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## SCANNED MAY 0 & 2010

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

OMB No 1545-0052

Depar	tment of	the Treasury				ed as a Private F				2009
		ue Service				e to use a copy of this ret	um to satisfy st	ate reporting	requirements	
		r year 2009, or ta	<del></del>		_	and ending				<del></del>
GC	песк аі	I that apply:	Initial ref	_		turn of a former public			Final return	
	4- 100	Name of founda	Amende	a return	_ [ ] A00	Iress change	Nam	e change	lover Identification num	
	the IRS abel.	, ,		BRENDA	S. GRU	JSECKI			loyer Identification num -1639401	lDer
	erwise.	1						1	phone number (see page 1	0 of the instructions)
	rint				not delivered	to street address)	Room/suite	_	7-678-5060	o or the mendenone,
or	type.	840 NO	RTH LAK	E SHORE	DRIVE	Ē	2301	C If exe	emption application is pend	ling, check here
	Specific	only or town, su	ite, and ZIP cod	le				7	oreign organizations, check	· . H
Instructions. CHICAGO IL  H Check type of organization: X Section 501(c)(3) exempt private			60611-2490		2. Fo	oreign organizations meetii	ng the			
			mpt private	foundation		85	5% test, check here and at	tach computation		
	ection	4947(a)(1) nonexe	empt charitab	le trust (	Other taxab	le private foundation		<b></b>	vate foundation status was	
I Fa	ir mark	et value of all asso	ets at end	J Accounting	g method:	Cash X A	crual	secti	on 507(b)(1)(A), check her	• . ▶ 📙
		om Part II, col. (c)			(specify)				foundation is in a 60-mon	
	e 16) ▶					be on cash basis )	1	unde	r section 507(b)(1)(B), che	ck here
P8	it i	Analysis of I		•		(a) Revenue and expenses per	(b) Net ii	ovestment	(c) Adjusted net	(d) Disbursements for charitable
		total of amounts in colu the amounts in column		•	y equal	books	1 ''	ome	income	purposes
						652.16				(cash basis only)
i		Contributions, gifts,	=	,	•	653,16	<u> </u>			
	2 3			not required to at		1,43	-	1,437		
		Interest on saving Dividends and interest	~	•	ments	61,11		61,118		
2		Gross rents	erest irom set	curiles .		01,11	9	01,110		
í		Net rental income	or (loss)							
Revenue	6a Net gain or (loss) from sale of assets not on line 10									
Ver	b Gross sales price for all assets on line 6a									
Re.	7 Capital gain net income (from Part IV, line 2)					0				
		Net short-term ca	•	_,					0	)
	9	Income modificati			•					
	10a	Gross sales less ret	urns & allowand	es						
	b	Less. Cost of goo	ds sold							
	С	Gross profit or (lo	ss) (attach so	hedule) <sub>.</sub>						
	11	Other income (att	ach schedule	) Stm	t 1	1,097,81				
	12	Total. Add lines 1				1,813,53	0	62,555	0	·
ý	13	Compensation of			etc.					
Ises		Other employees		- 1091						<u> </u>
Je.	15	Pension plans, er Legal feet attach	nployee bene	1610 Q	•					
Expen					<b>-</b> 2					<del>                                     </del>
ē	b	Accounting fees (			mt 3	6,82				F00
aţ	17	Other profession		eque,	mc 3	50	<del>' </del>			500
stri	ŧ .	Taxes (attach schedule)	(see page 14 of th	e instructions) St	mt 4	2,10	5		-	25
ž		Depreciation (attach				2,10	<del>-</del>			23
Operating and Administrative	1	Occupancy	osnousioj unu				1			<u> </u>
Ă	21	Travel, conference	es, and meet	 inas			1			
P	22	Printing and publi								
g B	1	Other expenses (att sch		Stm	t 5	93	0			770
ij	24	Total operating	-	rative expense	 9 <b>s</b> .					
Ţa		Add lines 13 throu		•		10,35	5	0		1,295
ğ	25	Contributions, gift	s, grants paid	l		187,92				187,924
	26	Total expenses ar	d disburseme	ents. Add lines 24	and 25	198,27	9	0	0	T
	27	Subtract line 26 fi								<u> </u>
		Excess of revenue				1,615,25	1			
		Net investment i		_	•			62,555	<del>                                     </del>	
		Adjusted net inc							0	<u> </u>
For I	rivacy	Act and Paperw	ork Reduction	n Act Notice, s	see page 30	of the instructions.				Form 990-PF (2009)

4,915,453 4 5 4,915,453 6

2

3

1,615,251

2 Enter amount from Part I, line 27a

4 Add lines 1, 2, and 3

3 Other increases not included in line 2 (itemize) ▶

6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

5 Decreases not included in line 2 (itemize) ▶

om 990-PF (2009) <b>JAMES</b> I			16-1639401		Page 3
, (a) List and descr	and Losses for Tax on Investrate the kind(s) of property sold (e.g., real esta rehouse, or common stock, 200 shs MLC Co	te,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a N/A					
b					
С					
d					<u> </u>
8	<del></del>	<del>- 1</del>			
(e) Gross sales price	(f) Depreciation allowed (or allowable)	10,	expense of sale		n or (loss) (f) minus (g)
a					
b	<del>  </del>	_		<del></del>	
<u>C</u>	<del></del>		<del></del>		
<u>d</u>					
Complete only for accets showin	ng gain in column (h) and owned by the	foundation on 12/31	/60		· · · · · · · · · · · · · · · · · · ·
Complete only for assets snowin		1			ol (h) gain minus ot less than -0-) <b>or</b>
(i) F M V as of 12/31/69	(i) F M V as of 12/31/69 (j) Adjusted basis (k) Excess of col (i) over col (j), if any			from col (h))	
a					-
b	<del>                                     </del>				<del></del> .
<u> </u>	<del> </del>				<u> </u>
d				·	
Capital gain net income or (net come)	capital loss)  If gain, also enter If (loss), enter -0-		}	2	
3 Net short-term capital gain or (lo	oss) as defined in sections 1222(5) and	· · · · · · · · · · · · · · · · · · ·	<b>-</b>		·
	3, column (c) (see pages 13 and 17 of th	· ·	1		
If (loss), enter -0- in Part I, line 8		.,	<u> </u>	3	
Part V Qualification L	Inder Section 4940(e) for Red	uced Tax on N	et Investment Incom	e	
For optional use by domestic private	e foundations subject to the section 494	0(a) tax on net inve	stment income.)		
f section 4940(d)(2) applies, leave the	his part blank.				
Was the foundation liable for the sec	ction 4942 tax on the distributable amou		base period? Yes	X No	
· · · · · · · · · · · · · · · · · · ·	each column for each year; see page 1		hefore making any entries		
(a)	(b)		(c)		(d)
Base period years Calendar year (or tax year beginnin	A duration of the same displace.	utions Net	value of nonchantable-use asset	ts (col (b)	stribution ratio divided by col (c))
2008		22,334	3,942,6		0.03102
2007		12,852	3,576,3		0.03155
2006		55,240	1,538,5		0.03590
2005		43,882	965,2		0.04546
2004		25,548	440,3	38	0.05801
2 Total of line 1, column (d)		· · · · · · · · · · · · · · · · · ·		2	0.20196
	 e 5-year base period—divide the total or	iline 2 by 5, or by th	ne		
_	has been in existence if less than 5 year		•	3	0.04039
4 Enter the net value of noncharit	able-use assets for 2009 from Part X, lii	ne 5 .		. 4	3,346,69
5 Multiply line 4 by line 3				5	135,18
6 Enter 1% of net investment inco	ome (1% of Part I, line 27b)			6	62
7 Add lines 5 and 6				7	135,80
8 Enter qualifying distributions fro	m Part XII, line 4			8	189,21

Enter qualifying distributions from Part XII, line 4

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

8 Enter qualifying distributions from Part XII, line 4

Part VI instructions on page 18

	990-PF (2009) JAMES P. AND BRENDA S. GRUSECKI 16-1639401			P	age 4
Pŧ	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instru	uctions)			
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.	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				626
	here ▶ 🕱 and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of				
	Part I, line 12, col. (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0
3	Add lines 1 and 2	3			626
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<u> </u>			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			626
6	Credits/Payments.				
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 3,200	1			
b	Exempt foreign organizations—tax withheld at source	1			
С	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld	1			
7	Total credits and payments. Add lines 6a through 6d			3,	<u> 200</u>
8	Enter any penalty for underpayment of estimated tax. Check here   if Form 2220 is attached				1
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	1			<u>573</u>
<u>11</u>	Enter the amount of line 10 to be. Credited to 2010 estimated tax ▶ 800 Refunded ▶ 11	1		Ι,	773
	ut VII-A Statements Regarding Activities		1		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
L	participate or intervene in any political campaign?		<u>1a</u>		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19		٠. ا		-
	of the instructions for definition)?		1b	····	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
_	published or distributed by the foundation in connection with the activities.				x
c d	Did the foundation file Form 1120-POL for this year?		1c		^
u	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation > \$ (2) On foundation managers > \$				
θ	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
٠	on foundation managers.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	-	x
_	If "Yes," attach a detailed description of the activities.				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			1	
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.				
	By language in the governing instrument, or				Ì
	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?	į	6	X	
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	1	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the	i			
	instructions) ▶ IL				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			-	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X	<b></b>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		1	i	
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page				
	27)? If "Yes," complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		İ		
	names and addresses		10		X
		For	m <b>99</b> (	J-PF	(2009)

Form	990-PF (2009) JAMES P. AND BRENDA S. GRUSECKI 16-1639401	L			Р	age <b>5</b>
Pa	rt 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		l	ļ		
	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)			11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before					
	August 17, 2008?			12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application	?		13	<u> </u>	<u> </u>
	Website address ► N/A					
14		hone no. 🕨	847-6	78-	506	0
	840 N LAKE SHORE DRIVE		60611			
	Located at ▶ CHICAGO, IL	ZIP+4 ▶	60611			.   —
15	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041—Check here	. 1		•		▶ ∐
	and enter the amount of tax-exempt interest received or accrued during the year		15			
Pa	art 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):	П	<b>ਦਿਸ਼</b>			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	∐ Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	П.,	<b></b>			I
	disqualified person?	Yes	X No			İ
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	1			I
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	∐ Yes	X No			Ī
	(5) Transfer any income or assets to a disqualified person (or make any of either available for	П v	X No			
	the benefit or use of a disqualified person)?	Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the					İ
	foundation agreed to make a grant to or to employ the official for a period after	Yes	X No			•
	termination of government service, if terminating within 90 days.)	_	M NO			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		N/A	1b	1	1
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?			<u>                                    </u>	-	$\vdash$
_	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 2009?		N/A	1c	İ	İ
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	•	,			<del>                                     </del>
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):					
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and					
а	6e, Part XIII) for tax year(s) beginning before 2009?	Yes	X No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20					
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)					I
-	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to					1
	all years listed, answer "No" and attach statement—see page 20 of the instructions.)		N/A	2b		I
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.					
	<b>▶</b> 20 , 20 , 20 , 20					I
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise					
	at any time during the year?	Yes	X No			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or					1
	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		_			<b>‡</b>
	foundation had excess business holdings in 2009.)		N/A	3b	<u> </u>	↓
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?			4a	<b> </b>	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its					1
	charitable number that had not been removed from jeonardy before the first day of the tax year beginning in 2009	17		1 4h	1	I X

	······································	ND BRENDA S. GRUSEC		L639401				Page 6
P		rding Activities for Which Fo	rm 4720 May Be R	<u>equired (conti</u>	nued)			
5a	• , , ,	•			-	_	,	
	(1) Carry on propaganda, or otherwise	,	· //	□ '	res [	X No		
		cific public election (see section 4955);	or to carry on,					1
	directly or indirectly, any voter regi				Yes 2	No		1
		travel, study, or other similar purposes		□ '	res 🛚	X No		
	(4) Provide a grant to an organization	-			[-			
		ction 4940(d)(2)? (see page 22 of the in	•	`∟'	es 2	X No		
	(5) Provide for any purpose other than		, or educational	$\Box$				
	purposes, or for the prevention of	-			res [	K No		
þ		any of the transactions fail to qualify ur				37/3		ŧ
		rrent notice regarding disaster assistar		nstructions)?		N/A	5b	
		ce regarding disaster assistance check			▶∟	_		-
С	If the answer is "Yes" to question 5a(4	•	from the tax	NT / N 🖂 .	. г	¬		
	because it maintained expenditure res			N/A 📋 🔻	/es	_  No		ı
e-	If "Yes," attach the statement required	, ,						
6a	Did the foundation, during the year, red	seive any funds, directly or indirectly, to	pay premiums	п.	. 5	X No		
<b>.</b>	on a personal benefit contract?	v promiumo dinostivos undenestivos e		. –	res 2	X No		
b	Did the foundation, during the year, pa If "Yes" to 6b, file Form 8870.	y premiums, directly or indirectly, on a	personal benefit contract	. <b>f</b>			6b	X
7a	At any time during the tax year, was th	a foundation a party to a prohibited toy	oboline impropries 2	П,	F	K No		1
b		' ' '			res 2	N/A	7b	
		Officers, Directors, Trustees,			Paid F			
,	and Contractors	J	, i odiladiloli malla	goro, mgmy i	uiu Li	прісус	55,	
1 1	List all officers, directors, trustees, fo	undation managers and their compe	ensation (see page 22 o	f the instructions	i).			
			<u> </u>	1	i	tributions to		
	(a) Name a	and address	(b) Title, and average hours per week	(c) Compensation (if not paid, enter	emplo	yee benefit		ense account,
			devoted to position	-0-)		nd deferred ensation	ounera	allowances
JZ	MES P GRUSECKI	CHICAGO	PRES/TRES/DR					
84	0 N LAKE SHORE DRIVE	IL 60611	1.00	٥		0		0
В	RENDA S GRUSECKI	CHICAGO	VP/SECTY/DIR					
84	10 N LAKE SHORE DRIVE	IL 60611	0.50	0		0		0
RO	BERT D TUERK	RIVER FOREST	DIRECTOR					
94	6 JACKSON AVE	IL 60305	0.25	0		0		0
2	Compensation of five highest-paid	employees (other than those include	d on line 1—see page 2	23 of the instructi	ons).			
	If none, enter "NONE."			<del>- "</del>				
			(b) Title, and average			tributions to yee benefit	(e) Even	ense account,
	(a) Name and address of each em	iployee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans a	nd deferred		allowances
			TOTALOGICO POSICION		comp	ensation		
NC	DNE							
				-				
	<del></del>			<u> </u>			ļ	
							<u> </u>	
Cota	I number of other employees paid over \$	\$50,000		<u>.                                    </u>	<u> </u>		•	
Ju	inditiber of other employees paid over t	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			·			PF (2009)
						F01		

Form 990-PF (	2009) JAMES P. AND BRENDA S. GRUSECKI 16-1639	401	Page <b>7</b>
Part VIII	Information About Officers, Directors, Trustees, Foundation Managers,	Highly Paid Emplo	yees,
	and Contractors (continued)		
3 Five hig	hest-paid independent contractors for professional services (see page 23 of the instructions).	If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
			<del></del>
	· · · · · · · · · · · · · · · · · · ·		
•	· · ·		
			<del></del>
· · · · · · · · · · · · · · · · · · ·			
•	•••		]
Total number	of others receiving over \$50,000 for professional services		<b>•</b>
Davi IV A	Summary of Direct Charitable Activities	<del></del>	
Part IX-A	Summary of Direct Charitable Activities		· · · · · · · · · · · · · · · · · · ·
	tion's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number beneficiaries served, conferences convened, research papers produced, etc.	ımber of	Expenses
1 N/A	· · ·		
•	·		
<u> </u>			
2			
3			
•			
Part IX-B	Summary of Program-Related Investments (see page 24 of the instruct	ions)	·
Describe the t	wo largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2 .		,	
•		•	
All other progr	am-related investments. See page 24 of the instructions		
3 .			
•			
Total. Add line	s 1 through 3		

Suitability test (prior IRS approval required)

Cash distribution test (attach the required schedule)

Enter 1% of Part I, line 27b (see page 26 of the instructions)

Adjusted qualifying distributions. Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years.

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.

Form **990-PF** (2009)

188.

189,219

626

3a

3b

4

5

þ

2	Undistributed income, if any, as of the end of 2009:			4.50 0.50	
	Enter amount for 2008 only			172,372	<del></del>
b	Total for prior years: 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2009.			İ	
а	From 2004			1	
b	From 2005			I	
C	From 2006			<b>I</b>	
d	From 2007			I	
8	From 2008			I	
f	Total of lines 3a through e				
4	Qualifying distributions for 2009 from Part XII,				
	line 4. ▶ \$ 189,219				
	Applied to 2008, but not more than line 2a			172,372	
b	Applied to undistributed income of prior years			1	
	(Election required—see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election			1	
	required—see page 26 of the instructions)				
d	Applied to 2009 distributable amount				16,847
0	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2009				
	(If an amount appears in column (d), the same				
_	amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
a	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract		-		
_	line 4b from line 2b				
С	• •				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
_	tax has been previously assessed				
a	Subtract line 6c from line 6b. Taxable				
_	amount—see page 27 of the instructions Undistributed income for 2008. Subtract line	<u> </u>			
0	4a from line 2a. Taxable amount—see page		1		
	27 of the instructions		1		
	Undistributed income for 2009. Subtract lines				
•	4d and 5 from line 1. This amount must be		<b>!</b>		
	distributed in 2010		1		149,862
7	Amounts treated as distributions out of corpus	<u></u>			
•	to satisfy requirements imposed by section	ļ			
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
	instructions)				
8	Excess distributions carryover from 2004 not				
•	applied on line 5 or line 7 (see page 27 of the				
	instructions)				
9	Excess distributions carryover to 2010.				
•	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
а	Excess from 2005				
b	Excess from 2006	1	1		
c	Excess from 2007	1			
d	Excess from 2008	1			
8	Excess from 2009	1			
<u> </u>		<u> </u>	<u> </u>		Form <b>990-PF</b> (2009)

Pa	rt XIV Private Operating Fou	ndations (see page 1	age 27 of the insti	ructions and Part	VII-A, guestion 9)			
1a	If the foundation has received a ruling or d	etermination letter tha	t it is a private operatin	g		,		
	foundation, and the ruling is effective for 2009, enter the date of the ruling							
b	Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)							
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years				
	income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total		
	investment return from Part X for	(4) 2000	(2) 2000	(4) 2001	(4) 2000	<u> </u>		
			•					
L	each year listed				-			
b	85% of line 2a							
С	Qualifying distributions from Part XII,							
	line 4 for each year listed							
d	Amounts included in line 2c not used directly					ĺ		
	for active conduct of exempt activities	<u>-</u>						
θ	Qualifying distributions made directly							
	for active conduct of exempt activities.							
	Subtract line 2d from line 2c							
3	Complete 3a, b, or c for the							
	altemative test relied upon:							
а	"Assets" alternative test—enter:							
	(1) Value of all assets		<u> </u>					
	(2) Value of assets qualifying under							
	section 4942(j)(3)(B)(i)							
b	"Endowment" alternative test—enter 2/3							
	of minimum investment return shown in				l .			
	Part X, line 6 for each year listed							
С	"Support" alternative test—enter:							
	(1) Total support other than gross							
	investment income (interest,							
	dividends, rents, payments on							
	securities loans (section							
	512(a)(5)), or royalties)							
	(2) Support from general public							
	and 5 or more exempt							
	organizations as provided in							
	section 4942(j)(3)(B)(iii)  (3) Largest amount of support from			<u> </u>				
	an exempt organization  (4) Gross investment income			<del></del>				
Ď.	at XV Supplementary Inform	ation (Complete	this part only if	the foundation ha	d \$5 000 or more	in accete at		
	any time during the ye	•	•		ia 40,000 or more	iii assous at		
1	Information Regarding Foundation Mar		or the motion			-		
' a	List any managers of the foundation who h	-	than 2% of the total co	intributions received by	the foundation			
a	before the close of any tax year (but only r				are rearreaders			
	See Statement 7	tiley have contributed	a more than 40,000). (C	section 507(d)(2).)				
	List any managers of the foundation who	we 10% or more of th	e stock of a corporation	o (or an equally large n	ortion of the			
þ	ownership of a partnership or other entity)				ordon or the			
	N/A	or willor the louridation	on mas a 10 % or greate	rinterest				
	Information Regarding Contribution, G	rant Cift Loan Sah	alarahin ata Braggan					
2	Check here ► X if the foundation only				ne not accept			
	unsolicited requests for funds. If the found			_				
	-			or trie iristructions) to iri	uividuais oi			
	organizations under other conditions, com			be addressed	·····			
а	The name, address, and telephone number N / A	er or the person to who	om applications should	ue addressed.				
	N/A							
	The form in which are limited in the 14 hard		tion and materials their	abould maked				
b	The form in which applications should be s <b>N/A</b>	submitted and informa	uon and materiais they	SHOUID INCIDE:				
С	Any submission deadlines: <b>N/A</b>							
	Any restrictions or limitations on awards, s	uch as by geographic	al areas, charitable field	ds. kinds of institutions	or other factors			
~	N/A	at ay googlapino		,				

▶ 3b

**Total** 

DAA

	art XVI-A	Analysis of Income-Producing Activ	<u>vities</u>			<del></del>	·
Ent	er gross amo	unts unless otherwise indicated.	Unrelate (a) Business code	(b) Amount	(c) Exclusion	(d) Amount	(e) Related or exempt function income (See page 28 of
1	Program sen	vice revenue:	1		code		the instructions )
	a						
	b						
	c						
	d						
	f						
	g Fees and	d contracts from government agencies					
2	Membership	dues and assessments					
3	Interest on sa	avings and temporary cash investments					1,437
4	Dividends an	id interest from securities	-				61,118
5	Net rental inc	come or (loss) from real estate:					
		anced property					
	<b>b</b> Not debt	-financed property					
6	Net rental inc	come or (loss) from personal property					
	Other investr						
8		) from sales of assets other than inventory					
-	•	or (loss) from special events					
		or (loss) from sales of inventory					
	Other revenu						
		JNREALIZED GAINS ON INVES					1,097,815
	θ						
12		d columns (b), (d), and (e)			0	0	1,160,370
		ne 12, columns (b), (d), and (e)				13	1,160,370
		n line 13 instructions on page 28 to verify calculations.	.)			_	
	art XVI-B	Relationship of Activities to the Acc		ent of Exempt F	urposes		
	Line No. ▼	Explain below how each activity for which income is accomplishment of the foundation's exempt purpose instructions.)		, ,			he
	N/A						
							- <del></del>
_							
				<del></del>			
				<del></del> -		···	
_							
_	1						
_							
DA/							Form <b>990-PF</b> (2009)

Pa	rt XVII	Information Rega	_	nsfers To an	d Transaction	ns and	Relations	hips With No	ncharita	able		
1	Did the org	anization directly or indir		in any of the follo	owing with any other	er organ	nization descri	bed			Yes	No
		, 501(c) of the Code (other		•	•	-						
	organizatio			, , , , , , , , , , , , , , , , , , ,	,		•				1	
а	•	from the reporting founda	tion to a none	chantable exemn	t organization of						1	
_	(1) Cash	mont the reporting loanet		onanabio oxomp	n organization of					1a(1)	1	X
	• •	onsoto					• •	• •		1a(1)		<u> </u>
_	(2) Other	• •		•				•		Ia(Z)		
D	Other tran										1	v
	` '	of assets to a noncharita	-	•	•					1b(1)		<del>_X</del> _
	• •	ases of assets from a no			on					1b(2)		X
	(3) Renta	l of facilities, equipment,	or other asse	ts				•		1b(3)		<u> </u>
	(4) Reimt	oursement arrangements								1b(4)		<u>X</u>
	(5) Loans	or loan guarantees								1b(5)	_	X
	(6) Perfor	mance of services or me	mbership or f	fundraising solicit	tations					1b(6)		X
С	Sharing of	facilities, equipment, ma	iling lists, oth	er assets, or paid	d employees			•		1c		X
d	If the ansv	ver to any of the above is	"Yes," compl	lete the following	schedule. Column	n (b) sho	ould always sh	ow the fair marke	t			
	value of th	e goods, other assets, o	r services givi	en by the reportir	ng foundation. If th	e founda	ation received	less than fair mar	ket			
	value in ai	ny transaction or sharing	arrangement,	, show in column	(d) the value of th	e goods	s, other assets	, or services rece	ived.			
(	a) Line no	(b) Amount involved		of noncharitable ex				of transfers, transact		anng arrange	ments	
N/	A								•			
										•		
					*	<del>                                     </del>					•	
			1									
	· · · · · · · · · · · · · · · · · · ·		<b>†</b>			<del>                                     </del>			-			
			1			-						
		<del></del>	<del> </del>			1						
		<del></del>	<u> </u>			<b></b> -				<del></del> -		
		<del>                                     </del>	<del> </del>			ļ						
		<u> </u>	ļ			ļ		<del></del>		<del> </del>		
						ļ						
			<u> </u>									
						<u> </u>						
		Ţ,										-
			ļ				-					
	described	ndation directly or indirect in section 501(c) of the complete the following sch	Code (other th			-	organizations			.   Ye	es 🔀	No
		(a) Name of organization		(b) Type o	of organization			(c) Description o	f relationship	)		
	N/A						,					
						1						
		<del></del>				1						
						<del> </del>						
	-		<u>-</u> .			†						•••
	11 4				d							
re	belief, it is	attles of penjury, I declare that true, correct, and complete (	T have examin Declaration of pi	ed this return, inclure reparer for her than	taxpayer or fiduciary)  Date	is bysed	on all information	president of the best of hoor of which preparer  PRESID  Title	has any kno	e and wledge.		
Sign Here	Paid Preparer's Use Only	Preparer's Signature	ance	Q Co	leman	/	Date 04/17/	Check if self-employed	ı▶ □	Preparer's identinumber (see Signage 30 of the in	nature struction	is)
<b>U</b>	Pad Si	Firm's name for yours of	COLEMA	A ASS	CIATES C	PA'S						
	2 2	Firm's name (or yours if self-employed), address,			A AVE STE				EIN ▶	36-320	617	12
		and ZIP code	CHICA		60656					773-44		
	<u> </u>			==					i none no	Form 99		

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

**Schedule of Contributors** 

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

OMB No 1545-0047

2009

Name of the organization

JAMES P. AND BRENDA S. GRUSECKI FAMILY FOUNDATION

**Employer identification number** 

16-1639401

Organization type (check one):								
Filers of:		Section:						
Form 990 o	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-I	PF	501(c)(3) exempt private foundation						
		4947(a)(1) nonexempt charitable trust treated as a private foundation						
		501(c)(3) taxable private foundation						
	a section 501(c)(7),	vered by the <b>General Rule</b> or a <b>Special Rule.</b> (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See						
General R	tule							
		g Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or contributor. Complete Parts I and II.						
Special R	ules							
se	ections 509(a)(1) and (1) \$5,000 or (2) 2%	organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and						
the	e year, aggregate cor	, (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during atributions of more than \$1,000 for use exclusively for religious, chantable, scientific, literary, or or the prevention of cruelty to children or animals Complete Parts I, II, and III.						
the ag ye ap	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, chantable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, chantable, etc., purpose. Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, chantable, etc., contributions of \$5,000 or more during the year \(\)							
990-EZ, or 990-EZ, or	Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box in the heading 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).							

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Schedule B (Form 990, 990-EZ, or 990-PF) (2009) of 1 of Part I Name of organization Employer identification number JAMES P. AND BRENDA S. GRUSECKI 16-1639401 Part I Contributors (see instructions) (a) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 1 JAMES P GRUSECKI Person 840 N LAKE SHORE DRIVE Payroll 353,160 Noncash IL 60611-2490 CHICAGO (Complete Part II if there is a noncash contribution ) (b) (a) (c) (d) No Name, address, and ZIP + 4 Aggregate contributions Type of contribution 2 BRENDA S GRUSECKI Person 840 N LAKE SHORE DRIVE Payroll 300,000 Noncash IL 60611-2490 CHICAGO (Complete Part II if there is a noncash contribution.) (d) (a) (b) (c) Name, address, and ZIP + 4 No. Aggregate contributions Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person Payroll Noncash

			(Complete Part II if there is a noncash contribution.)		
(a)	(b)	(c)	(d)		
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution		
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)		

(b)

Name, address, and ZIP + 4

(Complete Part II if there is a noncash contribution.)

(d)

Type of contribution

Person **Payroll** Noncash

(c)

Aggregate contributions

(a) No.

GRUSPRIV JAMES P. AND BRENDA S. GRUSECKI 16-1639401 FYE: 12/31/2009	S. GRUSECKI Federal S	Federal Statements		4/17/2010 6:19 PM
	Statement 1 - Form 990-PF,	- Form 990-PF, Part I, Line 11 - Other Income	come	
Description		Revenue per Books	Net Investment Income	Adjusted Net Income
NET UNREALIZED GAINS ON INVES Total		\$ 1,097,815 \$ 1,097,815	w w	\$ \$
<b>15</b>	Statement 2 - Form 990-PF, Pa	Part I, Line 16b - Accounting Fees	ing Fees	
Description  OTEMAN & ASSOCIATES	<b>Total</b>	Net Investment	Adjusted Net	Charitable Purpose
tal	9	0 %		0 %
State	Statement 3 - Form 990-PF, Part I, Line 16c - Other Professional Fees	Line 16c - Other Profes	ssional Fees	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
	<i>&amp;</i>	٠	<b>‹</b>	<b>‹</b>
EVANSTON IL 60202 CONSULTING FEES	200			
Total	\$ 500	\$	\$	\$
				1-3

GRUSPRIV JAMES P. AND BRENDA S. GRUSECKI 16-1639401 FYE: 12/31/2009	GRUSE	KI Federal (	Statements		4/17/2010 6:19 PM
	Statement 4		- Form 990-PF, Part I, Line 18 - Taxes	Xes	٠
Description		Total	Net Investment	Adjusted Net	Charitable Purpose
EXCISE TAX BASED ON INVESTMENT I SECRETARY OF STATE FILING FEE ILLINOIS ATTORNEY GENERAL FILING	w	326 15 10	<i>«</i>	v <sub>2</sub>	\$ 15 10
FOREIGN TAX FAID Total	\   	~  <b>~</b>	0	0	\$ 25
Stat	Statement 5	- Form 990-PF,	Part I, Line 23 - Other Expenses	xpenses	
Description		Total	Net Investment	Adjusted Net	Charitable Purpose
	φ.		w.	w	\$
Expenses DUES MEALS Total	w	770 160 930	o \$	\$	\$
					4-5

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GRUSPRIV JAMES P. AND BRENDA S. GRUSECKI

16-1639401

Federal Statements

FYE: 12/31/2009

## Statement 6 - Form 990-PF, Part II, Line 13 - Other Investments

Description				
	 Beginning of Year	End of Year	Basis of Valuation	 Fair Market Value
TEMPLETON GLOBAL BOND FUND				540 405
EDANIZI IN DANA MECH FUND	\$ 624,408 \$	742,197	Market	\$ 742,197
FRANKLIN DYNA TECH FUND	525,591	773,196	Market	773,196
FRANKLIN CAPITAL GROWTH FUND	,	,		,
	1,091,953		Market	
AMERICAN FUNDS-CASH MGMT	950,715	1,323,988	Market	1,323,988
FRANKLIN GROWTH FUND	330,713	1,323,300	Harket	1,323,300
		1,510,465	Market	1,510,465
Total	\$ 3,192,667 \$	4,349,846		\$ 4,349,846

GRUSPRIV JAMES P. AND BRENDA S. GRUSECKI
16-1639401 Federal Statements

16-1639401 FYE: 12/31/2009

Statement 7 - Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

Name of Manager	 Amount
JAMES P GRUSECKI	\$ 353,160
BRENDA S GRUSECKI	 300,000
Total	\$ 653,160

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# GRUSPRIV JAMES P. AND BRENDA S. GRUSECKI 16-1639401 FYE: 12/31/2009

Statement 8 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year
---

	Amount	1,000	3,846	30,000	4,000	30,000	5,000	2,000	4,805	3,000	8,720	14,200	25,000	5,138	1,000	3,200		20,000	1,000
	Purpose	HUMANITIES	HUMANITIES	PLAY & CAPITAL CAMPAIGN	HUMANITIES	SINGLE PERSON PROVIDING FOR DEPENDEN	MORTGAGE & HOUSING	SERVICES TO CHILDREN & FAMILIES	SINGLE PARENTS	ADULT EDUCATION	CAPITAL CAMPAIGN	SCHOLARSHIP	NATIONAL COUNCIL	VIVA	GENERAL SUPPORT	HUNTER CREEK TRAIL MAINTENANCE	GENERAL SUPPORT	HUMANITIES	GENERAL SUPPORT
	Status	250 PUB CHARITY	PUB CHARITY	PUB CHARITY	PUB CHARITY	PUB CHARITY	PUB CHARITY	PUB CHARITY	PUB CHARITY	PUB CHARITY	PUB CHARITY	PUB CHARITY	STE 103 PUB CHARITY	PUB CHARITY	PUB CHARITY	PUB CHARITY	PUB CHARITY	PUB CHARITY	PUB CHARITY
Address	Relationship	3J FEEWAY; STE	N 5TH AVE	N LINCOLN AVE	NONE	NORTH DESPLAINES NONE	126 NORTH DESPLAINES NONE	MADISON STREET NONE	1 S WOOD NONE	WEST MONROE NONE	S MICHIGAN AVE NONE	W JACKSON BLV NONE	: HALLAM ST; STE NONE	O W 24TH PLACE NONE	BOX 45364 NONE	HAKBOOK LANE NONE	NONE OF THE STATE	S MAKION SI NONE	IZU S LASALLE NONE
Name	Address			VICTORY GARDENS THEATER CHICAGO IL 60614	312-3626	61	CATHOLIC CHARITIES CHICAGO IL 60661	ERAN CHILD AND FAMILY RIVER FOREST IL 60305	Y CROSS/IMMACULATE HEA CHICAGO IL 60609	THE CARA PROGRAM CHICAGO IL 60661		T ACADEMY IL 60644		OF HEAVEN IL 60804	HEALTHCARE AC WA 98145	ASPEN CO 81612	MANDERERS		JUVENILE DIABETES KESEAKO CHICAGO IL 60603

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# GRUSPRIV JAMES P. AND BRENDA S. GRUSECKI Federal Statements

FYE: 12/31/2009

Statement 8 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

Name Address	Address Relationship	Status	Purpose	Amount
FOCUS-NUESTRA FAMILIA	1428 S 59TH COURT			
	NONE	PUB CHARITY	LEARNERS THEATER PROGRAM	1,650
OR W	CHICAGO FOUNDATION FOR WO ONE EAST WACKER DRIVE	Æ		1
CHICAGO IL 60601	NONE	PUB CHARITY	GENERAL SUPPORT	3,000
	848 EAST GRAND AVENUE	Æ		(
CHICAGO IL 60611	NONE	PUB CHARITY	GENERAL SUPPORT	3,000
	18 S MICHIGAN AVE			
CHICAGO IL 60603	NONE	PUB CHARITY	GENERAL SUPPORT	3,000
ASPEN MUSIC FESTIVAL	2 MUSIC SCHOOL ROAD			
	NONE	PUB CHARITY	GENERAL SUPPORT	2,000
	33 WEST MONROE STREET	H		
CHICAGO IL 60603	NONE	PUB CHARITY	GENERAL SUPPORT	2,000
	3717 N RAVENSWOOD			1
CHICAGO IL 60613	NONE	PUB CHARITY	LEARNERS THEATER PROGRAM	3,261
	PO BOX 4856			1
	NONE	PUB CHARITY	GENERAL SUPPORT	2,104
				187,924