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**Return of Private Foundation** 

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

OMB No 1545-0052

	t of the Treasury renue Service	Note The fo		pe able to use a copy of this			tina requirements.	2009
		or tax year beginnin			, and end		ting requirements.	
	all that apply:	Initial retu	· · · · · · · · · · · · · · · · · · ·	Initial return of a fo	<del></del>	<u> </u>	Final return	
01.0011	an that apply.	Amended		Address chang		· —	Name change	
Ab - I	Name of fo	oundation		<del></del>	<del></del>		A Employer identification	number
se the l label.			ERESA L	. COTSIRILOS				
therwis	— ·	Y FOUNDAT:					36-3413343	
print	· · · · · · · · · · · · · · · · · · ·			livered to street address)	R	oom/suite	B Telephone number	
or type	1200	. LAKE SHO	ORE DRI	VE #9-E			312-263-03	45
e Spec	I GIV OF LOW	n, state, and ZIP cod	le				C If exemption application is p	
structio	CHICA	GO, IL 6	0611				D 1. Foreign organizations	s, check here
Check	type of organization	ation: X Secti	on 501(c)(3) ex	empt private foundation			<ol><li>Foreign organizations me check here and attach co</li></ol>	eting the 85% test,
Se	ction 4947(a)(1	nonexempt charitab		Other taxable private founda	ition		E If private foundation sta	
Fair ma	rket value of all	assets at end of year	J Accounts	ng method: X Cash	Accrua	1	under section 507(b)(1)	
from F	Part II, col. (c),			her (specify)			F If the foundation is in a	60-month termination
▶\$				mn (d) must be on cash b	oasis)		under section 507(b)(1)	
art I	Analysis of R	evenue and Expense unts in columns (b), (c), a	)\$	(a) Revenue and	(b) Net inve	stment	(c) Adjusted net	(d) Disbursements
	necessarily equa	unts in columns (b), (c), a If the amounts in column	and (d) may not (a).)	expenses per books	` ncom		income	for charitable purposes (cash basis only)
1	Contributions,	gifts, grants, etc., rec	eived			·	N/A	
2	Check	f the foundation is not required						
3	Interest on saving cash investments	s and temporary		26,620.	26	,620.		STATEMENT
4		interest from securiti	es	72,761.	72	,761.		STATEMENT
5a	Gross rents							
Ь	Net rental income	or (loss)						
, 6a	Net gain or (loss)	from sale of assets not o	n line 10	33,991.				
b 7	Gross sales price assets on line 6a	for all 94	1,857.					
7		come (from Part IV, line :	2)		33	,991.		
8	Net short-term	capital gain				-		
9	Income modific							
10a								
b	Less Cost of good	as Cale IVEU						
C	Gross profit or	(loss)						
11	Other Indon	G 3 0 2010	38-0					
12	Total Add line	s 1 through 11	181	133,372.	133			
13	Compensation of	officers directors trusters and wages	es, etc	0.		0.		
14	Other employe	salaries and wages	السيسب					
15		employee benefits						
16a	Legal fees							
g b	Accounting fee		TMT 3	3,750.	3	<u>,750.</u>		
<u> </u>	Other profession	onal fees S	TMT 4	37,793.	37	,793.		_
17	Interest							
16a b c 17 18 19 20 21 22 23 24 25 26 27	Taxes							
19	Depreciation a	nd depletion						
20	Оссиралсу	_						
21		nces, and meetings						
22	Printing and pu		maem =	405				
2 23	Other expenses		TMT 5	125.		0.		2
5   24 5	-	g and administrative		41 660	4 4	F 4 3		
5	•	l lines 13 through 23	i	41,668.	41	<u>,543.</u>	<del></del>	222 02
25		gifts, grants paid	_	229,026.	•		<del> </del>	229,02
26	•	s and disbursements	8.	270 604	44	E 4 3		220 25
+	Add lines 24 ai		_	270,694.	41	<u>,543.</u>		229,05
27	Subtract line 2			127 200				1
l ª		over expenses and disl		-137,322.	~ ~ ~	000		
- 1		t income (if negative, e			91	,829.	37./5	
3501 -02-10	Adjusted net i	ncome (if negative, ente	•	Act Notice, see the instruc			N/A	Form <b>990-PF</b> (20

GEORGE J. & THERESA L. COTSIRILOS

_		GEORGE J. & THERESA L. C 0-PF (2009) FAMILY FOUNDATION	-	36-3	3413343 Page 2
P	art	II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	<del></del>
	7	Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	9,210.	11,295.	11,295.
	2	<u></u>	304,443.	624,791.	624,791.
	3	Accounts receivable ► 4,124.			
		Less: allowance for doubtful accounts ▶	4,110.	4,124.	4,124.
	4	Pledges receivable -			
		Less: allowance for doubtful accounts			<del></del>
	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			··· -··
ets	8	Inventories for sale or use			
Assets	9	· · · · · · · · · · · · · · · · · · ·			
•		Investments - U.S. and state government obligations STMT 6	906,520.	702,878.	739,973.
		Investments - corporate stock STMT 7	3,074,656.	2,818,529.	3,121,261.
	C	Investments - corporate bonds STMT 8	94,800.	94,800.	102,286.
	11	Investments - land, buildings, and equipment, basis			
	1	Less accumulated depreciation			· · · · · · · · · · · · · · · · · · ·
		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)	4,393,739.	4,256,417.	4,603,730.
_	I	Accounts payable and accrued expenses	2703077034	1/200/12//	1/000//001
	18	Grants payable		······································	
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
Ξ	22				
	23	Total liabilities (add lines 17 through 22)	0.	0.	
	[	Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
Š	24	Unrestricted			
or Fund Balances	25	Temporarily restricted			
Ba	26	Permanently restricted			
Ę		Foundations that do not follow SFAS 117, check here			
Ē	İ	and complete lines 27 through 31.			
150	27	Capital stock, trust principal, or current funds	0.	0.	
sse	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	4,393,739.	<u>4,256,417.</u>	
Ž	30	Total net assets or fund balances	4,393,739.	4,256,417.	
	21	Total liabilities and not access/fund belance	4,393,739.	4,256,417.	
	31	Total liabilities and net assets/fund balances		4,230,417	
	'art	Analysis of Changes in Net Assets or Fund Ba	alances 		
1		I net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
	-	st agree with end-of-year figure reported on prior year's return)		1	<u>4,393,739.</u>
2		r amount from Part I, line 27a		2	-137,322.
3		er increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	4,256,417.
		reases not included in line 2 (itemize)		5	0.
<u>6</u>	<u>I ota</u>	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	iumn (b), line 30	6	4,256,417. Form <b>990-PF</b> (2009)
					rum <b>330-FF</b> (2009)

	Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets	(col.	(b) divided by col. (c))
	2008	255,264.	4,584,673.		.055678
	2007	237,738.	5,344,579.		.044482
	2006	218,164.	4,841,659.		.045060
	2005	212,065.	4,548,154.		.046627
_	2004	183,036.	4,348,533.		.042091
	<b>Total</b> of line 1, column (d)  Average distribution ratio for the 5-year ba	use period - divide the total on line 2 by 5	or by the number of years	2	.233938
J	the foundation has been in existence if les	•	or by the number of years	3	.046788
4	Enter the net value of noncharitable-use as	ssets for 2009 from Part X, line 5		4	4,047,855.
5	Multiply line 4 by line 3			5	189,391.
6	Enter 1% of net investment income (1% o	f Part I, line 27b)		6	918.
7	Add lines 5 and 6			7	190,309.
8	Enter qualifying distributions from Part XII	I, line 4		8_	229,051.
	If line 8 is equal to or greater than line 7. c	heck the hox in Part VI, line 1h, and comi	plete that part using a 1% tax rate		

See the Part VI instructions.

GEORGE J. & THERESA L. COTSIRILOS Form 990-PF (2009) FAMILY FOUNDATION 36-341<u>3343</u> Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) Part VI 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. (attach copy of letter if necessary-see instructions) Date of ruling or determination letter: 918. b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🗶 and enter 1% 1 of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part 1, line 12, col. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2 3 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 Credits/Payments: 10,255. 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) 6с 6d d Backup withholding erroneously withheld 10,255. 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here \_\_\_\_\_ if Form 2220 is attached 8 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 337 . Refunded ▶ 11 11 Enter the amount of line 10 to be: Credited to 2010 estimated tax Part VII-A | Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in 1a any political campaign? 1b b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 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 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: (2) On foundation managers. ► \$ (1) On the foundation. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 0. managers. > \$ X 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. 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 N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4b 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 conflict with the state law X remain in the governing instrument? X 7 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 8a Enter the states to which the foundation reports or with which it is registered (see instructions) ILb If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) X of each state as required by General Instruction G? If "No," attach explanation 8b 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 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV X

Form **990-PF** (2009)

10

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

GEORGE J. & THERESA L. COTSIRILOS Form 990-PF (2009) FAMILY FOUNDATION	26 2411	2242	Page 5
Part VII-A   Statements Regarding Activities (continued)	36-3413	343	- ago o
11 ' At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			<del>1</del>
section 512(b)(13)? If "Yes," attach schedule (see instructions)		11	<b>X</b> _
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			<del> </del>
August 17, 2008?		12	X_
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	1	13 X	
Website address ► N/A			
	ephone no. <b>≥</b> 312-20	53-034	5
Located at ▶ 209 E LAKE SHORE DR CHICAGO IL	ZIP+4 <b>▶</b> 60		
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	<u> </u>
Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Require	red		
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Ye	s No
1a During the year did the foundation (either directly or indirectly):			1
(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)		1 1	
a disqualified person?	Yes X No		-
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X 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)?	Yes X No		1
(6) Agree to pay money or property to a government official? (Exception. Check "No"			
if the foundation agreed to make a grant to or to employ the official for a period after			
termination of government service, if terminating within 90 days.)	Yes X 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)?	N/A	1b	
Organizations relying on a current notice regarding disaster assistance check here			
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not of	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	g 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			
before 2009?	Yes X No		
If "Yes," list the years ▶	<del></del>		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating	g to incorrect		
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer *N			-
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.			
<b>&gt;</b>	_	1 1	
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		1
b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified			
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 49	43(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			
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>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its char	table purpose that		
had not been removed from jeopardy before the first day of the tax year beginning in 2009?	<del>.</del>	4b	_ <u> </u>
	Fo	rm <b>990-P</b>	<b>F</b> (2009)

GEORGE J. & THERESA L. COTSIRILOS

Form 990-PF (2009) FAMILY FOUNDATION			<u>36-34133</u>	<u>43</u>	Page 6
Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)		<b>,</b>
5a During the year did the foundation pay or incur any amount to:					
'(1) Carry on propaganda, or otherwise attempt to influence legislation (sect	ion 4945(e))?	☐ Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955)	; or to carry on, directly or indire				
any voter registration drive?		Ye	s X No	- 1	
(3) Provide a grant to an individual for travel, study, or other similar purpos	es?	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	tion described in section				İ
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	ĺ	į
(5) Provide for any purpose other than religious, charitable, scientific, literal	ry, or educational purposes, or t	or			
the prevention of cruelty to children or animals?		Ye	s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify t	inder the exceptions described	n Regulations			1
section 53.4945 or in a current notice regarding disaster assistance (see insi	tructions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check	k here				
c if the answer is "Yes" to question 5a(4), does the foundation claim exemption	r from the tax because it mainta	ıned			
expenditure responsibility for the grant?	N	I/A 🔲 Ye	s D No		
If "Yes," attach the statement required by Regulations section 53 49	045-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly,	to pay premiums on			ŀ	
a personal benefit contract?		Y€	s X No	ŀ	İ
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on	a personal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited ta	x shelter transaction?	Ye	es 🗓 No		
b If yes, did the foundation receive any proceeds or have any net income attrib	utable to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Trus	stees, Foundation Ma	nagers, Highly	<b>y</b>		
Paid Employees, and Contractors			<del></del>		
1 List all officers, directors, trustees, foundation managers and the	<del></del>	Lt. Componentian	(d) Contributions to		
(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	accou allov	xpense int, other wances
GEORGE J. COTSIRILOS	PRESIDENT				
209 E. LAKE SHORE DRIVE					
CHICAGO, IL 60611	0.00	0.	0.		0.
STEPHANIE COTSIRILOS	VICE PRES.				
96 WINTERHAVEN DRIVE					
ORONO, ME 04473	0.00	0.	0.		0.
JOHN G. COTSIRILOS	TREASURER				
2442 FOURTH AVE.				1	
SAN DIEGO, CA 92101	0.00	0.	0.		0.
GEORGE G. COTSIRILOS, JR.	SECRETARY			1	
1034 MERCED STREET					
BERKELY, CA 94707	0.00	0.	0.		0.
2 Compensation of five highest-paid employees (other than those i	<del></del>	enter "NONE."	I (4) 0		
(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	accou	Expense Int, other wances
NONE					
			1		· · · · ·
·		<u></u>			
	<u> </u>				
Total number of other employees paid over \$50,000			<b></b>		(

Page 7

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		
	7	
	_	
	L	
Total number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities		<b>&gt;</b>
		-
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produced to the conference of the convened of the conference of the convened of the conference of the convened of the conference o	cal information such as the iced, etc.	Expenses
1N/A		
2		
		<del></del>
3		
4	<del></del>	
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on li	nes 1 and 2.	Amount
1 N/A		
2		
All abban and an all to district the state of the state o		
All other program-related investments. See instructions.	1	
3		
· · · · · · · · · · · · · · · · · · ·		
Total. Add lines 1 through 3	<b>—</b>	0
		Form <b>990-PF</b> (200

Page 8

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	s, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	3,713,454.
	Average of monthly cash balances	1b	391,995.
	Fair market value of all other assets	10	4,048.
d	Total (add lines 1a, b, and c)	1d	4,109,497.
е	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	4,109,497.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	61,642.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,047,855.
6	Minimum investment return. Enter 5% of line 5	6	202,393.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here  and do not complete this part.)	nd certai	n
1	Minimum investment return from Part X, line 6	1	202,393.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	918.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	201,475.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	201,475.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	201,475.
P	art 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	229,051.
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:		
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	229,051.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		<u> </u>
	income. Enter 1% of Part I, line 27b	5	918.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	228,133.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies	
	4940(e) reduction of tax in those years.		

Form **990-PF** (2009)

### 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				201,475.
2 Undistributed income, if any, as of the end of 2009				202/2701
a Enter amount for 2008 only			227,475.	
b Total for prior years:		0.	, , , , , , , ,	
3 Excess distributions carryover, if any, to 2009:			·	
a From 2004				
<b>b</b> From 2005				
<b>c</b> 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: ▶\$229,051.				
a Applied to 2008, but not more than line 2a			227,475.	
<b>b</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	<b>V</b> •			1,576.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a))  6 Enter the net total of each column as indicated below:				
	0.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 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		<u> </u>		
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	·			··· <del>·</del>
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				199,899.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.		<u> </u>	
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	0.			
10 Analysis of line 9:				
a Excess from 2005				
<b>b</b> Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				····
				F 000 DE (0000)

GEORGE J. & THERESA L. COTSIRILOS Form 990-RF (2009) FAMILY FOUNDATION Page 10 36-3413343 Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 à 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 4942(i)(3) or 4942(j)(5) b Check box to indicate whether the foundation is a private operating foundation described in section Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (a) 2009 (b) 2008 (c) 2007 (d) 2006 (e) Total 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 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) "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year 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.) **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).) GEORGE J. COTSIRILOS 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. Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here LX 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:

Form 990-PF (2009) FAMILY FOUNDATION

Part XV Supplementary Information (continued)

36-3413343 Page 11

3 ' Grants and Contributions Paid During the Ye	ar or Approved for Future I	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
SEE STATEMENT 9			<u> </u>	229,026.
Total b Approved for future payment			<u>▶ 3a</u>	229,020.
, p. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.				
NONE				
NONE				
			1	
Total	I		2h	0

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

Enter gross amounts unless otherwise indicated.	Unrelated	business income		y section 512, 513, or 514	(e)
•	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion	Amount	function income
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					<del></del>
3 Interest on savings and temporary cash					
investments			14	26,620.	
4 Dividends and interest from securities			14	72,761.	· · · · · · · · · · · · · · · · · · ·
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					<u> </u>
8 Gain or (loss) from sales of assets other than inventory			18	33,991.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	.	·			
b					<u> </u>
c		<del></del>			
d	-				
e					
12 Subtotal. Add columns (b), (d), and (e)	<u>L</u>		0.	133,372.	0
13 Total. Add line 12, columns (b), (d), and (e)				13	133,372
(See worksheet in line 13 instructions to verify calculations.)					

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

P	art XVII	Information Re Exempt Organi	egarding Transfers To a izations	and Transactions	and Relation	nships With No	ncharitable	•	
1	Oud the o		ectly engage in any of the followin	n with any other organizati	inn described in s	ection 501(c) of		Yes	No
•			i(3) organizations) or in section 52	-		1(c) 01	-	.00	
а			ation to a noncharitable exempt or						İ
_	(1) Cash	· · · · ·		ya			1a(1)		X
	(2) Othe						1a(2)		X
b	Other tra								
	(1) Sale	s of assets to a noncharital	ble exempt organization				16(1)		X
	(2) Puro	chases of assets from a nor	ncharitable exempt organization				1b(2)		X
	(3) Rent	tal of facilities, equipment, (	or other assets				1b(3)		X
	(4) Rein	nbursement arrangements					1b(4)		X
	(5) Loar	ns or loan guarantees					1b(5)		X
	(6) Perf	formance of services or me	mbership or fundraising solicitatio	ns			1b(6)		<u>X</u>
	_		iling lists, other assets, or paid em	•			1c		X
d			"Yes," complete the following sche					ets,	
			oundation. If the foundation receive	ed less than fair market val	lue in any transac	tion or sharing arrang	ement, show in		
<i>(</i> - )		<u>'</u>	other assets, or services received.		1 (1)				
(a)	Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(0) Descrip	otion of transfers, transact	ions, and sharing an	rangeme	ants
_			N/A		-	<u>-</u>			
				· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·			
					<u> </u>				
_						<del></del>		-	
-					1				
			· · · <del></del> ···· -			,			
								•	
				·• · · · · · · · · · · · · · · · · · ·					
28		•	tly affiliated with, or related to, one	, ,	nizations describe	d			_
		, ,	r than section 501(c)(3)) or in sect	tion 527?			Yes	L X	No
t	If "Yes,"	complete the following sch		T 4. = .	_				
		(a) Name of org	janization	(b) Type of organization	<u> </u>	(c) Description of	relationship		
		N/A			<del> </del>				
					-				
_									
						<del> </del>			
$\neg$	Under pena	alties of perjury, ladeclare that I h	have examined this return, including acco	I empanying schedules and state	ments, and to the be	est of my knowledge and i	pelief, it is true, corre	ect,	
			er than taxpayer or fiduciary) is based on				,		
	/	m// las	rilo	18/23/10	$\mathcal{F}$	ጥረ ኃ .			
ě	Signa	ature of officer or trustee	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Date	Title	1.0 7	<u> </u>		
Ĭ	I P	reparer's	0 10		Date / /	Check if	Preparer's identif	ying nur	nber
Sign Here		ignature J.J.	all Han		8/19/10	Check if self- employed			
,			RCO, KINNAMAN,	LEWIS & CO.	11/1	EIN ►			
	5 S   4		KNIGHTSBRIDGE P		TE 350				
	ad		OLNSHIRE, IL 60			Phone no.	(847) 41	<u>5-1</u>	313
			<u> </u>				Earm QQf	\ DE	(0000)

Part IV. | Capital Gains and Losses for Tax on Investment Income (b) How acquired (c) Date acquired (a) List and describe the kind(s) of property sold, e.g., real estate. (d) Date sold (mo., day, yr.) (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co. D - Donation 1a 150,000 FEDL NATL MTG 5.25% 06/19/0701/12/09 786 SHS CONOCO PHILLIPS P 10/03/01|03/09/09 P 03/08/04|04/02/09 c 0.88 SHS TIME WARNER P VARIOUS 04/16/09 d 3126 SHS LIBERTY GLOBAL CL C e 2500 SHS SCHERING-PLOUGH P |10/06/08|05/29/09 f 4600 SHS SCHERING-PLOUGH P |10/06/08|08/14/09 P 06/01/07|09/02/09 g 4300 SHS MDS P h 619 SHS TIME WARNER CABLE 03/08/04|10/06/09 1075 SHS TYCO ELECTRONICS P 08/04/0510/16/09 500 SHS TYCO ELECTRONICS P |10/14/05|10/16/09 k 1200 SHS TYCO ELECTRONICS P 06/30/08|10/16/09 1 725 SHS TYCO ELECTRONICS P |07/30/08|10/16/09 m 150,000 FEDL HOME LN BKS NC 4.25% P 02/24/0411/13/09 P 07/30/0211/20/09 n 0.48 SHS DIRECTV 07/10/03|12/02/09 o 600 SHS DIAGEO P (h) Gain or (loss) (f) Depreciation allowed (g) Cost or other basis (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 148,852 150,000 1,148. a 6,775. 28,286, 21,511. b 19 36. -17. C 7,543. 56,368 48,825 d 60,799 38<u>,239</u>. 22,560. е 123.957 70,360. 53,597. f 32,398 88,784 -56,386. g 26,469 31,676. -5,207. h 25,606 34,253 -8,647. 11,910. 15,455. -3,545. 28.584 -14,561. 43,145 k -7,345. 17,269. 24,614 1 150,000. 150,000. 0. m 11. 15. 4. n 41,413. 25,268. 16,145. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any 1,148. а 6,775. b -17. C 7,543. d 22<u>,560.</u> е 53,597. -56,386. g -5,207. h -8,647. ı -3,545. -14,561. -7<u>,345.</u> 0. m 11. n 16,145. 0 { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } 2 Capital gain net income or (net capital loss) 2 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

Part IV. Capital Gains and Lo	sses for Tax on Investment Income				
	d describe the kind(s) of property sold rick warehouse; or common stock, 20		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a 705 SHS DISCOV	ERY COMM CL A		P	07/30/02	12/02/09
b 1000 SHS MEDTR	ONIC		P	02/27/07	
c 1450 SHS VIACO			P	02/03/05	
d 50 SHS VIACOM	CL B			03/04/05	
e 0.09 SHS AOL				03/08/04	
f 1100 SHS BLACK				01/15/97	
g 224.09 SHS AOL	<u></u>			03/08/04	
h 90.91 SHS AOL			P	09/10/09	12/23/09
1					<del></del>
<del></del>					
<u>k</u>			<del>-  </del>		
<u> </u>					
<u>m</u>					
<u>n</u>		· · · · · · · · · · · · · · · · · · ·			
0	(f) Depreciation allowed	(g) Cost or other basis	(h)	Gain or (loss)	
(e) Gross sales price	(or allowable)	plus expense of sale		lus (f) minus (g)	
a 22,846.		5,975.			16,871.
b 43,370.		49,941.			-6,571.
c 43,414.		65,293.			-21,879.
d 1,497.		2,136.			-639.
<u>e</u> 2.		3.			-1.
f 70,249.		34,960.			35,289.
g 5,254.		6,549.			<u>-1,295.</u>
h 2,132.		1,987.			145.
<u></u>					
<u> </u>				<del></del>	
<u>k</u>			<del></del>		
<u>-</u>					<del></del> -
<u>m</u>				=	
<u>n</u>					
Complete only for assets show	ng gain in column (h) and owned by t	the foundation on 12/31/69	(I) Los	sses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess	of col. (h) gain over not less than "-0-")	
a			•		16,871.
b					-6,571.
C					-21,879.
d					-639.
е					-1.
<u>f</u>					35,289.
g					-1,295.
<u>h</u>					145.
1			== . =		
<u>k</u>				<del></del> _	
<u> </u>				<u> </u>	
<u>m</u>			<del></del>		
<u>n</u>	<del>                                     </del>				
0					
2 Capital gain net income or (net c	• 11 (1000); 011tol 0	, i	!		33,991.
3 Net short-term capital gain or (lo If gain, also enter in Part I, line 8	oss) as defined in sections 1222(5) an	d (6):			
If (loss), enter "-0-" in Part I, line		J   3		N/A_	

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CA	ASH IN	VESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
INTEREST INCOME CORPORATE BON	DS			,	26,6	20.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A			26,6	20.
FORM 990-PF DIVIDEND	S AND INTER	EST FROM	SECUR	RITIES	STATEMENT	2
SOURCE	GROSS	AMOUNT		TAL GAINS	COLUMN (A AMOUNT	)
DIV INCOME - DREYFUS GOVT CAS DIVIDEND INCOME - HARRIS US TREASURY INTEREST	H	747. 58,139. 13,875.		0. 0. 0.	7 58,1 13,8	
TOTAL TO FM 990-PF, PART I, L	n 4	72,761.		0.	72,7	61.
FORM 990-PF	ACCOUNTI	NG FEES			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	EST- COME	(C) ADJUSTED NET INCOM		
DEMARCO KINNAMAN & LEWIS	3,750.	3	,750.			0.
TO FORM 990-PF, PG 1, LN 16B	3,750.	3	,750.			0.
FORM 990-PF	THER PROFES	SIONAL F	EES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTEI NET INCOM		
TRUSTEE FEES-HARRIS ASSOCIATES	37,793.	37	,793.			0.
TO FORM 990-PF, PG 1, LN 16C	37,793.	37	,793.			0.

FORM 990-PF	OTHER E	XPENSES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		
ANNUAL REPORT FILING FEE	110. 15.		0.	10. 15.
TO FORM 990-PF, PG 1, LN 23	125.	=======================================	0.	25.
FORM 990-PF U.S. AND S	STATE/CITY G	OVERNMENT	OBLIGATIONS	STATEMENT 6
DESCRIPTION	U.S GOV'		BOOK VALUE	FAIR MARKET VALUE
100,000 FED FARM CR BKS 2.0% 150M FHLB 4.25% 150,000 FED HOME 4.3% 2/3/11 150,000 US T-NOTE 4.5% 11/11 150,000 FED NATL MTG 5.25% 150,000 US T-NOTE 4.75% 5/12 150,000 FHLB 4.375% 9/13/13  TOTAL U.S. GOVERNMENT OBLIGAT TOTAL STATE AND MUNICIPAL GOVERNAL TO FORM 990-PF, PART II	ERNMENT OBL	IGATIONS	100,010. 0. 147,259. 151,147. 0. 148,053. 156,409. 702,878.	0. 155,675. 159,716. 0. 161,988. 161,250.
EODM 000 DE	CORDORAM	E CMOCK		STATEMENT 7
DESCRIPTION	CORPORAT	E STOCK	BOOK VALUE	FAIR MARKET VALUE
2820 SHS DIRECTV COM CL A 1900 SHS WALMART STORES INC 2100 SHS ILLINOIS TOOL WORKS 1000 SHS APACHE CORP 282 SHS LIBERTY MEDIA STARZ A 1100 SHS BLACK & DECKER MFG O 4800 SHS BRISTOL MYERS SQUIBE 4500 SHS WALT DISNEY CO. 1600 SHS FORTUNE BRANDS INC 2000 SHS DIAGEO PLC 3525 SHS LIBERTY INTERACTIVE	20 3		26,858. 97,470. 67,282. 59,916. 4,203. 0. 104,121. 68,667. 37,927. 87,241. 46,505.	101,555. 100,779. 103,170. 13,014. 0. 121,200. 145,125. 69,120. 138,820.

GEORGE J. & THERESA L. COTSIRILOS FAMILY		36-3413343
2300 SHS US BANCORP DEL	47,203.	51,773.
786 SHS CONOCOPHILLIPS	0.	0.
3000 SHS JPMORGAN CHASE & CO	110,592.	125,010.
1800 SHS MCDONALDS CORP	47,338.	112,392.
3466 SHS TIME WARNER INC	116,751.	100,999.
8500 SHS DELL INC COM	228,203.	122,060.
2200 SHS HARLEY-DAVIDSON INC	108,796.	55,440.
5150 SHS VIACOM INC-CL B	146,263.	153,109.
3126 SHS LIBERTY GLOBAL INC C	0.	0.
705 SHS DISCOVERY COMM SER C	7,094.	18,697.
3700 SHS CARNIVAL CORP	144,348.	117,253.
8800 SHS INTEL CORP COM	177,012.	179,520.
2820 SHS LIBERTY MEDIA SER A	0.	0.
3100 SHS WESTERN UNION CO COM	52,962.	58,435.
3975 SHS TYCO ELECTRONICS LTD	85,929.	97,586.
3175 SHS COVIDIEN LTD	116,343.	152,051.
5200 SHS HOME DEPOT INC	190,059.	150,436.
3400 SHS GLAXOSMITHKLINE PLC	166,662.	143,650.
4300 SHS MDS INC COM	79,796.	32,895.
3600 SHS MEDTRONIC INC	132,810.	158,328.
3400 SHS KINETIC CONCEPTS INC	84,901.	128,010.
2700 SHS XTO ENERGY INC COM	78,762.	125,631.
7100 SHS SCHERING PLOUGH CORP	0.	0.
4900 SHS CONAGRA FOODS INC	96,515.	112,945.
705 SHS DISCOVERY COMM SER A	90,515.	112,945.
705 SHS DISCOVERY COMM SER A		
TOTAL TO FORM 990-PF, PART II, LINE 10B	2,818,529.	3,121,261.
FORM 990-PF CORPORATE BONDS		STATEMENT 8
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
XEROX CORP SENIOR NOTE	94,800.	102,286.
TOTAL TO FORM 990-PF, PART II, LINE 10C	94,800.	102,286.

	AND CONTRIBUTIONS DURING THE YEAR	STATE	MENT 9
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
GRANT PARK ORCHESTRAL ASSOCIATION 251 SOUTH COLUMBUS DRIVE CHICAGO, IL 60601	CHARITABLE		2,600.
MUSIC INSTITUTE OF CHICAGO 300 GREEN BAY ROAD WINNETKA, IL 60093	CHARITABLE		1,000.
TASC 1500 NORTH HALSTED CHICAGO, IL 60642	CHARITABLE		2,500.
KEITH DAVIS SCHOLARSHIP FUND 407 S DEARBORN ST, SUITE 1675, C/O CHARLES G. MURPHY CHICAGO, IL 60605	CHARITABLE		100.
ORTHODOX CHRISTIAN LAITY P.O. BOX 6954 WEST PALM BEACH, FL 33405	CHARITABLE		1,000.
CONSTITUTIONAL RIGHTS FOUNDATION CHICAGO 407 SOUTH DEARBORN STREET, SUITE 1700 CHICAGO, IL 60605	CHARITABLE		1,000.
JEWISH COUNCIL ON URBAN AFFAIRS 610 SOUTH MICHIGAN AVENUE, SUITE 500 CHICAGO, IL 60605	CHARITABLE		2,000.
THE CHICAGO BAR FOUNDATION 321 SOUTH PLYMOUTH COURT, SUITE 3B CHICAGO, IL 60604	CHARITABLE		3,000.

GEORGE J. & THERESA L. COTSIRILO	OS FAMILY	36-3413343
THE NIGHT MINISTRY 4711 NORTH RAVENSWOOD AVENUE CHICAGO, IL 60640	CHARITABLE	1,000.
DENVER LUTHERAN HIGH SCHOOL 3201 WEST ARIZONA AVENUE DENVER, CO 80219	CHARITABLE	1,500.
CHICAGO HUMANITIES FESTIVAL 500 NORTH DEARBORN STREET, SUITE 825 CHICAGO, IL 60654	CHARITABLE	2,500.
WISHING WELL 25961 KANKAKEE STREET MANHATTAN, IL 60442	CHARITABLE	1,000.
RICHARD N. ROVNER, M.D. EPILEPSY RESEARCH AND EDUCATION FUND RUSH UNIVERSITY MEDICAL CENTER, 1653 W CONGRESS PKWY CHICAGO,	CHARITABLE	1,000.
826 VALENCIA 826 VALENCIA STREET SAN FRANCISCO, CA 94110	CHARITABLE	1,000.
BERKELEY HIGH SCHOOL DEVELOPMENT GROUP P.O. BOX 519 BERKELEY, CA 94701-0519	CHARITABLE	1,000.
BIG SHOULDERS FUND 309 WEST WASHINGTON SUITE 550 CHICAGO, IL 60606	CHARITABLE	1,000.
CALIFORNIA TROUT 870 MARKET ST., SUITE 528 SAN FRANCISCO, CA 94102	CHARITABLE	500.
CHICAGO 502/ARMED FORCES COUNCIL OF CHICAGO 65 WEST JACKSON BOULEVARD CHICAGO, IL 60604	CHARITABLE	1,000.

GEORGE J. & THERESA L. COTSIRIL	OS FAMILY	36-3413343
CHICAGO CHILDREN'S MUSEUM 700 EAST GRAND AVENUE CHICAGO, IL 60611-3428	CHARITABLE	1,000.
CHICAGO HOUSE 1925 NORTH CLYBOURN CHICAGO, IL 60614	CHARITABLE	1,000.
CHICAGO MILITARY ACADEMY-BRONZEVILLE 3519 SOUTH GILES AVENUE CHICAGO, IL 60653	CHARITABLE	1,000.
CHICAGO PUBLIC LIBRARY FOUNDATION 20 NORTH MICHIGAN AVENUE, SUITE 204 CHICAGO, IL 60602	CHARITABLE	1,000.
CHICAGO PUBLIC RADIO 848 EAST GRAND AVE CHICAGO, IL 60611-3509	CHARITABLE	250.
CHICAGO SYMPHONY 220 SOUTH MICHIGAN AVENUE CHICAGO, IL 60604	CHARITABLE	1,000.
COLLINS CENTER FOR THE ARTS - THE UNIVERSITY OF MAINE P.O. BOX 370 ORONO, ME 04473	CHARITABLE	2,500.
DEBORAH'S PLACE 2822 WEST JACKSON, CHICAGO, IL 60612	CHARITABLE	500.
DOCTORS WITHOUT BORDERS 333 SEVENTH AVENUE, 2ND FLOOR NEW YORK, NY 10001-5004	CHARITABLE	3,300.
EARTHJUSTICE LEGAL DEFENSE FUND 426 - 17TH STREET, 6TH FLOOR OAKLAND CA 94612	CHARITABLE	500.

OAKLAND, CA 94612

GEORGE J. & THERESA L. COTSIRII	OS FAMILY	36-3413343
EAST BAY COMMUNITY LAW CENTER 2921 ADELINE STREET BERKELEY, CA 94703	CHARITABLE	500.
FOURTH PRESBYTERIAN CHURCH 126 EAST CHESTNUT STREET CHICAGO, IL 60611-2094	CHARITABLE	17,135.
HARRIS THEATER FOR MUSIC AND DANCE 205 EAST RANDOLPH DRIVE CHICAGO, IL 60601	CHARITABLE	1,700.
HEALTH FOR HUMANITY 415 LINDEN AVENUE, SUITE B WILMETTE, IL 60091-2886	CHARITABLE	7,500.
HORIZON HOSPICE & PALLIATIVE CARE 833 WEST CHICAGO AVE., CHICAGO, IL 60622	CHARITABLE	1,000.
INTERFAITH CENTER OF NEW YORK 475 RIVERSIDE DRIVE NEW YORK, NY 10115	CHARITABLE	1,000.
LEGAL ASSISTANCE FOUNDATION OF METRO CHICAGO 111 WEST JACKSON BLVD., SUITE 300 CHICAGO, IL 60604	CHARITABLE	1,000.
LOYOLA UNIVERSITY CHICAGO 820 NORTH MICHIGAN AVENUE CHICAGO, IL 60611-2228	CHARITABLE	1,000.
LYRIC OPERA OF CHICAGO 20 N. WACKER DRIVE, SUITE 860 CHICAGO, IL 60606	CHARITABLE	7,087.
MABEL WADSWORTH WOMEN'S HEALTH	CAYDIWYDI E	10,000.

CHARITABLE

CENTER

PO BOX 918 BANGOR, ME 04402-0918

GEORGE J. & THERESA L. COTSIRIL	OS FAMILY	36-3413343
MATT TALBOT KITCHEN & OUTREACH P.O. BOX 80935 LINCOLN, NE 68501	CHARITABLE	1,000.
MERCY HOME FOR BOYS AND GIRLS 1140 WEST JACKSON BLVD. CHICAGO, IL 60607	CHARITABLE	1,000.
MISERICORDIA 6300 NORTH RIDGE, CHICAGO, IL 60660-1017	CHARITABLE	1,000.
MITCHELL A. MARS FOUNDATION P.O. BOX A3580 CHICAGO, IL 60690	CHARITABLE	1,000.
NORTHWESTERN UNIVERSITY MEDICAL SCHOOL - DEPT OF UROLOGY TARRY BUILDING 110715 303 EAST CHICAGO AVE, CHICAGO, IL 606	CHARITABLE	1,000.
NORTHWESTERN UNIVERSITY SCHOOL OF LAW - BLUHM LEGAL CLINIC 375 EAST CHICAGO AVENUE CHICAGO, IL 60611	CHARITABLE	1,000.
OLD ST. PATRICK'S CHURCH 711 W. MONROE ST. CHICAGO, IL 60661	CHARITABLE	1,000.
ORONO PUBLIC LIBRARY P.O. BOX 308 ORONO, ME 04473	CHARITABLE	800.
OUNCE OF PREVENTION FUND 33 WEST MONROE STREET, SUITE 2400 CHICAGO, IL 60603-3500	CHARITABLE	1,000.
PROJECT LIGHTS CHICAGO, IL	CHARITABLE	1,250.

GEORGE J. & THERESA L. COTSIRIL	OS FAMILY	36-3413343
RUSH UNIVERSITY MEDICAL CENTER 1700 W. VAN BUREN ST. STE 250, CHICAGO, IL 60612	CHARITABLE	25,000.
SGA YOUTH & FAMILY SERVICES 11 EAST ADAMS STREET, SUITE 1500 CHICAGO, IL 60603	CHARITABLE	1,000.
SIERRA CLUB FOUNDATION 85 SECOND STREET, SECOND FLOOR SAN FRANCISCO, CA 94105-3441	CHARITABLE	3,800.
ST PETER & PAUL GREEK ORTHODOX CHURCH 1401 WAGNER ROAD GLENVIEW, IL 60025	CHARITABLE	1,000.
STEPPENWOLF THEATRE COMPANY 758 WEST NORTH AVE, 4TH FLOOR CHICAGO, IL 60610	CHARITABLE	1,000.
THE ADIRONDACK MUSEUM P.O. BOX 99 BLUE MOUNTAIN LAKE, NY 12812-0099	CHARITABLE	1,000.
THE ART INSTITUTE OF CHICAGO 111 S. MICHIGAN AVE., CHICAGO, IL 60603-6404	CHARITABLE	1,350.
THE CULTURAL LANDSCAPE FOUNDATION 1909 QUE STREET NW, SECOND FLOOR WASHINGTON, DC 20009	CHARITABLE	1,000.
THE JOFFREY BALLET OF CHICAGO 10 EAST RANDOLPH STREET CHICAGO, IL 60601	CHARITABLE	1,000.
THE YOUNG WOMEN'S LEADERSHIP CHARTER SCHOOL 2641 SOUTH CALUMET CHICAGO, IL 60616	CHARITABLE	56,500.

GEORGE J. & THERESA L. COTSIRILO	OS FAMILY	36-3413343
TOURETTE'S AND TIC DISORDERS CLINIC FUND - 220 MONTGOMERY ST, 5TH FLOOR, UCSF-UNIVERSITY DEVELOPMENT RELATIONS SAN FRANCISCO, CA 94143	CHARITABLE	250.
TROUT UNLIMITED 1300 N. 17TH ST., SUITE 500 ARLINGTON, VA 22209	CHARITABLE	379.
UNIVERSITY OF CALIFORNIA, BERKELEY - COLLEGE OF LETTERS & SCIENCE, 200 CAMPBELL HALL BERKELEY, CA 94710-2920	CHARITABLE	5,000.
UNIVERSITY OF CHICAGO - THE LAW SCHOOL 1111 E. 60TH ST., CHICAGO, IL 60637	CHARITABLE	25,000.
VICTORY GARDENS THEATER 2257 NORTH LINCOLN AVENUE CHICAGO, IL 60614	CHARITABLE	1,000.
WORKING IN THE SCHOOLS 200 WEST ADAMS STREET, SUITE 1205 CHICAGO, IL 60606	CHARITABLE	1,000.
WTTW CHANNEL 11 5400 N. ST. LOUIS AVENUE CHICAGO, IL 60625-4698	CHARITABLE	1,500.
YALE LAW SCHOOL P.O. BOX 2038 NEW HAVEN, CT 06521-2038	CHARITABLE	2,000.
YOUNG PEOPLE'S CHAMBER ORCHESTRA 1034 MERCED STREET, BERKELEY, CA 94707	CHARITABLE	750.
YOUNG WOMEN'S LEADERSHIP NETWORK 95 MADISON AVENUE, SUITE 601 NEW YORK, NY 10016	CHARITABLE	4,775.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A	229,026.

# Form **8868**

(Rev April 2009)

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

Form 8868 (Rev. 4-2009)

• If yo			ightharpoons
-	iu are filing for an Automatic 3-Month Extension, complete only Part I and check this box iu are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form).	
Do no	t complete Part II unless you have already been granted an automatic 3-month extension on a previously f		m 8868.
Part	Automatic 3-Month Extension of Time. Only submit original (no copies needed).		
	oration required to file Form 990-T and requesting an automatic 6-month extension - check this box and cor	nplete	
Part I	•		. ▶∟
	er corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request al income tax retums.	n exten	sion of time
noted (not au you m	onic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electron atomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or cours submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic firs gov/efile and click on e-file for Chanties & Nonprofits.	ically if insolida	(1) you want the additional ited Form 990-T. Instead,
Туре	Name of Exempt Organization	Empl	oyer identification number
print	GEORGE J. & THERESA L. COTSIRILOS		
•	FAMILY FOUNDATION	3	6-3413343
File by ti due date	ne Nijerbe staat and annual staat and lie DO bey one instructions		
filing you return S	209 E. LAKE SHORE DRIVE #9-E		
instructe			
Checl	t type of return to be filed (file a separate application for each return):		
	Form 990	720	
=	Form 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 5	227	
=	Form 990-EZ Form 990-T (trust other than above) Form 6	069	
=	Form 990-PF		
			<del></del> .
	GEORGE J. COTSIRILOS		
	GEORGE J. COTSIRILOS  a books are in the care of ▶ 209 E LAKE SHORE DR CHICAGO IL - 60611	<u> </u>	
• The		<u> </u>	
• The	books are in the care of $\triangleright$ 209 E LAKE SHORE DR CHICAGO IL - 60611	L	<b>→</b>
• The	be books are in the care of $\blacktriangleright$ 209 E LAKE SHORE DR CHICAGO IL - 60611 ephone No $\blacktriangleright$ 312-263-0345 FAX No. $\blacktriangleright$ ne organization does not have an office or place of business in the United States, check this box		the whole group, check this
• The Tel	be books are in the care of $\blacktriangleright$ 209 E LAKE SHORE DR CHICAGO IL - 60611 ephone No $\blacktriangleright$ 312-263-0345 FAX No. $\blacktriangleright$ ne organization does not have an office or place of business in the United States, check this box	nis is fo	
• The Tel • If the box • 1	books are in the care of   209 E LAKE SHORE DR CHICAGO IL - 60613  ephone No   312-263-0345  FAX No.   ee organization does not have an office or place of business in the United States, check this box is so for a Group Return, enter the organization's four digit Group Exemption Number (GEN)   If it is for part of the group, check this box   and attach a list with the names and EINs of all request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time un   AUGUST 15, 2010  , to file the exempt organization return for the organization named is for the organization's return for:  X calendar year 2009 or	nis is foi I memb	ers the extension will cover.
• The Tel • If the box • 1	books are in the care of   209 E LAKE SHORE DR CHICAGO IL - 60613  ephone No   312-263-0345  FAX No.   ee organization does not have an office or place of business in the United States, check this box is is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)   If it is for part of the group, check this box   and attach a list with the names and EINs of all request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time un   AUGUST 15, 2010  , to file the exempt organization return for the organization named is for the organization's return for:  X calendar year 2009 or	nis is foi I memb	ers the extension will cover.
• The Tell • If the If	books are in the care of   209 E LAKE SHORE DR CHICAGO IL - 60613  ephone No   312-263-0345  FAX No.   ee organization does not have an office or place of business in the United States, check this box is so for a Group Return, enter the organization's four digit Group Exemption Number (GEN)   If it is for part of the group, check this box   and attach a list with the names and EINs of all request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time un   AUGUST 15, 2010  , to file the exempt organization return for the organization named is for the organization's return for:  X calendar year 2009 or	nis is for i memb til above.	ers the extension will cover.  The extension
• The Tel • If the If t	books are in the care of  209 E LAKE SHORE DR CHICAGO IL - 60613 ephone No  312-263-0345  re organization does not have an office or place of business in the United States, check this box his is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the If it is for part of the group, check this box and attach a list with the names and EINs of all request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time un AUGUST 15, 2010, to file the exempt organization return for the organization named is for the organization's return for:  X calendar year 2009 or, and ending, and ending  If this tax year is for less than 12 months, check reason: Initial return Final return	til above.	ers the extension will cover.  The extension  Change in accounting period
• The Tel • If the box \$\right	books are in the care of  209 E LAKE SHORE DR CHICAGO IL - 60613 ephone No  312-263-0345  re organization does not have an office or place of business in the United States, check this box his is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the If it is for part of the group, check this box and attach a list with the names and EINs of all request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time un AUGUST	nis is for i memb til above.	ers the extension will cover.  The extension  Change in accounting period
• The Tell • If the if the box 1  2  3a  b	books are in the care of  209 E LAKE SHORE DR CHICAGO IL - 60613 ephone No  312-263-0345  re organization does not have an office or place of business in the United States, check this box his is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the fit is for part of the group, check this box  and attach a list with the names and EINs of all request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time un AUGUST 15, 2010, to file the exempt organization return for the organization named is for the organization's return for:  X calendar year 2009 or and ending, and ending final return  If this tax year is for less than 12 months, check reason: Initial return Final return  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  If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	til above.	The extension  Change in accounting period
• The Tell • If the box 1  1	books are in the care of  209 E LAKE SHORE DR CHICAGO IL - 60613 ephone No  312-263-0345  FAX No.   ne organization does not have an office or place of business in the United States, check this box has is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the first is for part of the group, check this box and attach a list with the names and EINs of all request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time un AUGUST 15, 2010, to file the exempt organization return for the organization named is for the organization's return for:  X calendar year 2009 or and ending, and ending fithis tax year is for less than 12 months, check reason: Initial return Final return fithis application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 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.	til above.	The extension  Change in accounting period
• The Tell • If the lifth box 1  1  2  3a  b	books are in the care of  209 E LAKE SHORE DR CHICAGO IL - 60613 ephone No  312-263-0345  FAX No.   ne organization does not have an office or place of business in the United States, check this box has is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)   If it is for part of the group, check this box and attach a list with the names and EINs of all request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time un   AUGUST 15, 2010 , to file the exempt organization return for the organization named is for the organization's return for:  X calendar year 2009 or   Tax year beginning , and ending  If this tax year is for less than 12 months, check reason:   Initial return Final return  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  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.  Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	til above.	The extension  Change in accounting period
• The Tell • If the If	books are in the care of  209 E LAKE SHORE DR CHICAGO IL - 60613 ephone No  312-263-0345  FAX No.   ne organization does not have an office or place of business in the United States, check this box has is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the first is for part of the group, check this box and attach a list with the names and EINs of all request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time un AUGUST 15, 2010, to file the exempt organization return for the organization named is for the organization's return for:  X calendar year 2009 or and ending, and ending fithis tax year is for less than 12 months, check reason: Initial return Final return fithis application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 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.	til above.	The extension  Change in accounting period  \$ 0.555

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form	8868 (Rev	4-2009)			_	Page 2	
• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box . >							
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 co					<del></del>		
- •	e or	Name of Exempt Organization	.· .	Employer identification number 36-3413343			
prin		George J. & Theresa L. Cotsirilos Family Foundation  Number, street, and room or suite no. If a PO box, see instructions.			For IRS use only		
exter	date for	209 E. Lake Shore Drive #9-E		roring use	a omy		
due d filing		City, town or post office, state, and ZIP code. For a foreign address, see instructions.	· · · · · ·	<u> </u>			
retun	n See	Chicago, IL 60611					
Check type of return to be filed (File a separate application for each return):							
	Form 99	_ ' '	rm 1041-A		Form 6	069	
	Form 99		rm 4720		Form 8	870	
	Form 99	· · · · · · · · · · · · · · · · · · ·	orm 5227				
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.							
• The books are in the care of ▶ George J. Cotsirilos							
Telephone No. ▶ 312-263-0345 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.							
4							
5		For calendar year 2010, or other tax year beginning , 20 , and ending , 20					
6	If this tax year is for less than 12 months, check reason: 🔲 Initial return 🔲 Final return 🔲 Change in accounting period						
7	State in detail why you need the extension Information required to complete the tax return						
	has not been received from unrelated third parties over which the taxpayer						
	nası	no control. Additional time is respectfully re	guestea	•			
8a	If this a	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the	tentative ta	x.			
		y nonrefundable credits. See instructions.		8a	\$	0	
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						
	amoun	paid previously with Form 8868.	<del></del>	8b	\$ /	10,255	
С		Due. Subtract line 8b from line 8a. Include your payment with this form, or, if re				Ø	
	with FT	O coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). S	ee instruction	s. 8c	5		
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							
XID -							

Signature Mill Lata

Title ► CPA

Date > 8/13/2010

Form **8868** (Rev 4-2009)