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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

Department of the Treasury Internal Revenue Service

Inter	nal Rev	venue Service (7	7) Note. The fo	undation may be able	to use a copy of this return	n to satisfy state rep	orting	requirements	
Fo	r cal	endar year 20	09, or tax year beg	inning	, a	nd ending			
G	Che	ck all that appl	· =	return	Initial return of a for Address change		•	☐ Fina hange	l return
	se th lab	el. EBR FO	foundation DUNDATION				A E	imployer identification 36-34	88134
	pri	nt Number	and street (or P O box n A SALLE ST.	umber if mail is not de	elivered to street address)	Room/suite 1232	ВТ		page 10 of the instructions) 26-3110
	•	ecific City or to	own, state, and ZIP code				C If	exemption application i	
			GO, IL 60602-3344 Inization: 🙀 Section		mpt private foundation		1	Foreign organizations, Foreign organizations	
) nonexempt charita		Other taxable private		i	check here and attach private foundation statu	computation ▶
ı	of ye	market value o ear (from Part I 16) ▶\$	of all assets at end d, col. (c), 1,428,950	J Accounting (Other (sp. (Part I, column (c			ur F If	nder section 507(b)(1)(A) the foundation is in a 60 nder section 507(b)(1)(E)	A), check here D-month termination
Pa	rt I	amounts in colum	Revenue and Expenses (b), (c), and (d) may no plumn (a) (see page 11 of	ot necessanly equal	(a) Revenue and expenses per books	(b) Net investm	ent	(c) Adjusted net income	(d) Disbursements for chantable purposes (cash basis only)
	1		ts, grants, etc , received (
	3	_	ne foundation is not requi rings and temporary ca		11		11		
	4	Dividends and	interest from securitie		41,309	41	,309		
		Gross rents Net rental incor	 ma or (loce)	•	· , ,,			RE	- EUC
Revenue	6 8		ss) from sale of assets	s not on line 10	(29,178)				- V (V P)
Ver	ŀ		for all assets on line 6a					SE SE	
æ	I -		t income (from Part I\	/, line 2) .		.,			- 2010 141
	8	Net short-term	. •						18
	9	Income modific	cations retums and allowances					LUG	JEN, UT
	1	Less Cost of							
	1		(loss) (attach schedul	e)					
	11		(attach schedule)		496		342		
	12	Total. Add line	es 1 through 11 .		12,638	41	,662		
es	13	•	of officers, directors,	trustees, etc					
enses	14 15		e salaries and wages employee benefits .		·				
		Legal fees (atta		•					
Û	ı		s (attach schedule)		3,266	3	3,266		
Ĕ :	ı	=	onal fees (attach sche	dule)					
tra	17	Interest .			297		297		
nis.	18		edule) (see page 14 of the		974		974	<u> </u>	
Administrative Exp	19 20	Occupancy	attach schedule) and o	·		·			-
Ą	21		nces, and meetings						
pu	22	Printing and pu							
<u>Б</u>	23	Other expense	s (attach schedule)		2,443	2	2,443		
ä	24	•	g and administrative	•					
perating and	25		rough 23		6,980	€	5,980		
o	25 26		gifts, grants paid . and disbursements. Add	 Unes 24 and 25	44,000		. 000		44,000
	27	Subtract line 26		- 11103 24 dHU 20	50,980		5 <u>,980</u>		44,000
	ı		ue over expenses and d	lisbursements	(38,342)				
	ı		nt income (if negative		(==1= .=/	34	,682		
	_ (Adjusted net i	ncome (if negative, e	nter -0-)					

SCANNED SEP 2 9 2010

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	E	nd c	of year
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash—non-interest-bearing	8,368	27,5	584	27,584
	2	Savings and temporary cash investments	22,689	24,6	349	24,649
	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				1
		disqualified persons (attach schedule) (see page 15 of the instructions)				1
	7	·				
"	′	Other notes and loans receivable (attach schedule) 40,013 Less allowance for doubtful accounts		40,0	112	40.012
Assets	8	Less allowance for doubtful accounts Inventories for sale or use		40,0	113	40,013
155	9	Prepaid expenses and deferred charges			\dashv	
٩	1	Investments—U.S. and state government obligations (attach schedule)	398,022	398,0	122	483,840
		D Investments—corporate stock (attach schedule)	457,794	433,1	_	
		Investments—corporate stock (attach schedule) .	457,754	400,1	쒸	033,001
	11	Investments—land, buildings, and equipment basis			-	
	''	Less accumulated depreciation (attach schedule)				
	12	Investments—mortgage loans				
	13	Investments—other (attach schedule)	253,332	169,7	26	218,983
	14	Land, buildings, and equipment: basis	200,002	103,7		210,903
	15	Other assets (describe			一	
	16	Total assets (to be completed by all filers—see the			_	
		instructions Also, see page 1, item I)	1,140,205	1,093,1	29	1,428,950
	17	Accounts payable and accrued expenses	.,,		00	1,120,000
	18	Grants payable		<u>.</u>	Ť	
<u>ë</u>	19	Deferred revenue			\dashv	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			ᅱ	
jab	21	Mortgages and other notes payable (attach schedule)				
_	22	Other liabilities (describe)			\neg	
	23	Total liabilities (add lines 17 through 22)		1	00	
		Foundations that follow SFAS 117, check here				
S		and complete lines 24 through 26 and lines 30 and 31.			1	
nces	24	Unrestricted			ŀ	i
<u>=</u>	25	Temporanly restricted			ヿ	
ä	26	Permanently restricted			\neg	i
nd		Foundations that do not follow SFAS 117, check here		*****		
Net Assets or Fund Bala		and complete lines 27 through 31.				
ō	27	Capital stock, trust principal, or current funds	1,140,205	1,093,0	29	
ţ	28	Paid-in or capital surplus, or land, bldg., and equipment fund .				1
se	29	Retained earnings, accumulated income, endowment, or other funds	<u></u>			
Ą	30	Total net assets or fund balances (see page 17 of the				I
<u>e</u>		instructions)	1,140,205	1,093,0	29	
_	31	Total liabilities and net assets/fund balances (see page 17				
		of the instructions)	1,140,205	1,093,1	29	
	it III	Analysis of Changes in Net Assets or Fund Balances				
1		net assets or fund balances at beginning of year—Part II, column (a), line	30 (must agree with	ļ		
^		f-year figure reported on prior year's return)		· · · · —	1	1,140,205
		amount from Part I, line 27a	n Danta and 1949 1	_	2	(38,342)
		Increases not included in line 2 (itemize) Unrealized Appreciatio	n ⊬aπnersnip interest		3	1,273
		nes 1, 2, and 3		<u> </u>	4	1,103,136
		asses not included in line 2 (itemize) Flag Private Equity LP - 2008			5	10,297
U	ıolal	net assets or fund balances at end of year (line 4 minus line 5)—Part II, co	olumn (b), line 30		6	1,092,839

1 ,

Form 990-PF (2009) EBR FOUN	DATION				36-348813	34 Page 3
Part IV Capital Gains and	Losses for Tax on Invest	ment Inco				
• •	nd(s) of property sold (e.g., real estate or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date ac (mo , day		Date sold , day, yr)
1a SEE ATTACHED SCHEDULE			D Donation			
b		·				
С						
d						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		(h) Gain or (loss) (e) plus (f) minus (g	ı)
a						(29,178)
С						
d						
<u>e</u>						
Complete only for assets showing	g gain in column (h) and owned b	y the foundati	on on 12/31/69	**	Sains (Col (h) gain r	
(ı) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (i) I (j), if any		k), but not less than Losses (from col (h	•
a						
b				L		
С						
d						
<u>e</u>						
2 Capital gain net income or (no	ar canital ingel (*	o enter in Pa nter -0- in Pa		2		(29,178)
3 Net short-term capital gain or	(loss) as defined in sections	1222(5) and	(6):			
If gain, also enter in Part I, lin		3 and 17 of	the }			
instructions). If (loss), enter -0			·	3		
Part V Qualification Under	r Section 4940(e) for Red	uced Tax o	n Net Investme	<u>ent Incom</u>	e	
(For optional use by domestic pri	vate foundations subject to th	e section 49	40(a) tax on net i	nvestment i	ncome.)	
If section 4940(d)(2) applies, leav	ve this part blank					
Was the foundation liable for the	·	butable amo	unt of any year in	the base n	eriod? TYes	X No
If "Yes," the foundation does not				тато васо р	5.15G 1.5G	<u> </u>
				trana hafara		
	nt in each column for each ye	ear, see page	18 of the instruc	tions before		ntries.
(a) Base period years	(b)		(c)		(d) Distribution ra	tio
Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value	of nonchantable-use a	ssets	(col (b) divided by	
2008	84,0		1,569			0 053528
2007	90,0	-+ $-$ -		3,426		0.051182
2006	110,0			,586		0 067835
2005	178,3		1,417			0.125892
2004	146,6	332	1,369),95 <u>6</u>	т	0 107034
2 Total of line 1, column (d) .				2		0.405471
3 Average distribution ratio for t						
the number of years the found	•		•			0 081094
•			•			
4 Enter the net value of noncha	aritable-use assets for 2009 fr	om Part X, li	ne5	. 4		1,279,675
5 Multiply line 4 by line 3				. 5		103,774
6 Enter 1% of net investment in	ocome (1% of Part Lline 27h)			. 6		347
					 	
7 Add lines 5 and 6				7		104,121
8 Enter qualifying distributions						44,000
If line 8 is equal to or greater the Part VI instructions on pa		Part VI, line	1b, and complete	that part us	ing a 1% tax ra	ate. See

P	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see p	age 1	8 of th	e ins	tructi	ons)
1	a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. ☐					ľ
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)					
	b Domestic foundations that meet the section 4940(e) requirements in Part V, check	1			694	
	here ▶ ☐ and enter 1% of Part I, line 27b		-			
	c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%					
	of Part I, line 12, col. (b)	ı				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				
3	Add lines 1 and 2	3			694	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			694	
6	Credits/Payments					
	a 2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1,733					
	b Exempt foreign organizations—tax withheld at source					
	c Tax paid with application for extension of time to file (Form 8868)					
_	d Backup withholding erroneously withhold					
7 8		7			,733	
9	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached. Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	8				
10	• • • • • • • • • • • • • • • • • • •	9 10			020	
11		11			,039	
	art VII-A Statements Regarding Activities ■ 1,039 Refunded ►	1				
					V	NI.
1	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				Yes	
	participate or intervene in any political campaign?	•	•	1a		X
	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)?			46		V
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			1b		Х
	published or distributed by the foundation in connection with the activities			ľ		
	c Did the foundation file Form 1120-POL for this year?			1c		Χ
	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year		•	10		^
	(1) On the foundation. \$ (2) On foundation managers \$					
	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
	on foundation managers > \$			ŀ		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles					
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .			3_		Х
4	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
_	b If "Yes," has it filed a tax return on Form 990-T for this year?		•	4b	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•		5		Х
6	If "Yes," attach the statement required by General Instruction T					
O	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or					
	 By state legislation that effectively amends the governing instrument so that no mandatory directions 					
	that conflict with the state law remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), a	nd Da	4 VV	7	x	
	a Enter the states to which the foundation reports or with which it is registered (see page 19 of the	iiu ra	11.70	- '-	^	
_	instructions) ► ILLINOIS				ļ	
	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney					
	General (or designate) of each state as required by General Instruction G? If "No," attach explanation			8b	X	
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 on page 27)	?				
	If "Yes," complete Part XIV			9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing					
	their names and addresses			10		Х

orm	990-PF (2009) EBR FOUNDATION 36-348	8134	F	age 5
Par	t 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 page 20 of the instructions)	11		×
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	 		<u> </u>
	August 17, 2008?	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address			
14	The books are in care of ► SIMPSON ESTATES INC. Telephone no ► (312) 726-3	110		
	Located at ► 30 N. LA SALLE ST. SUITE 1232 CHICAGO IL ZIP+4 ► 60602-3344			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here			<u> </u>
	and enter the amount of tax-exempt interest received or accrued during the year			
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? . Yes X No			l
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No			1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Tyes X No			:
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			}
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			
	(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.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations	:		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here	1b	N/A	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?			!
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1c		X
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	and 60 Part XIII) for tax year(a) heavening hefers 20003			
	If "Yes," list the years → 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
_	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
	to all years listed, answer "No" and attach statement—see page 20 of the instructions)	2b	N/A	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	▶ 20 , 20 , 20 , 20			ı
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			I.
	enterprise at any time during the year? Yes X No			:
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation			
	or 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	L .		
١.	If the foundation had excess business holdings in 2009)	3b	N/A	
la L	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
Þ	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?

For	m 990-PF (2009) EBR FOUNDATION				36	-34881	34	Page 6
Pá	art VII-B Statements Regarding Activiti	es for Which Forn	n 4720 May Be Red	quired (continu	ued)			
5a	During the year did the foundation pay or incur any	amount to						
	(1) Carry on propaganda, or otherwise attempt	o influence legislation (section 4945(e))? .		res X	No		
	(2) Influence the outcome of any specific public	election (see section 4	955); or to carry	_				
	on, directly or indirectly, any voter registration	n drive?		.	res X	No		
	(3) Provide a grant to an individual for travel, sti	idy or other similar nur	noses?	\sqcap	res X	No		
	(4) Provide a grant to an organization other than	• •	•	. Ц	C3 [X]			
	in section 509(a)(1), (2), or (3), or section 49			. 🗆	res X	No		
	(5) Provide for any purpose other than religious		•	. Ш	es [V]	NO		
	educational purposes, or for the prevention	·	•	\Box	res X	No		
h	If any answer is "Yes" to 5a(1)–(5), did any of the	-			es 🔼	וויייי		İ
D		· · · · · · · · · · · · · · · · · · ·	•		,	-	b N	N/A
	Regulations section 53.4945 or in a current notice			the instructions)	` ~ 🗀	· -	יון טו	*/A
_	Organizations relying on a current notice regarding	•		•				
С		-		□,	, \Box			
	tax because it maintained expenditure responsibiling "Yes," attach the statement required by Regulation	•		· · · ш	es	No		
c -			• •					
oa	Did the foundation, during the year, receive any fu premiums on a personal benefit contract?	nas, airectly or indirecti	y, to pay	□.	. 🖂			
	·				res X			
D	Did the foundation, during the year, pay premiums	, directly or indirectly, o	n a personal benefit co	ntract?		_6	b	X
- .	If "Yes" to 6b, file Form 8870				. 🖂			
	At any time during the tax year, was the foundation			_	es X	No		
_	If yes, did the foundation receive any proceeds or						b	X
Ŀ	art VIII Information About Officers	Directors, Truste	es, Foundation M	lanagers, Hig	hly Paid	Empl	oyee	es,
	and Contractors							
_		_4!	4 41 1 41.	- / 00				
1	List all officers, directors, trustees, found	Y				nstruct	ions)).
1		ation managers and (b) Title, and average hours per week	(c) Compensation (lf not paid, enter	(d) Contribution	s to	(e) Exp	oense i	account,
	List all officers, directors, trustees, found (a) Name and address	(b) Title, and average	(c) Compensation	(d) Contribution	s to plans	(e) Exp	oense i	•
	List all officers, directors, trustees, found	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contribution employee benefit	s to plans	(e) Exp	oense i	account,
	List all officers, directors, trustees, found (a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contribution employee benefit	s to plans	(e) Exp	oense i	account,
	List all officers, directors, trustees, found (a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contribution employee benefit	s to plans	(e) Exp	oense i	account,
	List all officers, directors, trustees, found (a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contribution employee benefit	s to plans	(e) Exp	oense i	account,
	List all officers, directors, trustees, found (a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contribution employee benefit	s to plans	(e) Exp	oense i	account,
	List all officers, directors, trustees, found (a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contribution employee benefit	s to plans	(e) Exp	oense i	account,
	List all officers, directors, trustees, found (a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contribution employee benefit	s to plans	(e) Exp	oense i	account,
Se	List all officers, directors, trustees, found (a) Name and address e Attached Statement	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contribution employee benefit and deferred compo	s to plans ensation	(e) Exp	pense :	account, /ances
Se	List all officers, directors, trustees, found (a) Name and address e Attached Statement Compensation of five highest-paid emplo	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contribution employee benefit and deferred compo	s to plans ensation	(e) Exp	pense :	account, vances
Se	List all officers, directors, trustees, found (a) Name and address e Attached Statement	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contribution employee benefit and deferred composite and deferre	s to plans ensation	(e) Exp	pense :	account, vances
	List all officers, directors, trustees, found (a) Name and address e Attached Statement Compensation of five highest-paid emplo If none, enter "NONE."	(b) Title, and average hours per week devoted to position yees (other than the	(c) Compensation (If not paid, enter -0-)	(d) Contribution employee benefit and deferred composite and deferre	s to plans ensation 23 of the nois to	(e) Exp	pense a rallow	account, vances
	List all officers, directors, trustees, found (a) Name and address e Attached Statement Compensation of five highest-paid emplo	(b) Title, and average hours per week devoted to position yees (other than the bours per week devoted to position)	(c) Compensation (If not paid, enter -0-) Dose included on line (c) Compensation	(d) Contribution employee benefit and deferred composite and deferre	23 of the	(e) Exported instruction (e) Exported instruct	pense and a series of the seri	account, /ances
	List all officers, directors, trustees, found (a) Name and address e Attached Statement Compensation of five highest-paid emplo If none, enter "NONE."	(b) Title, and average hours per week devoted to position yees (other than the	(c) Compensation (If not paid, enter -0-) Dose included on line (c) Compensation	(d) Contribution employee benefit and deferred composite and deferred composite (d) Contribut employee benefit employee benefit and deferred composite and defer	23 of the	(e) Exported instruction (e) Exported instruct	pense and a series of the seri	account, //ances
	List all officers, directors, trustees, found (a) Name and address e Attached Statement Compensation of five highest-paid emplo If none, enter "NONE."	(b) Title, and average hours per week devoted to position yees (other than the bours per week devoted to position)	(c) Compensation (If not paid, enter -0-) Dose included on line (c) Compensation	(d) Contribution employee benefit and deferred composite and deferre	23 of the	(e) Exported instruction (e) Exported instruct	pense and a series of the seri	account, //ances
	List all officers, directors, trustees, found (a) Name and address e Attached Statement Compensation of five highest-paid emplo If none, enter "NONE."	(b) Title, and average hours per week devoted to position yees (other than the bours per week devoted to position)	(c) Compensation (If not paid, enter -0-) Dose included on line (c) Compensation	(d) Contribution employee benefit and deferred composite and deferre	23 of the	(e) Exported instruction (e) Exported instruct	pense and a series of the seri	account, //ances
	List all officers, directors, trustees, found (a) Name and address e Attached Statement Compensation of five highest-paid emplo If none, enter "NONE."	(b) Title, and average hours per week devoted to position yees (other than the bours per week devoted to position)	(c) Compensation (If not paid, enter -0-) Dose included on line (c) Compensation	(d) Contribution employee benefit and deferred composite and deferre	23 of the	(e) Exported instruction (e) Exported instruct	pense and a series of the seri	account, //ances
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	List all officers, directors, trustees, found (a) Name and address e Attached Statement Compensation of five highest-paid emplo If none, enter "NONE."	(b) Title, and average hours per week devoted to position yees (other than the bours per week devoted to position)	(c) Compensation (If not paid, enter -0-) Dose included on line (c) Compensation	(d) Contribution employee benefit and deferred composite and deferre	23 of the	(e) Exported instruction (e) Exported instruct	pense and a series of the seri	account, //ances
	List all officers, directors, trustees, found (a) Name and address e Attached Statement Compensation of five highest-paid emplo If none, enter "NONE."	(b) Title, and average hours per week devoted to position yees (other than the bours per week devoted to position)	(c) Compensation (If not paid, enter -0-) Dose included on line (c) Compensation	(d) Contribution employee benefit and deferred composite and deferre	23 of the	(e) Exported instruction (e) Exported instruct	pense and a series of the seri	account, //ances
	List all officers, directors, trustees, found (a) Name and address e Attached Statement Compensation of five highest-paid emplo If none, enter "NONE."	(b) Title, and average hours per week devoted to position yees (other than the bours per week devoted to position)	(c) Compensation (If not paid, enter -0-) Dose included on line (c) Compensation	(d) Contribution employee benefit and deferred composite and deferre	23 of the	(e) Exported instruction (e) Exported instruct	pense and a series of the seri	account, //ances
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Total number of other employees paid over \$50,000

Form 990-PF (2009) EBR FOUNDATION		36-3488134 Page 7
Part VIII Information About Officers, Directors, Trustees, I	oundation Managers, Highly Pai	d Employees,
and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (see	page 23 of the instructions). If none, enter	er "NONE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		<u> </u>
Total number of others receiving over \$50,000 for professional services .		•
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant s	tatistical information such as	
the number of organizations and other beneficiaries served, conferences convened, research pa	pers produced, etc	Expenses
1 NONE		
•		
2		
3		
~		
4		
Part IX-B Summary of Program-Related Investments (see page	24 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2	Amount
1 NONE		

2		
2		
All other program-related investments See page 24 of the instructions		-
3		
	,	4

Total. Add lines 1 through 3

Form **990-PF** (2009)

• •

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Par	Minimum Investment Return (All domestic foundations must complete this part. Foreign	foundati	ons,
	see page 24 of the instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.		
а	Average monthly fair market value of securities	1a	1,251,533
b	Average of monthly cash balances	1b	47,629
С	Fair market value of all other assets (see page 24 of the instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	1,299,162
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	1,299,162
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25		
	of the instructions)	4	19,487
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,279,675
6	Minimum investment return. Enter 5% of line 5	6	63,984
Par	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of	perating	
	foundations and certain foreign organizations check here $ ightharpoonup$ and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	63,984
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009 (This does not include the tax from Part VI)	1	
C	Add lines 2a and 2b	2c	694
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	63,290
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4 .	5	63,290
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
•	line 1	7	63,290
Par	Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	44,000
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	44,000
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 page 26 of the instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	44,000
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foun		
	qualifies for the section 4940(e) reduction of tax in those years		

Part	XIII Undistributed Incor	ne (see page 26 of t	he instructions)			
1	Distributable amount for 2009 fr	l	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
_	line 7					63,290
2	Undistributed income, if any, as					
a	•					<u> </u>
	Total for prior years 20,			<u></u>		
3	Excess distributions carryover,	1 ⁻ I				
a	From 2004 .	80,870				
b	From 2005 .	110,754				
C	From 2006	31,645				
d	From 2007	7,901				
e	From 2008	6,349	007.540			
4	Total of lines 3a through e	· · ·	237,519			
4	Qualifying distributions for 2009					
_	XII, line 4: \$					
	Applied to 2008, but not more the	1			-	 -
D	Applied to undistributed income	· •				
_	(Election required—see page 26	· 1				
Ü	Treated as distributions out of c	, ,				
	required—see page 26 of the in					44 000
d	Applied to 2009 distributable an					44,000
е 5	Remaining amount distributed of		19,290			10 200
J	Excess distributions carryover a (If an amount appears in column		19,290			19,290
	same amount must be shown in					
6	Enter the net total of each col indicated below:					
а	Corpus. Add lines 3f, 4c, and 4e	e. Subtract line 5 .	218,229			İ
b	Prior years' undistributed incom	e Subtract				
	line 4b from line 2b .					
c	Enter the amount of prior years'	undistributed				-
	income for which a notice of det					
	been issued, or on which the se	ction 4942(a)				
	tax has been previously assess	ed				
d	Subtract line 6c from line 6b Ta	exable		-		
	amount-see page 27 of the ins	structions				
е	Undistributed income for 2008	Subtract line				
	4a from line 2a. Taxable amoun	t—see page 27 of the				
	instructions					
f	Undistributed income for 2009.	Subtract				
	lines 4d and 5 from line 1 This	amount must				
	be distributed in 2010					
7	Amounts treated as distributions	s out of				
	corpus to satisfy requirements in	mposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see page 27 of				
	the instructions)					
8	Excess distributions carryover fi	rom 2004				
	not applied on line 5 or line 7 (se	ee page 27 of the				
	instructions)		61,580			
9	Excess distributions carryove	er to 2010.				
	Subtract lines 7 and 8 from line	6a	156,649			
10	Analysis of line 9					
а	Excess from 2005	110,754				
b	Excess from 2006 .	31,645				
C	Excess from 2007 .	7,901				
d	Excess from 2008 .	6,349				
е	Excess from 2009					<u> </u>

	EBR FOUNDATION	22 22 27 of 4	ha makrijakiana a		36-348	
_	rt XIV Private Operating Foundations (s	-		and Part VII-A, q	uestion 9)	N/A
та	If the foundation has received a ruling or determination, and the ruling is effective for 2009, ent			•		
	Check box to indicate whether the foundation is a	private operating fo	undation described	in section	4942(J)(3) o	r 4942(j)(5)
2 a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	year listed					
	85% of line 2a					
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities			<u> </u>		
е	Qualifying distributions made directly		· · · ·			
	for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
а	alternative test relied upon "Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in Part X, line 6 for each year listed					
c	"Support" alternative test—enter		-			
Ū	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments					
	on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public				<u> </u>	
	and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income .					
Pa	TLXV Supplementary Information (Co				,000 or more in	
_	assets at any time during the ye		8 of the instruc	ctions.)	<u>-</u>	
1 a	Information Regarding Foundation Manag List any managers of the foundation who have con		2% of the total contr	nhutions received by	the foundation	
u	before the close of any tax year (but only if they ha					
HO'	WARD B. SIMPSON CHARLES	H. MORSE IV				
b	List any managers of the foundation who own 10% ownership of a partnership or other entity) of which				portion of the	·
NO						
2	Information Regarding Contribution, Gran	t, Gift, Loan, Sc	holarship, etc., P	rograms:		
	Check here ► X if the foundation only makes unsolicited requests for funds. If the foundation may under other conditions, complete items 2a, b, c, are	akes gifts, grants, e		_	•	ations
a	The name, address, and telephone number of the		plications should be	addressed		
	The form in which applications should be submitte	d and information a	nd materials they sh	nould include:		
					· · · · · · · · · · · · · · · · · · ·	·····
С	Any submission deadlines:					
d	Any restrictions or limitations on awards, such as b factors	oy geographical are	as, charitable fields,	, kinds of institutions	s, or other	

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Part XV Supplementary Information (continued)

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
a Paid during the year				
SEE ATTACHED SCHEDULE				44,000
0227117101125 001125 022				
	<u></u>			
b Approved for future payment	 		▶ 3a	44,000
, , , , , , , , , , , , , , , , , , ,				
		•		
Total			3h	··

Enter gross amounts unless otherwise indicated.	Unrelated bus	iness income	Excluded by section	on 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of
a					the instructions)
b					
c					
d					
e					_
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments				<u> </u>	
3 Interest on savings and temporary cash investments .			14	11	
4 Dividends and interest from securities			14	41,309	
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 property7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			18	(29,178)	~
9 Net income or (loss) from special events			10	(29,170)	
0 Gross profit or (loss) from sales of inventory					
1 Other revenue a SEE ATTACHED SCHEDULE			18	496	
b					
С					
d					
e					
2 Subtotal Add columns (b), (d), and (e)				12,638	
3 Total. Add line 12, columns (b), (d), and (e)	lations)			13	12,638
3 Total. Add line 12, columns (b), (d), and (e) . See worksheet in line 13 instructions on page 28 to verify calcu	lations)			13	12,638
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calculart XVI-B Relationship of Activities to the Acculate No. Explain below how each activity for which income the accomplishment of the foundation's exempt page 28 of the instructions)	lations) omplishment is reported in colu	of Exempt P	urposes VI-A contributed in	nportantly to	12,638
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions on page 28 to verify calcular XVI-B Relationship of Activities to the Acculate No. Explain below how each activity for which income the accomplishment of the foundation's exempt p	lations) omplishment is reported in colu	of Exempt P	urposes VI-A contributed in	nportantly to	12,638
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Firm's name (or yours if self-employed), address, and ZIP code

SIMPSON ESTATES INC.

SUITE 1232

ar	t XVII	Information Rega Exempt Organiza	_	fers To and Tra	nsactions a	nd Rel	ationships With N	oncharita	ble		
	in secti	organization directly of the Code zations?	or indirectly en	• • •	•	-	•) -		Yes	No
b	(1) Ca (2) Other t (1) Sa (2) Pu (3) Re (4) Re (5) Lo (6) Pe Sharin If the a	ers from the reporting fash	charitable exent a noncharital ment, or other ments	npt organization ble exempt organi assets	zation	es Columion, If th	n (b) should always s	show the fa	fair m	narket	X X X X X X X
(a)	Line no	(b) Amount involved	(c) Name of	nonchantable exempt	organization	(d) Des	cription of transfers, transac	ctions, and sha	arıng arr	angem	ents
_											
											
_											
			<u> </u>			ļ					
					·						
	descri	foundation directly or in ibed in section 501(c) of s," complete the follow	of the Code (ot	ited with, or related ther than section 5	d to, one or mo 501(c)(3)) or in	ore tax-e section	exempt organizations 527?		es X] No	
_		(a) Name of organization		(b) Type	of organization		(c) Descriptio	n of relationsh	ıp		
		 									
				<u> </u>							
								· · · · · · · · ·			
	T	1									
ā	beli	der penálties of penjury, I decla ef, it is true, correct, and com			axpayer or fiduciary	y) is based	on all information of which				
Ā	S S	ignature of officer or trustee		1	Data	ate /	▼ / Title	Ι			
Sign Here	Paid sparer's	Preparer's signature	Det,	Tah	Date		Check if self-employed ▶	Preparer's id number (see page 30 of the P0054225	Signat ne instru	ure on	ı

30 N. LA SALLE ST.

CHICAGO, IL 60602-3344

EIN ► 36-2541394

Phone no (312) 726-3110

EBR Foundation 36-3488134

Part I, Line 1 - Contributions Received (at cost)

	Jessie S Jones - 46 shares of	
	United Technologies common stock	
	Fair Market Value = \$ 3,032 78	0
	Tall Market Value - \$ 5,052 TO	· ·
	Howard B Simpson - 46 shares of	
	United Technologies common stock	
	Fair Market Value = \$ 3,032 78	0
	-	
	Total Contributions Received	0
Part I, Line 11 -	Other Income & Part XVI, Line 11 - Other Revenue)
	Flag Private Equity, LP - Other Passive Income	3
	Flag Venture Ptrs II, LP - Other Portfolio	18
	SGF LLC - Ordinary Loss	(3)
	Flag Private Equity LP - Trade or Bus	(149)
	Simglo, L.P Ordinary Gain	403
	Flag Private Equity LP - Other Portfolio Inc	28
	Flag Private Equity LP- Cancellation of Debt	6
	FG-AFII - Other Portfolio Income	1
	Denmark Income Tax Refund	35
	Total Column B	342
	Tax Refund - Federal Form 2439 Taxes	154
	Total Column A	496
Part I, Line 16b	 Accounting Fees Simpson Estates, Inc - Accounting and Tax Preparation 	3,266
	and rax reparation	0,200
Part I, Line 18 -	Taxes	
	Simglo LP - Franchise Tax	1
	Alis & Co - Foreign Tax Paid	558
	Simglo LP - Foreign Tax Paid	403
	SGF LLC - Foreign Tax Paid	11
	Flag Priv Equity - Foreign Tax Paid	1
	Total Columns A & B	974
5 20		
Part I Line 23 -	Other Expenses	
	Simglo, LP	1,410
	SGF, LLC	180
	Flag Venture Partners II, LP	175
	Flag Private Equity LP	573
	FG-AFII	11
	Total From Passthroughs	2,349
	Filing Fees	25
	Investment Fees	69
	Total Other Expenses, Column A & B	2,443

EBR Foundation 36-3488134

Part II, Line 13 - Other Investments

	Book Value	Market Value
Simglo, LP	128,768	178,025
SGF, LLC	•	-
Flag Venture Partners II, LP	15,665	15,665
FG- AFII Prime Venture Partners	4,775	4,775
Flag Private Equity, LP	20,518	20,518
Total Other Investments	169,726	218,983

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	1800	3,772,46	5,598.34	3,772,46	20"848"52 \$5"306"52 \$6"306"53	37.05. 01.869.11 86.168.1	4,426.66	_10,00/f; /2-	102,102,48	107,700.82	Elsewhere : Simple	<i>o</i>						
	FROCEDS	5,618,12 481,81	6,350.18	8,002,95	1,732,93 /,684,79 152,16	7,039,85 4,625,37	3,500,10 10,152,67 29,860,80	12,616,54	86,337,47	90,687,65	Reported		:					
1 OR YFAK: 2009	SELL	10774708 06772709 08710709 11770709 10724708-06719709	Totalss		11/20/09/ 11/20/09 06/18/09 06/18/09		12/31/09	09/26/0th-11/13/09	Yotals:	Totale	Adjust Artworkip							
IR YFAK:	ncn DA11	10/24/08 08/10/09 10/24/08	Short Term Totals:	1072470B 01731708	01/31/08 08/27/07 11/21/03	72708774 11709706 05/26/05	10%%%01 01/01/94 01/01/00	997267 0 1	Long Torm Fotato:	 								
3	QUAM	40.00 162.13 120.00	Sha	40.00		360.00	70.00		0.1				; ;					
		(tarins & Livesign))))		& L.Osses.									!					
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ACCOUNT: F F EDIA ND 1 (#: 36-3480134	SECURITY	Theretis Short-Form-Capitation in the Find Calitation Calitation (ACAS)		Frank IIs tong Term Cap	Group-	DK.	TETROHANS ADR	(STROMIDRE EXCHANGE (SPXCF)			manny. But family suppression of super super in the super							

EBR FOUNDATION

36-3488134

CAPITAL GAIN (LOSS) SUMMARY - 2008

PARTNERSHIP GAINS & (LOSSES):	
SIMGLO, L.P. (36-3860054)	
Short Term Capital Gain (Loss) Long Term Capital Gain (Loss)	5,866 (8,783)
SGF, L.L.C. (36-4181745)	
Short Term Capital Gain (Loss) Long Term Capital Gain (Loss)	(535) (5,918)
FLAG VENTURE PARTNERS II, L.P. (06-1478807)	
Short Term Capital Gain (Loss) Long Term Capital Gain (Loss)	(31) 660
FLAG PRIVATE EQUITY L.P. (06-1582343)	
Short Term Capital Gain (Loss) Long Term Capital Gain (Loss)	98 290
FG-AFII, L.P. (58-2543471)	
Long Term Capital Gain (Loss)	0
TOTAL PARTNERSHIP GAINS (LOSSES) CAPITAL GAINS (LOSSES) FROM PREVIOUS PAGE CAPITAL GAIN DISTRIBUTIONS NET SEC. 1231 GAINS (LOSSES)	(8,353) (21,926) 1,176 (16)
SEC. 1256 STRADDLE GAINS (LOSSES) LOSS FROM DISTRIB. OF SGF PTRSHP INTEREST	(59)
TOTAL CAPITAL GAINS & LOSSES	(29,178)

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12/31/65	TOTAL DIV	00.0	00"069	00"0	00.0	301,50	1,518,20	00,0	00"0	87,50	/2.00	202, 80	03.155	00"0	00,345	322.40	00.09	336.00	132,00	00.6%	277,50	1,176.00	00.0	007,700	00.00	152,84	00.027	478,80	140.80	3,468.75	00.000.7	4,000.00	3, 125,00	4,500.00		70 "B" "C" "			:		
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514105	TOTAL VALUE	14.858.54	27,939,50	13,975,50	22,904,00	15,739.36	22,608,30	9,301,60	78, 167, 60 04, 040, 50	8,692.00	16,686,18	14,706.90	19,398,60	12.045.10	16,350.00	18,89760	6,613,50	15, 720, 00	00"//0"%	6,831,00	17,641,60	24,432,00	14.04.00	10,532,70	7,653,80	24,015,86	11,367,40	19,434,13	22,508,80	80,385,00	00"070"921	69,085,00	00,057,95	87,735,00		1 . L L / 9 / L / 0 . 70	Actet		633,881	782 840	7.7.
	UNIT VALUL	710, 75	164,350	13,310	40.900	4.557	57.970	023.55	13.690	34.770	107".36	37.710	49.740	087.74	81.750	30.480	44.090	52,400	54.430	25,300	47,680	.37,.760	70.840	010.95	5,390	69.410	0/0 75	061.89	35.170	097.701	176,020	136.170	119.440	116.980	•	- i p	7.		1		
),q	TOTAL COST	7.1944.60	15,080,22	19, 521, 81	6,084.56	6,481.70	14,330.61	9,147,89	50"A04"/*	11,362,10	14,908.03	14,8827,48	14,731,94	19:040:44	14,547,90	20,025.47	70"190"5	11,716.98	18.000.02	14,962,58	17,575,24	19,025,55	0, 021,00	12,067,00	7,343.47	10.1	- 12" (40 TZ)	4,493.09	14,097,18	73,869,00	91,687,50	_ 40,625.00	50,437,50	80,765,60	3	CO. 1 1 1 CO. 7 A	Book Value		433,135	398 022	
INVESTMENT MITORY	OVO COST	000	88.74	18.59	10,87	t	38.10	32,67	2 6 2 6 2 6	45,45	85,82	38,16	5777	30 E	72.74	75."41	22.07	90°-60°	56.75	55,42	47,110	27, 18	2 2	44.69	12.0	00.0	20.70	15.77	22.03	98,09	69.16	101.25	00,88	69"/0		1	ধ	 			
INVEST	CUAN	80.00	20,07	1,050,00	00.090	3,015,00	390.00	780,00	7, 185, 00 (05, 00	250,00	00"081	390,00	00.000	190.00	200,00	620,00	150.00	300,00	00.005	270.00	370.00	700,00	390,00	270.00	.47.0.00	346.00	30.0.00	285.00	640.00				50.00	75,00		:			5	1.00	
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E.B.R. FOUNDATION (36-3488134) PART XV - 2009 GRANTS & CONTRIBUTIONS PAID

RECIPIENT	CITY, STATE	PURPOSE OF GRANT	AMOUNT
1 THE MASTERS SCHOOL	DOBBS FERRY, NY	2009 ANNUAL FUND	\$500.00
2 CHICAGO ZOOLOGICAL SOCIETY	BROOKFIELD, IL	ANNUAL FUND	\$1,000.00
3 WORLD WILDLIFE FUND	WASHINGTON, DC	UNRESTRICTED	\$1,500.00
4 COLONIAL WILLIAMSBURG FOUNDATION	WILLIAMSBURG, VA	UNRESTRICTED	\$2,500.00
5 LAKE FOREST OPEN LANDS ASSOCIATION	LAKE FOREST, IL	UNRESTRICTED	\$6,000.00 -
6 NORTH CAROLINA ZOOLOGICAL SOCIETY	ASHEBORO, NC	UNRESTRICTED	\$1,000.00
7 U.S. FRIENDS OF D. SHELDRICK WILDLIFE TRUST	INDIANAPOLIS, IN	UNRESTRICTED	\$2,500.00
8 SNOW LEOPARD TRUST	SEATTLE, WA	UNRESTRICTED	\$12,500.00
9 THE HILL SCHOOL	POTTSTOWN, PA	UNRESTRICTED	\$500.00
10 UNIV OF VIRGINIA MCINTIRE SCH OF COMMERCE	CHARLOTTESVILLE, VA	UNRESTRICTED	\$500.00
11 RAY GRAHAM ASSOCIATION	DOWNERS GROVE, IL	HORSEMANSHIP PROGRAM	\$750 00
12 DUKE UNIVERSITY	DURHAM, NC	J SIMPSON III MEMORIAL ENDOWMENT FUND	\$5,500.00
13 MONTANA EQUESTRIAN EVENTS, INC.	WHITEFISH, MT	THE EVENT AT REBECCA FARM	\$5,000.00
14 RUSH UNIVERSITY MEDICAL CENTER	CHICAGO, IL	MULTIPLE SCLEROSIS CENTER	\$2,000.00
15 FODFEST	SHEFFIELD, MA	UNRESTRICTED	\$1,000.00
16 GREAT LAKES DISASTER TRAINING FOUNDATION	LAKE FOREST, IL	UNRESTRICTED	\$250.00
17 LAKE FOREST HOSPITAL	CHICAGO, IL	2009 ANNUAL FUND	\$1,000 00
		TOTAL CONTRIBUTIONS	\$44,000.00

Form 8868

(Rev April 2009)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

		th Extension, complete only Part I and check this box automatic) 3-Month Extension, complete only Part II (
Do not com	plete Part II unless you have	already been granted an automatic 3-month extension of	n a previously	filed Form 8868.
Part I	Automatic 3-Month Exte	nsion of Time. Only submit original (no copies nee	ded).	
•	•	nd requesting an automatic 6-month extension—check t	his box and co	mplete
-		7		
	porations (including 1120-C file acome tax returns.	ers), partnerships, REMICs, and trusts must use Form 70	JU4 to request	an extension of
of the return electronicall returns, or a	s noted below (6 months for a y if (1) you want the additional composite or consolidated Fo	can electronically file Form 8868 if you want a 3-month at corporation required to file Form 990-T). However, you contend (not automatic) 3-month extension or (2) you file Forms arm 990-T. Instead, you must submit the fully completed conic filing of this form, visit www.irs.gov/efile and click on	annot file Forn 990-BL, 6069, and signed pag	n 8868 or 8870, group ge 2 (Part II) of
Type or	Name of Exempt Organization		1	entification number
print	EBR FOUNDATION		36-3488134	
File by the	1	ite no. If a P.O. box, see instructions.		
due date for filing your	30 N. LA SALLE ST. SUITE	and ZIP code. For a foreign address, see instructions.		
return See instructions	CHICAGO		<u>IL</u>	60602-3344
Check type	e of return to be filed (file a se	eparate application for each return):		
Form 9	90	Form 990-T (corporation)		Form 4720
Form 9	90-BL	Form 990-T (sec. 401(a) or 408(a) trust)		Form 5227
Form 9	90-EZ	Form 990-T (trust other than above)		Form 6069
X Form 9	90-PF	Form 1041-A		Form 8870
Telepho If the or If this is	one No. ► (312) 726-3110 ganization does not have an of for a Group Return, enter the	FAX No. ► (312) 726-3143 FAX No. ► (312) 7	box	
until is fo	8/15/2010 r the organization's return for: Calendar year 2009 or	months for a corporation required to file Form 990-T) extends , to file the exempt organization return for the organization , and ending	tion named abo	ove. The extension
		nonths, check reason: Initial return Final return		ge in accounting period
		BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,		
	any nonrefundable credits. Se			3a \$ 1,200
		PF or 990-T, enter any refundable credits and estimated to	ax	2h & 1700
		year overpayment allowed as a credit. m line 3a. Include your payment with this form, or, if requ	ired	3b \$ 1,700
		m line 3a. Include your payment with this form, or, it requi uired, by using EFTPS (Electronic Federal Tax Payment	ueu,	
	stem). See instructions.	uned, by using EFTFS (Electionic Federal Tax Payment		3c \$
Caution	If you are going to make an ele	ectronic fund withdrawal with this Form 8868, see Form 8	453-EO and Fo	
	ent instructions.			

Form	8868	(Rev	4-2009)

Page 2

	y complete Part II if you have already been granted an automatic 3-month exten			
	y complete Part in it you have alleady been granted an automatic 3-month extension, complete only Part I (on page	•	viously lilea Fort	n 8888.
Part II	Additional (Not Automatic) 3-Month Extension, complete only Part 1 (on page		copies needed).
Type or	Name of Exempt Organization		Employer identifi	
print	EBR FOUNDATION		36-3488134	
File by the	Number, street, and room or suite no. If a P.O. box, see instructions.		For IRS use only	
extended due date for	30 N. LA SALLE ST. SUITE 1232	9.2	_	
filing the	City, town or post office, state, and ZIP code. For a foreign address, see instructions		17777941841877	
return See instructions	CHICAGO IL 60602-3344			
	/pe of return to be filed (File a separate application for each return):	12000 2000	E. St. E. H. S.	an reason area realized and an area realized
	n 990 X Form 990-PF Form 104	i_Λ	Form	6060
			=	
	n 990-BL Form 990-T (sec. 401(a) or 408(a) trust) Form 4720)	Form	8870
For	n 990-EZ Form 990-T (trust other than above) Form 522	7		
	o not complete Part II if you were not already granted an automatic 3-month extension			68.
• The l	books are in the care of SIMPSON ESTATES INC. 30 N. LA SALLE ST. SUITE 1	232 CHICAGO	IL 60602	
Tele	phone No. ► (312) 726-3110 FAX No. ► (312) 726-3	143		
	organization does not have an office or place of business in the United States, or			▶
If this	s is for a Group Return, enter the organization's four digit Group Exemption Numl	oer (GEN)		. If this is
for the v	whole group, check this box ▶	this box	▶ an	d attach a
list with	the names and EINs of all members the extension is for.		_	
4 1	request an additional 3-month extension of time until 11/15/201	0	•	
5 F	or calendar year 2009 , or other tax year beginning	, and e	nding	
6 lf	this tax year is for less than 12 months, check reason: Initial return Fina		Change in acc	ounting period
	tate in detail why you need the extension More time is requested to acquire all i			
	nd file an accurate return.			
-				
8 a 1	this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tent	ative tax,		
1	ess any nonrefundable credits. See instructions.		8a	\$ 700
b l	f this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable	credits and	77.2	
	estimated tax payments made. Include any prior year overpayment allowed as a c	redit and any		(
. غ	amount paid previously with Form 8868.		8b	\$ 1700
c	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if require	ed, deposit wi	h	~
	TD coupon or, if required by using EFTPS (Electronic Federal Tax Payment System). See	instructions.	8c	\$ 10
	Signature and Verification			
Under po	enalties of perjuly. I declare that shave examined this form, including accompanying schedules and statem correct, and complete, and that fem authorized to prepare this form	ents, and to the I	est of my knowledge	and belief,
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			8/ 1
Signatu	e ► Title ► PRESIDENT		Date ►	113/10
			Form	8868 (Rev 4-2009