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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 , 2009, and ending Jun 30 2010 Jul 1 For calendar year 2009, or tax year beginning Final return Initial Return of a former public charity G Check all that apply Initial return Address change Name change Amended return Employer identification number Name of foundation Use the IRS label. Franke Family Charitable Foundation 36-3662848 Otherwise, Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see the instructions) print (312) 464-9812 400 North Michigan 300 or type See Specific City or town If exemption application is pending, check here Instructions CHICAGO D 1 Foreign organizations, check here IL 60611 н Check type of organization X Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust | Other taxable private foundation If private foundation status was terminated Cash X Accrual Fair market value of all assets at end of year Accounting method under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination <u>34,764</u>,885 under section 507(b)(1)(B), check here (Part I, column (d) must be on cash basis ) Analysis of Revenue and Part I (c) Adjusted net (d) Disbursements (a) Revenue and (b) Net investment Expenses (The total of amounts in expenses per books income ıncome for charitable columns (b), (c), and (d) may not necessarily equal the amounts in column (a) purposes (cash basis only) (see the instructions)) Contributions, gifts, grants, etc, received (att sch) Ck ► X If the foundn is not req to att Sch B Interest on savings and temporary cash investments 2,478 2,478 86,352 86,352. Dividends and interest from securities 5a Gross rents b Net rental income or (loss) SCANNED ANT OF B 6a Net gain/(loss) from sale of assets not on line 10 **b** Gross sales price for all 6 Capital gain net income (from Part IV, line 2) Ő Net short-term capital gain Income modifications 10 a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit/(loss) (att sch) 11 Other income (attach schedule) See Line 11 Stmt 49,338 6,837 Total. Add lines 1 through 11 138,168. 95,667. Compensation of officers, directors, trustees, etc 13 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) 2,520 2,520. b Accounting fees (attach sch) L-16b Stmt c Other prof fees (attach sch) L-16c Stmt 75,500. 59,000. 16,500. 17 Interest 92,516. 18 Taxes (attach schedule)(see instr.) See Line 18 Stmt 15. Depreciation (attach sch) and depletion L-19 Stmt 619 Occupancy 16,436. 8,218. 8,218. Travel, conferences, and meetings 5,359. 5,359. Printing and publications 363. EXPENSES 363. Other expenses (attach schedule) See Line 23 Stmt 8,405 4,255 4,150. Total operating and administrative 201,718 expenses. Add lines 13 through 23 74,356 34,242. Contributions, gifts, grants paid 495,950. 495,950. Total expenses and disbursements. Add lines 24 and 25 697,668 74,356 530,192 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements -559,500 b Net investment income (if negative, enter -0-) 21,311 C Adjusted net income (if negative, enter -0-)

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Add lines 1, 2, and 3

Decreases not included in line 2 (itemize)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

38,259,143.

4

5

6

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 - see the	instructions)		
1 a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.	7			
Date of ruling or determination letter (attach copy of letter if necessary - see instr.)				
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V,		1	4	26.
check here ► and enter 1% of Part I, line 27b				1
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)	J			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
foundations only. Others enter -0-)	<del>-</del>	2		0.
3 Add lines 1 and 2	<del>-</del>	3 4	4	26.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others ent	∵ ' ⊢	5		26.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	<u> </u>	3	- 4	20.
6 Credits/Payments a 2009 estimated tax pmts and 2008 overpayment credited to 2009	42,501.	, ` ' '	.1	1
	22,501.			, ,
2 Exempt foreign organizations	0.			, ,
o lan paid illin approach		,		4
d Backup withholding erroneously withheld  7 Total credits and payments Add lines 6a through 6d		7	42,5	
	<del>-</del> -	8	12,5	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	<u> </u>	9		
	<u> </u>	0	42,0	75.
10 Overpayment If line / is more than the total of lines 5 and 8, enter the amount overpaid  11 Enter the amount of line 10 to be Credited to 2010 estimated tax  42,075. Refunda	<del></del>	1		
Part VII-A Statements Regarding Activities	· ·		_	
	r did it		Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation of participate or intervene in any political campaign?	uiu it	1a		х
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1 b		x
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any ma or distributed by the foundation in connection with the activities	terials publish	ned .		أحنا
c Did the foundation file Form 1120-POL for this year?		<u>1c</u>		X
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 ► \$		['t	1	.
(1) On the foundation (2) On foundation managers 5 e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax	imposed on			
foundation managers \$		١,		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		_ 2		x
If 'Yes,' attach a detailed description of the activities		ı		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrume	nt. articles			
of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the ch	anges	3	ļ	x
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4 a	<u> </u>	Х
<b>b</b> If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?		41	<del> </del>	X
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5	<b> </b>	Х
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		٠,	£, ,	- 1
By language in the governing instrument, or		· · · ·	٦,	
<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory direction</li> </ul>	ons that confli	ct		
with the state law remain in the governing instrument?	ı,	7	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 X	, -		<u> </u>	<del> </del>
8a Enter the states to which the foundation reports or with which it is registered (see the instructions) IL - Illinois	-	`·:	* '	
<b>b</b> If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General				
(or designate) of each state as required by General Instruction G <sup>2</sup> If 'No,' attach explanation		81	X	<del> </del>
9 Is the foundation claiming status as a private operating foundation within the meaning of section 49 for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes	42(j)(3) or 494 ,' complete Pa	12(j)(5) art XIV 9		X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule list and addresses	ting their name	es 10	<u> </u>	x
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	t VII-A Statements Regarding Activities Continued			· · ·		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)			11		<u> </u>
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  Website address	application	1 <sup>7</sup>	13	х	
14	The books are in care of FRANKE FAMILY CHARITABLE FOUNDATION Telephor	e no ►	(312)	464	981	.2
	Located at > 400 N MICHIGAN - Suite 300, CHICAGO IL ZIP + 4	606	11			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> — Check here	ı	1		<b>&gt;</b>	$\sqcup$
,	and enter the amount of tax-exempt interest received or accrued during the year	<u>▶</u>	15			
Par	t VII-B   Statements Regarding Activities for Which Form 4720 May Be Required				-	
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.				Yes	No
1 a	During the year did the foundation (either directly or indirectly)			1		
	(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	٠. ا		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No	,		1
	(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	_	* .	
ŀ	b If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> 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 instruction	ons)?	_	 1b		
	Organizations relying on a current notice regarding disaster assistance check here	<b>&gt;</b>				
(	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?			1c		x
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			, , ,	eg ca	
;	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?	Yes	X No			
	If 'Yes,' list the years ► 20 , 20 , 20				٠,	
ı	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942 all years listed, answer 'No' and attach statement — see the instructions)	(a)(2) a)(2) to		2 b		
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years	nere			, -	<del> </del>
•	► 20, 20, 20, 20				`	'
<b>3</b> .	a Did the foundation hold more than a 2% direct or indirect interest in any business				, ,	.
3	enterprise at any time during the year?	Yes	X No		14.	-
1	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 approve by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift_or bequest, or	d			- 3 3	
	(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)			3ь		
4	<b>a</b> 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		x

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Part VII-B Statements Regarding Activiti	es for Which Form	4720 May Be Requ	uired (continued)		
5a During the year did the foundation pay or incur	any amount to				
(1) Carry on propaganda, or otherwise attempt	to influence legislation	(section 4945(e))?	Yes XI	4o	
<ul><li>(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registral</li></ul>	Yes X	No .			
(3) Provide a grant to an individual for travel,	study, or other similar p	urposes?	Yes X	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	an a charitable, etc, org 4940(d)(2)? (see instruc	anization described ctions)	Yes XI	No T	
(5) Provide for any purpose other than religiou educational purposes, or for the prevention	s, charitable, scientific, of cruelty to children o	literary, or r animals?	Yes X I	No l	
<b>b</b> If any answer is 'Yes' to 5a(1)-(5), did <b>any</b> of the described in Regulations section 53 4945 or in (see instructions)?	ne transactions fail to qual a current notice regardi	ualify under the exception ng disaster assistance	ns	5b	
Organizations relying on a current notice regar	ding disaster assistance	e check here	▶ []		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure respons	ibility for the grant?		Yes	No	
If 'Yes,' attach the statement required by Regu		` ,			
6a Did the foundation, during the year, receive any on a personal benefit contract?	•		Yes X		
<b>b</b> Did the foundation, during the year, pay premit If 'Yes' to 6b, file Form 8870	ums, directly or indirectl	y, on a personal benefit	contract?	6b 2	<u>K</u>
<b>7a</b> At any time during the tax year, was the foundation	ation a party to a prohib	uted tax shelter transact	ion? Yes X	No     .	
<b>b</b> If yes, did the foundation receive any proceeds				7ь	
Part VIII   Information About Officers, D				mployees,	—
and Contractors	·				
1 List all officers, directors, trustees, foundation	n managers and their co	ompensation (see instru	ıctions).	<del></del>	
(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 accour other allowances	
Richard J. Franke					
400 N Michigan - Suite 300	Trustee				
Chicago IL 60611	5.00	0.	0.		<u>0.</u>
Barbara E. Franke 400 N Michigan - Suite 300	Trustee				
Chicago IL 60611	5.00	0.	0.		Ο.
Jane Franke-Molner	3.00	0.			<u>•</u>
400 N' Michigan - Suite 300	Trustee				
Chicago IL 60611	5.00	0.	0.		0.
2 Compensation of five highest-paid employee	s (other than those incl	uded on line 1— see ins	tructions) If none ente	r'NONF'	—
(a) Name and address of each employee	(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expense accour	nt
paid more than \$50,000	hours per week devoted to position	(c) compensation	employee benefit plans and deferred compensation	other allowances	
None			,		_
0					
0				·	_
0				,	
0					
Total number of other employees paid over \$50,000			<b>•</b>		ne
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Part VIII . Information About Officers, Directors, Trustees, Foundation Managers, High and Contractors (continued)	ly Paid Employe	es,
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) Con	npensation
Susan O. Kelty Office Administ	ration	
625 William, River		
Forest, IL 60305		59,000.
Total number of others receiving over \$50,000 for professional services	<b></b>	59000
	<u>-</u>	39000
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.	Ex	penses
1 None		
		0.
2		
*		<del> </del>
3		
	<del></del>	
4		
Part IX-B Summary of Program-Related Investments (see instructions)	<u></u>	<del></del>
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 an	d 2 A	mount
1 None		
		0.
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	<b>&gt;</b>	None
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Part X Minimum Investment Return (All domestic foundations must complete th see instructions.)	ıs part. Foreign	foundations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purpos	es	
a Average monthly fair market value of securities	1a	7,715,597.
b Average of monthly cash balances	1 b	3,255,725.
c Fair market value of all other assets (see instructions)	1c	22,124,681.
d Total (add lines 1a, b, and c)	1 d	33,096,003.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	33,096,003.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	. 4	496,440.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	. 5	32,599,563.
6 Minimum investment return. Enter 5% of line 5	6	1,629,978.
Part XI家 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) pri	vate operating	
and certain foreign organizations check here ► and do not comple		
1 Minimum investment return from Part X, line 6	1	1,629,978.
2a Tax on investment income for 2009 from Part VI, line 5	426.	
<b>b</b> Income tax for 2009 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2 c	426.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	1,629,552.
4 Recoveries of amounts treated as qualifying distributions	4	<u> </u>
5 Add lines 3 and 4	5	1,629,552.
6 Deduction from distributable amount (see instructions)	6	·········
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	1,629,552.
PartiXII Qualifying Distributions (see instructions)		
[items, ins]	Isr avaiu	
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes		
a Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1a	530,192.
<b>b</b> Program-related investments – total from Part IX-B	1 b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purpor		
3 Amounts set aside for specific charitable projects that satisfy the		
a Suitability test (prior IRS approval required)	3a	
<b>b</b> Cash distribution test (attach the required schedule)	3ь	<del></del>
4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, li	ine 4 4	530,192.
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)	e 5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	530,192.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculus qualifies for the section 4940(e) reduction of tax in those years	lating whether the f	oundation

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Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2008	<b>(c)</b> 2008	<b>(d)</b> 2009
1 Distributable amount for 2009 fro	om Part XI,	-			1,629,552.
2 Undistributed income, if any, as of the e	nd of 2009				
a Enter amount for 2008 only		,		0.	
<b>b</b> Total for prior years 20 , 20	, 20				
3 Excess distributions carryover, if any, to					)
a From 2004	357,738.				-
<b>b</b> From 2005	441,120.		,		
c From 2006	606,603.	'			
d From 2007	416,031.			II	
	,047,981.				
f Total of lines 3a through e	,01,,501	3,869,473.			_
4 Qualifying distributions for 2009	from Part	3/003/1731			
	30,192.				
a Applied to 2008, but not more th				<del></del>	t
	Γ			<u> </u>	
<b>b</b> Applied to undistributed income (Election required — see instruc	of prior years tions)	,			
c Treated as distributions out of c (Election required — see instruc					
d Applied to 2009 distributable an	nount		:		530,192.
e Remaining amount distributed of	out of corpus	0.	•	. !	5
5 Excess distributions carryover applied to			•		
(If an amount appears in colum same amount must be shown in	n (d), the n column (a) )			-	h.
6 Enter the net total of each colu indicated below:	mn as		,		
a Corpus Add lines 3f, 4c, and 4e Subtra	ct line 5	3,869,473.	-		
<b>b</b> Prior years' undistributed incom line 4b from line 2b .	e Subtract	· 1	0.	τ, ε	,
c Enter the amount of prior years ed income for which a notice of has been issued, or on which the 4942(a) tax has been previously	deficiency ne section	,		,	
d Subtract line 6c from line 6b Tamount — see instructions	axable		0.		, ,
e Undistributed income for 2008 Subtrac line 2a Taxable amount — see instruct				0.	
THE Za Taxable amount See Historic	10113				
f Undistributed income for 2009 4d and 5 from line 1. This amor distributed in 2010		•		,	1,099,360.
7 Amounts treated as distribution	s out of		<u> </u>		2,000,000.
corpus to satisfy requirements by section 170(b)(1)(F) or 4942 (see instructions)	mposed				
8 Excess distributions carryover fapplied on line 5 or line 7 (see	from 2004 not	357,738.		•	
9 Excess distributions carryovel Subtract lines 7 and 8 from line	r to 2010.				
10 Analysis of line 9	; ua	3,511,735.			
a Excess from 2005	441,120.			-	
b Excess from 2006	606,603.				
c Excess from 2007	416,031.	-			
	,047,981.				
e Excess from 2009	0.			<u> </u>	

Part XIV: Private Operating Foundation			VII-A guestion 9	30-3002840 9)	N/A
1a If the foundation has received a ruling or disseffective for 2009, enter the date of the r	etermination letter t				
<b>b</b> Check box to indicate whether the foundation	=	ating foundation de	scribed in section	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for each year listed	(a) 2009	<b>(b)</b> 2008	(c) 2007	(d) 2006	(e) Total
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					·····
Part XV Supplementary Information assets at any time during the	(Complete this le year — see in	part only if the structions.)	organization h	ad \$5,000 or moi	re in
1 Information Regarding Foundation Manag a List any managers of the foundation who h close of any tax year (but only if they have Richard J. & Barbara E. F:	ave contributed mo contributed more t	re than 2% of the than \$5,000) (See	otal contributions red section 507(d)(2))	ceived by the foundat	tion before the
<b>b</b> List any managers of the foundation who o a partnership or other entity) of which the <b>None</b>	wn 10% or more of foundation has a 10	the stock of a corp 9% or greater intere	ooration (or an equal est	ly large portion of the	e ownership of
2 Information Regarding Contribution, Gran	t Gift Loon Sabal	archin etc Deces	ms:	<del></del>	
Check here \( \bigcap \) If the foundation only n requests for funds. If the foundation makes	nakes contributions	to preselected cha	rıtable organızatıons		
complete items 2a, b, c, and d  a The name, address, and telephone numbe	r of the person to w	hom annications s	hould be addressed		
See Information Regarding Contribution, C	·				
<b>b</b> The form in which applications should be s	submitted and inform	nation and materia	ls they should includ	e	
c Any submission deadlines				<u>.                                    </u>	· · · · · · · · · · · · · · · · · · ·
d Any restrictions or limitations on awards, s	such as by geograp	hical areas, charita	ble fields, kinds of in	estitutions, or other fa	actors

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3 Grants and Contributions Paid During the Y	ear 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	l .	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year  Cash Contributions  See attached schedule #1		Exempt	Unrestricted	495,950.
		:		
Total			▶ 3;	405.050
Total b Approved for future payment		1	▶ 3;	495,950.
Total	- ·-·		▶ 3	b

Part XVI-A Analysis of Income-Producing Activities	es

	1				
nter gross amounts unless otherwise indicated		ed business income		d by section 512, 513, or 514	
	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	( <b>d)</b> Amount	(e) Related or exempt function income
1 Program service revenue			code_		(see the instructions)
a					
b			<u> </u>		
c			<del> </del>		
d			<del> </del>		
e			<u></u>		
g Fees and contracts from government agencies	<del>- </del>		-		
2 Membership dues and assessments			<del>                                     </del>		
3 Interest on savings and temporary cash investments			14	2,478.	
4 Dividends and interest from securities			14		<del></del>
5 Net rental income or (loss) from real estate	The State of	<b>有效的人们的</b>	100	AND DEPOSITE	<b>建建</b> 图像图像图像
a Debt-financed property	WALKER IN SOLIT	Land Committee State Contained to 1	1250 mm	to the second of the second of	With the state of
b Not debt-financed property					
6 Net rental income or (loss) from personal property					<del>-</del>
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events		<del></del>			
		· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · ·
10 Gross profit or (loss) from sales of inventory 11 Other revenue	500 S. 11 5 Mars	with the state of the state of	535	They get to confirm the	25 C 4 N 8 N 8 N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
11 Other revenue a Partenership Investments	,	A Partie a State of	14		
	- <del>-</del>	·	1	0,037.	
_	-				
			<del> </del>		
			ļ		ļ
е	William Self-		ne de la constante de la const	95 667	
e Subtotal Add columns (b), (d), and (e)	<b>1986</b> 35		<b>建造</b>	<del></del>	
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)			25.50	95,667. 13	
e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify	calculations)			13	
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)	calculations)			13	
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify  Part XVI-B.* Relationship of Activities to the line No.  Explain below bow each activity for which	calculations)	lishment of Exemp	t Purp	oses	95,667
e Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in the instructions for line 13 to verify  Part XVI-B.* Relationship of Activities to the	calculations)	lishment of Exemp	t Purp	oses	95,667
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify  Part XVI-B.* Relationship of Activities to the line No.  Explain below bow each activity for which	calculations)	lishment of Exemp	t Purp	oses	95,667
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify  Part XVI-B.* Relationship of Activities to the line No.  Explain below bow each activity for which	calculations)	lishment of Exemp	t Purp	oses	95,667
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify  Part XVI-B.* Relationship of Activities to the line No.  Explain below bow each activity for which	calculations)	lishment of Exemp	t Purp	oses	95,667
e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in the instructions for line 13 to verify  Part XVI-B.* Relationship of Activities to the line No.  Explain below bow each activity for which	calculations)	lishment of Exemp	t Purp	oses	95,667
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## Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

•	describer relation a Transf (1) Ca (2) Oil b Other (1) Sa (2) Pu (3) Re (4) Re (5) Lo	e organization directly obed in section 501(c) or g to political organizations of the reporting facts of assets transactions alies of assets from the reporting facts of assets to a nonconcretase of assets from the rental of facilities, equipped the rental of facilities of services of services.	f the Code (other ons? foundation to a charitable exem is a noncharitable ment, or other a nents	er than section 501(c) noncharitable exempt pt organization e exempt organization assets	(3) organizati organization	ons) or 11	rganization n section 52	7,	1a (1) 1a (2) 1b (1) 1b (2) 1b (3) 1b (4) 1b (5) 1b (6)	Yes	X X X X X X
	d If the a	ng of facilities, equipme answer to any of the ab ods, other assets, or se ansaction or sharing ar	ove is 'Yes,' co	implete the following s	chedule Col	undation	received les	s than fair mark	et value in	of	<u> </u>
<u>(</u> a	<b>)</b> Line no	(b) Amount involved	(c) Name of	noncharitable exempt organ	nization	<b>(d)</b> Des	scription of tran	nsfers, transactions,	and sharing arrar	ngement	<u>s</u>
		<del></del>		···-			<del> </del>				
_		<del></del>		<u> </u>			<del></del>				
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			<u> </u>	<del></del>							
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_						•					
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	descri	foundation directly or ii bed in section 501(c) o s,' complete the followin	f the Code (oth	ed with, or related to, er than section 501(c)	one or more (3)) or in sec	tax-exem tion 527	npt organiza	tions	Yes	<b>x</b>	No
_		(a) Name of organization	on	(b) Type of or	ganization			c) Description of	relationship		
_								<del> </del>	<u>-</u>		
								<u> </u>			
				<del></del>	_						
_											
s	Under pena complete [	olties of perjury, I declare that the Declaration of preparer (other to Cichar	han taxpayer or fidu	return, including accompani ciary) is based on all informa	ying schedules ar ation of which pre	nd statemen parer has a	ts, and to the being knowledge	est of my knowledge		e, corre	ct, and
N_GZ	Signa	ature of officer or trustee	20			Date	7	Title			
N HERE	Paid Pre-	Preparer's signature THOM	S J. WYER,	ATTORNEY AT LAW		5/16	11	Check if self- employed ► X	Preparer's Identify (See Signature in	ing num	iber rs)
•	parer's Use	yours if self	TAX SERVI					EIN ►			
	Only	lemploveti). 401//	S LA SALL	E ST STE 606		<u> </u>		-			
_	<u> </u>	address, and ZIP code CHIC.	AGO	· · · · · · · · · · · · · · · · · · ·	IL	6060	5-1076	Phone no	(312) 786		
В	AΑ								Form 99	90-PF	(2009)

Department of the Treasury Internal Revenue Service

# Depreciation and Amortization (Including Information on Listed Property)

► Attach to your tax return.

OMB No 1545-0172

Attachment Sequence No

Name(s) shown on return

► See separate instructions.

Identifying number

Fra	nke Family Chari	table Founda	ation					36-	3662848
Busine	ess or activity to which this form rela	ates	<u> </u>						
For	m 990-PF page 1								
Par		pense Certain P	Property Under Section	ction 179 you complete Par	t /				
1	Maximum amount See the	e instructions for a l	higher limit for certain b	ousinesses				1	\$250,000.
2	Total cost of section 179 p	property placed in se	ervice (see instructions)	)				2	
3	Threshold cost of section	179 property before	reduction in limitation	(see instructions)				3	\$800,000.
4	Reduction in limitation Su	ubtract line 3 from lii	ne 2 If zero or less, en	ter -0-				4	
5	Dollar limitation for tax yes		rom line 1 If zero or les	ss, enter -0- If ma	arried fili	ng		5	
6	(a	Description of property		(b) Cost (business	use only)	(с	) Elected cos	it .	
7	Listed property Enter the				7			<b></b> -	,
8	Total elected cost of section			c), lines 6 and 7				8	
9	Tentative deduction Enter							9	
10	Carryover of disallowed de		•		l 5			10	
11	Business income limitation Section 179 expense dedu		•	•		(see ii	15(15)	11	
	Carryover of disallowed de		•		, ► 13	-		1 12	<del>_</del> .
	: Do not use Part II or Part								
Pai			e and Other Depr		t include	listed	nronerty )	(See in	structions )
	Special depreciation allow				•				30 400013 /
	tax year (see instructions)				-			14	
	Property subject to section							15	
	Other depreciation (includ		<del></del>					16	0.
Pai	t III   MACRS Depre	ciation (Do not in	clude listed property) (						
	<del> </del>		Section						
17	MACRS deductions for as:	sets placed in servi	ce in tax years beginnir	ng before 2009				17	619.
18	If you are electing to grou asset accounts, check her		I in service during the ta	ax year into one o	r more g	general	► □		, -
	Section E	B – Assets Placed i	in Service During 2009	Tax Year Using tl	he Gene	ral Dep	reciation	System	
•	(a) Classification of property	(b) Month and year placed in service	(C) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Conven		(f) Method		(g) Depreciation deduction
19 a	a 3-year property	3 40	and the state of t						
	5-year property								
	7-year property	1 2 1							
	10-year property	<b>-</b>	<del></del>				<del></del> -		
	15-year property	<b>-</b>							
	20-year property	<b> </b>	· · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·	-	<del>-</del> · · · ·
	25-year property	-		25 yrs			S/L		·
	Residential rental			27.5 yrs	MM	,	S/L		
•	property								
	property         27.5 yrs         MM         S/L           i Nonresidential real         39 yrs         MM         S/L								
	property			37 715	MIM		S/L		
	<del></del>	- Assats Placed in	Service During 2009 T	av Vear Heine the					
20.	a Class life	Assets Flaced III	Colvice During 2003 I	az rear Using tile	- AIGING	ve De	S/L		··· <u> </u>
	b 12-year			12 yra			S/L		
	c 40-year	279. 32 3ml &	<del></del>	12 yrs 40 yrs	MM	<del>,  </del>	S/L		
_	rt IV Summary (See	instructions \	<u>=</u> .	40 ATR	l mix		3/1	I	
	Listed property Enter am		- <del></del>	<del> </del>				21	<del></del>
	Total Add amounts from line 12		nes 19 and 20 in column (a)	and line 21. Enter here	and on		<u> </u>	<del>-                                    </del>	<del> </del>
	the appropriate lines of your reti							22	619.
23	For assets shown above a	and placed in service	e during the current ve	ar enter T					1 4 34

36-3662848

Part,V: Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b,

	columns	(a) through (c)	of Section A,	all of Sec	tion B, a	and Sec	tion C if	арр	licable	9						
	Sectio	n A — Deprecia	tion and Othe	r Informa	tion (Ca	ution: S	ee the i	nstru	uction	s for lim	its for p	passeng	ger auto	mobiles	)	
24 a	Do you have eviden	ce to support the bu	ısıness/ınvestmei	nt use claim	ed?		Yes	$\prod$	No 2	<b>4b</b> If 'Ye	s,' is the	evidence	written?		Yes	No
Ту	(a) pe of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost other b	or	(busine	(e) or deprecia ess/investm ise only)		Re	(f) covery eriod	Met	g) hod/ ention	Depre	(h) eciation uction	Ele secti	(i) ected on 179 cost
25	Special deprectused more than		for qualified				ervice d	uring	g the	tax year	and	25				
26	Property used r	more than 50%	ın a qualified	business	use											
	·															
	<del></del>						<del>-</del>									
27	Property used 5	50% or less in a	qualified bus	iness use		J						!			<u>, I </u>	
	T Z		T													
																4
									Ì		<u> </u>	_,			_	
28	Add amounts in	r column (h), lin	ies 25 through	27 Enter	r here ar	nd on lin	ie 21, pa	age 1	1			28			1000	
29	Add amounts in	column (ı), lıng	e 26 Enter he	re and on	line 7, p	page 1								29	)	
Com to yo	plete this section our employees, fi	n for vehicles us	sed by a sole questions in S	ection C t	, partner to see if	, or othe	er 'more et an ex	thar	n 5% ion to	owner,' comple	ting this	s sectio	n for the	ose vehi	cles	
30	Total business/ during the year commuting mile	(do not include		1	a) icle 1	' '	b) cle 2	,	<b>(c)</b> Vehicl		(d) Vehic	·	<b>(€</b> Vehi	•		f) cle 6
31	Total commuting m	nles driven during t	he year													
32	Total other pers	sonal (noncomn	nuting)													
33	Total miles driv		ear Add				-									
	J			Yes	No	Yes	No	Y	es	No	Yes	No	Yes	No	Yes	No
34	Was the vehicle during off-duty		ersonal use													
35	Was the vehicle than 5% owner	e used primarily or related pers	by a more													
36	Is another vehi	cle available foi	r											_		
	•	Section	C - Question	s for Em	ployers \	Who Pro	ovide Ve	hicl	es for	Use by	Their E	mploy	ees			
	wer these question			an except	ion to co	mpletin	g Sectio	n B	for ve	hicles u	sed by	employ	ees who	are no	t more t	han
37	Do you maintai		cy statement t	hat prohib	oits all pe	ersonal	use of v	ehicl	les, ın	cluding	commu	ıtıng,			Yes	No
38	Do you maintai	n a written polic	cy statement t	hat prohib	oits perso	onal use	of yehi	cles,	exce	pt comn	nuting,	by your				
39	employees? Se Do you treat all			-	•		rs, airec	tors,	or 15	% or mo	re owne	ers				
40	Do you provide vehicles, and re				yees, ob	taın ınfo	rmation	fron	n your	employ	ees ab	out the	use of t	he		
41	Do you meet the											es				Name of the last
Pai	ttVI Amort		,												e-séristra des	- traduct wines
7-7		(a)		Τ	(b)		(c)		T	(d)	)		(e)	<u> </u>	(f)	
	Des	scription of costs		Date a	mortization egins		Amortizat amount			Cod	е	Amo pe	rtization riod or centage		Amortization for this year	
42	Amortization o	f costs that beg	ins during you	r 2009 tax	x year (s	ee instr	uctions)									
				<del> </del>		+						+		<u> </u>	-	
	A	-	b - f	2000 :		i							T ==	<del> </del>		
43 44		of costs that beg lounts in columi	-		•	oro to m	enort						43	<del> </del>		
***	rount radu alli	iganig in column	To occure		U IUI WII	ו טויט וט וו	υρυιι						1	i		

		<u> </u>		
	Charitable Contril	outions		
Date	Donee	Check #	Address	Amoun
7/17/2009	Good News Partners	3487	Chicago, IL	1,000 00
8/24/2009	Chicago Children's Choir	3492	Chicago, IL	2,000 00
9/3/2009	Chicago Humanities Festival	3474	Chicago, IL	18,500 00
9/21/2009	WTTW11	3493	Chicago, IL	75 00 10,000 00
9/24/2009	American Cancer Society	3496	New York, NY New York, NY	4,000 00
9/28/2009	Chamber Dance Project	3497 3505	Briarcliff Manor, NY	8,000 00
10/27/2009	New Beginnings		Colorado Springs, CO	5,000 00
10/27/2009	Colorado College	3506 3507	Hartsdale, NY	5,000 00
10/27/2009	Westchester Community Foundation			5,000 00
10/27/2009	Hackley School	3508 3509	Tarrytown, NY Sleepy Hollow, NY	1,000 00
10/27/2009	Open Door Family Medical Centers		White Plains, NY	1,000 00
10/27/2009	Westchester Coalition-Hungry & Homeless	3510 3504	Salisbury, VT	500 00
10/27/2009	Keewaydin Foundation		Cambridge, MA	5,000 00
11/9/2009	American Academy of Arts & Sciences	3498 3512	Chicago, IL	5,000 00
11/11/2009	The Salvation Army	3512	Chicago, IL	5,000 00
11/11/2009	Chicago Children's Choir  Yale Club of Chicago Foundation	3516	Chicago, IL	300 00
11/24/2009		3517	New Haven, CT	1,000 00
12/14/2009	Mory's Preservation Inc	3518	Chicago, IL	5,000 00
12/14/2009	Chicago Public Radio	3519	Chicago, IL	9,000 00
12/14/2009	Golden Apple Foundation	3520	Chicago, IL	10,000 00
12/14/2009	Hackley School Centennial Campaign National Trust for Historic Preservation	3520	Washington DC	25,000 00
12/14/2009		3523	Chicago, IL	25,000 00
12/21/2009	Art Institute of Chicago-Sustaining	3524	Chicago, IL	5,000 00
12/21/2009 12/21/2009	Art Institute of Chicago-Textile Art Institute of Chicago-Library	3525	Chicago, IL	5,000 00
12/21/2009	Court Theatre	3526	Chicago, IL	25,000 00
12/21/2009	Univ of Chicago-Women's Board	3527	Chicago, IL	2,000 00
12/21/2009	Univ of Chicago-Women's Board	3528	Chicago, IL	5,000 00
12/21/2009	Northwestern Univ - Weinberg College	3529	Evanston, IL	5,000 00
12/21/2009	Golden Apple Foundation	3530	Chicago, IL	5,000 00
12/21/2009	Misericordia Heart of Mercy	3522	Chicago, IL	200 00
1/11/2010	Yale University	3531	New Haven, CT	1,000 00
1/15/2010	Grant Park Music Festival	3541	Chicago, IL	2,000 00
1/15/2010	Desert Foothills Library	3542	Cave Creek, AZ	500 00
1/23/2010	Art Institute of Chicago	3543	Chicago, IL	1,000 00
1/26/2010	Art Institute of Chicago	3540	Chicago, IL	200,000 00
1/28/2010	Art Institute of Chicago	3544	Chicago, IL	7,500 00
2/23/2010	Keewaydin Foundation	3553	Salisbury, VT	5,000 00
3/13/2010	Yale Alumni Fund	3556	New Haven, CT	1,000 00
3/17/2010	Newberry Library	3557	Chicago, IL	3,750 00
3/18/2010	Teach for America	3558	New Haven, CT	500 00
3/18/2010	Court Theatre	3559	Chicago, IL	9,000 00
3/24/2010	WBEZ	3561	Chicago, IL	50 00
3/24/2010	Cedarville University	3562	Cedarville, OH	5,000 00
4/1/2010	Chicago Humanities Festival	3565	Chicago, IL	25,000 00
4/1/2010	Chicago Humanities Festival	3566	Chicago, IL	9,250 00
5/1/2010	The Chicago Community Trust	3571	Chicago, IL	12,500 00
5/24/2010	Harvard Business School	3577	Cambridge, MA	3,000 00
6/8/2010	Court Theatre	3580	Chicago, IL	1,000 00
6/8/2010	Harris Theater	3581	Chicago, IL	1,000 00
6/28/2010	Gilda's Club	3583	New York, NY	75 00
6/28/2010	North Shore Foundation	3583	Highland Park, IL	250 00
6/28/2010	Phi Beta Kappa Scholarship Fund	3579	Washington DC	4,000 00

Form 990-PF, Page 1, Part I, Line 11

1 3		11	C	mt
LI	ne		ા	mt

Other income	Rev/Exp Book	Net Inv Inc	Adj Net Inc
Venture I	1,830.	1,830.	
Venture II	3,289.	3,289.	
Venture III	-6,105.	-6,105.	
Venture IV	-31,587.	-31,587.	
Bain VI	3,250.	3,250.	
Bain VII	-37,590.	-37,590.	
Bain X	-39,803.	-39,803.	
Bain Special Situations 2008-C	102,657.	102,657.	
BCM07	-4,352.	-4,352.	
Farallon Capital Institutional	647,283.	647,283.	
Farallon FCIP	-632,035.	-632,035.	
Federal Tax Refund Applied	42,501.		l

Total

49,338.

6,837.

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

#### Line 18 Stmt

Taxes (see the instructions)	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Illinois Charity Bureau	15.			15.
Federal Taxes Paid	92,501.			
	_			

Total

92,516.

<u>15.</u>

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

#### Line 23 Stmt

Other expenses.	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Office Supplies	1,550.	775.		775.
Telephone	3,095.	1,548.		1,547.
Postage & Delivery	1,875.	937.		938.
Information Technology	669.	335.		334.
Insurance	238.	119.		119.
Dues & Fees	100.	100.		
Bank Fees	5.	5.		
Equipment Rental	416.	208.		208.
Repairs & Maintenance	457.	228.		229.

Total

8,405.

4,255.

4,150.

Form 990-PF, Page 10, Part XV, Line 2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs	Information	Regarding	Contribution	. Grant.	. Gift. Loan	. Scholarship	o, etc.	, Programs
---	-------------	-----------	--------------	----------	--------------	---------------	---------	------------

Name Richard J. Franke				
Address 400 N Michigan - Suite 3	300			
City, St, Zip, Phone Chicago	IL	60611	(312)	464-9812
The form in which applications should be sub				
Written Narrative. Submit proof the	at the organization	1 18 501(0	37 (3 <u>7 q</u> 0	Talliteu.
Any submission deadlines				
None	<u> </u>			
institutions, or other factors				
Name Address				
Name Address			als they s	should include
Name Address City, St, Zip, Phone			als they s	should include

#### Form 990-PF, Page 1, Part I

#### Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Thomas J Dwyer, Att	Tax Preparation & Plan	2,520.	2,520.		

Total

2,520.

2,520.

Form 990-PF, Page 1, Part I

#### Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Karee McBride Susan Kelty	Consulting Fees Consulting Fees	16,500. 59,000.	59,000.		16,500.

Total

75,500.

59,000.

16,500.

Form 990-PF, Line 19

#### **Allocated Depreciation**

Description .	Date Acquire	Cost or Basis	Prior Yr. Depr	Mthd	Lıfe	Current Depr	Net Invest Income	Adjusted Net Income
COMPUTER EQUIP. COMPUTER EQUIP. 2005 Computers	03/01/94 04/01/97 01/10/06	3919 1461 5372	3919 1461 4444	SL SL 200DB	5.00 5.00 5.00	0 0 619		

Total

Form 990-PF, Page 2, Part II, Line 10a

L-10a Stmt

	End o	f Year	End of Year		
Line 10a - Investments - US and State Government Obligations:	State and Local Obligations Book Value	State and Local Obligations FMV	US Government Obligations Book Value	US Government Obligations FMV	
10 Year TIPS 7/15/08			989,813.	995,640.	
26 Week T-Bill 12/2/10			339,244.	340,000.	
5 Year TIPS 10/30/09			260,289.	250,000.	

Total

1,589,346.

1,585,640.

Form 990-PF, Page 2, Part II, Line 10b L-10b Stmt

	End o	End of Year		
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value		
Cisco Systems	11,330.	3,751.		
Dodge & Cox Stock fund	4,980,834.	4,918,178.		
Domino's Pizza	150,533.	93,214.		
Nuveen Preferred Shares	425,000.	425,000.		
Nuveen Funds	1,563,757.	1,158,015.		
Innophos Holdings, Inc	21,397.	22,220.		

Total

7,152,851. 6

6,620,378.

Form 990-PF, Page 2, Part II, Line 13 L-13 Stmt

	End o	End of Year		
Line 13 - Investments - Other:	Book Value	Fair Market Value		
Absolute Return Cayman	1,300,806.	1,170,725.		
Bain Capital Fund VI	92,839.	117,709.		
Bain Capital Fund VII	198,604.	189,578.		
Bain Capital Fund X	1,153,026.	620,598.		
Bain Capital Mezzanine	8,728.	7,855.		
Farallon Capital	21,478,079.	18,578,212.		
Sankaty Middle Market	14,126.	12,713.		

Form 990-PF, Page 2, Part II, Line 13 L-13 Stmt

Continued

26,151,918. 23,193,929.

	End of	End of Year		
Line 13 - Investments - Other:	Book Value	Fair Market Value		
SRI Nine REIT	529,995.	1,146,650.		
Venture Investments I	87,749.	79,011.		
Venture Investments II	59,676.	63,387.		
Venture Investments III	252,374.	238,034.		
Venture Investments IV	975,916.	969,457.		

Form 990-PF, Page 2, Part II, Line 14

#### L-14 Stmt

Total

Line 14b - Description of Land, Buildings, and Equipment	(a) Cost/Other Basis	<b>(b)</b> Accumulated Depreciation	<b>(c)</b> Book Value
Equipment	9,291.	4,849.	4,442.
Total	9,291.	4,849.	4,442.

86,352.

#### Supporting Statement of:

#### Form 990-PF,p12/Line 3 Column (d)

Description	Amount
Park National Bank - Interest	2,478.
Total	2,478.

#### **Supporting Statement of:**

Total

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

Description	Amount
RBC 31286 - Dividends	67
RBC 31286 - Capital Gain Distributions	30
RBC 31286 - Interest	46
UBS 33937 - Dividends	244
Barclays - Dividends	51
Barclays - Capital Gain Distributions	43
Barclays - Interest	815
Treasury Direct - US Interest	15,962
Less: OID Paid	-1,765
Lehman Bros	395
John Hancock Preferred Income	25
DNP Select Income	16,200
Dodge & Cox Stock Fund	53,559
John Nuveen & Co	592
VRDN's	88

#### Form **8868** (Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

► File a separate application for each return.

OMB No 1545-1709

If you are	filing for an Automatic 3-Month Extension, complete only Part I and check this box		<b>►</b> x
If you are	filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this for	orm)	_
Do not comp	lete Part II unless you have already been granted an automatic 3-month extension on a previously filed	d Form 8868	3
Part l	Automatic 3-Month Extension of Time. Only submit original (no copies needed)		
A corporation	required to file Form 990-T and requesting an automatic 6-month extension - check this box and com-	nplete Part I	only -
All other corp income tax re	orations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request ai turns	n extension	of time to file
returns noted the additional Form 990-T I	ing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 e (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a constead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more detail the www.irs.gov/efile.and.click.on.e-file.for.Charities.	lectronically	r if (1) you want consolidated
	Name of Exempt Organization	Employer iden	tification number
Type or			
print	Franke Family Charitable Foundation	36-3662	848
File by the due date for	Number, street, and room or suite number. If a P.O. box, see instructions		
filing your	400 North Michigan, #300		
instructions	City, town or post office, state, and ZIP code For a foreign address, see instructions		
	CHICAGO	IL	60611
Check type o	freturn to be filed (file a separate application for each return)	<del></del>	
Form 990	` ' [ ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	0	
Form 990		7	
Form 990		9	
X Form 990	——————————————————————————————————————		
Telephone If the orga If this is for check this	are in the care of FRANKE FAMILY CHARITABLE FOUNDATION  FAX No Anization does not have an office or place of business in the United States, check this box or a Group Return, enter the organization's four digit Group Exemption Number (GEN)  Fox If it is for part of the group, check this box In and attach a list with the names and soon will cover		► ☐ e whole group, Il members
	it an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time		
	eb 15 , 20 11 , to file the exempt organization return for the organization named above		
	ension is for the organization's return for		
► 🗌	calendar year 20 or		
	tax year beginning Jul 1, 20 09 _, and ending Jun 30, 20 10 _		
2 If this ta	x year is for less than 12 months, check reason.  Initial return  Final return  C	hange in ac	counting period
	pplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any indable credits. See instructions	3a \$	15,465.
	pplication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments include any prior year overpayment allowed as a credit	3b \$	42,501.
deposit	e <b>Due.</b> Subtract line 3b from line 3a Include your payment with this form, or, if required, with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System) tructions	3c \$	0.
Caution. If yo payment inst	ou are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form ructions	8879-EO fo	r 
BAA For Pri	vacy Act and Paperwork Reduction Act Notice, see instructions.	Form	8868 (Rev 4-2009)

Form 8868	(Rev 4-2009) Franke Family Charitable Foundation	36	-3662848	Page 2
<ul><li>If you a</li></ul>	re filing for an Additional (Not Automatic) 3-Month Extension, complete only	Part II and check this box		<b>►</b> X
Note. Only	complete Part II if you have already been granted an automatic 3-month exter	sion on a previously filed l	Form 8868	_
• If you a	re filing for an Automatic 3-Month Extension, complete only Part I (on page 1	)		
Part II	Additional (Not Automatic) 3-Month Extension of Time. Only	file the original (no c	opies needed).	
Type or	Name of Exempt Organization	7	yer identification number	
print	Franke Family Charitable Foundation	36-3	3662848	
•	Number, street, and room or suite number. If a P.O. box, see instructions		s use only	
File by the extended				
due date for filing the	400 North Michigan, #300			
return See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions			
	CHICAGO IL 60611			
Check type	of return to be filed (File a separate application for each return)	No. Section of the Control of the Co	をは、1941年には、1941年の1941年を 1941年には、1941年の19	The state of the s
Form 9		Form 1041-A	☐ Form 60	000
Form 9		<b>-</b>	<b>⊢</b>	
Form 9		Form 4720	☐ Form 88	170
		Form 5227		
	not complete Part II if you were not already granted an automatic 3-month ex		ed Form 8868.	
	oks are in care of FRANKE FAMILY CHARITABLE FOUNDATION	<u>-</u>		
	one No (312) 464-9812 FAX No			
	ganization does not have an office or place of business in the United States, of			▶ 📙
	for a Group Return, enter the organization's four digit Group Exemption Numl			is for the
	o, check this box If it is for part of the group, check this box	and attach a list with the	names and EINs of	all
	ne extension is for			
	est an additional 3-month extension of time until May 16 , 20			
		09, and ending Jun 3	.0 , 20 <u>1</u>	<u>o</u>
6 If this	tax year is for less than 12 months, check reason: Initial return	Final return Ch	nange in accounting	period
7 State	in detail why you need the extension Additional time is need	ded to collect		
	ormation required in order to file a complete a urn.	nd accurate	- <b></b>	
8a If this	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tenta fundable credits. See instructions	tive tax, less any	8a \$	15,465.
paym	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable crents made. Include any prior year overpayment allowed as a credit and any arrorm 8868.	edits and estimated tax mount paid previously		
			8b \$ 4	42,501.
c Balar with F	ice Due. Subtract line 8b from line 8a Include your payment with this form, or TD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment S	ystem) See instrs	8c \$	0.
	Signature and Verificatio			
Under penaltie correct, and co	s of perjury, I declare that I have examined this form, including accompanying schedules and statemen mplete, and that am authorized to prepare this form.		and belief, it is true,	. /
Signature -	Title - Attorney of	m		411_
ВАА	FIFZ0502 03/3/09		Form <b>8868</b> (F	Rev 4-2009)