2) Pui	rchases of assets from a no	ncharitable exempt o	rganization				1b(2)	\Box	X
(3) Rei	ntal of facilities, equipment,	or other assets					1b(3)	$\neg \neg$	X
(4) Rei	imbursement arrangements						1b(4)		X
(5) Loa	ans or loan guarantees						1b(5)		X
(6) Per	rformance of services or me	mbership or fundrais	sing solicitatio	ns			1b(6)		X
c Sharing	of facilities, equipment, ma	uling lists, other asse	ts, or paid em	ployees			1c	一	X
d If the ar	nswer to any of the above is	"Yes," complete the f	following sche	dule. Column (b) should al	ways show the fair i	market value of the goods, o	other asse	ets,	
	ces given by the reporting f							•	
	(d) the value of the goods,								
a)Line no	(b) Amount involved	(c) Name of	noncharitable	e exempt organization	(d) Descriptio	n of transfers, transactions, and	sharing arra	angeme	nts
		N/A		<u></u>					
- +	-								
									
				· · · · · · · · · · · · · · · · · · ·	 		_		
-									
		 							
					 				
					_			—	
									—
		 							
		 							
	-				 -				
									
		<u> </u>			ļ				
بلبيب		1							
	oundation directly or indirec			·	izations described	<u></u>	-		٦
	on 501(c) of the Code (othe	, ,	(3)) or in sect	ion 527?		L	Yes	LX.	No
_b If "Yes,"	complete the following sch			[(1) T	····				
	(a) Name of org	janization		(b) Type of organization		(c) Description of relations	Jib		
				N/A	<u> </u>				
					ļ				
			,						
					1				
and	der penalties of perjury, I declare I belief, it is true, compct, and cor					Ma	y the IHS d	iscuss	his
Sign		\mathcal{L}		10.25-12		eho	irn with the	prepare (see inst	er tr)?
Here	Cowany -	(cmms)		10.10.12	pre	' [0	X Yes		No
S	ignature of officer or trustee			Date	Title				_
	Print/Type preparer's na	ame	Preparer's si	ignature (Date	Check if PTIN			
			1000-0	20.0	1 0/24/20	self- employed	1285	5751	2
Paid	ASHLEY SIW	ULA	للالللال	X	10/24/12	1`		. , _ 2	-
Prepare	Firm's name DEL	OITTE TAX	LLP		·	Firm's EIN ▶ 86-1	0657	72	
Use Onl								-	
	Firm's address ▶ 11	1 SOUTH W	ACKER	DRIVE	··	 	-		
		ICAGO, IL		_		Phone no. (312) 48	6-1	000
							rm 990 -		_
						10	550	(

123622 12-02-11

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.

OMB No 1545-0047

2011

Name of the organization

Employer identification number

<u>r</u>	ARLE M. & VIRGINIA M. COMBS FOUNDATION	30-0100434				
Organization type (check	one):					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt chantable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	S01(c)(3) exempt private foundation					
	4947(a)(1) nonexempt chantable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
contributor. Com	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in maplete Parts I and II.	noney or property) from any one				
Special Rules						
509(a)(1) and 170	1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg D(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the n (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II	_				
total contribution	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 exclusively 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 If this box is che purpose. Do not	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.					
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part et 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

EARLE M. & VIRGINIA M. COMBS FOUNDATION

36-6168454

·		
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
CME GROUP, INC. 20 S. WACKER CHICAGO, IL 60606	\$5,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
EARLE M. COMBS III 2384 OAK HILL RD. BARRINGTON, IL 60610	\$\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(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.)
(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.)
(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.)
(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, address, and ZIP+4 CME GROUP, INC. 20 S. WACKER CHICAGO, IL 60606 (b) Name, address, and ZIP+4 EARLE M. COMBS III 2384 OAK HILL RD. BARRINGTON, IL 60610 (b) Name, address, and ZIP+4 (b) Name, address, and ZIP+4 (b) Name, address, and ZIP+4	Name, address, and ZIP+4

Name of organization

Employer identification number

EARLE M. & VIRGINIA M. COMBS FOUNDATION

36-6168454

Part II	Noncash Property (see instructions) Use duplicate copies of Part 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. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		- - - \$				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		- - - - *				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		- - - - - - - - -				
(a) No. from Part I	(b) Description of noncash property gíven	(c) FMV (or estimate) (see instructions)	(d) Date received			
i		- - - - - - - - - - - -				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received			
		- - - - \$				
123453 01-23	3-12	Schedule B (Form 9	990, 990-EZ, or 990-PF) (2011)			

Employer identification number

ÈARLE	M. & VIRGINIA M. COMBS	FOUNDATION	36-6168454				
Part III	Exclusively religious, charitable, etc., indiversely vear. Complete columns (a) through (e) and the	vidual contributions to section 501(c ne following line entry. For organizatio)(7), (8), or (10) organizations that total more than \$1,000 for the inscriptions completing Part III, enter				
	the total of exclusively religious, charitable, et	c., contributions of \$1,000 or less for	the year. (Enter this information once)				
(a) No. from	Use duplicate copies of Part III if addition	ai space is needed.					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
							
		(e) Transfer of gif	t				
1		,,					
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
raiti							
		(e) Transfer of gif	t				
		(1)					
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I							
ı		(e) Transfer of gif	<u> </u>				
		(o) Transfer of gill	•				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) NI=							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
rait i							
	(e) Transfer of gift						
		(5) anoier of gir					
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				

		describe the kind(s) of property solo	(b) How acquired P - Purchase	(c) Date acquired	(d) Date sold	
.	-	rick warehouse; or common stock, 20	JU SRS. MLU CO.	D - Donation	(mo., day, yr.)	(mo., day, yr.)
		D SECURITIES LBO III, LP K-1		P		VARIOUS
		VENTURE FUND II	I, LP K-1	P		VARIOUS VARIOUS
	2,000 SHS POWE		1, DF K-1	P		VARIOUS
	FROM POWERSHAR			P		VARIOUS
		ISTRIBUTION FROM	WILLIAM RLATE	P		VARIOUS
	FROM MAJESTY I		P		VARIOUS	
		OSS FROM MAJESTY	P		VARIOUS	
		INS FROM PASS TH		- P		VARIOUS
		OR LOSS FROM PAS		P		VARIOUS
k .	UBI RECLASS			P		VARIOUS
1						
m						
n						
0	· · · · · · · · · · · · · · · · · · ·			<u> </u>	<u> </u>	<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) plus (f) minus (g)	
a	630,124.		607,673.			22,451.
b	9,452.					9,452.
С	12,979.					12,979.
d	3,716.					3,716.
е	1.					1.
f	363. 43,071.					363.
g h	8,379.			 		8,379.
	6,428.					$\frac{6,379.}{6,428.}$
-	<18.					<18.>
l k	<6,410.					<6,410.>
<u>'`</u>	10/1200					- (0 / 1 200)
m						
n						
0						
	Complete only for assets shown	ng gain in column (h) and owned by t	the foundation on 12/31/69		sses (from col. (h))	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		of col. (h) gain ove not less than *-0-*)	
а						22,451.
b					 -	9,452.
С						12,979.
d						3,716.
e						363.
f	<u>. </u>					43,071.
g						8,379.
h ı				 		6,428.
<u>'</u>				 	 _	<18.>
<u>,</u> k						<6,410.>
<u></u>						
m				· 	 ·	· · · · · · · · · · · · · · · · · · ·
n						
0						
2 C	Capital gain net income or (net ca	apital loss) { If gain, also enter in the loss in the	in Part I, line 7	2		100,412.
	-	ss) as defined in sections 1222(5) an	_ 1	-		
- 11	f gain, also enter in Part I, line 8, f (loss), enter "-0-" in Part I, line 8	column (c).	iu (0).	3	N/A	
	, ,,		/	- ,	/	

FORM 990-PF INTEREST ON SAVI	NGS AND	TEMPO	RARY C	ASH :	INVESTMENTS	STATEMENT	r 1
SOURCE						AMOUN	r.
ACCRUED INTEREST PURCHASED WILLIAM BLAIR							<283.: ,634.
TOTAL TO FORM 990-PF, PART I,	LINE 3,	COLU	MN A			46	351.
FORM 990-PF DIVIDEND	S AND IN	TERES	T FROM	SEC	JRITIES	STATEMENT	r 2
SOURCE	GF	ROSS A	MOUNT		PITAL GAINS DIVIDENDS	COLUMN (
WILLIAM BLAIR		3	6,309.		0.	36,	,309.
TOTAL TO FM 990-PF, PART I, L	N 4	3	6,309.		0.	36	,309.
FORM 990-PF	ОТНЕ	ER INC	OME			STATEMENT	r 3
DESCRIPTION			(A) EVENUE R BOOK		(B) NET INVEST- MENT INCOME		
IL REFUND LOSS FROM PASSTHROUGHS MISCELLANEOUS INCOME UBI INCOME FROM PASS THROUGHS UBI RECLASS			2,	706. 0. 551. 875.	<38,892 0 0	
TOTAL TO FORM 990-PF, PART I,	LINE 11	L	4,	257.	<38,892	!.>	·
FORM 990-PF	ACCOU	JNTING	FEES	C		STATEMENT	г 4
DESCRIPTION	(A) EXPENSE PER BOO		(B) ET INV ENT IN		(C) ADJUSTED NET INCOM		CABLE
TAX PREPARATION FEES	11,8	350.		0	•	11	,850.
TO FORM 990-PF, PG 1, LN 16B	11,8	350.		0	•	11	,850.
=					= =====	== ====	=

STATEMENT 6

FORM 990-PF

FORM 990-PF	OTHER E	XPENSES ST		PATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
SUPPLIES BOOKS POSTAGE PHONE MISSION EXPENSE MEALS ASSESMENT REAL ESTATE TAX OTHER EXPENSE MISCELLANEOUS FILING FEES BANK CHARGES	1,186. 4,758. 521. 576. 2,659. 2,063. 1,707. 3,953. 4,417. 151. 10. 76.	0. 0. 0. 0. 0. 0. 0. 0. 44.		1,186. 4,758. 521. 576. 2,659. 2,063. 1,707. 3,953. 4,417. 151. 10. 0.	
TO FORM 990-PF, PG 1, LN 23	22,077.	44.		22,001.	

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
25,000 SHS AON CORP 2,000 SHS BANK OF AMERICA CORP 4,000 SHS CINTAS CORP 500 SHS GENERAL ELECTRIC CO 1,000 SHS ILLINOIS TOOL WORKS INC 2,999 SHS MOLEX INC CLASS A 1,000 SHS PROGRESS ENERGY INC 7,000 SHS RPM INTERNATIONAL INC 205 SHS M & T BANK CORP 1,000 SHS ABBOTT LABORATORIES	200,206. 15,232. 6,723. 12,227. 12,140. 25,004. 10,855. 9,747. 17,736. 48,362.	8,955. 46,710. 59,340. 56,020. 171,850.
TOTAL TO FORM 990-PF, PART II, LINE 10B	358,232.	1,735,114.

CORPORATE STOCK

FORM 990-PF COF	RPORATE BONDS		STATEMENT	7
DESCRIPTION		BOOK VALUE	FAIR MARKET	r
50,000 PAR AMVESCAP PLC SR NT	•	51,787.	51,14	10.
100,000 PAR ANHEUSER BUSCH COS INC		97,930.	110,05	
50,000 PAR CITIGROUP INC BOND		48,856.	49,38	
50,000 PAR IRON MOUNTAIN INC BOND		50,000.	50,00	
100,000 PAR ANIXTER INC		99,250.	101,25	50.
100,000 PAR SCOTTS MIRACLE GRO CO S		103,875.	114,73	32.
50,000 PAR TRANSOCEAN INC SER C CVT		49,025.	49,15	
25,000 PAR FORD MOTOR CREDIT COMPAN	1X	25,000.	24,73	35.
TOTAL TO FORM 990-PF, PART II, LINE	E 10C	525,723.	550,45	57.
FORM 990-PF OTHE	ER INVESTMENTS		STATEMENT	 8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET	r
INVESTMENT IN MAJESTY I, LP.	COST	3,224,225.	3,790,22	 27.
INVESTMENT IN NORTH SKY VENTURE	COST	-,,,	0,.20,22	
FUND III, LP		215,975.	257,38	38.
INVESTMENT IN NORTH SKY LBO FUND	COST		•	
III, LP		160,639.	190,64	
FIRST EAGLE GLOBAL FUND	COST	30,485.	29,48	
WM. BLAIR GLOBAL GROWTH FUND	COST	497,107.	755,34	
		444		
DAVIS NEW YORK VENTURE FUND	COST	112,954.	122,04	13. —

	- LIST OF OFFICERS, D S AND FOUNDATION MANA	OF OFFICERS, DIRECTORS FOUNDATION MANAGERS					
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT			
EARLE M. COMBS III 141 WEST JACKSON BOULEVARD CHICAGO, IL 60604	PRESIDENT/DIRE	ECTOR 0.	0.	0.			
VIRGINIA M. COMBS 141 WEST JACKSON BOULEVARD CHICAGO, IL 60604	SECRETARY/TREA	ASURER 0.	0.	0.			
EARLE M. COMBS IV 141 WEST JACKSON BOULEVARD CHICAGO, IL 60604	DIRECTOR* 0.00	0.	0.	0.			
BONNIE C. ETTERS 141 WEST JACKSON BOULEVARD CHICAGO, IL 60604	DIRECTOR* 0.00	0.	0.	0.			
* AS NEEDED							
TOTALS INCLUDED ON 990-PF, I	AGE 6, PART VIII	0.	0.	0.			

Substantiation of Exercise of Expenditure Responsibility

Organizations: Earle M. & Virginia M. Combs

Foundation

Tax Year Ended: December 31, 2011

Form 990-PF, Part VII-B, Line 5c

The following Information is provided in accordance with IRC Sec. 4945(h)(3) and Reg. 53.4945-5(d) to demonstrate that the foundation exercised expenditure responsibility in regard to its grants.

Name and Location of Grantee	Amount of Grant	Date of Grant	Purpose of Grant	Amounts Expended by Grantee	To the Grantor's Knowledge, Grantee Has Diverted a Portion of Funds from the Purpose of the Grant (Yes/No)	Dates of Reports Received from the Grantee	Dates and Results of Any Verification of the Grantee's Reports
Christian Literature Sydney, Australia	\$500 00 \$500.00 \$2,500 00	01/14/2011 12/31/2011 03/22/2011	Religious Religious Religious	\$500 00 \$500 00 \$2,500.00	No	Sent letter of request to agency for final report.	See footnote
Rev Dr. Joseph Mungu Mazabuka, Zambia	\$750.00	01/24/2011	Religious Religious	\$750 00	o _Z	Sent letter of request to agency for final report.	See footnote

Footnote Earle M & Virginia M. Combs Foundation has no reason to doubt the accuracy or reliability of the information provided by the grantee, therefore, no independent verification of the information was made.

Form **8868**

(Rev. January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

• If you a	are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box		•	
• If you a	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of	this form).		
	omplete Part II unless you have already been granted					
Electron	ic filing $_{(e ext{-}file)}$. You can electronically file Form 8868 if $_{ ext{t}}$	you need a	a 3-month automatic extension of tin	ne to file (6	months for a corp	oration
required	to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically f	ile Form 8	868 to request an e	xtension
of time to	file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for	Transfers /	Associated With Ce	rtain
	Benefit Contracts, which must be sent to the IRS in page		(see instructions). For more details of	on the elec	ctronic filing of this f	form,
	v.irs gov/efile and click on e-file for Charities & Nonprofits					
Part I	-					
•	ation required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and	complete		T
Part I onl	•				-	X
	corporations (including 1120-C filers), partnerships, REM ome tax retums.	IICs, and t	rusts must use Form 7004 to reques	st an exten	sion of time	
	 	.	 			/=:A
Type or	Name of exempt organization or other filer, see instru	ictions.		Employe	r identification numb	oer (EIN) or
print	EARLE M. & VIRGINIA M. COMBS FOUNDATION X 36-616845				5. 4	
File by the						
due date for filing your	2384 OAK HILL RD.	ee manuc	dons.	Social se	curity number (SSN	1)
return See instructions		oreign add	tress see instructions			
	BARRINGTON, IL 60610	oroigir add	areas, see matractions.			
	,					
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			07
	·	•	,			
Applicat	ion	Return	Application			Return
						Code
Form 990)	01	Form 990-T (corporation)			07
Form 990	D-BL	02	Form 1041-A			08
Form 990)-EZ	01	Form 4720			09
Form 990)-PF	04	Form 5227			10
Form 990	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	O-T (trust other than above)	06	Form 8870			12
	EARLE M. COMBS					
	ooks are in the care of 2384 OAK HILL	RD• -		610		
	none No ► (312) 922-3900		FAX No. ►			
	organization does not have an office or place of busines				>	
_	is for a Group Return, enter the organization's four digit					
box 🕨	. If it is for part of the group, check this box				ers the extension is	for.
1 Ire	equest an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time	until	-	
	NOVEMBER 15, 2012 , to file the exemp	ot organiza	ition return for the organization name	ed above.	The extension	
	or the organization's return for: X calendar year 2011 or					
	tax year beginning		ad andma			
	Lax year beginning	, an	nd ending		- •	
2 If t	he tax year entered in line 1 is for less than 12 months, o	hock rose	on: Initial return	Final retur	m	
- 'r	Change in accounting period	oneon reas	initial return	i mai retui		
_	Orlange in accounting period					
3a If t	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069 e	enter the tentative tax less any			
	nrefundable credits. See instructions.	5000, 6	and contacted tan, 1000 any	3a	s	0.
_	his application is for Form 990-PF, 990-T, 4720, or 6069,	enter anv	refundable credits and	- 	-	
	timated tax payments made. Include any prior year over	_		3ь	s 2	2,358.
_	lance due. Subtract line 3b from line 3a. Include your pa					
	using EFTPS (Electronic Federal Tax Payment System).	-	· · · · · · · · · · · · · · · · · · ·	3c	s	0.
	If you are going to make an electronic fund withdrawal				EO for payment ins	tructions.

Form 8868 (Rev. 1-2012)					Page 2
• If you are filing for an Additional (Not Automatic) 3-Month Ext	tension, d	complete only Part II and check this	box		ل.ێـا ◄
Note. Only complete Part II if you have already been granted an a	utomatic	3-month extension on a previously fi	led Form	8868.	
• If you are filing for an Automatic 3-Month Extension, complet	te only Pa	art I (on page 1).			
Part II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies needed).
		· · · · · · · · · · · · · · · · · · ·	•	ng number, see l	
Type or Name of exempt organization or other filer, see instru	ctions			r identification nu	
print	OLIO III		Linpioyo		11501 (2.11) 01
File by the EARLE M. & VIRGINIA M. COMBS	FOU	NDATION	X	36-61684	154
due date for Number, street, and room or suite no. If a P O. box, so return. See 2384 OAK HILL RD.	ee instruc	tions.	Social se	cunty number (S	5N)
City, town or post office, state, and ZIP code. For a for BARRINGTON, IL 60610	oreign add	dress, see instructions.			
PARKINGION, ID 00010					
F-A					014
Enter the Return code for the return that this application is for (file	a separa	te application for each return)		• -	0 4
Ae:a:	T		\		15
Application	Return	Application			Return
Is For	Code	Is For		 	Code
Form 990	01				
Form 990-BL	02	Form 1041-A	<u> </u>		08
Form 990-EZ	01	Form 4720			09
Form 990 PF	04	Form 5227			10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870			12
STOP! Do not complete Part II if you were not already granted		natic 3-month extension on a prev	iously file	ed Form 8868.	
EARLE M. COMBS		DADDINGMON II 60	c 1 A		
• The books are in the care of > 2384 OAK HILL F	χυ		910	 	
Telephone No. ► (312) 922-3900		FAX No. ▶			r
If the organization does not have an office or place of business					· []
If this is for a Group Return, enter the organization's four digit (
box ►	and atta	ich a list with the names and EINs of	all memb	ers the extension	is for
	NOVEM	BER 15, 2012.			
5 For calendar year 2011, or other tax year beginning		, and ending	 	· · · · · · · · · · · · · · · · · · ·	·
6 If the tax year entered in line 5 is for less than 12 months, cl	heck reas	on: LInitial return L	Final r	etum	
Change in accounting period					
7 State in detail why you need the extension	TD 10	OSIDA MAL MAN DEMINA	337 3		,·
IN ORDER TO FILE A COMPLETE AN	ND AC	CURATE TAX RETURN,	AN A	DDTTTONAL	<u> </u>
EXTENSION IS REQUESTED.					
				r	
8a If this application is for Form 990-BL, 990-PF, 990 T, 4720, o	or 6069, e	nter the tentative tax, less any	i _		2 200
nonrefundable credits. See instructions.			8a	\$	2,298.
b If this application is for Form 990-PF, 990-T, 4720, or 6069,					
tax payments made. Include any prior year overpayment all	owed as a	a credit and any amount paid	ļ		F 101
previously with Form 8868.			8b	\$	5,181.
c Balance due. Subtract line 8b from line 8a Include your pa		h this form, if required, by using			0
EFTPS (Electronic Federal Tax Payment System). See instru			8c	\$	0.
-		st be completed for Part II o	•		
Under penalties of perjury, I declare that I have examined this form, including it is true, correct, and complete, and that I am authorized to prepare this for	ing accomp	panying scredules and statements, and to	the best o	i my knowledge and	Delief,
	()	\wedge	_	· 3/12/	17
Signature ► CONCLY Title ►	CPI		Date	· · · · · · · · · · · · · · · · · · ·	1
				Form 8868 (Rev. 1-2012)