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Form **990-PF**

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

OMB No 1545-0052

2009

Department of the Treasury Internal Revenue Service

Note The foundation may be able to use a copy of this return to satisfy state reporting requirements

For c	alen	dar	year 2009, or	ta	x year beginni	ng		, 2009	, and ending			1	
G C	heck	all	that apply	Γ	Initial return	Init	ial Return o	f a former p	ublic charity			Fin	al return
				Γ	Amended ret	urn		Address	hange [Na	me (change	
Use	the	Т							_		A	Employer identification nui	mber
	label				SYSTEMS							91-1987306	
	rwise int				FOUNDATIO						В	Telephone number (see the	•
or t	ype	1 7	AURORA, I	AI T	NGE AVENUI	5					<u>_</u>	(630) 851-45	
See S Instru		~	dictor, I	ш	00304						C	If exemption application is	· · · ·
		ᆫ			ाया ०		1.1.10		····		ļÞ	1 Foreign organizations, che	
Н			ype of organiz					npt private f				2 Foreign organizations mee here and attach computation	
-			et value of all ass		nonexempt cha	Ti Asi	rust Oti	thod: X C	orivate founda	crual	E	If private foundation status	s was terminated
ı			et value of all ass t II, column (c), II] AC	Other (specify		asii Mcc	Juai	l_	under section 507(b)(1)(A)	
•	\$,		,	Part			cash basis)	-	F	If the foundation is in a 60 under section 507(b)(1)(B)	
Part		Ar	nalysis of R	e e	venue and	T (i air i					٠	1	
	•				total of amoun	ts ın		enue and per books	(b) Net inve incon		ent	(c) Adjusted net income	(d) Disbursements for charitable
		col	ľumns (b), (c),	a	าd (d) may not	neces-	CAPCILLOS	po. 000					purposes
			rily equal the a ee the instructi		ounts in colum is))	ın (a)							(cash basis only)
	T	1			rants, etc. received	(att sch)		7,000.					
	-				undn is not req to a								
		3	Interest on sa	IVI	ngs and tempo	rary							
=	-	4	cash investme		is est from securities						_	DEOFILIED	1-1
5	ł		Gross rents	LOIL	st from securities							KECLIVED -	
7		b	Net rental income or (loss)							2	ກຼີ		ပ္က
ع دح		6a		m s	sale of assets not o	n line 10				č	2	111N w 1 2010	\$
≈ Ë		b	Gross sales price assets on line 6a	for	all					ĭ	-	0011 0 1 2010	Ś
			Capital gain net in		me (from Part IV, II	ne 2)		_			<u> </u>	A DE LIBE	<u> </u>
≓ N			Net short-tern		•				-		(JGDEN. U L	
Ė	١,		Income modif	ica I	ations			<u> </u>					
SCANNED		ua	Gross sales less returns and allowances										
Ī		b	Less Cost of goods sold	Ī									
2		c	Gross profit/(los:	ւ Տ) (att sch)								
₹.	1				ttach schedule	·).							
												<u></u>	
<u> </u>			Total. Add lin					7,000.			0.	0.	
	1		•		ers, directors, trus	tees, etc.		0.					
	- 1		Other employee s		•	4.4-							<u> </u>
			Legal fees (attach		employee bene bodulo)	:1115							
í	2		Accounting fees (· · · · · · · · · · · · · · · · · · ·	
	ĭ		Other prof fees (a										
o '	<u> </u>		Interest		011 0011)								
O P E R A	>	_	Taxes (attach schedule	Χse	e instr)		_						
	ا ۵		Depreciation										
	[],		sch) and depl	eti	on								
	- 1		Occupancy Travel confer	en	ces, and meet	ınas							
A I			Printing and p			iiiga							
N :	Š 2		•		(attach schedu	e)اد							
	E						<u> </u>						
	2	24	Total operation	ng	and administr	ative							
!	1.) E	Contributions of	iCI te	lines 13 throug grants paid STM	m 23 m 1		7,000.					7,000.
					and disburser		 	1,000.					7,000.
	1		Add lines 24			nents.		7,000.			0.	0.	7,000.
	7	?7	Subtract line	26	from line 12:								
		a	Excess of revand disburse	/er	ue over exper	ises		0.					
		h				ar -O.		0.			0.		
					ne (if negative, ento (if negative, enter		-				<u></u>	0.	
BAA	For			_	nerwork Redu		t Notice se	e the instru	ctions		TEE	A0504L 02/02/10	Form 990-PF (2009)

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		Attached schedules and amounts in the description	Beginning of year	End o	f year
Part		Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	` 1	Cash - non-interest-bearing	216.	216.	
	2	Savings and temporary cash investments			
	3	Accounts receivable		•	
		Less allowance for doubtful accounts			
	4	Pledges receivable			
	ļ	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)			
A		Less allowance for doubtful accounts			
A S S E T	8	Inventories for sale or use			
Ę	9	Prepaid expenses and deferred charges			
s	10 a	Investments – U.S. and state government obligations (attach schedule)			
	l t	nvestments — corporate stock (attach schedule)			
	l	: Investments — corporate bonds (attach schedule)		-	
	11	Investments – land, buildings, and		<u></u>	
	''	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)			
		Other assets (describe ►)		<u></u>	
	16	Total assets (to be completed by all filers — see instructions. Also, see page 1, item I).	216.	216.	0.
L	17	Accounts payable and accrued expenses			
À	18	Grants payable	***		
В	19	Deferred revenue			
Ĺ	20	Loans from officers, directors, trustees, & other disqualified persons			
T T	21	Mortgages and other notes payable (attach schedule)			
ı	22	Other liabilities (describe			
E S	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.			
Ŋ F.	24	Unrestricted			
N F E U T N	25	Temporarily restricted			
ח	26	Permanently restricted			
A B A L A N		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
EL	27	Capital stock, trust principal, or current funds	216.	216.	
ŚÑ	28	Paid-in or capital surplus, or land, building, and equipment fund	-		
L	29	Retained earnings, accumulated income, endowment, or other funds			
O E R S	30	Total net assets or fund balances (see the instructions)	216.	216.	
	31	Total liabilities and net assets/fund balances (see the instructions)	216.	216.	
Part		Analysis of Changes in Net Assets or Fund Balance	es		
1	Total end-	net assets or fund balances at beginning of year - Part II, colunt of-year figure reported on prior year's return)	nn (a), line 30 (must ag	ree with	216.
		r amount from Part I, line 27a		2	0.
		increases not included in line 2 (itemize)		3	
		lines 1, 2, and 3		4	216.
		ases 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), Iir	ne 30 6	216.

. (a)	List and describ	e the kind(s) of property sold (e.g., ise, or common stock, 200 shares MI	real estate,	(b) How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a N/A		·		D - Donation	 	
b						
c			······································			<u>-</u>
d	-					
е						
(e) Gross sa	les price	(f) Depreciation allowed (or allowable)	(g) Cost or other base plus expense of sa		(h) Gain or (e) plus (f) m	
a						
b						
c						
d						
<u>e</u>		<u> </u>				
	•	ing gain in column (h) and owned by	(k) Excess of column		l) Gains (Colu) ain minus column (F	
(i) Fair Mark as of 12/3		(j) Adjusted basis as of 12/31/69	over column (j), if a		an -0) or Losses (fr	
a						
<u>b</u>						
<u>c</u>						
d					· · · · · ·	
e 2 Capital gain ne	t income or (ne	i capital loss) - If gain, also	o enter in Part I, line 7 Iter -0- in Part I, line 7			,
3 Net short-term	capital gain or (loss) as defined in sections 1222(5)	_	2		
If gain, also en in Part I, line 8		e 8, column (c) (see the instructions)) If (loss), enter -0-	3		
Part V Qualifi	cation Under	r Section 4940(e) for Reduce	d Tax on Net Investme	ent Income		
(For optional use by	domestic private	e foundations subject to the section of	4940(a) tax on net investme	nt income)	N/A	
	able for the sec	nis part blank tion 4942 tax on the distributable an ify under section 4940(e) Do not co	• •	e period?	Yes	☐ No
1 Enter the appro	opriate amount i	n each column for each year, see th	e instructions before making	any entries		
(a) Base period Calendar year (beginnin	or tax year	(b) Adjusted qualifying distributions	(c) Net value of noncharitable use ass	sets (col	(d) Distribution umn (b) divided	
2008						
2007						
2006						
2005						
2004		<u> </u>	· . · · · · ·		···	
2 Total of line 1,	column (d)			2		
3 Average distrib number of year	ution ratio for the s the foundation	e 5-year base period – divide the to has been in existence if less than 5	otal on line 2 by 5, or by the 5 years	3		
4 Enter the net v	alue of nonchari	table-use assets for 2009 from Part	X, line 5	4		
5 Multiply line 4	by line 3			5		
6 Enter 1% of ne	t investment inc	ome (1% of Part I, line 27b)		6		
7 Add lines 5 and	d 6			7		
8 Enter qualifying	g distributions fro	om Part XII, line 4		. 8		
If line 8 is equal Part VI instruct		nan line 7, check the box in Part VI,	line 1b, and complete that p	part using a 1%	tax rate See th	e
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Par	t VI . Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see the instruc	tions)	
	Date of ruling or determination letter (attach copy of letter if necessary - see instr.) Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 'N/A' on line 1 (attach copy of letter if necessary - see instr.)		0.
	: 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-)		0.
3	Add lines 1 and 2		0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		0.
6	Credits/Payments		
	2009 estimated tax pmts and 2008 overpayment credited to 2009		
	Exempt foreign organizations – tax withheld at source		
	: Tax paid with application for extension of time to file (Form 8868)		
	Backup withholding erroneously withheld		0
_	Total credits and payments Add lines 6a through 6d		0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		0.
9	Tax date in the total of this ordinary, sites and the site		<u> </u>
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2010 estimated tax Refunded Refunded 11		
Par	t 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?	1a	Х
ŀ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1 b	Х
	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		
C	Did the foundation file Form 1120-POL for this year? I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$ 0. (2) On foundation managers \$ 0. Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	1c	X
	foundation managers $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If 'Yes,' attach a detailed description of the activities.	2	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? If 'Yes,' attach a conformed copy of the changes	3	X_
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X_
t	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	4b	N/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	X
_	If 'Yes,' attach the statement required by General Instruction T		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	x
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	$\frac{x}{x}$
	Enter the states to which the foundation reports or with which it is registered (see the instructions)		- :-
-	N/A		
۲	o 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	8ь	N/A
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	9	x
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10	X

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Part VII-A. Statements Regarding Activities Continued		
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	Х
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 ► N/A		
14 The books are in care of ► MARY LYNN HOFFER Telephone no ► (630)	<u>851</u>	- <u>4</u> 566
Located at > 23019 JOYCE LANE NAPERVILLE IL ZIP + 4 > 60564		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 − Check here and enter the amount of tax-exempt interest received or accrued during the year 15 15	N/A	N/A
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required		, 2.
File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes No
1 a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes $[X]$ No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No		
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) Yes X No		
b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)?	1 b	N/A
Organizations relying on a current notice regarding disaster assistance check here		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1 c	х
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?		
If 'Yes,' list the years ► 20 , 20 , 20 , 20		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	2 b	N/A
 all years listed, answer 'No' and attach statement — see the instructions) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 	20	- MA
► 20 , 20 , 20 , 20		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No		
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)	3b	N/A
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	Х
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?	4b	х
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Part VII-B Statements Regarding Activit		<u>n 4720 May Be Rec</u>	uired (continued)	·····	
5a During the year did the foundation pay or incu (1) Carry on propaganda, or otherwise attempt	-	n (section 4945(e))?	☐ Yes X	No	
(2) Influence the outcome of any specific pub	lic election (see section	, , , , , , , , , , , , , , , , , , , ,		,	
on, directly or indirectly, any voter registra(3) Provide a grant to an individual for travel,		purposes?	Yes X	No No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, or 4940(d)(2) ² (see instru	ganızatıon described uctions)	Yes X	No	
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	; literary, or or animals?	Yes X] No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to one a current notice regard	qualify under the except ding disaster assistance	ions	5b	N/A
Organizations relying on a current notice rega	rding disaster assistanc	ce check here	▶ [] [
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure responsible 'Yes,' attach the statement required by Region 1.	sibility for the grant?	•	N/A Yes] No	
6a Did the foundation, during the year, receive ar	ny funds, directly or indi	rectly, to pay premiums	□vac [V	No	
on a personal benefit contract? b Did the foundation, during the year, pay premi	ums, directly or indirect	tly, on a personal benef		6b	X
If 'Yes' to 6b, file Form 8870	lation a portir to a probi	bited toy aboltor transpo	ction? Yes X]No	
7a At any time during the tax year, was the found b If yes, did the foundation receive any proceeds				7b	N/A
Part VIII Information About Officers, D				1	
and Contractors	·	, 			
1 List all officers, directors, trustees, foundation				T <u>-</u>	
(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 other allo	e account, wances
DEBBIE BOYD	PRESIDENT	0.	0.		0.
3851 EXCHANGE AVENUE AURORA, IL 60504	0				
MARY LYNN HOFFER	DIRECTOR	0.	0.		0.
23019 JOYCE LANE	0				
NAPERVILLE, IL 60564					
MARK KROENCKE	DIRECTOR	0.	0.		0.
1021 RESERVE DRIVE	1 0				
ELGIN, IL 60124					
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1– see in	structions). If none, en	ter '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 other allo	account, wances
NONE					
					
Total number of other employees paid over \$50,000			>	1	0
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Part VIII · Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Employees,
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 recovered over \$50,000 for professional convices	0
Total number of others receiving over \$50,000 for professional services	-1 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 <u>N/A</u>	-
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 <u>N/A</u>	-
2	
	-
All other program-related investments. See instructions	-
	-
Total. Add lines 1 through 3	0.
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Part	Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	oreign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes Average monthly fair market value of securities	1 a	
	Average of monthly cash balances	1 b	216.
	Fair market value of all other assets (see instructions)	1 c	
	Total (add lines 1a, b, and c)	1 d	216.
	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
·	(attach detailed explanation).		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
	Subtract line 2 from line 1d	3	216.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	3.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	213.
6	Minimum investment return. Enter 5% of line 5	6	11.
Parl	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper and certain foreign organizations check here ► ☐ and do not complete this pa	ating f	oundations
1	Minimum investment return from Part X, line 6	1	11.
	Tax on investment income for 2009 from Part VI, line 5		***
	Income tax for 2009 (This does not include the tax from Part VI) 2b	i	
	Add lines 2a and 2b	2 c	
	Distributable amount before adjustments. Subtract line 2c from line 1	3	11.
	Recoveries of amounts treated as qualifying distributions	4	11.
	Add lines 3 and 4	5	11.
	Deduction from distributable amount (see instructions)	6	
	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	11.
		<u> </u>	
Part	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes	1 a	7,000.
	Expenses, contributions, gifts, etc – total from Part I, column (d), line 26 Program-related investments – total from Part IX-B	1 b	7,000.
	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
		-	
3 a	Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	7,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	
	Adjusted qualifying distributions. Subtract line 5 from line 4	6	7,000.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth qualifies for the section 4940(e) reduction of tax in those years	er the fo	oundation

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Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 line 7	from Part XI,				11.
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, t	o 2009				
a From 2004	6,000.				
b From 2005	7,414.				
c From 2006	6,917.				
d From 2007	5,411.				
e From 2008	4,489.				
f Total of lines 3a through e	_	30,231.			
4 Qualifying distributions for 200					
XII, line 4 P\$	7,000.			_	
a Applied to 2008, but not more	than line 2a			0.	
 Applied to undistributed incom (Election required - see instru 	e of prior years	-	0.		
 Treated as distributions out of (Election required — see instru 		0.			
d Applied to 2009 distributable a	mount				11.
e Remaining amount distributed	out of corpus	6,989.			
5 Excess distributions carryover applied (If an amount appears in colur same amount must be shown	nn (d), the	0.			0.
6 Enter the net total of each colindicated below:	umn as				
a Corpus Add lines 3f, 4c, and 4e Subtr	act line 5	37,220.			
b Prior years' undistributed incor line 4b from line 2b	me Subtract		0.		
c Enter the amount of prior year ed income for which a notice of has been issued, or on which the 4942(a) tax has been previous	of deficiency The section		0.		
d Subtract line 6c from line 6b amount — see instructions.	Taxable		0.		
e Undistributed income for 2008 Subtra line 2a Taxable amount — see instruc	ct line 4a from tions			0.	
f Undistributed income for 2009 4d and 5 from line 1 This amo distributed in 2010					0.
7 Amounts treated as distribution corpus to satisfy requirements by section 170(b)(1)(F) or 4942 (see instructions)	ımposed	0.			
8 Excess distributions carryover applied on line 5 or line 7 (see	from 2004 not instructions)	6,000.			
9 Excess distributions carryove Subtract lines 7 and 8 from lin	r to 2010. e 6a	31,220.			
10 Analysis of line 9					
a Excess from 2005	7,414.				
b Excess from 2006	6,917.				
c Excess from 2007	5,411.				
d Excess from 2008	4,489.				
e Excess from 2009	6,989.				
BAA					Form 990-PF (2009)

Form 990-PF (2009) ENGINEERING SYSTI		ID. I	V/II A 1	91-198730	
Part XIV Private Operating Foundation					N/A
1a If the foundation has received a ruling or d is effective for 2009, enter the date of the r	uling			_	4042()(5)
b Check box to indicate whether the foundati		rating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year (a) 2009	(b) 2008	Prior 3 years (c) 2007	(d) 2006	(e) Total
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	 				
 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)(j)					
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			<u> </u>	1.05.000	
Part XV Supplementary Information assets at any time during the	(Complete this e vear – see in	part only if the	organization n	ad \$5,000 or mo	re in N/A
1 Information Regarding Foundation Manag					
a List any managers of the foundation who he close of any tax year (but only if they have	ave contributed mo contributed more t	re than 2% of the to han \$5,000) (See s	otal contributions re section 507(d)(2))	ceived by the founda	ation before the
b List any managers of the foundation who o a partnership or other entity) of which the f				lly large portion of th	ne ownership of
2 Information Regarding Contribution, Gran Check here In the foundation only morequests for funds. If the foundation makes complete items 2a, b, c, and d	akes contributions gifts, grants, etc,	to preselected char (see instructions) to	itable organizations individuals or orga	nizations under othe	
a The name, address, and telephone number	of the person to w	hom applications sl	hould be addressed		
b The form in which applications should be s	ubmitted and inform	nation and material	s they should includ	de [.]	
c Any submission deadlines.					
d Any restrictions or limitations on awards, s	uch as by geograph	nical areas, charitab	ole fields, kinds of in	nstitutions, or other f	actors [.]
RAA	TC	EA02101 07/06/09			orm 990-PF (2009)

3 Grants and Contributions Paid During the Ye	ar or Approved for Futu	re Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
Name and address (home or business) a Paid during the year	substantial contributor	recipient		
	<u> </u>			
Total		·	► 3a	
b Approved for future payment Total			▶ 3b	

Page 12

Part XVI-A Analysis of Income-Producing Activities

		1		1		T
Enter o	gross amounts unless otherwise indicated	· · · · · ·	d business income	1 1	by section 512, 513, or 514	
•		(a) Business code	(b) Amount	(c) Exclu sion	(d) Amount	(e) Related or exempt function income
1 F	Program service revenue			code		(see the instructions)
			··-		= 15	
b _				 		
ď_				 		
е_						
f_		-		│		
	ees and contracts from government agencies	ļ		 		
	Membership dues and assessments	}				-
	nterest on savings and temporary cash investments			1 -		
	Dividends and interest from securities			 		
	let rental income or (loss) from real estate					
	Debt-financed property	-		 		
	lot debt-financed property			 		
	let rental income or (loss) from personal property	1		+	·-	
	Other investment income	ļ		+ +		
	am or (loss) from sales of assets other than inventory			+	- ·	
	let income or (loss) from special events					
	Gross profit or (loss) from sales of inventory					
	Other revenue	ļ		 -		
				+		
			 	 		
d_				+ +		
e	2	-		+		
12 3	Subtotal Add columns (b), (d), and (e)	LL				l <u></u>
12 7	'atal Add line 10 columns (b) (d) and (e)				12	Λ
	otal. Add line 12, columns (b), (d), and (e)	lculations \			13	0.
See w	orksheet in the instructions for line 13 to verify ca		and a second			0.
See w			shment of Exemp	ot Purpos		0.
See w	CVI-B Relationship of Activities to the	Accomplis	<u> </u>		ses	
See w	KVI-B Relationship of Activities to the	Accomplis	<u> </u>		ses	
See w Part X	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	
See we have a see which a see we have a see which a see which a see we have a see which a see we have a see which	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	
See we have a see which a see we have a see which a see which a see we have a see which a see we have a see which	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	
See we have a see which a see we have a see which a see which a see we have a see which a see we have a see which	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	
See we have a see which a see we have a see which a see which a see we have a see which a see whill a see which a	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	
See we have a see which a see we have a see which a see which a see we have a see which a see whill a see which a	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	
See we have a see which a see we have a see which a see which a see we have a see which a see whill a see which a	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	
See we have a see which a see we have a see which a see which a see we have a see which a see whill a see which a	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	
See we have a see which a see we have a see which a see which a see we have a see which a see whill a see which a	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	
See we have a see which a see we have a see which a see which a see we have a see which a see whill a see which a	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	
See we have a see which a see we have a see which a see which a see we have a see which a see whill a see which a	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	
See we have a see which a see we have a see which a see which a see we have a see which a see whill a see which a	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	
See we have a see which a see we have a see which a see which a see we have a see which a see whill a see which a	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	
See we have a see which a see we have a see which a see which a see we have a see which a see whill a see which a	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	
See we have a see which a see we have a see which a see which a see we have a see which a see whill a see which a	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	
See we have a see which a see we have a see which a see which a see we have a see which a see whill a see which a	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	
See we have a see which a see we have a see which a see which a see we have a see which a see whill a see which a	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	
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See we have a see which a see we have a see which a see which a see we have a see which a see whill a see which a	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	
See we have a see which a see we have a see which a see which a see we have a see which a see whill a see which a	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	
See w Part 2 Line	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	
See we have a see which a see we have a see which a see which a see we have a see which a see whill a see which a	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	
See w Part 2 Line	KVI-B Relationship of Activities to the No. Explain below how each activity for which in- accomplishment of the foundation's exempt	Accomplis	<u> </u>		ses	

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

								Yes	No
	ne organization directly ribed in section 501(c) on ng to political organizat	of the Code (o							
	sfers from the reporting		a noncharitable ex	kempt organizat	ion of				
(1) Cash									Х
(2) Other assets							1 a (2)		X
b Other	r transactions								
(1) Sales of assets to a noncharitable exempt organization							1 b (1)		X
(2) Purchases of assets from a noncharitable exempt organization							1 b (2)		X
(3) R	Rental of facilities, equip	oment, or othe	er assets				1 b (3)		X
(4) R	Reimbursement arrangei	ments					1 b (4)		X
(5) L	oans or loan guarantee	S.					1 b (5)		X
` '	erformance of services		, -				1 b (6)		<u>X</u>
c Shari	ng of facilities, equipme	ent, mailing lis	sts, other assets, o	r paid employee	es		1 c		<u>X</u>
the a	answer to any of the a oods, other assets, or s ransaction or sharing ai	services given	by the reporting fo	undation If the	foundation received	less than fair ma	irket value in	of	
a) Line no	(b) Amount involved	_	of noncharitable exempt	ı	(d) Description of tr		•	gements	_
/A									
		 	.						
		 			· · · · · · · · · · · · · · · · · · ·				
		<u> </u>							—
		 							
		-	· · · · · · · · · · · · · · · · · · ·		··-··				—
		 							—
			· · · · · ·						
	-	 							
		1	-						
					•				
· · · · · · · · · · · · · · · · · · ·									
			ated with or relate	d to, one or mo	re tax-exempt organi	zations	∏Yes	(T.)	_
descr	foundation directly or in the state of the section 501(c) on the section 501(c) on the section follows:	of the Code (of	ther than section 5	01(c)(3)) or in s	section 527?		□ 169	ΧN	O
descr	foundation directly or in the foundation directly or in the following the following (a) Name of organizations	of the Code (of ng schedule	ther than section 50	01(c)(3)) or in s of organization		(c) Description of		<u> </u>	
descri b If 'Yes	ibed in section 501(c) o s,' complete the following	of the Code (of ng schedule	ther than section 50	01(c)(3)) or in s		(c) Description of		<u> </u>	
descri b If 'Yes	ibed in section 501(c) o s,' complete the following	of the Code (of ng schedule	ther than section 50	01(c)(3)) or in s		(c) Description of		XN	
descri b If 'Yes	ibed in section 501(c) o s,' complete the following	of the Code (of ng schedule	ther than section 50	01(c)(3)) or in s		(c) Description o		IX N	
descri b If 'Yes	ibed in section 501(c) o s,' complete the following	of the Code (of ng schedule	ther than section 50	01(c)(3)) or in s		(c) Description of		[X]N	
describility (A)	ibed in section 501(c) of s,' complete the following (a) Name of organization	of the Code (of ng schedule on	(b) Type o	01(c)(3)) or in s			f relationship		
describility of the second of	ibed in section 501(c) o s,' complete the following	on I have examined th	(b) Type of the control of the contr	of organization	and statements, and to the		f relationship		
describility of the second of	ibed in section 501(c) of s,' complete the following (a) Name of organization of perjury, I declare that I Declaration of preparer (other the section other the section other the section other (other the section other the section other the section other the section other (other the section other (other the section other the section other the section other the section other (other the section other the section other the section other the section other (on I have examined th	(b) Type of the control of the contr	of organization	and statements, and to the preparer has any knowledge	best of my knowledge ► Poesid	f relationship	, correct,	and
describility of the second of	ibed in section 501(c) of s,' complete the following (a) Name of organization of the following (b) Name of organization of perjury, I declare that I	on I have examined th	(b) Type of the control of the contr	of organization	and statements, and to the preparer has any knowledge	best of my knowledge	f relationship and belief, it is true	, correct.	and A
describility of the second of	ibed in section 501(c) of s,' complete the following (a) Name of organization of perjury, I declare that I Declaration of preparer (other the later of officer or trustee	on I have examined th	(b) Type of the control of the contr	of organization	and statements, and to the preparer has any knowledge 5/25/10 Date Date	best of my knowledge Poesid Title Check if	f relationship and belief, it is true ent - ESI Preparer's Identifyin (See Signature in the	, correct,	and
describility of the second of	ibed in section 501(c) of s,' complete the following (a) Name of organization of perjury, I declare that I Declaration of preparer (other than the complete of officer or trustee of officer or truste	I have examined the han laxpayer or fice	(b) Type of the return, including accorduciary) is based on all in	of organization of organization	and statements, and to the preparer has any knowledge 5/25/10 Date Date 5/20/10	best of my knowledge Poesid Title Check if self-employed	and belief, it is true ent - ESI Preparer's Identifyin (See Signature in II) P00228190	, correct,	and
describility of the second of	alties of perjury. I declare that I Declaration of preparer (other tiggrand) Preparer's signature DIGIO	I have examined the han taxpayer or fice	(b) Type of the return, including accorductary) is based on all in the control of	of organization of organization mpanying schedules itermation of which p	and statements, and to the preparer has any knowledge 5/25/10 Date Date	best of my knowledge Poesid Title Check if self-employed	f relationship and belief, it is true ent - ESI Preparer's Identifyin (See Signature in the	, correct,	and
describility of the second of	ibed in section 501(c) of s,' complete the following (a) Name of organization of preparer (other the beclaration of preparer (other the signature) Preparer's signature	I have examined the han taxpayer or fice OVINE HNI SHUMAN BI	(b) Type of the return, including accorductary) is based on all in the LO JORDAN +	of organization of organization mpanying schedules itermation of which p	and statements, and to the preparer has any knowledge 5/25/10 Date Date 5/20/10	best of my knowledge Poesio Title Check if self-employed Poesion EIN > 36-	and belief, it is true ent - ESI Preparer's Identifyin (See Signature in II) P00228190	, correct.	and

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF

OMB No 1545 0047

2009

Name of the organization ENGINEERING SYSTE	Employer identification number					
CHARITABLE FOUNDA'		91-1987306				
Organization type (check one)						
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated a 527 political organization	as a private foundation				
Form 990-PF	X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation					
Check if your organization is covered by the Gei Note: Only a section 501(c)(7), (8), or (10) orga	neral Rule or a Special Rule nization can check boxes for both the General Rule and	l a Special Rule See instructions				
General Rule — X For an organization filing Form 990, 990-EZ, contributor (Complete Parts I and II)	or 990-PF that received, during the year, \$5,000 or mo	ore (in money or property) from any one				
Special Rules –						
509(a)(1)/170(b)(1)(A)(vi) and received from	orm 990 or 990-EZ, that met the 33-1/3% support test of any one contributor, during the year, a contribution of the (ii) Form 990-EZ, line 1 Complete Parts I and II	f the regulations under sections the greater of (1) \$5,000 or (2) 2% of the				
For a section 501(c)(7), (8), or (10) organiza aggregate contributions of more than \$1,000 prevention of cruelty to children or animals	ation filing Form 990 or 990-EZ, that received from any of for use exclusively for religious, charitable, scientific, I Complete Parts I, II, and III	one contributor, during the year, iterary, or educational purposes, or the				
contributions for use exclusively for religious this box is checked, enter here the total cont	ition filing Form 990 or 990-EZ, that received from any or to charitable, etc., purposes, but these contributions did retributions that were received during the year for an <i>excl</i> inless the General Rule applies to this organization because.	not aggregate to more than \$1,000 If lusively religious, charitable, etc.				
religious, charitable, etc, contributions of \$5,	,000 or more during the year.	> \$				
990 PF) but it must answer 'No' on Part IV. line	the General Rule and/or the Special Rules does not file 2 of their Form 990, or check the box on line H of its For requirements of Schedule B (Form 990, 990-EZ, or 990	orm 990 EZ, or on line 2 of its Form				
BAA For Privacy Act and Paperwork Reductio for Form 990, 990EZ, or 990-PF.	n Act Notice, see the Instructions Scho	edule B (Form 990, 990-EZ, or 990-PF) (2009				

	B (Form 990, 990-EZ, or 990-PF) (2009)	Page 1	of 1 of Part I
Name of org	987306		
Part I	Contributors (see instructions)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ENGINEERING SYSTEMS, INC. 3851 EXCHANGE AVENUE AURORA, IL 60504	\$7 <u>,000</u> .	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
RΔΔ	TEF 407021 06/23/09	Schedule B (Form 990	990-FZ or 990-PF) (2009)

	B (FOITH 990, 990-E2, 01 990-FF) (2009)		age 1		1 Ortaiti
Name of orga ENGINE	nization ERING SYSTEMS INC.		Employer identification number 91-1987306		
Part II	Noncash Property (see instructions)			<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	F (s	(c MV (or e see instr) stimate) uctions)	(d) Date received
	N/A		·		
		\$			
(a) No. from Part I	(b) Description of noncash property given	F (9	(c MV (or e see instr) stimate) uctions)	(d) Date received
		- - \$			
		1			
(a) No. from Part I	(b) Description of noncash property given	F (s	(c MV (or e see instr) stimate) uctions)	(d) Date received
		\$			
(a) No. from Part I	(b) Description of noncash property given	FI (s	(c MV (or e ee instr) stimate) uctions)	(d) Date received
		- \$			
(a) No. from Part I	(b) Description of noncash property given	FI (s	(c MV (or e ee instr) stimate) uctions)	(d) Date received
•		-			
] \$			
		1			
(a) No. from Part I	(b) Description of noncash property given	FI (s	(c) MV (or e ee instr) stimate) uctions)	(d) Date received
		_			
		\$			

BAA

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

(e)
Transfer of gift
Transferee's name, address, and ZIP + 4
Relationship of transferor to transferee

(Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury

Internal Revenue	Service		File a sepa	rate application for	each return.						
If you are	filing for an A	Automatic 3-Month	Extension, comp	lete only Part I and	check this box				► X		
If you are	filing for an	Additional (Not Auto	matic) 3-Month	Extension, complete	only Part II (on	page 2 of this	form)				
Do not comp	olete Part II un	less you have alread	dy been granted	an automatic 3-mont	th extension on a	previously fi	led Forr	n 8868			
Part I	Automatic :	3-Month Extens	ion of Time.	Only submit origi	nal (no copie	s needed).	-				
				, 3	` '	•					
A corporation	required to fi	le Form 990-T and i	equesting an au	tomatic 6-month exte	ension – check th	nis box and c	omplete	Part I only	▶ 🗍		
=				EMICS, and trusts m					e to file		
income tax re		daning 1120 0 morey,	, pa								
returns noted the additional Form 990-T	l below (6 mor l (not automat Instead, vou r	nths for a corporation () 3 month extension	n required to file on or (2) you file completed and	form 8868 if you wan Form 990-T) Howey Forms 990-BL, 6069 signed page 2 (Part & Nonprofits	ver, you cannot fi), or 8870, group	le Form 8868 returns, or a	electro compos	inically if (1) site or conso	you want olidated		
	Name of Exempt	Organization					Employer identification number				
Type or	ENGINEER	ING SYSTEMS	INC.								
print	CHARITAB	LE FOUNDATIO	N		<u> </u>	_	91-1987306				
File by the due date for	Number, street, a	and room or suite number	If a P O box, see inst	tructions							
filing your return See		HANGE AVENUE									
instructions		t office, state, and ZIP cod	le For a foreign addre	ss, see instructions							
	AURORA,										
Check type o	of return to be	filed (file a separate	e application for	each return):							
Form 990)		Form 990-T (c	•		Form 47	= -				
Form 990)-BL	L	⊣	ection 401(a) or 408(Form 52					
Form 990		<u> </u> _	-	ust other than above)	Form 600					
X Form 990)-PF		Form 1041-A			Form 88	70				
If the orga If this is for check this the extension I reques until The ext X X	anization does for a Group Re s box	eturn, enter the orgal If it is for part of the control of the control of the control of the organization's record of the organization's record of the control of the control of the organization's record of the control of the organization of the control of the c	nization's four dine group, check is for a corporation the exempt organizer for a corporation for a co	FAX No P ness in the United Stagit Group Exemption this box P and on required to file Fo nization return for the and ending	Number (GEN) attach a list with rm 990-T) extens	the names a	ind EIN:	for the whole s of all mem	bers		
	 	· · · · · · · · · · · · · · · · · · ·		<u> </u>			1 1				
nonrefu	indable credits	See instructions		0, or 6069, enter the			3a	\$	0.		
		or Form 990-PF or 9 ior year overpaymen		refundable credits ar redit	nd estimated tax	payments ——–	3ь	\$	0.		
deposit See ins	with FTD cou tructions	pon or, if required, t	by using EFTPS	payment with this for (Electronic Federal T	ax Payment Syst	em)	3c		0.		
payment insti	ructions			I with this Form 8868	3, see Form 8453	·EO and Forr			- 		
BAA For Priv	vacy Act and	Paperwork Reduction	on Act Notice, se	ee instructions.			f	Form 8868 (F	Rev 4-2009)		

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FEDERAL STATEMENTS

ENGINEERING SYSTEMS INC. CHARITABLE FOUNDATION

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STATEMENT 1 FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS

CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: INDIVIDUAL

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: INDIVIDUAL

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

AMOUNT GIVEN:

SCHOLARSHIP

EMILY C. HAGAN

4409 WOODGLEN DR.

GAINSEVILLE, GA 30507

INDIVIDUAL

SCHOLARSHIP SHELBY GRZETIC

2524 AYLESBUR. _ DARIEN, IL 60561 2524 AYLESBURY LN

INDIVIDUAL

SCHOLARSHIP

JOHN SLANE

1219 NORTH 31ST ST. COLORADO SPRINGS, CO 80904

SCHOLARSHIP

ERIKA NICHOLE VANBREE

8375 VAYLES RD GREENVILLE, IN 47124

SCHOLARSHIP

KATHERINE KLEPACKI

548 SILVERTON CT.

COLORADO SPRINGS, CO 80919

INDIVIDUAL

SCHOLARSHIP LOGAN DOUGLAS SANGDAHL

1242 ARDMORE DR

NAPERVILLE, IL 60540

INDIVIDUAL

SCHOLARSHIP KAITLIN ANN SMITH 14407 S MAPLE CT

PLAINFIELD, IL 60544

ORGANIZATIONAL STATUS OF DONEE: INDIVIDUAL

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2009

FEDERAL STATEMENTS

ENGINEERING SYSTEMS INC. CHARITABLE FOUNDATION

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STATEMENT 1 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND GRANTS

CLASS OF ACTIVITY: DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: INDIVIDUAL AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE:

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: INDIVIDUAL

AMOUNT GIVEN:

CLASS OF ACTIVITY:

DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: INDIVIDUAL

AMOUNT GIVEN:

CLASS OF ACTIVITY: DONEE'S NAME:

DONEE'S ADDRESS:

RELATIONSHIP OF DONEE:

ORGANIZATIONAL STATUS OF DONEE: INDIVIDUAL

AMOUNT GIVEN:

SCHOLARSHIP

BENJAMIN BIGELOW

40 LAKE FOREST CIRCLE

LAKE ST. LOUIS, MO 63367

SCHOLARSHIP JESSICA BOULDIN

1222 MARKET PLACE DRIVE

YORKVILLE, IL 60560

ORGANIZATIONAL STATUS OF DONEE: INDIVIDUAL

SCHOLARSHIP KRISTIN DOWNING

1463 ELDER DRIVE AURORA, IL 60506

INDIVIDUAL

SCHOLARSHIP MARGARET HAGAN 4409 WOODGLEN DR

GAINSEVILLE, GA 30507

INDIVIDUAL

SCHOLARSHIP BRITTANY LEWIS

4311 MEADOW SPRINGS

KINGWOOD, TX 77339

SCHOLARSHIP MEGHAN WOJNOWSKI

14862 INNSBROOK LN HOMER GLEN, IL 60491

SCHOLARSHIP TOMMASINA DOMEL 19 RIVER RIDGE DR.

SLEEPY HOLOW, IL 60118

7,000. TOTAL \$