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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

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 2009, and ending

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

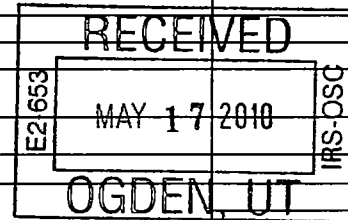
|                                                                         |                                                                                  |                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|-------------------------------------------------------------------------|----------------------------------------------------------------------------------|-----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Use the IRS label. Otherwise, print or type. See Specific Instructions. | Name of foundation<br><b>THE SCHIFF FOUNDATION INCORPORATED</b>                  |                                   | A Employer identification number<br><b>36-3485274</b>                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|                                                                         | Number and street (or P O box number if mail is not delivered to street address) | Room/suite                        | B Telephone number (see the instructions)<br><b>(312) 440-1244</b>                                                                                                                                                                                                                                                                                                                                                                                                                            |
|                                                                         | City or town<br><b>CHICAGO</b>                                                   | State ZIP code<br><b>IL 60611</b> | C If exemption application is pending, check here <input type="checkbox"/><br>D 1 Foreign organizations, check here <input type="checkbox"/><br>2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/><br>E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/><br>F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/> |

H Check type of organization ☒ Section 501(c)(3) exempt private foundation  
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, column (c), line 16)  
\$ **277,446.**

J Accounting method: ☒ Cash ☐ Accrual  
☐ Other (specify) \_\_\_\_\_  
(Part I, column (d) must be on cash basis.)

| Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see the instructions).) |                                                                             | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|------------------------------------|---------------------------|-------------------------|-------------------------------------------------------------|
| REVENUE                                                                                                                                                                 | 1 Contributions, gifts, grants, etc., received (att sch)                    |                                    |                           |                         |                                                             |
|                                                                                                                                                                         | 2 <input checked="" type="checkbox"/> if the foundn is not req to att Sch B |                                    |                           |                         |                                                             |
|                                                                                                                                                                         | 3 Interest on savings and temporary cash investments                        |                                    |                           |                         |                                                             |
|                                                                                                                                                                         | 4 Dividends and interest from securities                                    | 1,717.                             | 1,717.                    |                         |                                                             |
|                                                                                                                                                                         | 5a Gross rents                                                              |                                    |                           |                         |                                                             |
|                                                                                                                                                                         | b Net rental income or (loss)                                               |                                    | L-6a Stmt                 |                         |                                                             |
|                                                                                                                                                                         | 6a Net gain/(loss) from sale of assets not on line 10                       | 62.                                |                           |                         |                                                             |
|                                                                                                                                                                         | b Gross sales price for all assets on line 6a                               | 62.                                |                           |                         |                                                             |
|                                                                                                                                                                         | 7 Capital gain net income (from Part IV, line 2)                            |                                    | 62.                       |                         |                                                             |
|                                                                                                                                                                         | 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/(loss) (att sch)                                                                                                                                         |                                                                             |                                    |                           |                         |                                                             |
| 11 Other income (attach schedule)                                                                                                                                       |                                                                             |                                    |                           |                         |                                                             |
| 12 Total. Add lines 1 through 11                                                                                                                                        | 1,779.                                                                      | 1,779.                             |                           |                         |                                                             |
| ADMINISTRATIVE AND OPERATING EXPENSES                                                                                                                                   | 13 Compensation of officers, directors, trustees, etc                       |                                    |                           |                         |                                                             |
|                                                                                                                                                                         | 14 Other employee salaries and wages                                        |                                    |                           |                         |                                                             |
|                                                                                                                                                                         | 15 Pension plans, employee benefits                                         |                                    |                           |                         |                                                             |
|                                                                                                                                                                         | 16a Legal fees (attach schedule)                                            |                                    |                           |                         |                                                             |
|                                                                                                                                                                         | b Accounting fees (attach sch)                                              | 6,100.                             |                           |                         | 6,100.                                                      |
|                                                                                                                                                                         | c Other prof fees (attach sch)                                              | 819.                               | 819.                      |                         | 819.                                                        |
|                                                                                                                                                                         | 17 Interest                                                                 |                                    |                           |                         |                                                             |
|                                                                                                                                                                         | 18 Taxes (attach schedule)(see instr) See Line 18 Stmt                      | 1,540.                             | 40.                       |                         | 0.                                                          |
|                                                                                                                                                                         | 19 Depreciation (attach sch) and depletion                                  |                                    |                           |                         |                                                             |
|                                                                                                                                                                         | 20 Occupancy                                                                |                                    |                           |                         |                                                             |
|                                                                                                                                                                         | 21 Travel, conferences, and meetings                                        |                                    |                           |                         |                                                             |
|                                                                                                                                                                         | 22 Printing and publications                                                |                                    |                           |                         |                                                             |
|                                                                                                                                                                         | 23 Other expenses (attach schedule) See Line 23 Stmt                        | 175.                               |                           |                         | 175.                                                        |
|                                                                                                                                                                         | 24 Total operating and administrative expenses. Add lines 13 through 23     | 8,634.                             | 859.                      |                         | 7,094.                                                      |
|                                                                                                                                                                         | 25 Contributions, gifts, grants paid                                        | 81,535.                            |                           |                         | 81,535.                                                     |
| 26 Total expenses and disbursements. Add lines 24 and 25                                                                                                                | 90,169.                                                                     | 859.                               |                           | 88,629.                 |                                                             |
| 27 Subtract line 26 from line 12:                                                                                                                                       |                                                                             |                                    |                           |                         |                                                             |
| a Excess of revenue over expenses and disbursements                                                                                                                     | -88,390.                                                                    |                                    |                           |                         |                                                             |
| b Net investment income (if negative, enter -0-)                                                                                                                        |                                                                             | 920.                               |                           |                         |                                                             |
| c Adjusted net income (if negative, enter -0-)                                                                                                                          |                                                                             |                                    |                           |                         |                                                             |



22

**Part II Balance Sheets**

Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

|                                                                                                     |                                                                                                                                    | Beginning of year | End of year    |                       |
|-----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|-------------------|----------------|-----------------------|
|                                                                                                     |                                                                                                                                    | (a) Book Value    | (b) Book Value | (c) Fair Market Value |
| <b>A<br/>S<br/>S<br/>E<br/>T<br/>S</b>                                                              | 1 Cash — non-interest-bearing                                                                                                      | 124,845.          | 37,035.        | 37,035.               |
|                                                                                                     | 2 Savings and temporary cash investments                                                                                           | 135,133.          | 134,553.       | 134,553.              |
|                                                                                                     | 3 Accounts receivable                                                                                                              |                   |                |                       |
|                                                                                                     | Less allowance for doubtful accounts                                                                                               |                   |                |                       |
|                                                                                                     | 4 Pledges receivable                                                                                                               |                   |                |                       |
|                                                                                                     | Less allowance for doubtful accounts                                                                                               |                   |                |                       |
|                                                                                                     | 5 Grants receivable                                                                                                                |                   |                |                       |
|                                                                                                     | 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)      |                   |                |                       |
|                                                                                                     | 7 Other notes and loans receivable (attach sch)                                                                                    |                   |                |                       |
|                                                                                                     | 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 (attach schedule)                                                           |                   |                |                       |
|                                                                                                     | b Investments — corporate stock (attach schedule)                                                                                  | 96,670.           | 96,670.        | 105,858.              |
|                                                                                                     | c Investments — corporate bonds (attach schedule)                                                                                  |                   |                |                       |
|                                                                                                     | 11 Investments — land, buildings, and equipment: basis                                                                             |                   |                |                       |
| Less accumulated depreciation (attach schedule)                                                     |                                                                                                                                    |                   |                |                       |
| 12 Investments — mortgage loans                                                                     |                                                                                                                                    |                   |                |                       |
| 13 Investments — other (attach schedule)                                                            | 0.                                                                                                                                 |                   |                |                       |
| 14 Land, buildings, and equipment: basis                                                            |                                                                                                                                    |                   |                |                       |
| Less accumulated depreciation (attach schedule)                                                     |                                                                                                                                    |                   |                |                       |
| 15 Other assets (describe _____)                                                                    |                                                                                                                                    |                   |                |                       |
| 16 <b>Total assets</b> (to be completed by all filers — see instructions. Also, see page 1, item i) | 356,648.                                                                                                                           | 268,258.          | 277,446.       |                       |
| <b>L<br/>I<br/>A<br/>B<br/>I<br/>L<br/>I<br/>T<br/>I<br/>E<br/>S</b>                                | 17 Accounts payable and accrued expenses                                                                                           |                   |                |                       |
|                                                                                                     | 18 Grants payable                                                                                                                  |                   |                |                       |
|                                                                                                     | 19 Deferred revenue                                                                                                                |                   |                |                       |
|                                                                                                     | 20 Loans from officers, directors, trustees, & other disqualified persons                                                          |                   |                |                       |
|                                                                                                     | 21 Mortgages and other notes payable (attach schedule)                                                                             |                   |                |                       |
|                                                                                                     | 22 Other liabilities (describe _____)                                                                                              |                   |                |                       |
|                                                                                                     | 23 <b>Total liabilities</b> (add lines 17 through 22)                                                                              |                   |                |                       |
| <b>N<br/>E<br/>T<br/>A<br/>S<br/>S<br/>E<br/>T<br/>B<br/>A<br/>L<br/>A<br/>N<br/>C<br/>E<br/>S</b>  | <b>Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.</b> <input type="checkbox"/> |                   |                |                       |
|                                                                                                     | 24 Unrestricted                                                                                                                    |                   |                |                       |
|                                                                                                     | 25 Temporarily restricted                                                                                                          |                   |                |                       |
|                                                                                                     | 26 Permanently restricted                                                                                                          |                   |                |                       |
|                                                                                                     | <b>Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.</b> <input checked="" type="checkbox"/>   |                   |                |                       |
|                                                                                                     | 27 Capital stock, trust principal, or current funds                                                                                | 80,827.           | 80,827.        |                       |
|                                                                                                     | 28 Paid-in or capital surplus, or land, building, and equipment fund                                                               | 275,821.          | 187,431.       |                       |
|                                                                                                     | 29 Retained earnings, accumulated income, endowment, or other funds                                                                |                   |                |                       |
|                                                                                                     | 30 <b>Total net assets or fund balances</b> (see the instructions)                                                                 | 356,648.          | 268,258.       |                       |
|                                                                                                     | 31 <b>Total liabilities and net assets/fund balances</b> (see the instructions)                                                    | 356,648.          | 268,258.       |                       |

**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 | 356,648. |
| 2 Enter amount from Part I, line 27a                                                                                                                         | 2 | -88,390. |
| 3 Other increases not included in line 2 (itemize) _____                                                                                                     | 3 |          |
| 4 Add lines 1, 2, and 3                                                                                                                                      | 4 | 268,258. |
| 5 Decreases not included in line 2 (itemize) _____                                                                                                           | 5 |          |
| 6 Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30                                                      | 6 | 268,258. |

**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 shares MLC Company)

(b) How acquired  
P — Purchase  
D — Donation(c) Date acquired  
(month, day, year)(d) Date sold  
(month, day, year)

1a CAPITAL GAIN DISTRIBUTION ACCT 23-09499

P

Various

Various

b

c

d

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 62. 0. 62.

b

c

d

e

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) Fair Market Value  
as of 12/31/69(j) Adjusted basis  
as of 12/31/69(k) Excess of column (i)  
over column (j), if any(l) Gains (Column (h)  
gain minus column (k), but not less  
than -0-) or Losses (from column (h))

a 0. 0. 0. 62.

b

c

d

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

62.

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) (see the instructions) If (loss), enter -0-  
in Part I, line 8 ]

3

**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)

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 the instructions before making any entries.

| (a)<br>Base period years<br>Calendar year (or tax year<br>beginning in) | (b)<br>Adjusted qualifying distributions | (c)<br>Net value of<br>noncharitable-use assets | (d)<br>Distribution ratio<br>(column (b) divided by column (c)) |
|-------------------------------------------------------------------------|------------------------------------------|-------------------------------------------------|-----------------------------------------------------------------|
| 2008                                                                    | 653,993.                                 | 368,820.                                        | 1.773204                                                        |
| 2007                                                                    | 591,215.                                 | 970,000.                                        | 0.609500                                                        |
| 2006                                                                    | 283,287.                                 | 952,903.                                        | 0.297288                                                        |
| 2005                                                                    | 91,615.                                  | 841,380.                                        | 0.108887                                                        |
| 2004                                                                    | 227,685.                                 | 732,345.                                        | 0.310899                                                        |

2 Total of line 1, column (d)

2

3.099778

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

0.619956

4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5

4

319,017.

5 Multiply line 4 by line 3

5

197,777.

6 Enter 1% of net investment income (1% of Part I, line 27b)

6

9.

7 Add lines 5 and 6

7

197,786.

8 Enter qualifying distributions from Part XII, line 4

8

88,629.

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.

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

|                                                                                                                                                                                                                                    |    |      |          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|------|----------|
| 1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1.<br>Date of ruling or determination letter _____ (attach copy of letter if necessary - see instr.) |    | 1    | 18.      |
| 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, column (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    | 18.      |
| 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    | 18.      |
| 6 Credits/Payments                                                                                                                                                                                                                 |    |      |          |
| a 2009 estimated tax pmts and 2008 overpayment credited to 2009                                                                                                                                                                    | 6a | 606. |          |
| 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  | 606. |          |
| 8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> 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 | 588. |          |
| 11 Enter the amount of line 10 to be Credited to 2010 estimated tax                                                                                                                                                                | 11 | 588. | Refunded |

**Part VII-A Statements Regarding Activities**

|                                                                                                                                                                                                                                                                                                                                                      | Yes | No |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?                                                                                                                                                                             |     | X  |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?<br><i>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.</i> |     | X  |
| c Did the foundation file Form 1120-POL for this year?                                                                                                                                                                                                                                                                                               |     | X  |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:<br>(1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____                                                                                                                         |     |    |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____                                                                                                                                                                             |     |    |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS?<br><i>If 'Yes,' attach a detailed description of the activities.</i>                                                                                                                                                                               |     | X  |
| 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If 'Yes,' attach a conformed copy of the changes</i>                                                                                                                  |     | X  |
| 4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?                                                                                                                                                                                                                                                      |     | X  |
| b If 'Yes,' has it filed a tax return on Form 990-T for this year?                                                                                                                                                                                                                                                                                   |     |    |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?<br><i>If 'Yes,' attach the statement required by General Instruction T.</i>                                                                                                                                                                         |     | X  |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>• By language in the governing instrument, or<br>• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?                 | X   |    |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If 'Yes,' complete Part II, column (c), and Part XV</i>                                                                                                                                                                                                         | X   |    |
| 8 a Enter the states to which the foundation reports or with which it is registered (see the instructions)<br>IL - Illinois                                                                                                                                                                                                                          |     |    |
| b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If 'No,' attach explanation</i>                                                                                                                                 | X   |    |
| 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)? <i>If 'Yes,' complete Part XIV</i>                                                                                        |     | X  |
| 10 Did any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a schedule listing their names and addresses</i>                                                                                                                                                                                                         |     | X  |

BAA

Form 990-PF (2009)

**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)                                   | 11 |   | X |
| 12 | Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?                                                                                                     | 12 |   | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?<br>Website address <u>N/A</u>                                                                         | 13 | X |   |
| 14 | The books are in care of <u>HAROLD SCHIFF</u> Telephone no <u>(312) 440-1244</u><br>Located at <u>229 EAST LAKE SHORE DRIVE CHICAGO IL</u> ZIP + 4 <u>60611</u>                                                           |    |   |   |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <input type="checkbox"/><br>and enter the amount of tax-exempt interest received or accrued during the year <u>15</u> |    |   |   |

**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 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>1a</b> 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>b</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 the instructions)? Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>                                                                                                                                                           | 1 b |    |
| <b>c</b> 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?                                                                                                                                                                                                                                                                                                        | 1 c | X  |
| <b>2</b> 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))                                                                                                                                                                                                                                                                                                                  |     |    |
| <b>a</b> 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<br>If 'Yes,' list the years <u>20__</u> , <u>20__</u> , <u>20__</u> , <u>20__</u>                                                                                                                                                                                        |     |    |
| <b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> 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 the instructions)                                                                                                                                                                            | 2 b |    |
| <b>c</b> If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here <u>20__</u> , <u>20__</u> , <u>20__</u> , <u>20__</u>                                                                                                                                                                                                                                                                                                                          |     |    |
| <b>3a</b> 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>b</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) | 3 b |    |
| <b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                                                                                                                                                                                                                                                                                                                                                                               | 4 a | X  |
| <b>b</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?                                                                                                                                                                                                                                                              | 4 b | X  |

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**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)? (see instructions)

☐ 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)?

5b

Organizations relying on a current notice regarding disaster assistance check here

☐**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)

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

6b

**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

X

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

7b

**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?**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 (see instructions).

| (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 |
|--------------------------------------------------------------------|----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| HAROLD SCHIFF<br>229 E. LAKE SHORE DRIVE<br>CHICAGO IL 60611       | PRESIDENT/TREASURER<br>10.00                             | 0.                                        | 0.                                                                    | 0.                                    |
| MARGOT LEVIN SCHIFF<br>229 E. LAKE SHORE DRIVE<br>CHICAGO IL 60611 | VP/SECRETARY<br>5.00                                     | 0.                                        | 0.                                                                    | 0.                                    |
| LESLIE ANN SCHIFF<br>229 E. LAKE SHORE DRIVE<br>CHICAGO IL 60611   | DIRECTOR<br>1.00                                         | 0.                                        | 0.                                                                    | 0.                                    |
| DAVID SCHIFF<br>229 E. LAKE SHORE DRIVE<br>CHICAGO IL 60611        | DIRECTOR<br>1.00                                         | 0.                                        | 0.                                                                    | 0.                                    |

**2** Compensation of five highest-paid employees (other than those included on line 1— see instructions). 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                                                          |                                                          |                  |                                                                       |                                       |
| 0                                                             |                                                          |                  |                                                                       |                                       |
| 0                                                             |                                                          |                  |                                                                       |                                       |
| 0                                                             |                                                          |                  |                                                                       |                                       |
| 0                                                             |                                                          |                  |                                                                       |                                       |

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

None

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services — (see instructions). 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 |                     | None             |

**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 |          |
| 2 |          |
| 3 |          |
| 4 |          |

**Part IX-B** Summary of Program-Related Investments (see instructions)

| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 | Amount |
|------------------------------------------------------------------------------------------------------------------|--------|
| 1                                                                                                                |        |
| 2                                                                                                                |        |
| All other program-related investments See instructions                                                           |        |
| 3                                                                                                                |        |
| Total. Add lines 1 through 3                                                                                     |        |

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**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 | 87,552.  |
| b | Average of monthly cash balances                                                                           | 1b | 236,323. |
| c | Fair market value of all other assets (see instructions)                                                   | 1c |          |
| d | Total (add lines 1a, b, and c)                                                                             | 1d | 323,875. |
| e | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)  | 1e |          |
| 2 | Acquisition indebtedness applicable to line 1 assets                                                       | 2  |          |
| 3 | Subtract line 2 from line 1d                                                                               | 3  | 323,875. |
| 4 | Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)  | 4  | 4,858.   |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4       | 5  | 319,017. |
| 6 | Minimum investment return. Enter 5% of line 5                                                              | 6  | 15,951.  |

**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  | 15,951. |
| 2a | Tax on investment income for 2009 from Part VI, line 5                                             | 2a | 18.     |
| b  | Income tax for 2009 (This does not include the tax from Part VI)                                   | 2b |         |
| c  | Add lines 2a and 2b                                                                                | 2c | 18.     |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1                              | 3  | 15,933. |
| 4  | Recoveries of amounts treated as qualifying distributions                                          | 4  |         |
| 5  | Add lines 3 and 4                                                                                  | 5  | 15,933. |
| 6  | Deduction from distributable amount (see instructions)                                             | 6  |         |
| 7  | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7  | 15,933. |

**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 | 88,629. |
| b | Program-related investments — total from Part IX-B                                                                                                   | 1b |         |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes                                            | 2  |         |
| 3 | Amounts set aside for specific charitable projects that satisfy the                                                                                  |    |         |
| 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  | 88,629. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions) | 5  | 0.      |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4                                                                                       | 6  | 88,629. |

**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.

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**Part XIII** Undistributed Income (see instructions)

|                                                                                                                                                                            | (a)<br>Corpus | (b)<br>Years prior to 2008 | (c)<br>2008 | (d)<br>2009 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------|-------------|-------------|
| 1 Distributable amount for 2009 from Part XI, line 7                                                                                                                       |               |                            |             | 15,933.     |
| 2 Undistributed income, if any, as of the end of 2009                                                                                                                      |               |                            |             |             |
| a Enter amount for 2008 only                                                                                                                                               |               |                            | 0.          |             |
| b Total for prior years. 20 __, 20 __, 20 __                                                                                                                               |               |                            |             |             |
| 3 Excess distributions carryover, if any, to 2009                                                                                                                          |               |                            |             |             |
| a From 2004 191,250.                                                                                                                                                       |               |                            |             |             |
| b From 2005 50,230.                                                                                                                                                        |               |                            |             |             |
| c From 2006 237,231.                                                                                                                                                       |               |                            |             |             |
| d From 2007 542,922.                                                                                                                                                       |               |                            |             |             |
| e From 2008 636,437.                                                                                                                                                       |               |                            |             |             |
| f Total of lines 3a through e                                                                                                                                              | 1,658,070.    |                            |             |             |
| 4 Qualifying distributions for 2009 from Part XII, line 4: \$ 88,629.                                                                                                      |               |                            |             |             |
| a Applied to 2008, but not more than line 2a                                                                                                                               |               |                            |             |             |
| b Applied to undistributed income of prior years (Election required – see instructions)                                                                                    |               |                            |             |             |
| c Treated as distributions out of corpus (Election required – see instructions)                                                                                            |               |                            |             |             |
| d Applied to 2009 distributable amount                                                                                                                                     |               |                            |             | 15,933.     |
| e Remaining amount distributed out of corpus                                                                                                                               | 72,696.       |                            |             |             |
| 5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a) )                                        |               |                            |             |             |
| 6 Enter the net total of each column as indicated below:                                                                                                                   |               |                            |             |             |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5                                                                                                                          | 1,730,766.    |                            |             |             |
| 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 |               |                            |             |             |
| 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 instructions                                                                            |               |                            | 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) (see instructions)                                  |               |                            |             |             |
| 8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)                                                                              | 191,250.      |                            |             |             |
| 9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a                                                                                              | 1,539,516.    |                            |             |             |
| 10 Analysis of line 9                                                                                                                                                      |               |                            |             |             |
| a Excess from 2005 50,230.                                                                                                                                                 |               |                            |             |             |
| b Excess from 2006 237,231.                                                                                                                                                |               |                            |             |             |
| c Excess from 2007 542,922.                                                                                                                                                |               |                            |             |             |
| d Excess from 2008 636,437.                                                                                                                                                |               |                            |             |             |
| e Excess from 2009 72,696.                                                                                                                                                 |               |                            |             |             |

## N/A

1

[illegible]

4942(1)(5)

[illegible]

**(4) Gross investment income**

## 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)                                                    |                                                                                                           |                                |                                  |                |
| <b>a Paid during the year</b>                                                          |                                                                                                           |                                |                                  |                |
| AMERICAN JEWISH COMMITTEE<br>165 EAST 56TH STREET<br>NEW YORK NY 10022                 |                                                                                                           | 501 (c) (3)                    | GENERAL USE                      | 250.           |
| ARCHITECTS RESEARCH FOUNDATION<br>440 N. WELLS STREET<br>CHICAGO IL 60610              |                                                                                                           | 501 (c) (3)                    | GENERAL USE                      | 250.           |
| HILLTOP MONTESSORI SCHOOL<br>6 ABBOTT SQUARE<br>BIRMINGHAM AL 35242                    |                                                                                                           | 501 (c) (3)                    | GENERAL USE                      | 100.           |
| ILLINOIS INSTITUTE OF TECHNOLOGY<br>3300 S. FEDERAL STREET<br>CHICAGO IL 60616         |                                                                                                           | 501 (c) (3)                    | GENERAL USE                      | 1,000.         |
| ART INSTITUTE OF CHICAGO<br>111 SOUTH MICHIGAN AVENUE<br>CHICAGO IL 60603              |                                                                                                           | 501 (c) (3)                    | GENERAL USE                      | 10,000.        |
| BOY SCOUTS OF AMERICA<br>1218 WEST ADAMS STREET<br>CHICAGO IL 60607                    |                                                                                                           | 501 (c) (3)                    | GENERAL USE                      | 5,000.         |
| ISRAEL GUIDE DOG CENTER FOR THE BLIND<br>732 S. SETTLERS CIRCLE<br>WARRINGTON PA 18976 |                                                                                                           | 501 (c) (3)                    | GENERAL USE                      | 100.           |
| FRIENDS SCHOOL OF MINNESOTA<br>1365 ENGLEWOOD AVE<br>ST PAUL MN 55104                  |                                                                                                           | 501 (c) (3)                    | GENERAL USE                      | 15,710.        |
| OFF THE STREET CLUB<br>25 N. KARLOV AVENUE<br>CHICAGO IL 60624                         |                                                                                                           | 501 (c) (3)                    | GENERAL USE                      | 1,000.         |
| See Line 3a statement                                                                  |                                                                                                           |                                |                                  | 48,125.        |
| <b>Total</b>                                                                           |                                                                                                           |                                | <b>3a</b>                        | <b>81,535.</b> |
| <b>b Approved for future payment</b>                                                   |                                                                                                           |                                |                                  |                |
|                                                                                        |                                                                                                           |                                |                                  |                |
| <b>Total</b>                                                                           |                                                                                                           |                                | <b>3b</b>                        |                |

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

| Enter gross amounts unless otherwise indicated             | Unrelated business income |               | Excluded by section 512, 513, or 514 |               | (e)<br>Related or exempt<br>function income<br>(see the instructions) |
|------------------------------------------------------------|---------------------------|---------------|--------------------------------------|---------------|-----------------------------------------------------------------------|
|                                                            | (a)<br>Business<br>code   | (b)<br>Amount | (c)<br>Exclu-<br>sion<br>code        | (d)<br>Amount |                                                                       |
| 1 Program service revenue:                                 |                           |               |                                      |               |                                                                       |
| a _____                                                    |                           |               |                                      |               |                                                                       |
| b _____                                                    |                           |               |                                      |               |                                                                       |
| c _____                                                    |                           |               |                                      |               |                                                                       |
| d _____                                                    |                           |               |                                      |               |                                                                       |
| e _____                                                    |                           |               |                                      |               |                                                                       |
| f _____                                                    |                           |               |                                      |               |                                                                       |
| g Fees and contracts from government agencies              |                           |               |                                      |               |                                                                       |
| 2 Membership dues and assessments                          |                           |               |                                      |               |                                                                       |
| 3 Interest on savings and temporary cash investments       |                           |               |                                      |               |                                                                       |
| 4 Dividends and interest from securities                   |                           |               | 14                                   | 1,717.        |                                                                       |
| 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                                  |                           |               |                                      |               |                                                                       |
| 8 Gain or (loss) from sales of assets other than inventory |                           |               | 18                                   | 62.           |                                                                       |
| 9 Net income or (loss) from special events                 |                           |               |                                      |               |                                                                       |
| 10 Gross profit or (loss) from sales of inventory          |                           |               |                                      |               |                                                                       |
| 11 Other revenue:                                          |                           |               |                                      |               |                                                                       |
| a _____                                                    |                           |               |                                      |               |                                                                       |
| b _____                                                    |                           |               |                                      |               |                                                                       |
| c _____                                                    |                           |               |                                      |               |                                                                       |
| d _____                                                    |                           |               |                                      |               |                                                                       |
| e _____                                                    |                           |               |                                      |               |                                                                       |
| 12 Subtotal. Add columns (b), (d), and (e)                 |                           |               |                                      | 1,779.        |                                                                       |
| 13 Total. Add line 12, columns (b), (d), and (e)           |                           |               |                                      | 13            | 1,779.                                                                |

(See worksheet in the instructions for line 13 to verify calculations.)

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**

[illegible]



Name \*

Employer Identification Number

THE SCHIFF FOUNDATION INCORPORATED

36-3485274

**Asset Information:**

| Description of Property |       | CAPITAL GAIN DISTRIBUTION                           |       |
|-------------------------|-------|-----------------------------------------------------|-------|
| Date Acquired           | _____ | How Acquired                                        | _____ |
| Date Sold               | _____ | Name of Buyer                                       | _____ |
| Sales Price:            | 62.   | Cost or other basis (do not reduce by depreciation) | 0.    |
| Sales Expense           | _____ | Valuation Method:                                   | _____ |
| Total Gain (Loss)       | 62.   | Accumulation Depreciation                           | _____ |
| Description of Property |       |                                                     |       |
| Date Acquired           | _____ | How Acquired                                        | _____ |
| Date Sold               | _____ | Name of Buyer                                       | _____ |
| Sales Price:            | _____ | Cost or other basis (do not reduce by depreciation) | _____ |
| Sales Expense           | _____ | Valuation Method:                                   | _____ |
| Total Gain (Loss)       | _____ | Accumulation Depreciation                           | _____ |
| Description of Property |       |                                                     |       |
| Date Acquired           | _____ | How Acquired                                        | _____ |
| Date Sold               | _____ | Name of Buyer                                       | _____ |
| Sales Price:            | _____ | Cost or other basis (do not reduce by depreciation) | _____ |
| Sales Expense           | _____ | Valuation Method:                                   | _____ |
| Total Gain (Loss)       | _____ | Accumulation Depreciation                           | _____ |
| Description of Property |       |                                                     |       |
| Date Acquired           | _____ | How Acquired                                        | _____ |
| Date Sold               | _____ | Name of Buyer                                       | _____ |
| Sales Price:            | _____ | Cost or other basis (do not reduce by depreciation) | _____ |
| Sales Expense           | _____ | Valuation Method:                                   | _____ |
| Total Gain (Loss)       | _____ | Accumulation Depreciation                           | _____ |
| Description of Property |       |                                                     |       |
| Date Acquired           | _____ | How Acquired                                        | _____ |
| Date Sold               | _____ | Name of Buyer                                       | _____ |
| Sales Price:            | _____ | Cost or other basis (do not reduce by depreciation) | _____ |
| Sales Expense           | _____ | Valuation Method:                                   | _____ |
| Total Gain (Loss)       | _____ | Accumulation Depreciation                           | _____ |
| Description of Property |       |                                                     |       |
| Date Acquired           | _____ | How Acquired                                        | _____ |
| Date Sold               | _____ | Name of Buyer                                       | _____ |
| Sales Price:            | _____ | Cost or other basis (do not reduce by depreciation) | _____ |
| Sales Expense           | _____ | Valuation Method:                                   | _____ |
| Total Gain (Loss)       | _____ | Accumulation Depreciation                           | _____ |
| Description of Property |       |                                                     |       |
| Date Acquired           | _____ | How Acquired                                        | _____ |
| Date Sold               | _____ | Name of Buyer                                       | _____ |
| Sales Price:            | _____ | Cost or other basis (do not reduce by depreciation) | _____ |
| Sales Expense           | _____ | Valuation Method:                                   | _____ |
| Total Gain (Loss)       | _____ | Accumulation Depreciation                           | _____ |

Form 990-PF, Page 1, Part I, Line 18

**Line 18 Stmt**

| Taxes (see the instructions) | Rev/Exp Book | Net Inv Inc | Adj Net Inc | Charity Disb |
|------------------------------|--------------|-------------|-------------|--------------|
| EXCISE TAX                   | 1,500.       | 0.          |             | 0.           |
| FOREIGN TAX WITHHELD         | 40.          | 40.         |             |              |
| Total                        | 1,540.       | 40.         |             | 0.           |

Form 990-PF, Page 1, Part I, Line 23

**Line 23 Stmt**

| Other expenses: | Rev/Exp Book | Net Inv Inc | Adj Net Inc | Charity Disb |
|-----------------|--------------|-------------|-------------|--------------|
| FILING FEES     | 15.          |             |             | 15.          |
| DELIVERY        | 42.          |             |             | 42.          |
| BOARD FEES      | 118.         |             |             | 118.         |
| Total           | 175.         |             |             | 175.         |

Form 990-PF, Page 11, Part XV, line 3a

**Line 3a statement**

| Recipient<br><br>Name and address<br>(home or business)                         | If recipient is<br>an individual,<br>show any<br>relationship to<br>any foundation<br>manager or<br>substantial<br>contributor | Founda-<br>tion<br>status<br>of re-<br>cipient | Purpose of<br>grant or contribution | Person or<br>Business<br>Checkbox<br><br>Amount                                    |
|---------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------|------------------------------------------------------------------------------------|
| <b>a Paid during the year</b>                                                   |                                                                                                                                |                                                |                                     |                                                                                    |
| THE ARTS CLUB OF CHICAGO<br>201 E. ONTARIO STREET<br>CHICAGO IL 60611           |                                                                                                                                | 501 (C) (3)                                    | GENERAL USE                         | Person or <input type="checkbox"/><br>Business <input type="checkbox"/><br>100.    |
| CHICAGO SINAI CONGREGATION<br>15 W. DELAWARE PL<br>CHICAGO IL 60610             |                                                                                                                                | 501 (C) (3)                                    | GENERAL USE                         | Person or <input type="checkbox"/><br>Business <input type="checkbox"/><br>4,500.  |
| GOLDEN APPLE FOUNDATION<br>8 S. MICHIGAN AVE. SUITE 700<br>CHICAGO IL 60603     |                                                                                                                                | 501 (C) (3)                                    | GENERAL USE                         | Person or <input type="checkbox"/><br>Business <input type="checkbox"/><br>2,500.  |
| CHICAGO ARCHITECTURE FOUNDATION<br>224 S. MICHIGAN AVE #116<br>CHICAGO IL 60604 |                                                                                                                                | 501 (C) (3)                                    | GENERAL USE                         | Person or <input type="checkbox"/><br>Business <input type="checkbox"/><br>275.    |
| CATALYST FOUNDATION<br>710 ST. OLAF AVE. #100<br>NORTHFIELD MN 55057            |                                                                                                                                | 501 (C) (3)                                    | GENERAL USE                         | Person or <input type="checkbox"/><br>Business <input type="checkbox"/><br>200.    |
| JEWISH UNITED FUND<br>30 S. WELLS STREET<br>CHICAGO IL 60606                    |                                                                                                                                | 501 (C) (3)                                    | GENERAL USE                         | Person or <input type="checkbox"/><br>Business <input type="checkbox"/><br>5,000.  |
| MERCY HOUSING LAKEFRONT<br>247 S. STATE STREET #810<br>CHICAGO IL 60604         |                                                                                                                                | 501 (C) (3)                                    | GENERAL USE                         | Person or <input type="checkbox"/><br>Business <input type="checkbox"/><br>25,000. |
| MUSEUM OF CONTEMPORARY ART<br>220 EAST CHICAGO AVENUE<br>CHICAGO IL 60611       |                                                                                                                                | 501 (C) (3)                                    | GENERAL USE                         | Person or <input type="checkbox"/><br>Business <input type="checkbox"/><br>2,500.  |



Form 990-PF, Page 11, Part XV, line 3a

Continued

**Line 3a statement**

| Recipient<br><br>Name and address<br>(home or business) | If recipient is<br>an individual,<br>show any<br>relationship to<br>any foundation<br>manager or<br>substantial<br>contributor | Founda-<br>tion<br>status<br>of re-<br>cipient | Purpose of<br>grant or contribution | Person or<br>Business<br>Checkbox<br><br>Amount |
|---------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------|-------------------------------------------------|
| <b>a Paid during the year</b>                           |                                                                                                                                |                                                |                                     |                                                 |
| PITZER COLLEGE                                          |                                                                                                                                |                                                |                                     | Person or <input type="checkbox"/>              |
| 1050 N. MILLS AVENUE                                    |                                                                                                                                |                                                |                                     | Business <input type="checkbox"/>               |
| CLAREMONT CA 91711                                      |                                                                                                                                | 501 (C) (3)                                    | GENERAL USE                         | 5,000.                                          |
| PROJECT MATCH/FAMILIES IN TRANSITION ASS                |                                                                                                                                |                                                |                                     | Person or <input type="checkbox"/>              |
| 451 N. LASALLE DR                                       |                                                                                                                                |                                                |                                     | Business <input type="checkbox"/>               |
| CHICAGO IL 60654                                        |                                                                                                                                | 501 (C) (3)                                    | GENERAL USE                         | 1,000.                                          |
| WEIZMANN INSTITUTE OF SCIENCE                           |                                                                                                                                |                                                |                                     | Person or <input type="checkbox"/>              |
| 633 3RD AVENUE 20TH FLOOR                               |                                                                                                                                |                                                |                                     | Business <input type="checkbox"/>               |
| NEW YORK NY 10017                                       |                                                                                                                                | 501 (C) (3)                                    | GENERAL USE                         | 1,000.                                          |
| UVA HEALTH FOUNDATION                                   |                                                                                                                                |                                                |                                     | Person or <input type="checkbox"/>              |
| PO BOX 800773                                           |                                                                                                                                |                                                |                                     | Business <input type="checkbox"/>               |
| CHARLOTTESVILLE VA 22908                                |                                                                                                                                | 501 (C) (3)                                    | GENERAL USE                         | 300.                                            |
| UNIVERSITY OF ILLINOIS FOUNDATION                       |                                                                                                                                |                                                |                                     | Person or <input type="checkbox"/>              |
| 1305 W. GREEN STREET                                    |                                                                                                                                |                                                |                                     | Business <input type="checkbox"/>               |
| URBANA IL 61801                                         |                                                                                                                                | 501 (C) (3)                                    | GENERAL USE                         | 250.                                            |
| WINDOW TO THE WORLD COMMUNICATIONS                      |                                                                                                                                |                                                |                                     | Person or <input type="checkbox"/>              |
| 5400 N. ST LOUIS AVENUE                                 |                                                                                                                                |                                                |                                     | Business <input type="checkbox"/>               |
| CHICAGO IL 60625                                        |                                                                                                                                | 501 (C) (3)                                    | GENERAL USE                         | 500.                                            |

Total

48,125.

**Supporting Statement of:**

Form 990-PF,p12/Line 4 Column (d)

| Description                           | Amount        |
|---------------------------------------|---------------|
| ACCOUNT NUMBER 23-09499               |               |
| DOMESTIC DIVIDENDS                    | 1,007.        |
| US GOV INTEREST REPORTED AS DIVIDENDS | 63.           |
| FOREIGN DIVIDENDS                     | 647.          |
| Total                                 | <u>1,717.</u> |