

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

Department of the Treasury Internal Revenue Service

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

2011

For	calen	dar year 2011 or tax year beginning JUL	Y 1, 20	011, and	ending	JUNE 30	, 20 12
Na	me of fo	undation	<u>-</u> -	 -	A Employer	identification number	
G.L	_ VITA	LE FAMILY FOUNDATION				27-3097971	
Nu	mber an	d street (or P O box number if mail is not delivered to street address)	Ro	om/suite	B Telephone	number (see instruction	s)
200	N LIN	IWOOD ROAD, P.O. BOX 509					
Cit	y or tow	n, state, and ZIP code			C If exempt	ion application is pendi	na. check here ▶ [
GA	LESBU	JRG, IL 61401					g,
G	Check	call that apply: Initial return Initial return	n of a former pub	lic charity	D 1. Foreign	organizations, check l	nere ►
		☐ Final return ☐ Amended			i		_
		Address change Name cha	9			n organizations meeting here and attach compu	
		type of organization: Section 501(c)(3) exempt			E If private	foundation status was t	
		on 4947(a)(1) nonexempt charitable trust 🔲 Other ta				07(b)(1)(A), check here	► [
		narket value of all assets at J Accounting method		Accrual	F If the four	ndation is in a 60-mont)	termination
		f year (from Part II, col. (c),			under sec	ction 507(b)(1)(B), check	here ►
_		5) ▶ \$ 970251 (Part I, column (d) must b	e on cash basis)		<u> </u>		
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(h) No	t investment	(a) Advented set	(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books		income	(c) Adjusted net income	for charitable purposes
	1 :	the amounts in column (a) (see instructions).)					(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	10000	00			
	2	Check ► ☐ if the foundation is not required to attach Sch B					
	3	Interest on savings and temporary cash investments		44	44	44	
	4	Dividends and interest from securities	148	19	14819	14819	
	5a	Gross rents					······································
a)	b	Net rental income or (loss)				*	· ·
Revenue	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a	 			•	-
ĕ	7	Capital gain net income (from Part IV, line 2)	* * * * * * * * * * * * * * * * * * * *			, ^ ^ , , , , , , , , , , , , , , , , ,	
æ	8	Net short-term capital gain				· *** / / / /	*
	9	Income modifications	*	-			-
	10a	Gross sales less returns and allowances		- 			<u> </u>
	b	Less: Cost of goods sold	****	***	<u>,</u>	* /*	
	c	Gross profit or (loss) (attach schedule)		_			
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	10148	63	14863	14863	
'	13	Compensation of officers, directors, trustees, etc.			1,1000		
Š	14	Other employee salaries and wages					
ë	15	Pension plans; employee benefits					
Expenses	16a	Legal fees (attach schedule) 5 .2012.					
_	b	Accounting fees (attach schedule) . Jos		41			
Operating and Administrative	С	Other professional; fees; (attagh-schedule)					
Ţ	17	Interest L. U.G.D.E.N. U					
is.	18	Taxes (attach schedule) (see instructions)	1	34			
Ę	19	Depreciation (attach schedule) and depletion					
Þ	20	Occupancy					
9	21	Travel, conferences, and meetings	6	35	0	0	
a	22	Printing and publications		23	0	0	(
В	23	Other expenses (attach schedule)	15	12	1495	1495	(
aţ	24	Total operating and administrative expenses.					
ě	05	Add lines 13 through 23	23		1495	1495	(
Ö	25	Contributions, gifts, grants paid	2000				50000
_	26	Total expenses and disbursements. Add lines 24 and 25	2023	45	1495	1495	50000
	27	Subtract line 26 from line 12:		40			
	a	Excess of revenue over expenses and disbursements	8125	18			
	b	Net investment income (if negative, enter -0-) .			13368	40000	
		Adjusted net income (if negative, enter -0-)	 _			13368	rm 990-PF (201
ror	raper	work Reduction Act Notice, see instructions.	Cat	No 11289	Х	r Fo	rm 330-PF (2011

Part II		Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o		of year		
		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	,	(c) Fair Market Value		
	1	Cash—non-interest-bearing						
	2	Savings and temporary cash investments	1000	69	9721	69721		
	3	Accounts receivable ▶						
		Less: allowance for doubtful accounts ▶						
	4	Pledges receivable ▶				-		
		Less: allowance for doubtful accounts ▶						
	5	Grants receivable						
	6	Receivables due from officers, directors, trustees, and other						
		disqualified persons (attach schedule) (see instructions)						
	7	Other notes and loans receivable (attach schedule) ▶						
		Less: allowance for doubtful accounts ▶						
ţ	8	Inventories for sale or use	· · · · · · · · · · · · · · · · · · ·	****	\neg			
Assets	9	Prepaid expenses and deferred charges						
As	10a	Investments—U S and state government obligations (attach schedule)						
	b	Investments—corporate stock (attach schedule)	0	569	9506	574488		
	С	Investments—corporate bonds (attach schedule)	0		8852			
	11	Investments—land, buildings, and equipment basis ▶				320403		
		Less: accumulated depreciation (attach schedule) ►						
	12	Investments—mortgage loans						
	13	Investments—other (attach schedule)						
	14	Land, buildings, and equipment: basis ▶						
		Less accumulated depreciation (attach schedule) ▶						
	15	Other assets (describe ACCRUED INTEREST RECEIVABLE)	0		5573	5573		
	16	Total assets (to be completed by all filers—see the		<u> </u>	3373	5573		
		instructions. Also, see page 1, item I)	1000	96.	3652	970251		
_	17	Accounts payable and accrued expenses	1000	30.	134			
	18	Grants payable	0	150	0000	 -/		
<u>ë</u>	19	Deferred revenue	<u>_</u>	130	3000			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons						
ap	21	Mortgages and other notes payable (attach schedule)	<u>.</u>			ł		
ַ .	22		· .			, <u>,</u>		
	23	Other liabilities (describe Total liabilities (add lines 17 through 22)	0	<u>. </u>				
_		Foundations that follow SFAS 117, check here						
es		and complete lines 24 through 26 and lines 30 and 31.						
nc	24	Unrestricted		ţ				
Balances	25	Temporarily restricted		1				
	26	Permanently restricted				' .		
5						ł		
Fu		Foundations that do not follow SFAS 117, check here ▶ □ and complete lines 27 through 31.						
o	27	Capital stock, trust principal, or current funds				,		
ts	28	Paid-in or capital surplus, or land, bldg., and equipment fund						
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	-	 		The second secon		
As	30		1000		2540	, 4,1,1		
et	31	Total net assets or fund balances (see instructions)	1000	01.	3518			
Z	٥.	instructions)	1000		2050	, , ,		
Dа	rt III	Analysis of Changes in Net Assets or Fund Balances	1000	96.	3652	L		
		in net assets or fund balances at beginning of year—Part II, colu	mn (a) line 20 /	at agree with				
'	Pnd-	of year eported on prior year's return	mm (a), ime 30 (mus	scagree with				
_				⊢	1_	1000		
2		er amount from Part I, line 27a			2	812518		
3	Othe	er increases not included in line 2 (itemize)			3			
4		lines 1, 2, and 3			4	813518		
5		reases not included in line 2 (itemize)	Dort II. ook /-> !		5			
U	illa	If net assets or fund balances at end of year (line 4 minus line 5)—	rait II, column (D), li	iie su	6	813518		

		ne kind(s) of property sold (e.g., real estate use, or common stock, 200 shs MLC Co.)		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
<u>1a</u>						
_ <u>b</u>						
<u> </u>	·					
d				ļ		
<u>e</u>						
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		in or (loss) (f) minus (g)
<u>a</u>						
b						
<u> </u>						
<u>d</u>						
e	Complete only for accets she	average and the column (b) and average	h Al	40/04/00		
	Complete only for assets shi	owing gain in column (h) and owned		·		ol (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) I (j), if any		ot less than -0-) or (from col. (h))
<u>a</u>						
<u>b</u>						·
C						
d						
<u>e</u>			-la		ļ <u> </u>	
2	Capital gain net income o		also enter in Pa , enter -0- in Pa		2	
3	Net short-term capital gain if gain, also enter in Part	in or (loss) as defined in sections : I, line 8, column (c) (see instruc	1222(5) and (6 tions). If (loss)), enter -0- ın }		
	Part I, line 8			· }	3	
Part	V Qualification Unc	der Section 4940(e) for Redu	iced Tax on I	Net Investment	Income	
Vas t	tion 4940(d)(2) applies, leav he foundation liable for the s " the foundation does not	e section 4942 tax on the distribut t qualify under section 4940(e). D	table amount o	f any year in the	base period?	☐ Yes 🗸 N
1		ount in each column for each yea			aking any entries	
•	(a)	(b)	ar, see the man		aking any entires	. (d)
Cal	Base period years endar year (or tax year beginning in	A Million and Allinoide Annual Control of the Contr	s Net value o	(c) of noncharitable-use a		stribution ratio divided by col (c))
	2010		0		492	0
	2009		0		0	0
	2008		0		0	0
<u> </u>	2007		0		0	0
	2006		0		0	0
_						
2	Total of line 1, column (d)				. 2	
3		for the 5-year base period—divi			1 1	
	number of years the found	dation has been in existence if le	ess than 5 years		3	
4	Enter the net value of nor	ncharitable-use assets for 2011 f	rom Part X, line	5	. 4	47834
5	Multiply line 4 by fine 3				. 5	
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6	13
7	Add lines 5 and 6				. 7	13
8	Enter qualifying distribution	ons from Part XII, line 4			. 8	5000
•		ater than line 7, check the box in				

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see in	nstru	ction	ns)
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% of Part I, line 27b		134	
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of			į
_	Part I, line 12, col. (b).			نـــا
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
3	Add lines 1 and 2		134	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		134	
6 a	Credits/Payments: 2011 estimated tax payments and 2010 overpayment credited to 2011 6a			
b	Exempt foreign organizations—tax withheld at source 6b			:
C	Tax paid with application for extension of time to file (Form 8868) . 6c 134			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments. Add lines 6a through 6d		134	
8	Enter any penalty for underpayment of estimated tax. Check here			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10			
11	Enter the amount of line 10 to be. Credited to 2012 estimated tax ▶ Refunded ▶ 11			
	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 any political campaign?	4-	Yes	No ✓
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	1a		-
	of the instructions for definition)?	1b		1
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	<u> </u>		
	published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		✓
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ N/A (2) On foundation managers. ▶ \$ N/A		«×	,
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			ı
	on foundation managers. ► \$N/A			1
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		
	If "Yes," attach a detailed description of the activities.			,
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		1
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	Ν	A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		✓
•	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 			į
	conflict with the state law remain in the governing instrument?			~ j
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	6 7	✓	-
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	-		- -
	ILLINOIS			i
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			ĺ
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	N	A
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 year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes,"			
	complete Part XIV	9	✓	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		

Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see i	nstru	ctio	ns)			
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1.						
ь	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)						
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► ✓ and enter 1% of Part I, line 27b		134				
c	here \[\subseteq \] and enter 1% of Part I, line 27b		1				
·	Part I, line 12, col. (b).		-				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)						
3	Add lines 1 and 2		134				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)						
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		134				
6	Credits/Payments:						
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 6a						
b	Exempt foreign organizations—tax withheld at source 6b						
С	Tax paid with application for extension of time to file (Form 8868) . 6c						
d	Backup withholding erroneously withheld						
7	Total credits and payments. Add lines 6a through 6d		0				
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached If						
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9		134				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10						
11	Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ Refunded ▶ 11						
Part		,					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Щ	Yes	No			
b	participate or intervene in any political campaign?	1a		✓			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)?	1b		1			
	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		\			
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	~					
	(1) On the foundation. ▶ \$ N/A (2) On foundation managers. ▶ \$ N/A						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ N/A			,			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		√ ·			
	If "Yes," attach a detailed description of the activities.			_' _			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of						
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .	3		1			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		1			
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N	A			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		1			
	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:	end Vine	entre namen	, .			
	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	1				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7		✓			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶						
	ILLINOIS						
Ь	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	N	Α			
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 year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV	_	,				
10	•	9	✓				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	ا 🚛		,			
	names and addresses	10					

Form	990-PF	(2011)

Pa	O	e	-

Dord	VII-A Statements Regarding Activities (continued)	_		-age o
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)			,
12		11		✓
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)			١,
12		12		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	✓	
4.4	Website address >			
14	The books are in care of ▶ ADAM VITALE Telephone no. ▶ 309	-342-	6185	
	Located at ► 200 N LINWOOD ROAD, P.O. BOX 509, GALESBURG, IL ZIP+4 ►	6140	1	<u></u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here			▶ □
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		✓
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of			ı
	the foreign country ▶			l
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			;
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No]	!
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		}	·
	the benefit or use of a disqualified person)?		Ì	:
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		l	
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			;
b -	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			ļ., i
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	N	A
	Organizations relying on a current notice regarding disaster assistance check here			
С	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		V
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and]
	6e, Part XIII) for tax year(s) beginning before 2011?			:
	If "Yes," list the years ▶ 20, 20, 20, 20			
b	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.)	2b		1
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			<u> </u>
	▶ 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			,
	at any time during the year?	1 7/		ļ. '
b	If "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			į
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the tapse of		1	1
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		l	
	foundation had excess business holdings in 2011.)	3b	N	Ā
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	і``	1
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	— —	 	
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4h	·	,

•				
Form	990-	PF	(2011)	

Page 6

Part	VII-B	Statements Regarding Activities	for W	hich Form	4720 I	May Be R	equire	d (contii	nued)			
5a	During t	he year did the foundation pay or incur a	ny amo	unt to:								
	(1) Car	y on propaganda, or otherwise attempt to	oinflue	nce legislatio	n (sect	ion 4945(e))? .	☐ Yes	✓ No	1		1
		ence the outcome of any specific public									- 1	i
	dıre	ctly or indirectly, any voter registration dri						☐Yes	✓ No			į
	(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes V No								i		!	
		vide a grant to an organization other than						_	_			
	sect	tion 509(a)(1), (2), or (3), or section 4940(d)(2)? (se	ee instruction	ns) .			Yes	✓ No			
	(5) Prov	vide for any purpose other than religious,	charita	able, scientifi	c, litera	ry, or educ	ational	_				
	pur	ooses, or for the prevention of cruelty to c	hildren	or animals?				□Yes	✓ No			1
b	If any a	nswer is "Yes" to 5a(1)-(5), did any of the	transa	ctions fail to	qualify	under the	exception	ons desci	ribed in			:
	Regulat	ions section 53.4945 or in a current notice	regardıı	ng disaster as	ssistanc	e (see instr	uctions)	?	•	5b	N	Ą
	Organiz	ations relying on a current notice regardii	ng disa	ster assistan	ce ched	ck here .			▶ 🗆			
C		nswer is "Yes" to question 5a(4), does t									Ī	
	becaus	e it maintained expenditure responsibility	for the	grant?				☐ Yes	☐ No			į
		attach the statement required by Regula										
6a		foundation, during the year, receive any	funds, (directly or inc	directly,	, to pay pre	miums					
	•							☐ Yes	✓ No			
b		foundation, during the year, pay premiun	ns, dire	ctly or indired	ctly, on	a personal	benefit	contract	? .	6b		✓_
		to 6b, file Form 8870.										į
		me during the tax year, was the foundation a						☐ Yes	✓ No			
		did the foundation receive any proceeds								7b	N.	<u>A</u>
Pan	VIII	Information About Officers, Direct	tors, I	rustees, F	ounda	tion Mana	agers,	Highly I	and Er	nploy	ees,	
1	Liet all	and Contractors			-!				1			
<u>'</u>	List all	officers, directors, trustees, foundation		e, and average		mpensation		Contribution				
		(a) Name and address	hou	rs per week		paid, enter	emplo	yee benefit	plans	(e) Expe	nse acc allowan	
SEE A	TTACHE	D	devote	ed to position		-0-)	and dere	erred compe	ensation			
										•		
								_				
	_			•								
					L							
2		nsation of five highest-paid employee	s (oth	er than tho	se incl	uded on li	ne 1—:	see instr	uctions). If n	one, e	enter
	"NONE											
				(b) Title, and a	average			(d) Contrib employee		(e) Expe		ount.
	(a) Name a	nd address of each employee paid more than \$50,00	10	hours per v		(c) Compe	nsation	plans and	deferred		allowan	
								compen	sation			
NONE			-									
						<u> </u>						
	· · · · · · · · · · · · · · · · · · ·											
						ļ					-	
				 								
				<u> </u>								
Total	number	of other employees paid over \$50,000 .					 -		. ▶		0	
			•		<u> </u>		-			orm 99	_	(2011)

3	and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON"	E "
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
ION		(c) Compensation
ON		
-		
		<u> </u>
otal	number of others receiving over \$50,000 for professional services	0
a _r	IX-A Summary of Direct Charitable Activities	
Lie	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	Τ
	anizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	N/A	
•		
	······································	1
2		
	······································	
3		
4		
Par	IX-B Summary of Program-Related Investments (see instructions)	
De	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	N/A	
2		
All	other program-related investments. See instructions	
3		1
		1
ota	. Add lines 1 through 3	
		Form 990-PF (20

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn founda	tions,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	7 4 7 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5 7 5	
а	Average monthly fair market value of securities	1a	447479
b	Average of monthly cash balances	1b	35361
С	Fair market value of all other assets (see instructions)	1c	2787
d	Total (add lines 1a, b, and c)	1d	485627
е	Reduction claimed for blockage or other factors reported on lines 1a and	[,]	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3_	485627
4	Cash deemed held for charitable activities. Enter 1 ½ % of line 3 (for greater amount, see		
	instructions)	4	7284
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	478343
6	Minimum investment return. Enter 5% of line 5	6	23917
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ▶ ☐ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	23917
2a	Tax on investment income for 2011 from Part VI, line 5	. 155 ki	
b	Income tax for 2011. (This does not include the tax from Part VI.)	1	
С	Add lines 2a and 2b	2c	134
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	23783
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	23783
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	23783
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	·,* ·	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	50000
b	Program-related investments—total from Part IX-B	1b	
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		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	50000
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 (see instructions)	5	134
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	49866
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years	ng whether	the foundation

Part	XIII Undistributed Income (see instruction	ons)			- rage o
1	Distributable amount for 2011 from Part XI,	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
	line 7				23783
2	Undistributed income, if any, as of the end of 2011:				
а	Enter amount for 2010 only			0	!
b	Total for prior years: 20,20,20				
3	Excess distributions carryover, if any, to 2011:				ı
а	From 20060				
b	From 2007				
C	From 2008				
d	From 2009				
e	From 2010				
T	Total of lines 3a through e	0			
4	Qualifying distributions for 2011 from Part XII, line 4: ▶ \$				
a	Applied to 2010, but not more than line 2a .			.0	
b	Applied to undistributed income of prior years (Election required—see instructions).		_	, 1	*
С	Treated as distributions out of corpus (Election		0		
Ŭ	required—see instructions)	o			*
d	Applied to 2011 distributable amount	, con who 's		* , ,	23783
е	Remaining amount distributed out of corpus	26217	~ × × *	* _ **	, 3 / 100 M
5	Excess distributions carryover applied to 2011	0	#	** ** ** ** **	0
	(If an amount appears in column (d), the same		may v v v votes in the second	A *** * ** * *	214 2 4 Men - 11 11 11 11
_	amount must be shown in column (a).)			>	The second secon
6	Enter the net total of each column as indicated below:				
a	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	26217			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		, , , , , , , , , , , , , , , , , , ,
С	Enter the amount of prior years' undistributed	**************************************		*	V
	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		
е	Undistributed income for 2010. Subtract line				· .
	4a from line 2a. Taxable amount-see	, , , ,	****		* //
	instructions	» `/	~ ~ ~ · · · · · · · · · · · · · · · · ·	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) (see instructions)				-
8	Excess distributions carryover from 2006 not	0			
	applied on line 5 or line 7 (see instructions).	0			
9	Excess distributions carryover to 2012.				
-	Subtract lines 7 and 8 from line 6a	26217			
10	Analysis of line 9:	20217	·		
a	Excess from 2007		}		
b	Excess from 2008 0	1			
С	Excess from 2009 0	1			
d	Excess from 2010				
е	Excess from 2011 26217]	1		

any time during the year—see instructions.) Information Regarding Foundation Managers: List any managers of the foundation who have contributed more than 2% of the total contributions received by the found before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2)) List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accompanie.		(4) Gross investment income . 14863 0 0 1486
Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the found before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2)) //A b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. //A 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here ▶ ☐ if the foundation only makes contributions to preselected charitable organizations and does not accommodated requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations of the conditions, complete items 2a, b, c, and d. a The name, address, and telephone number of the person to whom applications should be addressed: DAM VITALE 100 N LINWOOD ROAD, P.O. BOX 509, GALESBURG, IL 61401 309-342-6185 b The form in which applications should be submitted and information and materials they should include:	art	XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets a
a List any managers of the foundation who have contributed more than 2% of the total contributions received by the found before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2)) //A b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. //A 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here ▶ ☐ if the foundation only makes contributions to preselected charitable organizations and does not accounted requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations of the conditions, complete items 2a, b, c, and d. a The name, address, and telephone number of the person to whom applications should be addressed: DAM VITALE 100 N LINWOOD ROAD, P.O. BOX 509, GALESBURG, IL 61401 309-342-6185 b The form in which applications should be submitted and information and materials they should include:		any time during the year—see instructions.)
before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2)) A b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. IA 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here ▶ ☐ if the foundation only makes contributions to preselected charitable organizations and does not accurately requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations of 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: DAM VITALE DO N LINWOOD ROAD, P.O. BOX 509, GALESBURG, IL 61401 309-342-6185 b The form in which applications should be submitted and information and materials they should include:	1	Information Regarding Foundation Managers:
b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. IA Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accurately defended in the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations of other conditions, complete items 2a, b, c, and d. The name, address, and telephone number of the person to whom applications should be addressed: DAM VITALE DO N LINWOOD ROAD, P.O. BOX 509, GALESBURG, IL 61401 309-342-6185 The form in which applications should be submitted and information and materials they should include:	а	List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation
 b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here ► if the foundation only makes contributions to preselected charitable organizations and does not accurately requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations of 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: DAM VITALE OO N LINWOOD ROAD, P.O. BOX 509, GALESBURG, IL 61401 309-342-6185 b The form in which applications should be submitted and information and materials they should include: 		before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2))
ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. I/A Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here ▶ ☐ if the foundation only makes contributions to preselected charitable organizations and does not ac unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations of other conditions, complete items 2a, b, c, and d. The name, address, and telephone number of the person to whom applications should be addressed: DAM VITALE DO N LINWOOD ROAD, P.O. BOX 509, GALESBURG, IL 61401 309-342-6185 The form in which applications should be submitted and information and materials they should include:	/A	
 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here ▶ ☐ if the foundation only makes contributions to preselected charitable organizations and does not ac unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations of 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: DAM VITALE DO N LINWOOD ROAD, P.O. BOX 509, GALESBURG, IL 61401 309-342-6185 b The form in which applications should be submitted and information and materials they should include: 	b	List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the
 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here		ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.
Check here ▶ ☐ if the foundation only makes contributions to preselected charitable organizations and does not ac unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations of 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: DAM VITALE 100 N LINWOOD ROAD, P.O. BOX 509, GALESBURG, IL 61401 309-342-6185 b The form in which applications should be submitted and information and materials they should include:	/A	
unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations to other conditions, complete items 2a, b, c, and d. The name, address, and telephone number of the person to whom applications should be addressed: DAM VITALE ON LINWOOD ROAD, P.O. BOX 509, GALESBURG, IL 61401 309-342-6185 The form in which applications should be submitted and information and materials they should include:	2	Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:
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: DAM VITALE 00 N LINWOOD ROAD, P.O. BOX 509, GALESBURG, IL 61401 309-342-6185 b The form in which applications should be submitted and information and materials they should include:		Check here ▶ ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept
a The name, address, and telephone number of the person to whom applications should be addressed: DAM VITALE 00 N LINWOOD ROAD, P.O. BOX 509, GALESBURG, IL 61401 309-342-6185 b The form in which applications should be submitted and information and materials they should include:		unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under
DAM VITALE 00 N LINWOOD ROAD, P.O. BOX 509, GALESBURG, IL 61401 309-342-6185 b The form in which applications should be submitted and information and materials they should include:		other conditions, complete items 2a, b, c, and d.
N LINWOOD ROAD, P.O. BOX 509, GALESBURG, IL 61401 309-342-6185 The form in which applications should be submitted and information and materials they should include:	а	The name, address, and telephone number of the person to whom applications should be addressed:
b The form in which applications should be submitted and information and materials they should include:	DAM	I VITALE
	00 N	LINWOOD ROAD, P.O. BOX 509, GALESBURG, IL 61401 309-342-6185
O PRESCRIBED FORM	b	The form in which applications should be submitted and information and materials they should include:
	O PF	RESCRIBED FORM

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

c Any submission deadlines:

NONE

NONE

factors:

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Recipient Foundation Purpose of grant or status of Amount any foundation manager contribution Name and address (home or business) recipient or substantial contributor a Paid during the year **KNOX COUNTY YMCA** N/A N/A **EDUCATION-GENERAL WELLNESS** 50000 1324 W. CARL SANDBURG DRIVE GALESBURG, IL 61401 За 50000 **b** Approved for future payment **KNOX COUNTY YMCA** N/A N/A **EDUCATION-GENERAL WELLNESS** 150000 1324 W CARL SANDBURG DRIVE GALESBURG, IL 61401 3b 150000

	r gros	s amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by section	on 512, 513, or 514	(e)
•	Drogs		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
•	a a	ram service revenue.					
	ъ –						
	c -			<u> </u>		_	1
	d _				 		
	е —				 	· · · · · ·	
	f -		-		<u> </u>		
	g Fe	ees and contracts from government agencies			 		
2		bership dues and assessments				<u> </u>	
3		est on savings and temporary cash investments					44
4		ends and interest from securities			 		14819
5		ental income or (loss) from real estate:	<u> </u>				14013
_		ebt-financed property	 				
		ot debt-financed property			 		
6		ental income or (loss) from personal property			 		
7		r investment income			 		
8		or (loss) from sales of assets other than inventory		·			
9		ncome or (loss) from special events					
10		s profit or (loss) from sales of inventory .			-		
		r rovonuo.	 -				
•	b						
	<u> </u>			.			
	ч –						• • • • • • • • • • • • • • • • • • • •
	<u> </u>						
12	Subt	otal. Add columns (b), (d), and (e)					14062
						13	14863
	104						
						.~	14003
See	works	sheet in line 13 instructions to verify calculation	s.)				14803
See Par		sheet in line 13 instructions to verify calculation Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	ot Purposes		
See Par Lin	works	sheet in line 13 instructions to verify calculation	s.) ccomplishm	ent of Exemp	ot Purposes	-A contributed i	mportantly to the
See Par Lin	works t XVI e No.	Belationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) ccomplishm income is report poses (other than	ent of Exemported in column by providing fur	ot Purposes (e) of Part XVI nds for such purp	-A contributed i oses) (See instru	mportantly to the
See Par Lin	works t XVI e No. ▼	Beheet in line 13 instructions to verify calculation B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur THE ORGANIZATION IS ORGANIZED FOR THE	s.) Ccomplishm Income is repoposes (other tha	ent of Exemported in column in by providing fur	ot Purposes (e) of Part XVI nds for such purp	-A contributed i oses) (See instruction	mportantly to the ctions)
See Par Lin	works t XVI e No. V	Belationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur	s.) Ccomplishm Income is repoposes (other tha	ent of Exemported in column in by providing fur	ot Purposes (e) of Part XVI nds for such purp	-A contributed i oses) (See instruction	mportantly to the ctions)
See Par Lin	works t XVI e No. I	Beheet in line 13 instructions to verify calculation Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur THE ORGANIZATION IS ORGANIZED FOR THE E COLLECTING INCOME THEREFROM, AND TURN	s.) Ccomplishm Income is repoposes (other tha	ent of Exemported in column in by providing fur	ot Purposes (e) of Part XVI nds for such purp	-A contributed i oses) (See instruction	mportantly to the ctions)
See Par Lin	works t XVI e No. I	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur THE ORGANIZATION IS ORGANIZED FOR THE E COLLECTING INCOME THEREFROM, AND TURN ORGANIZATIONS.	IS.) ICCOMPLISHM INCOME IS REPORTED TO THE INCOME IS REPORTED TO THE INCOME INC	ent of Exemported in column in by providing fur RPOSE OF HOLD ENTIRE AMOUN	ot Purposes (e) of Part XVI nds for such purp ING TITLE TO PI NT LESS EXPENS	-A contributed i oses) (See instrui ROPERTY AND SES TO EXEMPT	mportantly to the ctions)
See Par Lin	works t XVI e No. I	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur THE ORGANIZATION IS ORGANIZED FOR THE E COLLECTING INCOME THEREFROM, AND TURN ORGANIZATIONS. THE INDIVIDUAL LINE ITEMS ALLOW THE ORGANIZATIONS	IS.) ICCOMPLISHM INCOME IS REPOPULATED INCOME IS REPOPULATED INCOME INCO	ent of Exemported in column by providing fur RPOSE OF HOLD ENTIRE AMOUN	et Purposes (e) of Part XVI ands for such purposes ING TITLE TO PI NT LESS EXPENSE	-A contributed in oses) (See instructions of the contributed in oses) (See instructions of the contributed in oses) (See To EXEMPT)	mportantly to the ctions)
See Par Lin	works t XVI e No. I	Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur THE ORGANIZATION IS ORGANIZED FOR THE E COLLECTING INCOME THEREFROM, AND TURN ORGANIZATIONS.	IS.) ICCOMPLISHM INCOME IS reproses (other than EXCLUSIVE PURING OVER THE	ent of Exemported in column by providing fur RPOSE OF HOLD ENTIRE AMOUNTABILITY TO DETI	et Purposes (e) of Part XVI nds for such purposes ING TITLE TO PI NT LESS EXPENS ERMINE THE TIME JM BENEFIT FROM	-A contributed ioses) (See instructions of the contributed in the cont	mportantly to the ctions)
See Par Lin	works t XVI e No. I	Breationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur THE ORGANIZATION IS ORGANIZED FOR THE E COLLECTING INCOME THEREFROM, AND TURN ORGANIZATIONS. THE INDIVIDUAL LINE ITEMS ALLOW THE ORGANIZATION ORGANIZATION ORGANIZATION ORGANIZATIONS.	IS.) ICCOMPLISHM INCOME IS reproses (other than EXCLUSIVE PURING OVER THE	ent of Exemported in column by providing fur RPOSE OF HOLD ENTIRE AMOUNTABILITY TO DETI	et Purposes (e) of Part XVI nds for such purposes ING TITLE TO PI NT LESS EXPENS ERMINE THE TIME JM BENEFIT FROM	-A contributed ioses) (See instructions of the contributed in the cont	mportantly to the ctions)
See Par Lin	works t XVI e No. I	Explain below how each activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur THE ORGANIZATION IS ORGANIZED FOR THE E COLLECTING INCOME THEREFROM, AND TURN ORGANIZATIONS. THE INDIVIDUAL LINE ITEMS ALLOW THE ORGINAMOUNT OF THE INDIVIDUAL GRANTS IN ORDIFUNDS THIS ADDITIONALLY ALLOWS THE TR	IS.) ICCOMPLISHM INCOME IS reproses (other than EXCLUSIVE PURING OVER THE	ent of Exemported in column by providing fur RPOSE OF HOLD ENTIRE AMOUNTABILITY TO DETI	et Purposes (e) of Part XVI nds for such purposes ING TITLE TO PI NT LESS EXPENS ERMINE THE TIME JM BENEFIT FROM	-A contributed ioses) (See instructions of the contributed in the cont	mportantly to the ctions)
See Par Lin	works t XVI e No. I	Explain below how each activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur THE ORGANIZATION IS ORGANIZED FOR THE E COLLECTING INCOME THEREFROM, AND TURN ORGANIZATIONS. THE INDIVIDUAL LINE ITEMS ALLOW THE ORGINAMOUNT OF THE INDIVIDUAL GRANTS IN ORDIFUNDS THIS ADDITIONALLY ALLOWS THE TR	IS.) ICCOMPLISHM INCOME IS reproses (other than EXCLUSIVE PURING OVER THE	ent of Exemported in column by providing fur RPOSE OF HOLD ENTIRE AMOUNTABILITY TO DETI	et Purposes (e) of Part XVI nds for such purposes ING TITLE TO PI NT LESS EXPENS ERMINE THE TIME JM BENEFIT FROM	-A contributed ioses) (See instructions of the contributed in the cont	mportantly to the ctions)
See Par Lin	works t XVI e No. I	Explain below how each activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur THE ORGANIZATION IS ORGANIZED FOR THE E COLLECTING INCOME THEREFROM, AND TURN ORGANIZATIONS. THE INDIVIDUAL LINE ITEMS ALLOW THE ORGINAMOUNT OF THE INDIVIDUAL GRANTS IN ORDIFUNDS THIS ADDITIONALLY ALLOWS THE TR	IS.) ICCOMPLISHM INCOME IS reproses (other than EXCLUSIVE PURING OVER THE	ent of Exemported in column by providing fur RPOSE OF HOLD ENTIRE AMOUNTABILITY TO DETI	et Purposes (e) of Part XVI nds for such purposes ING TITLE TO PI NT LESS EXPENS ERMINE THE TIME JM BENEFIT FROM	-A contributed ioses) (See instructions of the contributed in the cont	mportantly to the ctions)
See Par Lin	works t XVI e No. I	Explain below how each activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur THE ORGANIZATION IS ORGANIZED FOR THE E COLLECTING INCOME THEREFROM, AND TURN ORGANIZATIONS. THE INDIVIDUAL LINE ITEMS ALLOW THE ORGINAMOUNT OF THE INDIVIDUAL GRANTS IN ORDIFUNDS THIS ADDITIONALLY ALLOWS THE TR	IS.) ICCOMPLISHM INCOME IS reproses (other than EXCLUSIVE PURING OVER THE	ent of Exemported in column by providing fur RPOSE OF HOLD ENTIRE AMOUNTABILITY TO DETI	et Purposes (e) of Part XVI nds for such purposes ING TITLE TO PI NT LESS EXPENS ERMINE THE TIME JM BENEFIT FROM	-A contributed ioses) (See instructions of the contributed in the cont	mportantly to the ctions)
See Par Lin	works t XVI e No. I	Explain below how each activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur THE ORGANIZATION IS ORGANIZED FOR THE E COLLECTING INCOME THEREFROM, AND TURN ORGANIZATIONS. THE INDIVIDUAL LINE ITEMS ALLOW THE ORGINAMOUNT OF THE INDIVIDUAL GRANTS IN ORDIFUNDS THIS ADDITIONALLY ALLOWS THE TR	IS.) ICCOMPLISHM INCOME IS reproses (other than EXCLUSIVE PURING OVER THE	ent of Exemported in column by providing fur RPOSE OF HOLD ENTIRE AMOUNTABILITY TO DETI	et Purposes (e) of Part XVI nds for such purposes ING TITLE TO PI NT LESS EXPENS ERMINE THE TIME JM BENEFIT FROM	-A contributed ioses) (See instructions of the contributed in the cont	mportantly to the ctions)
See Par Lin	works t XVI e No. I	Explain below how each activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur THE ORGANIZATION IS ORGANIZED FOR THE E COLLECTING INCOME THEREFROM, AND TURN ORGANIZATIONS. THE INDIVIDUAL LINE ITEMS ALLOW THE ORGINAMOUNT OF THE INDIVIDUAL GRANTS IN ORDIFUNDS THIS ADDITIONALLY ALLOWS THE TR	IS.) ICCOMPLISHM INCOME IS reproses (other than EXCLUSIVE PURING OVER THE	ent of Exemported in column by providing fur RPOSE OF HOLD ENTIRE AMOUNTABILITY TO DETI	et Purposes (e) of Part XVI nds for such purposes ING TITLE TO PI NT LESS EXPENS ERMINE THE TIME JM BENEFIT FROM	-A contributed ioses) (See instructions of the contributed in the cont	mportantly to the ctions)
See Par Lin	works t XVI e No. I	Explain below how each activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur THE ORGANIZATION IS ORGANIZED FOR THE E COLLECTING INCOME THEREFROM, AND TURN ORGANIZATIONS. THE INDIVIDUAL LINE ITEMS ALLOW THE ORGINAMOUNT OF THE INDIVIDUAL GRANTS IN ORDIFUNDS THIS ADDITIONALLY ALLOWS THE TR	IS.) ICCOMPLISHM INCOME IS reproses (other than EXCLUSIVE PURING OVER THE	ent of Exemported in column by providing fur RPOSE OF HOLD ENTIRE AMOUNTABILITY TO DETI	et Purposes (e) of Part XVI nds for such purposes ING TITLE TO PI NT LESS EXPENS ERMINE THE TIME JM BENEFIT FROM	-A contributed ioses) (See instructions of the contributed in the cont	mportantly to the ctions)
See Par Lin	works t XVI e No. I	Explain below how each activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur THE ORGANIZATION IS ORGANIZED FOR THE E COLLECTING INCOME THEREFROM, AND TURN ORGANIZATIONS. THE INDIVIDUAL LINE ITEMS ALLOW THE ORGINAMOUNT OF THE INDIVIDUAL GRANTS IN ORDIFUNDS THIS ADDITIONALLY ALLOWS THE TR	IS.) ICCOMPLISHM INCOME IS reproses (other than EXCLUSIVE PURING OVER THE	ent of Exemported in column by providing fur RPOSE OF HOLD ENTIRE AMOUNTABILITY TO DETI	et Purposes (e) of Part XVI nds for such purposes ING TITLE TO PI NT LESS EXPENS ERMINE THE TIME JM BENEFIT FROM	-A contributed ioses) (See instructions of the contributed in the cont	mportantly to the ctions)
See Par Lin	works t XVI e No. I	Explain below how each activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur THE ORGANIZATION IS ORGANIZED FOR THE E COLLECTING INCOME THEREFROM, AND TURN ORGANIZATIONS. THE INDIVIDUAL LINE ITEMS ALLOW THE ORGINAMOUNT OF THE INDIVIDUAL GRANTS IN ORDIFUNDS THIS ADDITIONALLY ALLOWS THE TR	IS.) ICCOMPLISHM INCOME IS reproses (other than EXCLUSIVE PURING OVER THE	ent of Exemported in column by providing fur RPOSE OF HOLD ENTIRE AMOUNTABILITY TO DETI	et Purposes (e) of Part XVI nds for such purposes ING TITLE TO PI NT LESS EXPENS ERMINE THE TIME JM BENEFIT FROM	-A contributed ioses) (See instructions of the contributed in the cont	mportantly to the ctions)
See Par Lin	works t XVI e No. I	Explain below how each activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur THE ORGANIZATION IS ORGANIZED FOR THE E COLLECTING INCOME THEREFROM, AND TURN ORGANIZATIONS. THE INDIVIDUAL LINE ITEMS ALLOW THE ORGINAMOUNT OF THE INDIVIDUAL GRANTS IN ORDIFUNDS THIS ADDITIONALLY ALLOWS THE TR	IS.) ICCOMPLISHM INCOME IS reproses (other than EXCLUSIVE PURING OVER THE	ent of Exemported in column by providing fur RPOSE OF HOLD ENTIRE AMOUNTABILITY TO DETI	et Purposes (e) of Part XVI nds for such purposes ING TITLE TO PI NT LESS EXPENS ERMINE THE TIME JM BENEFIT FROM	-A contributed ioses) (See instructions of the contributed in the cont	mportantly to the ctions)
See Par Lin	works t XVI e No. I	Explain below how each activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur THE ORGANIZATION IS ORGANIZED FOR THE E COLLECTING INCOME THEREFROM, AND TURN ORGANIZATIONS. THE INDIVIDUAL LINE ITEMS ALLOW THE ORGINAMOUNT OF THE INDIVIDUAL GRANTS IN ORDIFUNDS THIS ADDITIONALLY ALLOWS THE TR	IS.) ICCOMPLISHM INCOME IS reproses (other than EXCLUSIVE PURING OVER THE	ent of Exemported in column by providing fur RPOSE OF HOLD ENTIRE AMOUNTABILITY TO DETI	et Purposes (e) of Part XVI nds for such purposes ING TITLE TO PI NT LESS EXPENS ERMINE THE TIME JM BENEFIT FROM	-A contributed ioses) (See instructions of the contributed in the cont	mportantly to the ctions)
See Par Lin	works t XVI e No. I	Explain below how each activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur THE ORGANIZATION IS ORGANIZED FOR THE E COLLECTING INCOME THEREFROM, AND TURN ORGANIZATIONS. THE INDIVIDUAL LINE ITEMS ALLOW THE ORGINAMOUNT OF THE INDIVIDUAL GRANTS IN ORDIFUNDS THIS ADDITIONALLY ALLOWS THE TR	IS.) ICCOMPLISHM INCOME IS reproses (other than EXCLUSIVE PURING OVER THE	ent of Exemported in column by providing fur RPOSE OF HOLD ENTIRE AMOUNTABILITY TO DETI	et Purposes (e) of Part XVI nds for such purposes ING TITLE TO PI NT LESS EXPENS ERMINE THE TIME JM BENEFIT FROM	-A contributed ioses) (See instructions of the contributed in the cont	mportantly to the ctions)
See Par Lin	works t XVI e No. I	Explain below how each activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur THE ORGANIZATION IS ORGANIZED FOR THE E COLLECTING INCOME THEREFROM, AND TURN ORGANIZATIONS. THE INDIVIDUAL LINE ITEMS ALLOW THE ORGINAMOUNT OF THE INDIVIDUAL GRANTS IN ORDIFUNDS THIS ADDITIONALLY ALLOWS THE TR	IS.) ICCOMPLISHM INCOME IS reproses (other than EXCLUSIVE PURING OVER THE	ent of Exemported in column by providing fur RPOSE OF HOLD ENTIRE AMOUNTABILITY TO DETI	et Purposes (e) of Part XVI nds for such purposes ING TITLE TO PI NT LESS EXPENS ERMINE THE TIME JM BENEFIT FROM	-A contributed ioses) (See instructions of the contributed in the cont	mportantly to the ctions)
See Par Lin	works t XVI e No. I	Explain below how each activities to the A Explain below how each activity for which accomplishment of the foundation's exempt pur THE ORGANIZATION IS ORGANIZED FOR THE E COLLECTING INCOME THEREFROM, AND TURN ORGANIZATIONS. THE INDIVIDUAL LINE ITEMS ALLOW THE ORGINAMOUNT OF THE INDIVIDUAL GRANTS IN ORDIFUNDS THIS ADDITIONALLY ALLOWS THE TR	IS.) ICCOMPLISHM INCOME IS reproses (other than EXCLUSIVE PURING OVER THE	ent of Exemported in column by providing fur RPOSE OF HOLD ENTIRE AMOUNTABILITY TO DETI	et Purposes (e) of Part XVI nds for such purposes ING TITLE TO PI NT LESS EXPENS ERMINE THE TIME JM BENEFIT FROM	-A contributed ioses) (See instructions of the contributed in the cont	mportantly to the ctions)

Part	XVII		n Regarding Tran	sfers To and Tra	ansaction	s and f	Relationshi	ps With N	oncharit		<u>ugo 15</u>
1	ın secti	organization d on 501(c) of the ations?	irectly or indirectly e Code (other than	engage in any of the section 501(c)(3) or	e following ganizations	with any	y other organection 527, r	ization des elating to p	cribed olitical	Yes	No
а	Transfe	ers from the rep	orting foundation to	o a noncharitable ex	kempt orga	ınızation	of:				1 ;
	(1) Cas	sh							[1	a(1)	1
	(2) Oth	er assets .							1	a(2)	1
þ	Other t	ransactions:									T
				empt organization					1	b(1)	✓
	(2) Pur	chases of asse	ts from a noncharit	able exempt organiz	zation				[1	b(2)	7
	(3) Rer	ntal of facilities,	equipment, or other	er assets					[1	b(3)	✓
	(4) Rei	mbursement ar	rangements						1	b(4)	✓
	(5) Loa	ins or loan gua	rantees						1	b(5)	▼
	(6) Per	formance of se	rvices or membersl	nip or fundraising so	olicitations				1	b(6)	/
				sts, other assets, or						1c	/
d	If the a	inswer to any o	of the above is "Ye	s," complete the fo	ollowing sc	hedule.	Column (b) s	should alwa	ys show	the fair	market
				ices given by the re jement, show in col							
(a) Line	no (b)	Amount involved	(c) Name of nonc	haritable exempt organiza	ation	(d) Desc	ription of transfe	rs, transaction	s, and sharir	g arrange	ments
											
			·								
					_						
							·			-	
		_	<u></u>								
			<u> </u>								
						<u></u>					
2a b	describ	ped in section 5		filiated with, or relation of the than section 5				· · ·	· · □] No
		(a) Name of organ	ization	(b) Type of o	organization			(c) Description	of relations	hip	
											
								_			
											
											
	1		1 1 15-111.	<u> </u>			L				<u> </u>
Sign				ed this retum, including act nan taxpayer) is based on al					ny knowleag	and belie	, it is true,
•		DORTH		1.//	Vice	_	•		May the IRS		
Here		6: 11a	<u> </u>	11/9/20	012 /	resid	ent		(see instructi		
		ure of officer or trus		Date /	Title						
Paid		Print/Type preparer	's name	Preparer's signature			Date		· 🗸 if PT	IN.	
Prep	arer 🛚	<u> VILLIAM R. PILL</u>	MAN	william,	Ray P	Ulman	UPA 11-	5-/2self-er	nployed	P00758	8693
Use		Firm's name	WILLIAM R PILLMA	N, C.P.A.	U			Firm's EIN ▶	37	-131211	1
		Firm's address 🕨	1921 W ALTORFER	DRIVE, PEORIA, IL	61615			Phone no		713-281	
									For	ո 990-F	PF (2011)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2011

Employer identification number

G.L. VITAL	LE FAMILY FOUNDATION	27-3097971						
Organizat	tion type (check one):	-						
Filers of:	Section:							
Form 990	or 990-EZ 501(c)() (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated	d as a private foundation						
	☐ 527 political organization							
Form 990-	-PF							
	4947(a)(1) nonexempt charitable trust treated as a	a private foundation						
	501(c)(3) taxable private foundation							
•	your organization is covered by the General Rule or a Special Rule . by a section 501(c)(7), (8), or (10) organization can check boxes for both the ns.	ne General Rule and a Special Rule. See						
General R	Rule							
	For an organization filing Form 990, 990-EZ, or 990-PF that received, during property) from any one contributor. Complete Parts I and II.	ng the year, \$5,000 or more (in money or						
Special R	Rules							
u tr	For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one conthe greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, Complete Parts I and II.	intributor, during the year, a contribution of						
d	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ the during the year, total contributions of more than \$1,000 for use exclusively or educational purposes, or the prevention of cruelty to children or animals	for religious, charitable, scientific, literary,						
d n y a								
Caution. A	An organization that is not covered by the General Rule and/or the Specia	al Rules does not file Schedule B (Form 990,						

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
G.L. VITALE FAMILY FOUNDATION

Employer identification number 27-3097971

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.								
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
	G. LOUIS VITALE FAMILY TRUST C/O MICHAEL L. VITALE, 73 OAK RIDGE DRIVE DECATUR, IL 62521	\$\$	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						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
		\$	Person						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
		\$	Person						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
		\$	Person						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution						
		\$	Person						

Name of organization
G.L. VITALE FAMILY FOUNDATION

Employer identification number 27-3097971

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 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						
		\$							

Schedule B (Form 990, 990-EZ, or 990-PF) (2011) Name of organization **Employer identification number G L. VITALE FAMILY FOUNDATION** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations Part III that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and 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 (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift from (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

27-3097971 G.L. VITALE FAMILY FOUNDATION FOR THE YEAR ENDED JUNE 30, 2012

FORM 990-PF PAGE 1

	AND	EVENUE EXPENSES BOOKS	NET ESTMENT NCOME	JUSTED NET COME	FOR CH	SEMENTS ARITABLE POSES
LINE 18 - TAXES EXCISE TAX	\$	<u>134</u> .	\$ <u>Q</u> .	\$ <u>Q</u> .	\$	<u>Q</u> .
LINE 23 - OTHER EXPENSES FILING FEES MISCELLANEOUS INVESTMENT MANAGEMENT FEES	\$ \$	10. 7. <u>1495</u> . 1512.	\$ 0. 0. <u>1495</u> . 1495.	\$ 0. 0. <u>1495</u> . 1495.	\$ \$	0. 0. <u>0</u> . 0.

27-3097971 G.L. VITALE FAMILY FOUNDATION FOR THE YEAR ENDED JUNE 30, 2012

FORM 990PF - PAGE 2

	BEGIN OF Y	EAR	END OF YEAR	FAIR MARKET
LINE 10B - INVESTMENTS - CORPORATE STOCK	<u>BOOK \</u>	VALUE	BOOK VALUE	<u>VALUE</u>
MORGAN STANLEY SMITH BARNEY RBC WEALTH MANAGEMENT	\$	0. 0	\$ 443750. 125756.	\$ 441368. 133120.
TIBO WENETH MANAGEMENT	\$	<u>Ο</u> . <u>Q</u> .	\$ <u>569506</u> .	\$ <u>574488</u> .
LINE 10C - INVESTMENTS - CORPORATE BONDS RBC WEALTH MANAGEMENT	\$	<u>Q</u> .	\$ <u>318852</u> .	\$ <u>320469</u> .

27-3097971 G.L. VITALE FAMILY FOUNDATION FOR THE YEAR ENDED JUNE 30, 2012

FORM 990-PF PAGE 6

PART VIII - INFORMATION ABOUT OFFICERS, DIRECTORS, TRUSTEES, FOUNDATION MANAGERS, HIGHLY PAID EMPLOYEES, AND CONTRACTORS

NAME AND ADDRESS	TITLE, AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTION TO EMPLOYEE BENEFIT PLANS AND DEFERRED COMPENSATION	EXPENSE ACCOUNT, OTHER ALLOWANCES
ANDREA VITALE GALESBURG, IL	PRESIDENT 1 HR	0	0	0
ADAM VITALE GALESBURG, IL	V.P. & TREASURER 1 HR	0	0	o
MONICA JENSEN EAST GALESBURG, IL	SECRETARY 1 HR	0	0	o
KATHLEEN VITALE C/O GALESBURG, IL	DIRECTOR 1 HR	0	0	0
JOY BLANG MILFORD, OH	DIRECTOR 1 HR	0	0	0

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

	are filing for an Automatic 3-Month Extension,						▶ 🗹
	are filing for an Additional (Not Automatic) 3-Me						
Do not	complete Part II unless you have already been g	granted an a	utomatic 3-month extension of	n a previous	ly file	d For	n 8868.
a corpo 8868 to Return	nic filing (e-file). You can electronically file Form ration required to file Form 990-T), or an addition request an extension of time to file any of the for Transfers Associated With Certain Persona ons). For more details on the electronic filing of the	ial (not auto forms listed Il Benefit C	matic) 3-month extension of to in Part I or Part II with the e ontracts, which must be ser	me. You can xception of I it to the IRS	elec orm in	tronica 8870, paper	ally file Form , Information format (see
Part I	Automatic 3-Month Extension of Time	e. Only sub	mit original (no copies nee	ded).			
	pration required to file Form 990-T and reque				box	and (complete
Part I or	nly						▶ 🛚
All other	r corporations (including 1120-C filers), partnersh	nips, REMIC	s, and trusts must use Form 7	7004 to reque	est ar	n exter	nsion of time
to file ın	come tax returns.						
							e instructions
Type or	Name of exempt organization or other filer, see i	nstructions.		ployer identıfic			∍r (EIN) or
print	G.L. VITALE FAMILY FOUNDATION				7-309		
File by the	Number, street, and room or suite no. If a P.O. b	ox, see instr	l	cial security nu	mber	(SSN)	
due date t		 ,					
return Se	e only, town or post office, state, and 211 code. To	or a toreign a	ddress, see instructions.				
instruction	GALESBURG, IL 61401						
Enter th	e Return code for the return that this application	is for (file a	separate application for each	return) .			0 4
Applic	ation	Return	Application				Return
Is For		Code	Is For	·			Code
_ Form 9	990	- 01	Form 990-T (corporation)	-			07
Form 9	990-BL	02	Form 1041-A				08
Form 9	990-EZ	01	Form 4720				09
	990-PF	04	Form 5227				10
	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11
Form 9	990-T (trust other than above)	06	Form 8870				12
Telep • If the • If this for the a list w	hone No. ► 309-342-6185 organization does not have an office or place of is for a Group Return, enter the organization's fowhole group, check this box ►	business in our digit Gro f it is for pa sion is for. corporation empt organ	up Exemption Number (GEN) t of the group, check this box required to file Form 990-T) ex	ctension of tir	► [ne pove.	If] and ———— The e	extension is
2	If the tax year entered in line 1 is for less than 12 Change in accounting period If this application is for Form 990-BL, 990-PF, 9	months, cl	eck reason: Initial return	Final ret			
	nonrefundable credits. See instructions.	, ,		,	За	\$	134
b	If this application is for Form 990-PF, 990-T,	4720, or	6069, enter any refundable of	credits and			
	estimated tax payments made. Include any prior				3b	\$	0
С	Balance due. Subtract line 3b from line 3a. Inclu EFTPS (Electronic Federal Tax Payment System	ude your pa	yment with this form, if require	d, by using	3с		134
Courties	If you are going to make an electronic fund withdraw			Form 8879-F0			