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2010
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705
SCANNED

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

OMB No	1545-0052
2(	009

ernal Revenue Se			e able to use	a copy of		-		quirements	<u> </u>
	year 2009, or tax year begin		<del></del>	-1 - 1	<del></del>	, and endi	<del></del>		, 20
Check all t	· · · · —		∐ I <u>niti</u>	_	of a former p	ublic char	<del>-</del> i		Final return
	Amended re	eturn		Addres	s change		Name		ication number
	Name of foundation						A Em	ployer laenui	icauon number
se the IRS	label. MOREY & ANNE CHAPMAN FAMILY FOUNDATION						36-60		-6059338
therwise,	Number and street (or P O box n	<del></del>			te B Teles	B Telephone number (see page 10 of the instructions)			
print	Namber and street (or 1 '6 'box in	100 10 011001	uuu.coo,	11001111001					
or type.	ONE S. WACKER DR.,	STE :	1800				İ	(3:	12) 602-6800
ee Specific structions.	City or town, state, and ZIP code					!	C If e	emption applic	ation is
istructions.								ding, check her oreian organiza	ations, check here
	CHICAGO, IL 60606						2. F	oreign organiza	ations meeting the
Check type	e of organization X Section	n 501(c	)(3) exemp	t private f	oundation				here and attach
Section 4	4947(a)(1) nonexempt charitable				ıvate founda	tion	F If D	ivate foundation	on status was terminated
Fair marke	et value of all assets at end	J Accou	unting metho	od 🔼 Ca	ash Acc	crual			b)(1)(A), check here .
	m Part II, col (c), line		her (specify)				F   If th	e foundation is	s in a 60-month termination
16) ▶ \$		<del>`                                    </del>	column (d) m	iust be on	cash basis )		und	er section 507(t	o)(1)(B), check here
	ysis of Revenue and Expense of amounts in columns (b), (c), and		(a) Revent		(b) Net inve	estment	(c) Adıu	sted net	(d) Disbursements for charitable
may r	not necessarily equal the amounts	in	éxpense:	s per	incom			ome	purposes
colum	n (a) (see page 11 of the instruction	ons) )		3					(cash basis only)
	tions, gifts, grants, etc., received (attach sche		<del></del>						
2 Check	■ attach Sch B	• • • • ⊦		4,357.		4,357.			ATCH 1
	. Off savings and temporary cash invest	e	1	0,498	1	0,498.			111011 1
	nds and interest from securities .				-	1			
	rents								· ·
	n or (loss) from sale of assets not on li	ne 10		37,126.				··· · · · · · · · · · · · · · · · · ·	
<b>b</b> Gross s	100	246	1000	_					
7 Capita	I gain net income (from Part IV, lik	YE !	/ED		73	37,126.			
	ort-term capital gain $0$	[							
9 Income	e modifications · Jul JUN	2.8 2	010   8						
	ales less returns owances · · · ·		اذا						
<b>b</b> Less C	ost of goods sold .	EAL	<u> </u>						
	profit or (loss) (attach schedule)	<u>L V</u>	UIII		**				
11 Other	income (attach schedule)	-		1 001		1 001			
	Add lines 1 through 11			51,981.		1,981.			
	nsation of officers, directors, trustees, e								
	employee salaries and wages								
	on plans, employee benefits		<del></del>						
	fees (attach schedule)					-+			
	nting fees (attach schedule) professional fees (attach schedule								
	professional fees (attach scriedule st								
	attach schedule) (see page 14 of the instr	i i							<del> </del>
,	ciation (attach schedule) and dep						<del> </del>		
•	ancy								
	conferences, and meetings								
	g and publications								
	expenses (attach schedule) ATC			182.		157.			25
24 Total	pperating and administrative exp	enses.				[			
Add Iır	nes 13 through 23	[		182.		157.			25
25 Contril	butions, gifts, grants paid			32,950.		1.5			132,950
	penses and disbursements_Add lines 24	and 25	13	33,132.		157.			132,975
27 Subtra	ct line 26 from line 12		,	,, ,,,					
	of revenue over expenses and disbursemen	· ' ' F	<del>-</del> -	31,151.		1,824.		<del></del>	<del> </del>
	vestment income (if negative, ent	· · ·				11,024.		-0-	<del> </del>
c Adiusi	ted net income (if negative, enter	-0-)   t Notice,			L	i		<del></del>	Form <b>990-PF</b> (2009)

Par	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	·
	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	400 534	2 010	
2	• • • • • • • • • • • • • • • • • • • •	490,534.	3,919.	3,919.
3				
	Less allowance for doubtful accounts ▶			
4	Pledges receivable ▶			
	Less allowance for doubtful accounts ▶			<del></del>
5				
e				
	disqualified persons (attach schedule) (see page 16 of the instructions)			
7		·		
'	Less allowance for doubtful accounts			
ه اي				
Assets				
SSI	a Investments - U S and state government obligations (attach schedule)			*
۱۰	, , , , , , , , , , , , , , , , , , ,	120,163.	118,083.	288,545.
	b Investments - corporate stock (attach schedule)	10,040.	417,584.	424,217.
11	c Investments - corporate bonds (attach schedule)	10,010.	11770011	
	Investments - land, buildings, and equipment basis  Less accumulated depreciation (attach schedule)			
12	Investments - mortgage loans			
13	Investments - other (attach schedule) ATCH 3	92,719.	92,719.	33,896.
14				
	equipment basis Less accumulated depreciation (attach schedule)			
15	Other assets (describe			
16	Total assets (to be completed by all filers - see the			
' '	instructions Also, see page 1, item I)	713,456.	632,305.	750,577.
17				
18				
- 1		ı		
20				
ig 21	·			
7 22	Other liabilities (describe			
١,,	Total liabilities (add lines 17 through 22)			
23				
1	Foundations that follow SFAS 117, check here			
S	and complete lines 24 through 26 and lines 30 and 31.	713,456.	632,305.	
Se 24	Unrestricted	713,430.	032,303.	
[ 25	Temporarily restricted			
Balance	Permanently restricted			
or Fund	Foundations that do not follow SFAS 117,			
교	check here and complete lines 27 through 31. ▶ 🔛			
Ö 27	Capital stock, trust principal, or current funds			
Net Assets				
S 29				
₹ 30				
Ne	instructions)	713,456.	632,305.	
31				
	of the instructions)	713,456.	632,305.	
Par	Analysis of Changes in Net Assets or Fund E			
	otal net assets or fund balances at beginning of year - Part II,	<del>`</del>	agree with	
				713,456.
2 F	nd-of-year figure reported on prior year's return)			-81,151.
4 E	nter amount from Part I, line 27a			01,101.
			1 .	632,305.
	dd lines 1, 2, and 3			032,305.
	ecreases not included in line 2 (itemize)		5	620 205
6 To	otal net assets or fund balances at end of year (line 4 minus li	ne 5) - Part II, column (b),	line 30   6	632,305.

Part IV Capital Gain					
(a) List ar	nd describe the kind(s) of property sold	(e g , real estate,	(b) How acquired	(c) Date acquired	(d) Date sold
	brick warehouse, or common stock, 200	· ·	P-Purchase D-Donation	(mo day vr)	(mo , day, yr )
1a SEE PART IV SCH	EDULE				
b					
С					
d				1	
e					
	(f) Depreciation allowed	(g) Cost or other basis	1	(h) Gain or (lo	nee)
(e) Gross sales price	(or allowable)	plus expense of sale		(e) plus (f) mini	•
			<del></del>	<del></del>	
<u>a</u>				<del></del>	
_b			<del></del>	<del></del>	
<u>c</u>			<del></del>		
<u>d</u>					
<u>e</u>	<u> </u>		<u> </u>		
Complete only for assets	showing gain in column (h) and ow	ned by the foundation on 12/31/69	- \··	Gains (Col (h) g	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less t Losses (from co	
a					
b					
C			ļ		
d				· ·	
е			<del> </del>		
	, II	f gain, also enter in Part I, line 7	<del>                                     </del>		
2 Capital gain net income o	r (net canital loce)	f (loss), enter -0- in Part I, line 7	. 2		37,126.
3. Not short-term capital gai	'' ا n or (loss) as defined in sections 12		<del></del>		
, ,	•	, , , , , , , , , , , , , , , , , , , ,	1		
If agin, also enter in Port 1			1 1		
If gain, also enter in Part		·	`		
If (loss), enter -0- in Part I,	line 8		3		
If (loss), enter -0- in Part I, Part V Qualification U (For optional use by domest	nder Section 4940(e) for Red ic private foundations subject to the	uced Tax on Net Investment In	come	ome )	
If (loss), enter -0- in Part I, Part V Qualification U (For optional use by domest If section 4940(d)(2) applies	nder Section 4940(e) for Red ic private foundations subject to the	uced Tax on Net Investment In le section 4940(a) tax on net inves	come tment inco		Yes X No
If (loss), enter -0- in Part I, Part V Qualification U (For optional use by domest If section 4940(d)(2) applies Was the foundation liable for	Inne 8,	uced Tax on Net Investment In the section 4940(a) tax on net investigation	come tment inco		Yes X No
If (loss), enter -0- in Part I, Part V Qualification U (For optional use by domest If section 4940(d)(2) applies Was the foundation liable for If "Yes," the foundation does	nder Section 4940(e) for Red ic private foundations subject to the , leave this part blank r the section 4942 tax on the distril a not qualify under section 4940(e)	uced Tax on Net Investment In the section 4940(a) tax on net invest butable amount of any year in the Do not complete this part	come tment inco	d?	Yes X No
If (loss), enter -0- in Part I, Part V Qualification U (For optional use by domest If section 4940(d)(2) applies Was the foundation liable for If "Yes," the foundation does 1 Enter the appropriate am (a)	Inne 8	butable amount of any year in the Do not complete this part	come tment inco	d?	
If (loss), enter -0- in Part I, Part V Qualification U (For optional use by domest If section 4940(d)(2) applies Was the foundation liable for If "Yes," the foundation does 1 Enter the appropriate am	nder Section 4940(e) for Red ic private foundations subject to the , leave this part blank r the section 4942 tax on the distril a not qualify under section 4940(e)	uced Tax on Net Investment In the section 4940(a) tax on net invest butable amount of any year in the Do not complete this part	come tment inco	d?	atio
If (loss), enter -0- in Part I,  Part V Qualification U (For optional use by domest  If section 4940(d)(2) applies  Was the foundation liable for If "Yes," the foundation does  1 Enter the appropriate am  (a)  Base penod years  Calendar year (or tax year beginning in)	Inne 8	butable amount of any year in the Do not complete this part r, see page 18 of the instructions butable amount of the instruction am	come tment inco	king any entries (d) Distribution ra (col (b) divided by	atio
If (loss), enter -0- in Part I, Part V Qualification U (For optional use by domest If section 4940(d)(2) applies Was the foundation liable for If "Yes," the foundation does 1 Enter the appropriate am (a) Base period years Calendar year (or tax year beginning in) 2008	Inne 8	butable amount of any year in the Do not complete this part r, see page 18 of the instructions butable use assets  (c)  Net value of nonchantable-use assets	come tment inco	king any entries (d) Distribution ra (col (b) divided by	atio y col (c)) 0.044251
If (loss), enter -0- in Part I, Part V Qualification U (For optional use by domest If section 4940(d)(2) applies Was the foundation liable for If "Yes," the foundation does 1 Enter the appropriate am (a) Base penod years Calendar year (or tax year beginning in) 2008 2007	Inne 8	butable amount of any year in the Do not complete this part r, see page 18 of the instructions butable use assets  (c)  Net value of nonchantable-use assets  837,052.  854,441.	come tment inco	cing any entries (d) Distribution re (col (b) divided by	atio y col (c)) 0.044251 0.097690
If (loss), enter -0- in Part I, Part V Qualification U (For optional use by domest  If section 4940(d)(2) applies  Was the foundation liable for If "Yes," the foundation does  1 Enter the appropriate am (a) Base penod years Calendar year (or tax year beginning in)  2008  2007  2006	Inne 8	butable amount of any year in the Do not complete this part r, see page 18 of the instructions between the value of nonchantable-use assets  837,052.  854,441.  922,233.	come tment inco	king any entries (d) Distribution ra (col (b) divided by	atio y col (c)) 0.044251 0.097690 0.111002
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If (loss), enter -0- in Part I,  Part V Qualification U (For optional use by domest  If section 4940(d)(2) applies  Was the foundation liable for if "Yes," the foundation does  1 Enter the appropriate and (a)  Base period years Calendar year (or tax year beginning in)  2008  2007  2006  2005  2004  2 Total of line 1, column (d) 3 Average distribution ration number of years the four  4 Enter the net value of no	Inne 8	butable amount of any year in the Do not complete this part r, see page 18 of the instructions between the page of the p	come tment inco pase perio	king any entries (d) Distribution ra (col (b) divided by	0.044251 0.097690 0.111002 0.091805 0.086738 0.431486 0.086297
If (loss), enter -0- in Part I,  Part V Qualification U (For optional use by domest  If section 4940(d)(2) applies  Was the foundation liable for If "Yes," the foundation does  1 Enter the appropriate am  (a)  Base penod years  Calendar year (or tax year beginning in)  2008  2007  2006  2005  2004  2 Total of line 1, column (d) 3 Average distribution ration number of years the four 4 Enter the net value of no 5 Multiply line 4 by line 3	Inne 8	butable amount of any year in the Do not complete this part r, see page 18 of the instructions between the value of nonchantable-use assets  837,052. 854,441. 922,233. 991,512. 1,034,611.  e the total on line 2 by 5, or by the s than 5 years  om Part X, line 5	come tment inco pase perio	king any entries (d) Distribution ra (col (b) divided by	0.044251 0.097690 0.111002 0.091805 0.086738 0.431486 0.086297
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If (loss), enter -0- in Part I,  Part V Qualification U (For optional use by domest  If section 4940(d)(2) applies  Was the foundation liable for if "Yes," the foundation does 1 Enter the appropriate an (a)  Base penod years Calendar year (or tax year beginning in)  2008  2007  2006  2005  2004  2 Total of line 1, column (d) 3 Average distribution ration number of years the four 4 Enter the net value of no 5 Multiply line 4 by line 3 6 Enter 1% of net investments 7 Add lines 5 and 6	Inne 8	butable amount of any year in the Do not complete this part r, see page 18 of the instructions between the Do not complete this part r, see page 18 of the instructions between the Do not complete this part r, see page 18 of the instructions between the page 18 of the instruction between the page 18 of the instruction between the page 18 of the instruction between	come tment inco pase perior efore mal  2  3  4  5	d? (d) Distribution ra (col (b) divided by	atio (c)) 0.044251 0.097690 0.111002 0.091805 0.086738 0.431486 0.086297 749,768. 64,703.

Form	990-PF (2009) 36-6059338		F	Page 4
	tVI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of t	he ins	truction	ons)
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1			
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			518.
	here X and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%			
	of Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2			518.
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	<del></del>		518.
6	Credits/Payments			
а	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1,167.			
b	Exempt foreign organizations-tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c 0 .			
	Backup withholding erroneously withheld		, ,	
	Total credits and payments Add lines 6a through 6d		1,1	167.
8	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			<u> </u>
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			549.
	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 649. Refunded ▶ 11			
	t VII-A Statements Regarding Activities		l	T
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	<u> </u>	Yes	No X
	participate or intervene in any political campaign?	<u>1</u> a		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19	١		х
	of the instructions for definition)?	1 <u>b</u>		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			X
_	Did the foundation file Form 1120-POL for this year?	1 c		<u> </u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ►\$(2) On foundation managers ►\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
_	on foundation managers  \$	_		x
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2_		<del>                                     </del>
•	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		X
4				X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	1		
_ b	If "Yes," has it filed a tax return on Form 990-T for this year?			X
5	If "Yes," attach the statement required by General Instruction T	_	<b> </b>	
e	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
6	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	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	Х	
8а	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) > IL,		1	
ь	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	8 b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			[ <u>-</u>
	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		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	140	1	X

. 10 X Form 990-PF (2009)

Х

3 b

4a

of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . . . .

charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009? . . . . .

Form **990-PF** (2009)

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

Form 990-PF	= (2009)	36-6059338	Page 7
Part VIII	Information About Officers, Directors, Trustees, Foundat and Contractors (continued)	ion Managers, Highly Paid Emplo	yees,
3 Five hig	phest-paid independent contractors for professional services (see	page 23 of the instructions). If none	enter "NONE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NON	E		
			,
Total num	ber of others receiving over \$50,000 for professional services		▶ NONE
Part IX-A	Summary of Direct Charitable Activities		
	undation's four largest direct charitable activities during the tax year. Include relevant stations and other beneficianes served, conferences convened, research papers produced, e		Expenses
1 NONE	E		
2 	· · · · · · · · · · · · · · · · · · ·		
3			
4			
Part IX-E	Summary of Program-Related Investments (see page 23 c	of the instructions)	
	he two largest program-related investments made by the foundation during the tax year o		Amount
1 NONE	E		
2			
	rogram-related investments. See page 24 of the instructions		
3 NONE	E 		
Total Ado	1 lines 1 through 3		

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foresee page 24 of the instructions)	eign foundation	ons,
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	567,563.
b	Average of monthly cash balances	1b	193,623.
C	Fair market value of all other assets (see page 24 of the instructions)	1c	0.
d	Total (add lines 1a, b, and c)	1d	761,186.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)  Acquisition indebtedness applicable to line 1 assets		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	0.14 11 20 5 2 2 1 2 4 4	3	761,186.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25		
		4	11,418.
5	of the instructions)  Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	749,768.
6	Minimum investment return. Enter 5% of line 5	. 6	37,488.
Pa	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) profoundations and certain foreign organizations check here ▶ and do not complete this	ate operating	
1	Minimum investment return from Part X, line 6	. 1	37,488.
2 a	Tax on investment income for 2009 from Part VI, line 5		
b		7	
С	Add lines 2a and 2b	2c	518.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	36,970.
4	Recoveries of amounts treated as qualifying distributions		
5	. , , , , , , , , , , , , , , , , , , ,		36,970.
6	Add lines 3 and 4  Deduction from distributable amount (see page 25 of the instructions)  Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	. 7	36,970.
Pa	art XII Qualifying Distributions (see page 25 of the instructions)	<del></del>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
' a		1a	132,975.
b			0.
2	Program-related investments - total from Part IX-B		
	purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the		•
а			0.
b	Cash distribution test (attach the required schedule)		0.
4.	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	. 4	132,975.
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)		518.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	132,457.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years	whether the fo	undation

Form **990-PF** (2009)

1 Distributable amount for 2009 from Part XI,   Corpus   Years prior to 2008   2008	(d) 2009 36,970.
1 Distributable amount for 2009 from Part XI, line 7  2 Undistributed income, if any, as of the end of 2009 a Enter amount for 2008 only  b Total for pnor years 20 07 ,20 06 ,20 05  3 Excess distributions carryover, if any, to 2009 a From 2004 38,262. b From 2005 41,912. c From 2006 56,878. d From 2007 41,613. e From 2008 178,665.	
2 Undistributed income, if any, as of the end of 2009 a Enter amount for 2008 only b Total for pnor years 20 07 ,20 06 ,20 05 3 Excess distributions carryover, if any, to 2009 a From 2004	36,970.
2 Undistributed income, if any, as of the end of 2009 a Enter amount for 2008 only b Total for pnor years 20 07 ,20 06 ,20 05 3 Excess distributions carryover, if any, to 2009 a From 2004	
a Enter amount for 2008 only	
b Total for pnor years 20 07 ,20 06 ,20 05  3 Excess distributions carryover, if any, to 2009 a From 2004	
3 Excess distributions carryover, if any, to 2009 a From 2004	
a From 2004	
b From 2005	
c From 2006	
d From 2007	
e From 2008	
f Total of lines 3a through e	
7545 57 1105 53	
line 4 ▶ \$132,975.	
a Applied to 2008, but not more than line 2a	
b Applied to undistributed income of prior years (Election required - see page 26 of the instructions)	
c Treated as distributions out of corpus (Election required - see page 26 of the instructions)	
d Applied to 2009 distributable amount	36,970.
e Remaining amount distributed out of corpus . 96,005.	
5 Excess distributions carryover applied to 2009	
(If an amount appears in column (d), the same amount must be shown in column (a))	
6 Enter the net total of each column as	
indicated below:	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 274,670.	
b Prior years' undistributed income Subtract	
line 4b from line 2b	
c Enter the amount of prior years' undistributed	
income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has	
been previously assessed	
d Subtract line 6c from line 6b Taxable	
amount - see page 27 of the instructions	
e Undistributed income for 2008 Subtract line	
4a from line 2a Taxable amount - 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 out of corpus to satisfy requirements imposed by section	
170(b)(1)(F) or 4942(g)(3) (see page 27 of the	
Instructions)	
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions) 38,262.	
motivations)	
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a 236, 408.	
10 Analysis of line 9	<del></del>
a Excess from 2005 41,912.	
b Excess from 2006	
c Excess from 2007	
d Excess from 2008	
e Excess from 2009 96,005.	

	foundation, and the ruling i	s effective for 2009,	enter the date of the ruling			<del></del>
þ	Check box to indicate whet		a private operating found		4942	(j)(3) or 4942(j)
a	Enter the lesser of the ad-	Tax year	45,0000	Prior 3 years	40.000	(e) Total
	l or the minimum investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
b	85% of line 2a					
С	Qualifying distributions from Part					
	XII, line 4 for each year listed .		<del> </del>			<del>- </del>
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
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					
_	alternative test relied upon					
а	"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-					
	ment return shown in Part X,					
	line 6 for each year listed	<del></del>				
С	"Support" alternative test - enter					
	(1) Total support other than					1
	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 sup- port from an exempt					
	organization (4) Gross investment income					
Pa		v Information (0	Complete this part	only if the founda	tion had \$5,000	or more in as
	at any time du	ring the year - se	e page 28 of the in			
	Information Regarding				<del></del>	
а	List any managers of the before the close of any to					
	<u>ATTACHME</u>	NT 5				·
b	List any managers of the ownership of a partnership of a partnership of a partnership of the control of the con					ly large portion of
	NONE					
	Information Regarding			· <del>-</del>		
	Check here ▶ if the unsolicited requests for	funds If the four	ndation makes gifts, g	rants, etc (see page		
	organizations under other	er conditions, comp	lete items 2a, b, c, and	d		
а	The name, address, and ATTACHMEN	•	of the person to whor	n applications should be	e addressed	
b	The form in which applic	<del></del>	ibmitted and information	on and materials they s	should include	
	ATTACHMEN	NT 7				
С	Any submission deadline	es				-
	NONE				<del> </del>	
	American American and American			shippi prope phonitol	ale fields kinds of	institutions or of
d	Any restrictions or lim factors  ATTACHMEN		s, such as by geogra	ipnical aleas, chantat	ole neido, kindo el	matitudions, or o

Form 990-PF (2009)			36-6059338	Page <b>1</b> 1
Part XV Supplementary Information (c	ontinued)			
3 Grants and Contributions Paid Duri	ng the Year or App		ıture Payment	·
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
<b>a</b> Paid during the year SEE ATTACHED STATEMENT				132,950
SEE ATTACHED STATEMENT				132, 930
		1		
		1		
		1		
			]	
		1		
		1		
		1 1		
		1 1		
		1		
Total	<del>, , , , , , , , , , , , , , , , , , , </del>	<del></del>	▶ 3a	132,950
<b>b</b> Approved for future payment				
		ļ		
	1			
		1		
	<u> </u>	<u> </u>		
Total	<u></u> . <u></u>		<u></u> 3b	

Part	XVI-A Analysis of Income-Produ	cing Activ	/ities			
	ross amounts unless otherwise indicated	Unrela	ated business income	Excluded by	y section 512, 513, or 514	(e) Related or exempt
·		(a)	(b)	(c)	(d)	function income (See page 28 of
1 Pro	gram service revenue	Business code	Amount	Exclusion code	Amount	the instructions )
а				İ		
b						
С						
d						
е						
f						
g	Fees and contracts from government agencies					
2 Mei	mbership dues and assessments					
3 Inte	rest on savings and temporary cash investments			14	4,357.	
4 DIV	idends and interest from securities			14	10,498.	
5 Net	rental income or (loss) from real estate					
а	Debt-financed property					
b	Not debt-financed property	ļ				
6 Net	rental income or (loss) from personal property					
7 Oth	er investment income					
8 Gai	n or (loss) from sales of assets other than inventory			18	37,126.	
9 Net	income or (loss) from special events					
<b>10</b> Gro	oss profit or (loss) from sales of inventory					
11 Oth	ner revenue a					
b						.,
c						
d						
e						<u></u>
	ototal Add columns (b), (d), and (e)				51,981.	F1 001
13 Tot	al. Add line 12, columns (b), (d), and (e)				13	51,981.
(See w	orksheet in line 13 instructions on page 28  XVI-B Relationship of Activities	to verify calc	ulations )			
Line I	the accomplishment of the fo	ity for whi	ch income is reporte exempt purposes (	ed in columi other than I	n (e) of Part XVI-A cor by providing funds for	itributed importantly to such purposes) (See
			<del></del>			
					<del> </del>	
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						·
						······································
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			<del> </del>			

Pa	rt XVII	Information Exempt Orga	Regarding Tran nizations	sfers To and	Transac	tions a	and Relati	onship	s With N	lonc	hari	table
1	Did ti	he organization directly ction 501(c) of the C	y or indirectly enga ode (other than sec	ige in any of the	e following ganizations)	with ar	ny other org ection 527,	anization relating to	described political		Yes	No
а	organı Transi	zations? fers from the reporting for	oundation to a nonchi	arıtable exempt orga	nization of							
	(1) Ca	ash								1a(1)		X
	(2) 0	ther assets								1a(2)		X .
b		transactions										X
		ales of assets to a nonch								l .	1	$\frac{1}{X}$
		urchases of assets from								1b(2) 1b(3)		X
		ental of facilities, equipm eimbursement arrangeme								1b(4)		X
		pans or loan guarantees										Х
		erformance of services of										Х
С		ng of facilities, equipmer								1 c		X
d		answer to any of										
	value	of the goods, other	assets, or services	given by the re	porting fou	ndation	If the found	dation red	eived less	than	faır	market
	value	in any transaction or	sharing arrangeme	ent, show in colu	ımn (d) the	e value	of the good	s, other	assets, or	service	es re	ceived
		(b) A	(a) Name of people	antable avenue erane	.zation	(d) Doss	ription of transf	are transact	one and shar	no arra	naeme	
(a)	Line no	(b) Amount involved	(c) Name or nonch	aritable exempt organ	ization	N/A	inpulon or trains	ers, transact	ions, and snar	ing and	ingeme	1113
		1		<del></del>			<del></del>					
				<del></del>					•			
								-				
								<del></del>				
											-	
							<u></u>		· · · · · · · · · · · · · · · · · · ·	<u>.</u>		
				· · · · · · · · · · · · · · · · · · ·				-,				
	<del></del>							·····			· · ·	
2 a	is the	foundation directly or	indirectly affiliated v	with, or related to	, one or m	ore tax-e	xempt organi	zations de	scribed in			_
	sectio	in 501(c) of the Code (oth	ner than section 501(c	(3)) or in section 5	277				l	Y	es	X No
b	If "Ye	s," complete the following										
	/A	(a) Name of organization	n	(b) Type of org	janization		<del></del>	(c) Descript	on of relations	inip		
	/ A						· · · · ·					
			<del>-</del>									
			· · · · · · · · · · · · · · · · · · ·		· <del></del>							
					-							
	Under belief,	penalties of perjury, I decl	are that I have examine plete Declaration of pre	ed this return, including parer (other than tax	ng accompan payer or fiduo	ying sched	lules and stater sed on all infor	ments, and mation of w	to the best o	fmyk rhasa	nowle	dge and owledge
	\ \	Mun 3Pl			1	6-29	5-11) <b>k</b>	PDE	ころ・ひこ		_	
Φ		ignature of officer or trustee	The state of the s			Date	<u> </u>	Title	1 100	<del>, , ,</del>		
Her		U N	*	0	Date/		Ohari d		Preparer's			
Sign Here	۲- ۲-	Preparer's	1 nO0 1) 1	50.6	6/1	7/10	Check if self-employ	red 🕨 🔙	number (Se page 30 of	he inst	ature of	on s)
Š	Paid Preparer's Use Only	signature	ruce u.	owy all	17 12	710			P00022			
	rep Use	Firm's name (or yours if			, TUE 0::	/ TMP 10	200	EIN ▶	34-1853	929		<u> </u>
		self-employed), address and ZIP code	ONE SOUT CHICAGO,	H WACKER DR IL	IVE, SU		300 606	Dhans s	312-6	02-6	;gnn	
		1 2.10 2.11 0000	CUICAGO,	TT		001		1 Phone no	ארר <sub>א</sub>	U Z - (	, , , , ,	

Form 990-PF (2009)

36-6059338

MOREY & ANNE CHAPMAN FAMILY FOUNDATION
FORM 990-PF - PART IV

Kind of Pi Gross sale price less expenses of sale			Descr	ription		por	Date	Date sold
Gross sale price less expenses of sale	- Daii	Description			lol	acquired		
	Deprectation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
39,246.		1,300 SH PE PROPERTY TY 2,080.		INC		P	VARIOUS 37,166.	12/10/2009
10,000.		10,000 SH P PROPERTY TY 10,040.				Р	11/22/1989 -40.	11/16/2009
OTAL GAIN(LC	oss)						37,126.	
							:	

# ATTACHMENT 1

## INTEREST ON TEMPORARY CASH INVESTMENTS ı PART I FORM 990PF,

NET INVESTMENT INCOME	12,062. -7,705.	4,357.
REVENUE AND EXPENSES PER BOOKS	12,062.	4,357.
		TOTAL
DESCRIPTION	INTEREST INCOME LESS: ACCRUED INTEREST	

36-6059338

ATTACHMENT

### OTHER EXPENSES 1 PART FORM 990PF,

CHARITABLE  PURPOSES  15.	25.
NET INVESTMENT INCOME_ 157.	157.
REVENUE AND EXPENSES PER BOOKS 15.	182.
DESCRIPTION ANNUAL AG 990-IL FILING FEE BANK SERVICE CHARGE SECRETARY OF STATE	TOTALS

- OTHER INVESTMENTS

MOREY & ANNE CHAPMAN FAMILY FOUNDATION

PART II FORM 990PF,

DESCRIPTION

MUTUAL FUNDS

BOOK VALUE ENDING

ATTACHMENT 3

ENDING FMV

92,719.

33,896.

TOTALS

92,719.

33,896.

AND TRU	
DIRECTORS,	
OFFICERS,	
LIST OF O	
VIII -	
PART	

MOREY & ANNE CHAPMAN FAMILY FOUNDATION

TRUSTEES	OIIBS DEB	ITION	
AND	ii G	POS	
FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	TITIE AND AVERACE HOURS DER	WEEK DEVOTED TO POSITION	
OFFICERS,	- I-I-I-I	WEEK	
OF.			
LIST			
١			
VIII			
PART		DRESS	
990PF,		NAME AND ADDRESS	
FORM		NAME	

VICE-PRESIDENT 1.00 ONE S. WACKER DR., STE 1800 CHICAGO, IL 60606 MARILYN CHAPMAN

PRESIDENT/TREASURER/SECRETARY 1.00 ONE S. WACKER DR., STE 1800 MYRON CHAPMAN

ASSISTANT SECRETARY/DIRECTOR ONE S. WACKER DR., STE 1800 CHICAGO, IL 60606 MARILYN CHAPMAN

1.00 DIRECTOR ONE S. WACKER DR., STE 1800 DONNA L. GOLDBERG CHICAGO, IL 60606 CHICAGO, IL 60606

DIRECTOR/ASSISTANT TREASURER ONE S. WACKER DR., STE 1800 SUSAN L. GOLDBERG CHICAGO, IL 60606

GRAND TOTALS

36-6059338

ATTACHMENT

ATTACHMENT

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

MARILYN CHAPMAN MYRON CHAPMAN

#### FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

MYRON CHAPMAN ONE S. WACKER DR., STE 1800 CHICAGO, IL 60606

#### 990PF, PART XV - FORM AND CONTENTS OF SUBMITTED APPLICATIONS

APPLICATIONS SHOULD BE SUBMITTED IN WRITING OR PRINTED FORM PROVIDING PERTINENT INFORMATION REGARDING GOALS, ACTIVITIES AND OBJECTIVES.

#### 990PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

CONTRIBUTIONS ARE MADE ONLY TO QUALIFIED ORGANIZATIONS. AMOUNTS ARE NOT IN EXCESS OF \$100 IN RESPONSE TO UNSOLICITED APPLICATIONS FOR FUNDS.

#### MOREY AND ANNE CHAPMAN FAMILY FOUNDATION FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

	VAL	BOOK \			
CORPORATE STOCKS	METHOD	BEG	END	FMV	
4E CHE AMERICANI ECONI OCY CORD NEW	COST	40	40	ase	
15 SHS AMERICAN ECONLOGY CORP NEW 2800 SHS W W GRAINGER INCORP	COST	116.760	. •	256	
300 SHS MIDAS GROUP INC	COST	483	116,760	271,124	
1300 SHS PEPSI AMERICAS	COST	2,080	483 0	2,535	
500 SHS PEPSI AMERICAS	COST	2,080 800	800	14.630	
500 5H3 PEPSI AMERICAS	COST	800	800	14,630	
	TOTAL	120,163	118,083	288,545	
MOREY AND ANNE CHAPMAN FAMILY FOUNDATION					
FORM 990-PF, PART II, LINE 10C					
INVESTMENTS - CORPORATE BONDS					
	VAL	BOOK \	/ALUE		
CORPORATE BONDS	METHOD	BEG	END _	FMV	
10,000 PENNZOIL COMPANY, 10 125%, 09	COST	10,040	0	0	
100,000 GOLDMAN SACHS GROUP INC GLB 6 6%	COST	0	107,210	108,714	
100,000 MORGAN STANLEY SER MTN GLB 5 625%	COST	0	102,480	105,532	
100,000 PARKER-HANNIFIN CORP 4 875%	COST	0	105,581	104,638	
100,000 GENERAL ELEC CAP CORP SER MTN GLB 5%	COST	0	102,313	105,333	
	TOTAL	10,040	417,584	424,217	
MOREY AND ANNE CHAPMAN FAMILY FOUNDATION FORM 990-PF, PART II, LINE 13					
INVESTMENTS - OTHER	1/41	B00K1	/ALLIE		
MUTUAL FUNDS	VAL	BOOK V		<b>540</b> /	
MUTUAL FUNDS	METHOD	BEG	END	FMV	
3,275 COHEN & STEERS REIT & PFD INCOME FD	COST	97,717	97,717	33,896	
	TOTAL	97,717	97,717	33,896	

97,717 (4,998) 2008 Non-Dividend Distributions 92,719 **TB** 

#### MOREY AND ANNE CHAPMAN FAMILY FOUNDATION FORM 990-PF, PART XV, LINE 3A CHARITABLE CONTRIBUTIONS - YEAR 2009

Chk No	Name	Address	Amount
578	ANSHE EMET SYNAGOGUE	CHICAGO, IL 60613	1,025 00
577	ANSHE EMET SYNAGOGUE	CHICAGO, IL 60613	1,025 00
1093	ANSHE EMET SYNAGOGUE	CHICAGO, IL 60613	1,200 00
576	ANSHE EMET SYNAGOGUE	CHICAGO, IL 60613	100 00
980	ANSHE EMET SYNAGOGUE	CHICAGO, IL 60613	2,650 00
1100	BOCA RATON COMMUNITY HOSPITAL FOUNDATION	745 MEADOWS RD, BOCA RATON, FL 33486	450 00
580	BOCA RATON COMMUNITY HOSPITAL FOUNDATION	745 MEADOWS RD, BOCA RATON, FL 33486	1,000 00
585	JEWISH FEDERATION OF SOUTH PALM BEACH COUNTY	9901 DONNA KLEIN BLVD, BOCA RATON, FL 33428	30,000 00
584	JEWISH FEDERATION OF SOUTH PALM BEACH COUNTY	9901 DONNA KLEIN BLVD, BOCA RATON, FL 33428	5,000 00
586	JEWISH UNITED FUND OF METRO CHICAGO	30 SOUTH WELLS ST, CHICAGO, IL 60606	45,000 00
778	JEWISH UNITED FUND OF METRO CHICAGO	30 SOUTH WELLS ST, CHICAGO, IL 60606	45,000 00
981	WPBT2	P O BOX 610002, MIAMI, FL 33261	500 00
		TOTAL	132,950.00

#### Application for Extension of Time To File an Exempt Organization Return

(1101 ).p 2000)				Exemple Organization Neturn	OMB No 1545-1709			
Department of the internal Revenue S		•		► File a separate application for each return.				
<ul><li>If you are :</li><li>If you are :</li></ul>	filing for a filing for a	n Additional (N	ot A	th Extension, complete only Part I and check this box automatic) 3-Month Extension, complete only Part II (on page 2 of the eady been granted an automatic 3-month extension on a previously file			▶ X	
Part I Auto	matic 3	Month Exten	sior	of Time. Only submit original (no copies needed).				
A corporation	required t	o file Form 990	D-T a	and requesting an automatic 6-month extension - check this box and co	mplete	÷		
Part I only							▶ 📖	
All other corp time to file inc			0-C	filers), partnerships, REMICs, and trusts must use Form 7004 to re	equest	an ex	ktension of	
one of the re electronically returns, or a c	eturns not if (1) you composite	ed below (6 n want the add or consolidate	nont itioni d Fre	n electronically file Form 8868 if you want a 3-month automatic exhs for a corporation required to file Form 990-T). However, you cal (not automatic) 3-month extension or (2) you file Forms 990-BL, om 990-T Instead, you must submit the fully completed and signed ping of this form, visit www irs gov/efile and click on e-file for Chanties &	annot 6069, age 2	file F or 88 (Part	orm 8868 370, group	
Type or	Name of	Exempt Organiza	ation	Employe	r Ident	ificatio	n number	
print	МО	REY & ANNE	CH	APMAN FAMILY FOUNDATION 36-	6059	338		
File by the	Number,	street, and room	n or s	uite no If a P O box, see instructions.				
due date for filing your				R., STE 1800				
retum See Instructions		n or post office, ICAGO, IL		, and ZIP code. For a foreign address, see instructions. 0.6				
Check type o	of return t	o be filed (file a	sep	parate application for each return).				
Form 990	0		$\sqcup$	Form 990-T (corporation) Form 4720				
Form 990			Ш	Form 990-T (sec 401(a) or 408(a) trust) Form 5227				
Form 990				Form 990-T (trust other than above)				
X Form 990	-PF	1	ш	Form 1041-A Form 8870				
		care of ► CB 312 602-68		MHM LLC  FAX No ▶				
<ul> <li>If this is for</li> </ul>	r a Group	Return, enter th	ю <u>ог</u>	ce or place of business in the United States, check this box		 . If th	nis is	
names and Ell	Ns of all n	eck this box . • nembers the ex	<u>dens</u>					
until	rganizatioi	old not not not not not not not not not not	<u>0</u>	(6 months for a corporation required to file Form 990-T, to file the exempt organization return for the organization named a	) exte ibove.	nsion The e	of time xtension is	
		beginning		, and ending				
2 If this tax	year is fo	r less than 12 i	mont	ths, check reason Initial return Final return Change	in ac	countir	ng period	
		is for Form 99 dits See instruc		., 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any s.	За	\$	518.	
b If this ap	plication i	s for Form 990	-PF	or 990-T, enter any refundable credits and estimated tax payments				
				nent allowed as a credit	3 b	\$	1,167.	
				ne 3a. Include your payment with this form, or, if required, deposit	6			
		or, if require	ed, I	by using EFTPS (Electronic Federal Tax Payment System) See				
instructio					3с	\$	<del></del>	
•		to make an el	ectro	onic fund withdrawal with this Form 8868, see Form 8453-EO and For	n 8879	}-EO		
for navment in	etructions							

CBIZ MHM, LLC One S. Wacker Dr., Suite 1800 Chicago, Illinois 60606-4630

Form 8868 (Rev 4-2009)

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