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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

2009Department 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

KEMPER EDUCATIONAL AND CHARITABLE FUND
PMB 186 1001 GREEN BAY ROAD
WINNETKA, IL 60093-1721

A Employer identification number

36-6054499

B Telephone number (see the instructions)

847-441-2043

C If exemption application is pending, check here ☐**D 1** Foreign organizations, check here ☐**2** Foreign organizations meeting the 85% test, check here and attach computation ☐**E** If private foundation status was terminated under section 507(b)(1)(A), check here ☐**F** If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

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)

▶ \$ 9,592,963.

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** Ck ☒ if the foundn is not req to att Sch B**3** Interest on savings and temporary cash investments**4** Dividends and interest from securities

507,981.

507,981.

507,981.

5a Gross rents**b** Net rental income or (loss)**6a** Net gain/(loss) from sale of assets not on line 10

-476,782.

b Gross sales price for all assets on line 6a 3,545,652.**7** Capital gain net income (from Part IV, line 2)

0.

8 Net short-term capital gain**9** Income modifications**10a** Gross sales less returns and allowances**b** Less Cost of goods sold**c** Gross profit/(loss) (att sch)**11** Other income (attach schedule)

SEE STATEMENT 1

1,850.

12 Total. Add lines 1 through 11

33,049.

507,981.

507,981.

13 Compensation of officers, directors, trustees, etc

64,992.

19,498.

19,497.

45,495.

14 Other employee salaries and wages**15** Pension plans, employee benefits**16a** Legal fees (attach schedule)**b** Accounting fees (attach sch) SEE ST 2

8,445.

2,534.

2,533.

5,912.

c Other prof fees (attach sch) SEE ST 3

77,394.

77,394.

77,394.

17 Interest

2.

2.

2.

18 Taxes (attach schedule)(see instr) SEE STM 4

-11,023.

-11,023.

-11,023.

19 Depreciation (attach sch) and depletion**20** Occupancy**21** Travel, conferences, and meetings

963.

289.

289.

674.

22 Printing and publications**23** Other expenses (attach schedule)

SEE STATEMENT 5

7,831.

2,350.

2,349.

5,483.

24 Total operating and administrative expenses. Add lines 13 through 23

148,604.

91,044.

91,041.

57,564.

25 Contributions, gifts, grants paid STMT 6

431,850.

431,850.

26 Total expenses and disbursements. Add lines 24 and 25

580,454.

91,044.

91,041.

489,414.

27 Subtract line 26 from line 12:**a Excess of revenue over expenses and disbursements**

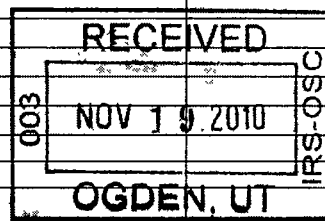
-547,405.

b Net investment income (if negative, enter -0-)

416,937.

c Adjusted net income (if negative, enter -0-)

416,940.



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21

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
ASSETS	1 Cash — non-interest-bearing					
	2 Savings and temporary cash investments			408,958.	407,154.	407,154.
	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) STATEMENT 7			2,217,743.	2,197,180.	2,288,809.
	b Investments — corporate stock (attach schedule) STATEMENT 8			7,081,919.	6,556,881.	6,891,269.
	c Investments — corporate bonds (attach schedule)					
LIABILITIES	11 Investments — land, buildings, and equipment basis					
	Less: accumulated depreciation (attach schedule)					
	12 Investments — mortgage loans					
	13 Investments — other (attach schedule)					
	14 Land, buildings, and equipment basis					
	Less: accumulated depreciation (attach schedule)					
	15 Other assets (describe)					5,731.
	16 Total assets (to be completed by all filers — see instructions Also, see page 1, item I)			9,708,620.	9,161,215.	9,592,963.
	17 Accounts payable and accrued expenses					
	18 Grants payable					
NET ASSETS OR FUND BALANCES	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 Total liabilities (add lines 17 through 22)			0.	0.	
	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.	<input type="checkbox"/>				
	24 Unrestricted					
	25 Temporarily restricted					
	26 Permanently restricted					
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.	<input checked="" type="checkbox"/>				
ASSETS	27 Capital stock, trust principal, or current funds			9,708,620.	9,161,215.	
	28 Paid-in or capital surplus, or land, building, and equipment fund					
	29 Retained earnings, accumulated income, endowment, or other funds					
	30 Total net assets or fund balances (see the instructions)			9,708,620.	9,161,215.	
	31 Total liabilities and net assets/fund balances (see the instructions)			9,708,620.	9,161,215.	

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	9,708,620.
2 Enter amount from Part I, line 27a	2	-547,405.
3 Other increases not included in line 2 (itemize)	3	
4 Add lines 1, 2, and 3	4	9,161,215.
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	9,161,215.

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)
1 a SEE STATEMENT 9				
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			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(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	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div>		2	-476,782.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> If gain, also enter in Part I, line 8, column (c) (see the instructions) If (loss), enter -0- in Part I, line 8 </div>		3	0.

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) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2008	590,026.	10,126,431.	0.058266
2007	581,901.	11,256,735.	0.051694
2006	577,771.	10,675,695.	0.054120
2005	554,631.	10,556,770.	0.052538
2004	534,224.	10,402,939.	0.051353

2 Total of line 1, column (d)	2	0.267971
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	0.053594
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	345,936.
5 Multiply line 4 by line 3	5	18,540.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	4,169.
7 Add lines 5 and 6	7	22,709.
8 Enter qualifying distributions from Part XII, line 4	8	489,414.

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 Date of ruling or determination letter _____ (attach copy of letter if necessary - see instr.)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	4,169.
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	4,169.
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	4,169.
6 Credits/Payments			
a 2009 estimated tax pmts and 2008 overpayment credited to 2009	6a	5,731.	
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	5,731.	
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	0.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	1,562.	
11 Enter the amount of line 10 to be Credited to 2010 estimated tax <input checked="" type="checkbox"/> Refunded <input type="checkbox"/>	11	0.	

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)? <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: (1) On the foundation <input checked="" type="checkbox"/> \$ 0. (2) On foundation managers <input checked="" type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input checked="" type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <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?		N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <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: • 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?		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 XIV</i>	X	
8 a Enter the states to which the foundation reports or with which it is registered (see the instructions) IL		
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? <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

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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?	13	X	
Website address <u>N/A</u>				
14	The books are in care of <u>PATRICIA VAN CLEAVE</u>	Telephone no	<u>847-441-2043</u>	
	Located at <u>1047 ELM WINNETKA IL</u>	ZIP + 4	<u>60093</u>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year	N/A	<input type="checkbox"/> N/A	
		15		

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

File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(6)	Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)? Organizations relying on a current notice regarding disaster assistance check here		<input type="checkbox"/>
1b			X
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?		X
1c			X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	If 'Yes,' list the years <u>20__ , 20__ , 20__ , 20__</u>		
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 the instructions)		N/A
2b			N/A
c	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__ , 20__ , 20__ , 20__</u>		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b	If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)		N/A
3b			N/A
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?		X
4b			X

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Form 990-PF (2009)

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 N/A

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

6b X

If 'Yes' to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b N/A

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
SEE STATEMENT 10		64,992.	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				

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

0

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

3 Five highest-paid independent contractors for professional services – (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 0

Part IX A Summary of Direct Charitable Activities

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

	Expenses
1 N/A	
2	
3	
4	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	0.

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Form 990-PF (2009)

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	1 a	334,164.
b Average of monthly cash balances	1 b	17,040.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	351,204.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1 e	0.
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	351,204.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	5,268.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	345,936.
6 Minimum investment return. Enter 5% of line 5	6	17,297.

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	17,297.
2a Tax on investment income for 2009 from Part VI, line 5	2 a	4,169.	
b Income tax for 2009 (This does not include the tax from Part VI)	2 b		
c Add lines 2a and 2b	2 c	4,169.	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	13,128.	
4 Recoveries of amounts treated as qualifying distributions	4		
5 Add lines 3 and 4	5	13,128.	
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	13,128.	

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	1 a	489,414.
b Program-related investments — total from Part IX-B	1 b	
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)	3 a	
b Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	489,414.
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	4,169.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	485,245.

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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Form 990-PF (2009)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				13,128.
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____		0.		
3 Excess distributions carryover, if any, to 2009.				
a From 2004				
b From 2005	84,985.			
c From 2006	584,959.			
d From 2007	38,160.			
e From 2008	91,338.			
f Total of lines 3a through e	799,442.			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ 489,414.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus (Election required — see instructions)	0.			
d Applied to 2009 distributable amount				13,128.
e Remaining amount distributed out of corpus	476,286.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,275,728.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable amount — see instructions		0.		
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount — see 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)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	1,275,728.			
10 Analysis of line 9				
a Excess from 2005	84,985.			
b Excess from 2006	584,959.			
c Excess from 2007	38,160.			
d Excess from 2008	91,338.			
e Excess from 2009	476,286.			

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

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling ▶

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

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

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year – see instructions.)**1 Information Regarding Foundation Managers:**

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

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc, (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

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

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

c Any submission deadlines

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

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	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
a Paid during the year				
Total			3a	
b Approved for future payment				
Total			3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (see the instructions)
		(a) Business code	(b) Amount	(c) Exclu- sion code	(d) 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					507,981.
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					-476,782.
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue:					
a	SETTLEMENT INCOME					1,850.
b						
c						
d						
e						
12	Subtotal. Add columns (b), (d), and (e)					33,049.
13	Total. Add line 12, columns (b), (d), and (e)					33,049.

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

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

[illegible]

KEMPER EDUCATIONAL AND CHARITABLE FUND

36-6054499

STATEMENT 1
FORM 990-PF, PART I, LINE 11
OTHER INCOME

	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
SETTLEMENT INCOME	\$ 1,850.		
TOTAL	\$ 1,850.	\$ 0.	\$ 0.

STATEMENT 2
FORM 990-PF, PART I, LINE 16B
ACCOUNTING FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OROREK & ASSOCIATES TAX PREPARATION	\$ 8,445.	\$ 2,534.	\$ 2,533.	\$ 5,912.
TOTAL	\$ 8,445.	\$ 2,534.	\$ 2,533.	\$ 5,912.

STATEMENT 3
FORM 990-PF, PART I, LINE 16C
OTHER PROFESSIONAL FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MERRILL LYNCH-INVESTMENT MGMT	\$ 77,394.	\$ 77,394.	\$ 77,394.	
TOTAL	\$ 77,394.	\$ 77,394.	\$ 77,394.	\$ 0.

STATEMENT 4
FORM 990-PF, PART I, LINE 18
TAXES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL TAX	\$ -13,683.	\$ -13,683.	\$ -13,683.	
FOREIGN TAX	2,660.	2,660.	2,660.	
TOTAL	\$ -11,023.	\$ -11,023.	\$ -11,023.	\$ 0.

KEMPER EDUCATIONAL AND CHARITABLE FUND

36-6054499

STATEMENT 5
FORM 990-PF, PART I, LINE 23
OTHER EXPENSES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADMINISTRATIVE EXPENSE	\$ 250.	\$ 75.	\$ 75.	\$ 175.
BANK SERVICE CHARGE	510.	153.	153.	357.
DUES & SUBSCRIPTIONS	1,165.	350.	349.	816.
INSURANCE	2,814.	844.	844.	1,971.
LICENSES & FEES	70.	21.	21.	49.
POSTAGE	226.	68.	68.	158.
SUPPLIES	2,796.	839.	839.	1,957.
TOTAL	\$ 7,831.	\$ 2,350.	\$ 2,349.	\$ 5,483.

STATEMENT 6
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS
CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY:	PROGRAM SUPPORT	
DONEE'S NAME:	ALZHEIMER'S ASSOCIATION	
DONEE'S ADDRESS:	225 N MICHIGAN AVE	
	CHICAGO, IL 60601	
RELATIONSHIP OF DONEE:	PUBLIC	
ORGANIZATIONAL STATUS OF DONEE:		
AMOUNT GIVEN:		\$ 5,000.
CLASS OF ACTIVITY:	PROGRAM SUPPORT	
DONEE'S NAME:	LAWRENCE HALL YOUTH SERVICES	
DONEE'S ADDRESS:	4833 N. FRANCISCO	
	CHICAGO, IL 60625	
RELATIONSHIP OF DONEE:	PUBLIC	
ORGANIZATIONAL STATUS OF DONEE:		
AMOUNT GIVEN:		600.
CLASS OF ACTIVITY:	PROGRAM SUPPORT	
DONEE'S NAME:	CASA/COOK COUNTY	
DONEE'S ADDRESS:	910 WEST VAN BUREN	
	CHICAGO, IL 60607	
RELATIONSHIP OF DONEE:	PUBLIC	
ORGANIZATIONAL STATUS OF DONEE:		
AMOUNT GIVEN:		20,000.
CLASS OF ACTIVITY:	PROGRAM SUPPORT	
DONEE'S NAME:	WOMEN'S BD CHICAGO ZOOLOGICAL SOCIETY	
DONEE'S ADDRESS:	3300 GOLF RD	
	BROOKFIELD, IL 60513	
RELATIONSHIP OF DONEE:	PUBLIC	
ORGANIZATIONAL STATUS OF DONEE:		
AMOUNT GIVEN:		2,500.
CLASS OF ACTIVITY:	PROGRAM SUPPORT	
DONEE'S NAME:	CHICAGO BOTANICAL GARDEN	
DONEE'S ADDRESS:	1000 LAKE COOK RD	
	GLENCOE, IL 60022	
RELATIONSHIP OF DONEE:		

KEMPER EDUCATIONAL AND CHARITABLE FUND

36-6054499

STATEMENT 6 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

ORGANIZATIONAL STATUS OF DONEE:	PUBLIC	
AMOUNT GIVEN:		\$ 26,250.
CLASS OF ACTIVITY:	PROGRAM SUPPORT	
DONEE'S NAME:	THE RIGHT ANGLE FOUNDATION	
DONEE'S ADDRESS:	1010 N. NOBLE ST. 2ND FL CHICAGO, IL 60622	
RELATIONSHIP OF DONEE:		
ORGANIZATIONAL STATUS OF DONEE:	PUBLIC	
AMOUNT GIVEN:		10,500.
CLASS OF ACTIVITY:	PROGRAM SUPPORT	
DONEE'S NAME:	MIDWEST CARE CENTER	
DONEE'S ADDRESS:	2050 CLAIRE CT GLENVIEW, IL 60025	
RELATIONSHIP OF DONEE:		
ORGANIZATIONAL STATUS OF DONEE:	PUBLIC	
AMOUNT GIVEN:		3,800.
CLASS OF ACTIVITY:	PROGRAM SUPPORT	
DONEE'S NAME:	HOLY FAMILY MINISTRIES	
DONEE'S ADDRESS:	ONE NORTHFIELD PLAZA #300 NORTHFIELD, IL 60093	
RELATIONSHIP OF DONEE:		
ORGANIZATIONAL STATUS OF DONEE:	PUBLIC	
AMOUNT GIVEN:		50,000.
CLASS OF ACTIVITY:	PROGRAM SUPPORT	
DONEE'S NAME:	NU/FEINBERG SCHOOL OF MEDICINE	
DONEE'S ADDRESS:	303 E CHICAGO AVE MORTON BLDG 4-656 CHICAGO, IL 60611	
RELATIONSHIP OF DONEE:		
ORGANIZATIONAL STATUS OF DONEE:	PUBLIC	
AMOUNT GIVEN:		30,000.
CLASS OF ACTIVITY:	PROGRAM SUPPORT	
DONEE'S NAME:	ASSOCIATION HOUSE	
DONEE'S ADDRESS:	1116 N. KEDZIE CHICAGO, IL 60651	
RELATIONSHIP OF DONEE:		
ORGANIZATIONAL STATUS OF DONEE:	PUBLIC	
AMOUNT GIVEN:		25,000.
CLASS OF ACTIVITY:	PROGRAM SUPPORT	
DONEE'S NAME:	WINNETKA CONGREGATIONAL CHURCH	
DONEE'S ADDRESS:	725 PINE ST WINNETKA, IL 60093	
RELATIONSHIP OF DONEE:		
ORGANIZATIONAL STATUS OF DONEE:	PUBLIC	
AMOUNT GIVEN:		2,750.
CLASS OF ACTIVITY:	PROGRAM SUPPORT	
DONEE'S NAME:	THE MELODRAMATICS THEATER CO	
DONEE'S ADDRESS:	117 EDDY ST #4 ITHACA, NY 14850	
RELATIONSHIP OF DONEE:		
ORGANIZATIONAL STATUS OF DONEE:	PUBLIC	

KEMPER EDUCATIONAL AND CHARITABLE FUND

36-6054499

STATEMENT 6 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

AMOUNT GIVEN: \$ 2,500.

CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: AUX EVANSTON NORTHWESTERN HEALTHCARE
DONEE'S ADDRESS: 1301 CENTRAL ST
EVANSTON, IL 60201RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 200.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: WINNETKA HISTORICAL SOCIETY
DONEE'S ADDRESS: P.O. BOX 365
WINNETKA, IL 60093RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 2,450.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: CHICAGO PUBLIC LIBRARY FOUNDATION
DONEE'S ADDRESS: 20 N. MICHIGAN AVE # 204
CHICAGO, IL 60602RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 2,500.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: MUSEUM OF SCIENCE & INDUSTRY
DONEE'S ADDRESS: 57TH & LAKESHORE DR
CHICAGO, IL 60637RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 2,500.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: ART INSTITUTE OF CHICAGO
DONEE'S ADDRESS: 111 S. MICHIGAN AVE
CHICAGO, IL 60603RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 2,500.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: GLENCOE UNION CHURCH
DONEE'S ADDRESS: 263 PARK AVE
GLENCOE, IL 60022RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 1,000.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: WINNETKA PUBLIC SCHOOL FOUNDATION
DONEE'S ADDRESS: P.O. BOX 97
WINNETKA, IL 60093RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: PUBLIC

KEMPER EDUCATIONAL AND CHARITABLE FUND

36-6054499

STATEMENT 6 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

AMOUNT GIVEN:		\$	2,500.
CLASS OF ACTIVITY:	PROGRAM SUPPORT		
DONEE'S NAME:	INDIAN HILL CLUB SCHOLARSHIP FOUNDATION		
DONEE'S ADDRESS:	1 INDIAN HILL RD WINNETKA, IL 60093		
RELATIONSHIP OF DONEE:			
ORGANIZATIONAL STATUS OF DONEE:	PUBLIC		
AMOUNT GIVEN:			2,500.
CLASS OF ACTIVITY:	PROGRAM SUPPORT		
DONEE'S NAME:	GLENWOOD SCHOOL FOR BOYS AND GIRLS		
DONEE'S ADDRESS:	500 W 187TH ST GLENWOOD, IL 60425		
RELATIONSHIP OF DONEE:			
ORGANIZATIONAL STATUS OF DONEE:	PUBLIC		
AMOUNT GIVEN:			50,000.
CLASS OF ACTIVITY:	PROGRAM SUPPORT		
DONEE'S NAME:	NAPSLO EDUCATION FOUNDATION		
DONEE'S ADDRESS:	200 NE 54TH ST #200 KANSAS CITY, MO 64118		
RELATIONSHIP OF DONEE:			
ORGANIZATIONAL STATUS OF DONEE:	PUBLIC		
AMOUNT GIVEN:			15,000.
CLASS OF ACTIVITY:	PROGRAM SUPPORT		
DONEE'S NAME:	HAVEN YOUTH & FAMILY SERVICES		
DONEE'S ADDRESS:	560 GREENBAY RD WINNETKA, IL 60093		
RELATIONSHIP OF DONEE:			
ORGANIZATIONAL STATUS OF DONEE:	PUBLIC		
AMOUNT GIVEN:			150.
CLASS OF ACTIVITY:	PROGRAM SUPPORT		
DONEE'S NAME:	UNITED WAY OF NORTH SHORE		
DONEE'S ADDRESS:	540 W. FRONTAGE RD # 3040 NORTHFIELD, IL 60093		
RELATIONSHIP OF DONEE:			
ORGANIZATIONAL STATUS OF DONEE:	PUBLIC		
AMOUNT GIVEN:			250.
CLASS OF ACTIVITY:	PROGRAM SUPPORT		
DONEE'S NAME:	AVON WALK FOR BREAST CANCER		
DONEE'S ADDRESS:	1 AVON PLAZA RYE, NY 10580		
RELATIONSHIP OF DONEE:			
ORGANIZATIONAL STATUS OF DONEE:	PUBLIC		
AMOUNT GIVEN:			250.
CLASS OF ACTIVITY:	PROGRAM SUPPORT		
DONEE'S NAME:	ALLIANCE FRANCAISE		
DONEE'S ADDRESS:	810 N. DEARBORN CHICAGO, IL 60610		
RELATIONSHIP OF DONEE:			
ORGANIZATIONAL STATUS OF DONEE:	PUBLIC		

KEMPER EDUCATIONAL AND CHARITABLE FUND

36-6054499

STATEMENT 6 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

AMOUNT GIVEN: \$ 1,500.

CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: MAGICAL STRINGS OF YOUTH
DONEE'S ADDRESS: 2403 GRESHAN ST
ARLINGTON HEIGHTS, IL 60004RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 25,000.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: ROTARY CLUB OF WINNETKA-NORTHFIELD
DONEE'S ADDRESS: 620 LINCOLN AVE
WINNETKA, IL 60093RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 1,900.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: EVANS SCHOLARS FOUNDATION
DONEE'S ADDRESS: 1 BRIAR ROAD
GOLF, IL 60029RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 200.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: UNIV OF WISCONSIN FOUNDATION
DONEE'S ADDRESS: 1848 UNIVERSITY AVE; P.O. BOX 8860
MADISON, WI 53708RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 500.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: FOLDS OF HONOR FOUNDATION
DONEE'S ADDRESS: 730 S. YALE STE #600
TULSA, OK 74136RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 250.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: NORTHWESTERN UNIVERSITY
DONEE'S ADDRESS: 2020 RIDGE
EVANSTON, IL 60208RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 75,000.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: IOTA COURT PRESERVATION ASSOCIATION
DONEE'S ADDRESS: PO BOX 1582
MADISON, WI 53701RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: PUBLIC

KEMPER EDUCATIONAL AND CHARITABLE FUND

36-6054499

STATEMENT 6 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

AMOUNT GIVEN: \$ 5,000.

CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: CLEARBROOK
DONEE'S ADDRESS: 1835 WEST CENTRAL RD
ARLINGTON HEIGHTS, IL 60005RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 250.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: MAKE A WISH
DONEE'S ADDRESS: 640 N. LA SALLE BLVD
CHICAGO, IL 60654RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 250.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: BOUNDLESS READERS
DONEE'S ADDRESS: 5153 NORTH CLARK ST, STE 206
CHICAGO, IL 60640RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 15,000.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: NORTH SHORE UNIVERSITY HEALTHSYSTEM
DONEE'S ADDRESS: 1033 UNIVERSITY PLACE #450
EVANSTON, IL 60201RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 25,000.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: OJAI FESTIVALS LTD.
DONEE'S ADDRESS: P.O. BOX 185
OJAI, CA 93024RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 1,000.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: SKOKIE SCHOOL FOUNDATION
DONEE'S ADDRESS: P.O. BOX 117
WINNETKA, IL 60093RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 1,000.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: UNIVERSITY OF CINCINNATI
DONEE'S ADDRESS: 2600 CLIFTON AVE.
CINCINNATI, OH 45221RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: PUBLIC

KEMPER EDUCATIONAL AND CHARITABLE FUND

36-6054499

STATEMENT 6 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

AMOUNT GIVEN: \$ 100.

CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: OSTOMY ASSOCIATION OF GREATER CHICAGO
DONEE'S ADDRESS: CHICAGO, ILRELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 500.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: UNIVERSITY OF CHICAGO
DONEE'S ADDRESS: 5801 SOUTH ELLIS AVENUE
CHICAGO, IL 60637
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 500.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: GENEVA FOUNDATION
DONEE'S ADDRESS: 3200 GRANT ST
EVANSTON, IL 60201
RELATIONSHIP OF DONEE:
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 500.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: FAMILY SERVICE WINNETKA NORTHFIELD
DONEE'S ADDRESS: 992 1/2 GREEN BAY RD
WINNETKA, IL 60093
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 100.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: INTERFAITH HOUSE
DONEE'S ADDRESS: 3456 W. FRANKLIN BLVD
CHICAGO, IL 60624
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 100.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: JOHN G. SHEDD AQUARIUM
DONEE'S ADDRESS: 1200 S. LAKE SHORE DR
CHICAGO, IL 60605
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: PUBLIC
AMOUNT GIVEN: 2,500.CLASS OF ACTIVITY: PROGRAM SUPPORT
DONEE'S NAME: DE PAUW UNIVERSITY
DONEE'S ADDRESS: P.O. BOX 37
GREENCASTLE, IN 46135
RELATIONSHIP OF DONEE: NONE
ORGANIZATIONAL STATUS OF DONEE: PUBLIC

KEMPER EDUCATIONAL AND CHARITABLE FUND

36-6054499

STATEMENT 6 (CONTINUED)
FORM 990-PF, PART I, LINE 25
CONTRIBUTIONS, GIFTS, AND GRANTS

AMOUNT GIVEN: \$ 15,000.

TOTAL \$ 431,850.

STATEMENT 7
FORM 990-PF, PART II, LINE 10A
INVESTMENTS - U.S. AND STATE GOVERNMENT OBLIGATIONS

<u>U.S. GOVERNMENT OBLIGATIONS</u>	<u>VALUATION METHOD</u>	<u>BOOK VALUE</u>	<u>FAIR MARKET VALUE</u>
US GOVT OBLIGATIONS	COST	\$ 2,197,180.	\$ 2,288,809.
		\$ 2,197,180.	\$ 2,288,809.
	TOTAL	\$ <u>2,197,180.</u>	\$ <u>2,288,809.</u>

STATEMENT 8
FORM 990-PF, PART II, LINE 10B
INVESTMENTS - CORPORATE STOCKS

<u>CORPORATE STOCKS</u>	<u>VALUATION METHOD</u>	<u>BOOK VALUE</u>	<u>FAIR MARKET VALUE</u>
CORPORATE STOCK	COST	\$ 6,556,881.	\$ 6,891,269.
	TOTAL	\$ <u>6,556,881.</u>	\$ <u>6,891,269.</u>

STATEMENT 9
FORM 990-PF, PART IV, LINE 1
CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

<u>ITEM</u>	<u>(A) DESCRIPTION</u>	<u>(B) HOW ACQUIRED</u>	<u>(C) DATE ACQUIRED</u>	<u>(D) DATE SOLD</u>
1	ACCT 4004	PURCHASED	VARIOUS	VARIOUS
2	ACCT 4101	PURCHASED	VARIOUS	VARIOUS
3	ACCT 7022	PURCHASED	VARIOUS	VARIOUS
4	ACCT 7023	PURCHASED	VARIOUS	VARIOUS
5	ACCT 7025	PURCHASED	VARIOUS	VARIOUS
6	ACCT 7026	PURCHASED	VARIOUS	VARIOUS
7	ACCT 7027	PURCHASED	VARIOUS	VARIOUS
8	ACCT 7327	PURCHASED	VARIOUS	VARIOUS

<u>ITEM</u>	<u>(E) GROSS SALES</u>	<u>(F) DEPREC. ALLOWED</u>	<u>(G) COST BASIS</u>	<u>(H) GAIN (LOSS)</u>	<u>(I) FMV 12/31/69</u>	<u>(J) ADJ. BAS. 12/31/69</u>	<u>(K) EXCESS (I) - (J)</u>	<u>(L) GAIN (LOSS)</u>
1	380,907.		495,392.	-114,485.				\$ -114,485.
2	32,178.		63,993.	-31,815.				-31,815.
3	114,650.		89,484.	25,166.				25,166.
4	68,192.		114,958.	-46,766.				-46,766.
5	364,366.		617,786.	-253,420.				-253,420.

KEMPER EDUCATIONAL AND CHARITABLE FUND

36-6054499

STATEMENT 9 (CONTINUED)
 FORM 990-PF, PART IV, LINE 1
 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

ITEM	(E) GROSS SALES	(F) DEPREC. ALLOWED	(G) COST BASIS	(H) GAIN (LOSS)	(I) FMV 12/31/69	(J) ADJ. BAS. 12/31/69	(K) EXCESS (I) - (J)	(L) GAIN (LOSS)
6	544,798.		542,320.	2,478.				\$ 2,478.
7	1164832.		1159682.	5,150.				5,150.
8	875,729.		938,819.	-63,090.				-63,090.
							TOTAL	<u>\$-476,782.</u>

STATEMENT 10
 FORM 990-PF, PART VIII, LINE 1
 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES


NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
JOHN VAN CLEAVE 508 JEFFERSON GLENCOE, IL	CHAIRMAN 0	\$ 0.	\$ 0.	\$ 0.
DALE PARK JR 321 N. CLARK, SUITE 3400 CHICAGO, IL	SECRETARY 0	0.	0.	0.
MARGARET ARCHAMBAULT 3240 N. LAKE SHORE DRIVE CHICAGO, IL	TRUSTEE 0	0.	0.	0.
BRIAN VAN CLEAVE 1047 ELM ST WINNETKA, IL 60093	TRUSTEE 0	0.	0.	0.
PATRICIA VAN CLEAVE 1047 ELM ST WINNETKA, IL 60093	TRUSTEE 0	64,992.	0.	0.
	TOTAL	<u>\$ 64,992.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1)

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the extended due date for filing the return. See instructions	Name of Exempt Organization		Employer identification number
	KEMPER EDUCATIONAL AND CHARITABLE FUND		36-6054499
	Number, street, and room or suite number. If a P.O. box, see instructions		For IRS use only
	ARCHAMBAULT & ASSOCIATES, LTD 851 SPRUCE ST SUITE 100		
	City, town or post office, state, and ZIP code. For a foreign address, see instructions		
	WINNETKA, IL 60093		

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

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

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

- The books are in care of PATRICIA VAN CLEAVE
Telephone No. 847-441-2043 FAX No. _____
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until 11/15, 2010.

5 For calendar year 2009, or other tax year beginning _____, 20____, and ending _____, 20____.

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

7 State in detail why you need the extension TAXPAYER RESPECTFULLY REQUESTS ADDITIONAL TIME TO GATHER INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE TAX RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a \$	0.
8b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b \$	5,731.
8c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instrs.	8c \$	0.

Signature and Verification

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

Signature K. Archambault Title CRA Date 8/5/10