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

2009

Department of the Treasury
Internal Revenue Service

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

For calendar year **2009**, or tax year beginning _____, and ending _____

G Check all that apply: Initial return, Initial return of a former public charity, Final return, Amended return, Address change, Name change

Use the IRS label Otherwise, print or type See Specific Instructions	Name of foundation ROSEBUD FOUNDATION	A Employer identification number 26-2250986
	C/O MR. THOMAS WILSON	B Telephone number 847-572-4392
	Number and street (or P.O. box number if mail is not delivered to street address) Room/suite 195 BIRCH ST.	C If exemption application is pending, check here <input type="checkbox"/>
	City or town, state, and ZIP code WINNETKA, IL 60093	D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 750935.	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received				N/A	
2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B					
3 Interest on savings and temporary cash investments		27001.	27001.		STATEMENT 1
4 Dividends and interest from securities		16722.	16722.		STATEMENT 2
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10		-63811.			
b Gross sales price for all assets on line 6a 66.					
7 Capital gain net income (from Part IV, line 2)			0.		
8 Net short-term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less: Cost of goods sold					
c Gross profit or (loss)					
11 Other income					
12 Total Add lines 1 through 11		-20088.	43723.		
13 Compensation of officers, directors, trustees, etc		0.	0.		0.
14 Other employee salaries and wages					
15 Pension plans, employee benefits					
16a Legal fees STMT 3		3245.	3245.		0.
b Accounting fees STMT 4		3821.	3821.		0.
c Other professional fees					
17 Interest					
18 Taxes STMT 5		10.	10.		0.
19 Depreciation and depletion					
20 Occupancy					
21 Travel, conferences, and meetings					
22 Printing and publications					
23 Other expenses					
24 Total operating and administrative expenses. Add lines 13 through 23		7076.	7076.		0.
25 Contributions, gifts, grants paid		63500.			63500.
26 Total expenses and disbursements Add lines 24 and 25		70576.	7076.		63500.
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements		-90664.			
b Net investment income (if negative, enter -0-)			36647.		
c Adjusted net income (if negative, enter -0-)				N/A	

SCANNED SEP 23 2010

ROSEBUD FOUNDATION
C/O MR. THOMAS WILSON

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments		107300.	107300.
	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			
	7 Other notes and loans receivable ▶			
	Less allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock STMT 7	0.	499494.	499494.
	c Investments - corporate bonds STMT 8	0.	144141.	144141.
	11 Investments - land, buildings, and equipment basis ▶			
Less accumulated depreciation ▶				
12 Investments - mortgage loans				
13 Investments - other				
14 Land, buildings, and equipment basis ▶				
Less accumulated depreciation ▶				
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers)	0.	750935.	750935.	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶ _____)			
23 Total liabilities (add lines 17 through 22)	0.	0.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input type="checkbox"/>			
	and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input checked="" type="checkbox"/>			
	and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	0.	0.	
28 Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.		
29 Retained earnings, accumulated income, endowment, or other funds	0.	750935.		
30 Total net assets or fund balances	0.	750935.		
31 Total liabilities and net assets/fund balances	0.	750935.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	0.
2 Enter amount from Part I, line 27a	2	-90664.
3 Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 6	3	841599.
4 Add lines 1, 2, and 3	4	750935.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	750935.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, 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)
1a WELLS FARGO ADVISORS (SEE ATTACHED SCHEDULE)			
b WELLS FARGO ADVISORS (SEE ATTACHED SCHEDULE)			
c WELLS FARGO ADVISORS (SEE ATTACHED SCHEDULE)			
d CAPITAL GAINS DIVIDENDS			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			134879.
b			-186304.
c			-12452.
d 66.			66.
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(j) FMV as of 12/31/69	(k) Adjusted basis as of 12/31/69	(l) Excess of col (j) over col (k), if any	
a			134879.
b			-186304.
c			-12452.
d			66.
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	-63811.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8		3	N/A

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

N/A

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

Yes No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2008			
2007			
2006			
2005			
2004			

2 Total of line 1, column (d)	2	
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	
5 Multiply line 4 by line 3	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	
8 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 Part VI instructions	8	

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary-see instructions)	}	1	733.
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, 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	733.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	733.
6	Credits/Payments			
a	2009 estimated tax payments and 2008 overpayment credited to 2009	6a		
b	Exempt foreign organizations - tax withheld at source	6b		
c	Tax paid with application for extension of time to file (Form 8868)	6c		
d	Backup withholding erroneously withheld	6d		
7	Total credits and payments Add lines 6a through 6d		7	0.
8	Enter any penalty for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached		8	22.
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		9	755.
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 2010 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>		11	

Part VII-A Statements Regarding Activities

	Yes	No
1a		X
1b		X
1c		X
2		X
3		X
4a		X
4b		
5		X
6		X
7	X	
8a		
8b	X	
9		X
10		X

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Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)			X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?			X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A	X		
14	The books are in care of ▶ MR. THOMAS WILSON Telephone no ▶ 847-572-4392 Located at ▶ 195 BIRCH ST., WINNETKA, IL ZIP+4 ▶ 60093			
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 ▶ 15 N/A			

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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here N/A <input type="checkbox"/>	1b	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶ _____		
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) N/A	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ _____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009.) N/A	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
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 2009?	4b	X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? Yes No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Yes No
Organizations relying on a current notice regarding disaster assistance check here N/A

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No
If "Yes," attach the statement required by Regulations section 53.4945-5(d) N/A

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Yes No

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
THOMAS WILSON 195 BIRCH ST. WINNETKA, IL 60096	CO-TRUSTEE 5.00	0.	0.	0.
KATHRYN WILSON 195 BIRCH ST. WINNETKA, IL 60096	CO-TRUSTEE 5.00	0.	0.	0.
C. PAGE WILSON 195 BIRCH ST. WINNETKA, IL 60096	CO-TRUSTEE 5.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services ▶ 0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc

	Expenses
1 N/A	
2	
3	
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
1 N/A	
2	
All other program-related investments See instructions	
3	

Total. Add lines 1 through 3 ▶ 0.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	590466.
b	Average of monthly cash balances	1b	107300.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	697766.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	697766.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	10466.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	687300.
6	Minimum investment return. Enter 5% of line 5	6	34365.

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	34365.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	733.
b	Income tax for 2009 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	733.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	33632.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	33632.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	33632.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	63500.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	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	63500.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	63500.

Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				33632.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2009				
a From 2004				
b From 2005				
c From 2006				
d From 2007				
e From 2008				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ 63500.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2009 distributable amount				33632.
e Remaining amount distributed out of corpus	29868.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	29868.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable amount - see instructions		0.		
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	29868.			
10 Analysis of line 9				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009	29868.			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating 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)

	Tax year	Prior 3 years			(e) Total
	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

NONE

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 ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

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 accept unsolicited requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

- a** The name, address, and telephone number of the person to whom applications should be addressed

- b** The form in which applications should be submitted and information and materials they should include

- c** Any submission deadlines

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

Part XV **Supplementary Information** (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SEE STATEMENT 9				
Total			▶ 3a	63500.
b <i>Approved for future payment</i>				
NONE				
Total			▶ 3b	0.

 FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	AMOUNT
WELLS FARGO ADVISORS	27001.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	27001.

 FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
WELLS FARGO ADVISORS	16788.	66.	16722.
TOTAL TO FM 990-PF, PART I, LN 4	16788.	66.	16722.

 FORM 990-PF LEGAL FEES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL	3245.	3245.		0.
TO FM 990-PF, PG 1, LN 16A	3245.	3245.		0.

 FORM 990-PF ACCOUNTING FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TAX RETURN PREPARATION	3821.	3821.		0.
TO FORM 990-PF, PG 1, LN 16B	3821.	3821.		0.

FORM 990-PF	TAXES	STATEMENT	5
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
SECRETARY OF STATE	10.	10.		0.
TO FORM 990-PF, PG 1, LN 18	10.	10.		0.

FORM 990-PF	OTHER INCREASES IN NET ASSETS OR FUND BALANCES	STATEMENT	6
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DESCRIPTION	AMOUNT
TRANSFER FROM ROSEBUD CHARITABLE TRUST, FEIN 45-6145049	644597.
INCREASE IN MARKET VALUE OF INVESTMENTS	197002.
TOTAL TO FORM 990-PF, PART III, LINE 3	841599.

FORM 990-PF	CORPORATE STOCK	STATEMENT	7
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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
STOCKS AND OPTIONS	51460.	51460.
MUTUAL FUNDS	26394.	26394.
PREFERRED STOCK	421640.	421640.
TOTAL TO FORM 990-PF, PART II, LINE 10B	499494.	499494.

FORM 990-PF	CORPORATE BONDS	STATEMENT	8
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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
FIXED INCOME	144141.	144141.
TOTAL TO FORM 990-PF, PART II, LINE 10C	144141.	144141.

FORM 990-PF

GRANTS AND CONTRIBUTIONS
PAID DURING THE YEAR

STATEMENT 9

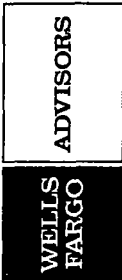
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
PACFT FOUNDATION P.O. BOX 492 OAK PARK, IL 60603	NONE AS NEEDED	501C3	5000.
ARMENIAN CHURCH OF LAKE BLUFF 1955 SHORE ACRES LAKE BLUFF, IL 60044	NONE AS NEEDED	501C3	3000.
HEART LINK OPEN 6300 N. RIDGE AVE. CHICAGO, IL 60660	NONE AS NEEDED	501C3	3000.
MISERICORDIA WOMEN'S AUXILIARY 6300 N. RIDGE AVE. CHICAGO, IL 60660	NONE AS NEEDED	501C3	200.
THE CLEARING P.O. BOX 65 ELLISON BAY, WI 54210	NONE AS NEEDED	501C3	200.
ST. HELINA COOP NURSERY P.O. BOX 493 RUTHERFORS, CA 94573	NONE AS NEEDED	501C3	2500.
GOOD NEWS PARTNERS 1600 JONQUAL TERRACE CHICAGO, IL 60626	NONE AS NEEDED	501C3	2000.
THE HAVEN 560 GREEN BAY RD. WINNETKA, IL 60093	NONE AS NEEDED	501C3	2700.

ACS 225 N. MICHIGAN AVE. CHICAGO, IL 60601	NONE AS NEEDED	501C3	1000.
MIDWEST CARE CENTER 2050 CLAIRE CO. GLENVIEW, IL 60025	NONE AS NEEDED	501C3	100.
THE HAVEN THE HAVEN WINNETKA, IL 60093	NONE AS NEEDED	501C3	800.
FCA P.O. BOX 336 WHEATON, IL 60186	NONE AS NEEDED	501C3	2500.
NIU FDN NORTHERN ILLINOIS UNIVERSITY DEKALB, IL 60115	NONE AS NEEDED	501C3	20000.
NORRIDGE CARES VILLAGE HALL NORRIDGE , IL 60706	NONE AS NEEDED	501C3	1000.
NEW HOPE BAPTIST CHURCH 11021 S. ASHLAND CHICAGO, IL 60643	NONE AS NEEDED	501C3	500.
FCA 8701 LEEDS RD. KANSAS CITY, MO 64129	NONE AS NEEDED	501C3	3000.
NORTHWESTERN UNIVERSITY 633 CLARK STREER EVANSTON, IL 60208	NONE AS NEEDED	501C3	2000.
ADVOCATE CHARITABLE FDN 3815 HIGHLAND AVE. DOWNERS GROVE, IL 60515	NONE AS NEEDED	501C3	4000.

RUSH UNIVERSITY MEDICAL CENTER 1700 WEST VAN BUREN ST. CHICAGO, IL 60612	NONE AS NEEDED	501C3	4000.
BOYS AND GIRLS CLUB OF LAKE COUNTY 1801 SHERIDAN RD. NORTH CHICAGO, IL 60064	NONE AS NEEDED	501C3	2000.
LEUKEMAI & LYMPHONA SOCIETY 651 W. WASHINGTON CHICAGO, IL 60661	NONE AS NEEDED	501C3	1000.
WE GROW DREAMS 1055 W. WASHINGTON ST. WEST CHICAGO, IL 60015	NONE AS NEEDED	501C3	1000.
IL JR GOLF ASSN 11855 ARCHER AVE., #200 LEMONT, IL 60439	NONE AS NEEDED	501C3	1000.
FAMILY SERVICES OF WINNETKA 992 1/2 GREEN BAY RD. WINNETKA, IL 60093	NONE AS NEEDED	501C3	1000.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

63500.



Realized Gain/Loss

As of Date: 2/05/10

Account Number: 1752-6742
Command Account Number: 9079814633
ROSEBUD FOUNDATION

Important Realized Gain/Loss Information

This information is provided for courtesy purposes only. Each individual taxpayer should consult with a tax advisor as to any additional reporting requirements or adjustments. NO COST BASIS OR REALIZED GAIN/LOSS INFORMATION IS PROVIDED TO THE IRS, NOR IS THIS INFORMATION VERIFIED OR GUARANTEED BY FIRST CLEARING, LLC TO BE ACCURATE FOR EACH TAXPAYER'S UNIQUE REPORTING REQUIREMENTS. THEREFORE, YOU SHOULD NEVER ASSUME THIS STATEMENT IS ACCURATE IN LIEU OF COMPLETING SCHEDULE D OF YOUR TAX RETURN AND CONSULTING WITH YOUR TAX ADVISOR.

Federal tax reporting requirements will create differences between the information presented here and what appears on your Form 1099-B, including but not limited to the following situations:

- * Cost basis for many fixed income tax lots has been amortized (for securities purchased at a premium) or accreted (for securities purchased at a discount), when possible, for applicable securities. For securities that were purchased at an Original Issue Discount (OID), only those positions whose cost basis has been adjusted will reflect the impacts of the OID accruals on the original cost basis. The original issue discount amount reported on your Form 1099-OID is not adjusted for market discount, acquisition premium or bond premium. Therefore, the amortization and accretion adjustments used on this statement may not be consistent with the Form 1099-OID amount because the reporting requirements on the Form 1099-OID are different.
- * The Original Price represents the unadjusted price of the security. The Original Price can be used to calculate the original unadjusted cost of the security.
- * Short sales are reportable on Form 1099-B before the position is closed.
- * Implicit redemptions by the issuer of a structured product are reportable on Form 1099-B, but will not appear on the Realized Gain/Loss Statement if that implicit redemption did not result in a closed tax lot at that time.
- * Securities subject to marked to market reporting requirements for those investors are not included here nor is that information available on our systems.
- * Long-term capital gains reported by a RIC or REIT appear on Form 1099-DIV only, as noted in the instructions for that form.
- * Lots closed due to transfers or journals will not be reflected in the Realized Gain/Loss Statement, or on the Form 1099-B.

Realized Gain/Loss Summary

	THIS YEAR GAIN	THIS YEAR LOSS	THIS YEAR NET
Short term	134,879.27	-186,303.77	-51,424.50
Long term	0.00	-12,451.73	-12,451.73
Total - Realized Gain/Loss	\$134,879.27	-\$198,755.50	-\$63,876.23

Realized Gain/Loss

As of Date: 2/05/10

Account Number: 1752-6742
 Command Account Number: 9079814633
 ROSEBUD FOUNDATION

Realized Gain/Loss Detail for Year

DESCRIPTION	QUANTITY	ADJ PRICE/ ORIG PRICE	DATE ACQUIRED	CLOSE DATE	PROCEEDS	ADJ COST/ ORIG COST	GAIN/LOSS
Short Term							
AEGON N V 7 25% PERP CUM PFD CALL STARTING 12/15/12	1,000.0000	8.3500	10/08/08	08/21/09	16,480.56	8,442.50	8,038.06
AEGON N V FLOATING RATE NON-CUM PERPETUAL PFD CALL STARTING 12/15/10	1,000.0000	10.1500	01/09/09	08/27/09	10,647.91	10,155.00	492.91
ALPINE GLOBAL PREMIER PROPER	1,500.0000	9.9300	07/08/08	04/23/09	5,329.36	14,930.62	-9,601.26
	993.0000	9.9256	07/08/08	04/23/09	3,528.03	9,879.70	-6,351.67
	800.0000	9.9000	07/08/08	04/23/09	2,842.33	7,946.51	-5,104.18
	300.0000	9.9100	07/08/08	04/23/09	1,065.87	2,980.13	-1,914.26
	7.0000	9.8700	07/08/08	04/23/09	24.88	69.26	-44.38
	193.0000	9.8700	07/08/08	04/23/09	685.22	1,909.50	-1,224.28
	107.0000	9.8860	07/08/08	04/23/09	379.89	1,060.34	-680.45
	100.0000	9.9200	07/08/08	04/23/09	355.05	994.38	-639.33
BANK OF AMERICA CORP PFD DEP SHS REPSTG 1/1200TH SER 1	1,000.0000	8.8600	01/09/09	06/11/09	14,200.56	8,865.00	5,335.56
	2,000.0000	4.8500	03/12/09	06/11/09	28,401.13	9,790.00	18,611.13
BANK OF AMERICA 7 25% SERIES L CONVERTIBLE 12/31/49	50.0000	788.0000	07/15/08	06/22/09	40,581.45	39,502.50	1,078.95
CITIGROUP INC GOLDMAN SACHS GROUP PFD FLOATING RATE PERP CALLABLE	1,000.0000	9.9500	11/14/08	01/22/09	3,124.98	10,007.50	-6,882.52
	1,000.0000	13.9500	01/09/09	12/15/09	21,792.61	13,955.00	7,837.61



Realized Gain/Loss

As of Date: 2/05/10

Account Number: 1752-6742
 Command Account Number: 9079814633
 ROSEBUD FOUNDATION

Short Term DESCRIPTION	Quantity	ADJ PRICE/ ORIG PRICE	DATE ACQUIRED	CLOSE DATE	PROCEEDS	ADJ COST/ ORIG COST	GAIN/LOSS
<i>Continued</i>							
1,000.0000	11.9000	03/11/09	12/15/09	21,792.61	11,990.00	9,802.61	
700.0000	11.9000	03/24/09	12/15/09	15,254.83	8,345.75	6,909.08	
300.0000	11.9000	03/24/09	12/15/09	6,535.77	3,576.75	2,959.02	
POWERSHRS FINANCIAL PREFERRED PORTFOLIO ETF							
3,500.0000	11.4467	04/17/09	09/30/09	55,163.00	40,122.95	15,040.05	
1,300.0000	11.4499	04/17/09	09/30/09	20,489.12	14,906.97	5,582.15	
200.0000	11.4199	04/17/09	09/30/09	3,152.17	2,292.38	859.79	
700.0000	14.3600	08/27/09	09/30/09	11,032.61	10,093.25	939.36	
1,300.0000	14.3600	08/27/09	09/30/09	20,497.09	18,744.59	1,752.50	
PROSHARES ULTRA DOW ETF							
1,000.0000	36.5254	10/29/08	01/14/09	27,665.39	36,532.90	-8,867.51	
1,000.0000	33.7200	10/29/08	03/06/09	19,692.18	33,727.50	-14,035.32	
500							
600.0000	27.2377	10/27/08	03/06/09	8,858.94	16,390.62	-7,531.68	
400.0000	27.2400	10/27/08	03/06/09	5,905.96	10,935.50	-5,029.54	
500.0000	14.6800	03/05/09	03/06/09	7,382.46	7,387.50	-5.04	
500.0000	14.6777	03/05/09	03/06/09	7,382.47	7,381.35	1.12	
ROYAL BK SCOTLAND 7.25% PERP NON-CUM PFD CALL STARTING 12/31/12							
500.0000	12.3500	10/03/08	01/22/09	2,323.73	6,267.50	-3,943.77	
1,000.0000	7.2500	10/08/08	01/22/09	4,647.47	7,335.00	-2,687.53	
500.0000	6.9500	10/08/08	01/22/09	2,323.74	3,567.50	-1,243.76	
S&P MIDCAP 400 ETF INDEX SPDR TRUST SERIES 1							
700.0000	143.1499	07/09/08	01/14/09	64,009.64	100,276.68	-36,267.04	

Realized Gain/Loss

As of Date: 2/05/10

Account Number: 1752-6742
 Command Account Number: 9079814633
 ROSEBUD FOUNDATION

Short Term	Continued	QUANTITY	ADJ PRICE/ ORIG PRICE	DATE ACQUIRED	CLOSE DATE	PROCEEDS	ADJ COST/ ORIG COST	GAIN/LOSS
DESCRIPTION		500.0000	49.0200	02/09/09	06/17/09	31,693.48	24,515.00	7,178.48
SOHU COM INC								
ULTRA FINANCIAL	ETF	2,700.0000	8.5800	10/10/08	03/18/09	6,752.65	23,194.70	-16,442.05
PROSHRS		1,100.0000	8.7100	10/10/08	03/18/09	2,751.08	9,592.69	-6,841.61
		1,000.0000	8.7700	10/10/08	03/18/09	2,500.98	8,780.63	-6,279.65
		892.0000	8.7300	10/10/08	03/18/09	2,230.88	7,804.15	-5,573.27
		800.0000	8.6700	10/10/08	03/18/09	2,000.79	6,944.50	-4,943.71
		600.0000	8.6300	10/10/08	03/18/09	1,500.59	5,184.38	-3,683.79
		400.0000	8.8800	10/10/08	03/18/09	1,000.39	3,556.25	-2,555.86
		400.0000	8.6100	10/10/08	03/18/09	1,000.39	3,448.25	-2,447.86
		100.0000	8.7200	10/10/08	03/18/09	250.09	873.06	-622.97
		8.0000	8.7400	10/10/08	03/18/09	20.00	70.01	-50.01
		2,000.0000	6.0400	12/16/08	03/18/09	5,002.01	12,141.67	-7,139.66
		1,000.0000	6.0400	12/16/08	03/24/09	2,900.98	6,070.83	-3,169.85
		9,000.0000	1.3900	03/06/09	03/24/09	26,108.85	12,591.00	13,517.85
		1,000.0000	1.3900	03/06/09	04/17/09	3,600.90	1,399.00	2,201.90
		9,000.0000	1.8500	03/10/09	04/17/09	32,408.17	16,731.00	15,677.17
		1,000.0000	1.8500	03/10/09	04/17/09	3,611.40	1,859.00	1,752.40
		9,000.0000	2.9200	04/02/09	04/17/09	32,502.66	26,353.64	6,149.02
		2,000.0000	2.9200	04/02/09	06/22/09	7,276.41	5,856.36	1,420.05
UNITED STATES OIL FUND	LP	800.0000	28.3700	03/13/09	04/02/09	24,528.50	22,786.00	1,742.50
WEATHRFORD INTERNATIONAL	LTD REG	1,000.0000	32.1700	09/22/08	07/07/09	17,772.54	32,272.50	-14,499.96
Total - Short Term						\$660,962.75	\$712,387.25	-\$51,424.50



Realized Gain/Loss

As of Date: 2/05/10

Account Number: 1752-6742
 Command Account Number: 9079814633
 ROSEBUD FOUNDATION

DESCRIPTION	QUANTITY	ADJ PRICE/ ORIG PRICE	DATE ACQUIRED	CLOSE DATE	PROCEEDS	ADJ COST/ ORIG COST	GAIN/LOSS
Long Term							
ALPINE GLOBAL PREMIER PROPER	300.0000	12.6800	03/11/08	04/23/09	1,065.87	3,838.57	-2,772.70
	500.0000	12.7000	03/11/08	04/23/09	1,776.45	6,404.82	-4,628.37
	200.0000	12.6956	03/11/08	04/23/09	710.58	2,561.04	-1,850.46
DUKE REALTY CORP 8.375% PERPETUAL CUM PFD SER O CALL STARTING 2/22/2013	1,000.0000	24.7500	03/06/08	08/03/09	21,676.87	24,877.07	-3,200.20
Total - Long Term					\$25,229.77	\$37,681.50	-\$12,451.73

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print	Name of Exempt Organization ROSEBUD FOUNDATION	Employer identification number 26-2250986
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. 195 BIRCH ST.	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WINETKA, IL 60093	

Check type of return to be filed (file a separate application for each return):

- | | | |
|---|---|------------------------------------|
| <input type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input checked="" type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

MR. THOMAS WILSON

- The books are in the care of ▶ **195 BIRCH ST. - WINNETKA, IL 60093**
 Telephone No. ▶ _____ FAX No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2010**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
 ▶ calendar year **2009** or
 ▶ tax year beginning _____, and ending _____.

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	3c	\$	0.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

Part II			Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).		
Type or print File by the extended due date for filing the return See instructions	Name of Exempt Organization ROSEBUD FOUNDATION C/O MR. THOMAS WILSON		Employer identification number 26-2250986		
	Number, street, and room or suite no. If a P.O. box, see instructions. 195 BIRCH ST.		For IRS use only		
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WINNETKA, IL 60093				

Check type of return to be filed (File a separate application for each return):

- | | | | | | |
|--------------------------------------|---|---|--------------------------------------|------------------------------------|------------------------------------|
| <input type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 5227 | <input type="checkbox"/> Form 8870 |
| <input type="checkbox"/> Form 990-BL | <input checked="" type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 4720 | <input type="checkbox"/> Form 6069 | |

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

MR. THOMAS WILSON

- The books are in the care of **195 BIRCH ST. - WINNETKA, IL 60093**
- Telephone No. FAX No.
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

- I request an additional 3-month extension of time until **NOVEMBER 15, 2010.**
- For calendar year **2009**, or other tax year beginning _____, and ending _____.
- If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period
- State in detail why you need the extension
INFORMATION FROM A THIRD PARTY NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN IS CURRENTLY UNAVAILABLE.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature *Thomas Wilson* Title *CPA* Date *7/25/10*