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Form 990-PF

See Attached Form _ \$366

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

2010

OMB No 1545-0052

Department to the Treasury Internal Revenue Service

SCANNED AUG 1 1 2011

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

For ca	lenda	r year 2010, or 1	lax year beginni	ng	, 2010	, and ending			,	
G Ch	eck al	I that apply	Initial return	Init	ial Return of a former p	oublic charity			Fin	al return
			Amended ret	urn	Address	change	Name	cha	inge	
			· · · · · · · · · · · · · · · · · · ·				- 1	. 1	Employer identification nu	nber
			EUKEMIA FO	UNDAT	CION				26-1500324	
		ASTOR					E	-	Telephone number (see the	instructions)
CHIC	AGO,	, IL 60610								
							0	1	If exemption application is	pending, check here
									Foreign organizations, che	
H Č		type of organiz			1(c)(3) exempt private			2	Foreign organizations meet here and attach computation	ing the 85% test, check
			nonexempt cha			private foundati			If private foundation status	
		ket value of all asse art II, column (c), lin		J Acc	counting method X C	ash Accru	Jai	ι	under section 507(b)(1)(A)	, check here
► Ś					Other (specify)		F		If the foundation is in a 60	
Part		3,275 nalysis of Re		(Part I,	, column (d) must be o	T		\neg	under section 507(b)(1)(B)	
rait			total of amount	s in	(a) Revenue and expenses per books	(b) Net inves			(c) Adjusted net income	(d) Disbursements for charitable
	co	lumns (b), (c),	and (d) may not	neces-	expenses per books	income	=		income	purposes
		erily equal the a ee the instruction	mounts in colum	n (a)						(cash basis only)
	1		grants, etc, received	(att sch)	173,000.	2 3 4		+	,	
	2		oundn is not req to at	, ,		2 1 mg 2 mg 2	-K			
	3	Interest on say	rings and tempo							1 1 1 1 1 1 1
		cash investme	nts. erest from securities		ļ	 		+		7 X 8
	4 5a	Dividends and inte Gross rents	arest from Securities					+-		-c+ -, .
		Net rental income			D			ر 5 ر	The state of the s	3, 2, 5
R	6a	or (loss) Net gain/(loss) from	sale of assets not or	line 10	-25,894.	4 Y		17	100 mg 100 mg	- X X X X X X X X X X X X X X X X X X X
E V		Gross sales price for assets on line 6a		182.	Margarette some in an	, who was the organization	pr	ş iso r	. किल्पार्वे १ क्रिंग सहस्र १ जिल्ल	1001-15 15 15 15 15 15 15 15 15 15 15 15 15 1
Ě	7_	Cental dain net inc	ome (from Part IV, In	e 2)	32		0	. ,``	***	
E N	'8	Net Short term	capital gain		1 W. (107 15	,		\perp	0.	
Ü	9	Income modifi Gross sales less	cations		7 2/1/2		78.4			
_	IVa	returns and G 0	2 2011	1		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\$, ,		
	\6	returns and G allowarices G Bless Cost of	CK.		100		, <u> </u>	7	4.044	*
	L	goods sold Gross profit/(loss		 			/490	+	· · · · · · · · · · · · · · · · · · ·	* * * * · · · · · · · · · · · · · · · ·
	111	Other income	(attach schedule	le				+		* 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.
	L		See Stateme		66,671.			1		,
	12	Total. Add line			213,777.		0	$\cdot $	0.	· · · · · · · · · · · · · · · · · · ·
	13		ficers, directors, truste	ees, etc	0.			 		
	14	Other employee sa	-							
			, employee bene		333.					
A		i Legai rees (attach i Accounting fees (a	schedule) See	SL Z	333.			-		
M	1	o Accounting rees (a : Other prof fees (at						+	- u	
0 1	17	•	addit soils					+	<u></u>	
OPERATI	18	Taxes (attach schedule)	see instr.) See. S	Stm 3	626.			1		
R R	19	Depreciation (a	attach					1	,.	
1 1	20	sch) and deple	etion					+		
N V G E	20		ences, and meet	ınas				+		
	22	Printing and p		irigs				+-		
A E X D P	23		s (attach schedu	ıle)	-1.			†		
E			See Stateme	ent 4	5,625.					
EXPENSES	24	Total operatin	g and administr	ative	C 504					
S	25		I lines 13 throug s, grants paid Stm		6,584. 171,000.	S. 26 . 1	····	+		171,000.
	1		s, grants paid அட்ட s and disbursen		1/1,000.	r- 75	•	+	<u> </u>	1/1,000.
	20	Add lines 24 a	nd 25	n¢nts.	177,584.		0		0.	171,000.
	27	Subtract line 2	6 from line 12:			٠,			,	ر
	a	Excess of reve and disbursen	enue over expen	ses	36,193.	* * , ' .	÷	-	,	, , , , , , , , , ,
	н		ome (if negative, ente	r -0-1	30,133.	,	· 0		1 3.54	41
	1		ne (if negative, enter	-	1	3	• ,	+	0.	

Page 2

Dar	+ 11	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End	of year
Га		(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-bearing ·			
	2	Savings and temporary cash investments	2,110,906.	194,808.	194,808.
	3	Accounts receivable	ha Chantodostavinotavinotavino vienestaviti astronita –	4.50 displacement 5 manifelement to the founded of programment of	manus money with the grant con
		Less allowance for doubtful accounts ►			
	4	Pledges receivable		نست المستنث كسسا السسعة،	د تد شید سیسیسفیدستانشد
		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)	, , , , , , , , , , , , , , , , , , ,	The second secon	· · · · · · · · · · · · · · · · · · ·
ŝ		Less allowance for doubtful accounts		······································	
A S E T	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
S	10:	a Investments – U.S. and state government obligations (attach schedule)			
	ļ	investments — corporate stock (attach schedule)		533,173.	585,499.
	•	c Investments — corporate bonds (attach schedule)	1,040,094.	2,459,212.	2,495,663.
	11	Investments – land, buildings, and equipment basis	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Tamahan Kalan	
		Less: accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans.			
	13	Investments – other (attach schedule)			
	14				and the second distance of the second
		Less accumulated depreciation (attach schedule)			
		Other assets (describe) Total assets (to be completed by all filers — see instructions. Also, see page 1, item l)	3,151,000.	3,187,193.	3,275,970.
Ļ	17	Accounts payable and accrued expenses			
Å	18	Grants payable			B 25 1 2 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2
В	19	Deferred revenue			17 13 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Ľ	20	Loans from officers, directors, trustees, & other disqualified persons			
I T	21	Mortgages and other notes payable (attach schedule)		· · · · · · · · · · · · · · · · · · ·	· *:
- 1	22	Other liabilities (describe			
E S	23		0.	0.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
N F	24	Unrestricted	3,151,000.	3,187,193.	
Ê Ü T Ņ	25	Temporarily restricted .			
D	26	Permanently restricted			
A S S A E T A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
E L T A	27	Capital stock, trust principal, or current funds			
SN	28	Paid-in or capital surplus, or land, building, and equipment fund			
o E	29	Retained earnings, accumulated income, endowment, or other funds			
RS	30	Total net assets or fund balances (see the instructions)	3,151,000.	3,187,193.	*
	31	Total liabilities and net assets/fund balances (see the instructions)	3,151,000.	3,187,193.	
Parl	: 111	Analysis of Changes in Net Assets or Fund Balance			-
1	Total	I net assets or fund balances at beginning of year — Part II, colu of-year figure reported on prior year's return).		gree with	3,151,000.
		r amount from Part I, line 27a		2	36,193.
		increases not included in line 2 (itemize)		3	30,133.
		lines 1, 2, and 3			3,187,193.
		ases not included in line 2 (itemize)		5	0,10,,100.
		I net assets or fund balances at end of year (line 4 minus line 5)	- Part II. column (b) I		3,187,193.
			, (-), !		

b c d e 2 Capital gain net income or (net capital loss) — If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see the instructions) If (loss), enter -0-	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)					(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
c d e e (e) Gross sales proce (f) Deprecation allowed (g) Cost or other basis (h) Gain or (cross) (e) plus (f) minus (g) a 599,182. 625,07625,894. 625,07	1a UBS SUMMARY	u		P		Various	Various
d e e (e) Gross sales price (f) Depreciation allowed (or allowable) (or allowable) (p) Cost or other basis (p) Cost or other basis (p) Sam or (tocs) (p) Sus (f) minus (g) a 599,182. 625,076, -25,894. 625,076, -25,894. 626,076, -25,894. 627,076, -25,894. 628,076, -25,894. 629,076, -25,894. 629,076, 62	b						
e (e) Cross sales price (f) Depreciation allowed (gr Cost or other basis plus expense of sale (e) plus (f) minus (g) a 599,182. 625,07625,894. c d d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (g) Fair Market Value as of 12/31/69 (g) Adjusted basis over column (g) and owned by the foundation on 12/31/69 (g) Fair Market Value as of 12/31/69 (g) Adjusted basis over column (g) and owned by the foundation on 12/31/69 (g) Fair Market Value as of 12/31/69 (g) Excess of column (g) am minus column (h), bit of the standard of the sale of 12/31/69 (g) Excess of column (g) am minus column (h), bit of the standard of the sale of 12/31/69 (g) Excess of column (g) am minus column (h), bit of the standard of the sale of 12/31/69 (g) Excess of column (g) am minus column (h), bit of the standard of the sale of 12/31/69 (g) Excess of column (g) am minus column (h), bit of the standard of the sale of 12/31/69 (g) Excess of column (g) am minus column (h), bit of the standard (h) of 12/31/69 (g) Excess of column (g) am minus column (h), bit of the sale of 12/31/69 (g) Excess of column (g) am minus column (h) and the sale of 12/31/69 (g) Excess of column (g) am minus column (h) and the sale of 12/31/69 (g) Excess of column (g) am minus column (h) and the sale of 12/31/69 (g) Excess of column (g) am minus column (h) and the sale of 12/31/69 (g) Excess of column (g) am minus column (h) and the sale of 12/31/69 (g) Excess of column (g) am minus column (h) and the sale of 12/31/69 (g) Excess of column (g) am minus column (h) and the sale of 12/31/69 (g) Excess of column (g) am minus column (h) and the sale of 12/31/69 (g) Excess of column (g) am minus column (h) and the sale of 12/31/69 (g) Excess of column (g) am minus column							
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a b					_		
b	as of 12/31/69		over column (j), if a	ny	tha	ain minus column (k an -0-) o r Losses (fr	om column (h))
c d d e 2 Capital gain net income or (net capital loss) — [if gain, also enter in Part I, line 7]	a						-25,894.
e 2 Capital gain net income or (net capital loss)		<u> </u>			·		
2 Capital gain net income or (net capital loss) — If gain, also enter in Part I, line 7 2 2 -25, 894. 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see the instructions) If (loss), enter -0- 3 3 -25, 894. Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income (N/A) If section 4940(d)(2) applies, leave this part blank Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? — Yes — No If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part 1 Enter the appropriate amount in each column for each year, see the instructions before making any entries. Calendary period years Calendary year — Adjusted qualifying distributions — Net value of noncharitable-use assets — (column (b) divided by column (c)) 2009 2008 2007 2006 2007 2006 2007 2006 2007 4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the							
2 Capital gain net income or (net capital loss)						- 1, 1	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see the instructions) If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net investment income (For optional use by domestic fo		et capital loss) If gain, also	o enter in Part I, line 7				25 224
If gain, also enter in Part I, line 8, column (c) (see the instructions) if (loss), enter -0	3 Net short-term capital gain or	_	د ــ	<u> </u>	2		-25,894.
In Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income N/A	, ,		, ,,,				
(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income) If section 4940(d)(2) applies, leave this part blank Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If Yes,' the foundation does not qualify under section 4940(e). Do not complete this part 1. Enter the appropriate amount in each column for each year, see the instructions before making any entries. (a) Calendar year (or fax year beginning in) Adjusted qualifying distributions Calendar year (or fax year beginning in) 2009 2008 2007 2006 2007 2006 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the	in Part I, line 8	e o, column (c) (see the instructions	s) 11 (loss), effici -0-		3		-25,894.
If section 4940(d)(2) applies, leave this part blank Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?	Part V Qualification Unde	er Section 4940(e) for Reduce	ed Tax on Net Investme	ent Incor	ne		
Calendar year (or lax year beginning in) Adjusted qualifying distributions Ret value of noncharitable-use assets Column (b) divided by column (c)) 2009 2008 2007 2006 2005 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5 Multiply line 4 by line 3 5 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the	Was the foundation liable for the se If 'Yes,' the foundation does not qua	ction 4942 tax on the distributable ai	omplete this part		95	Yes	No
Base period years Calendar year (or tax year beginning in) Adjusted qualifying distributions Net value of noncharitable-use assets Distribution ratio (column (b) divided by column (c)) 2009 2008 2007 2006 2005 Total of line 1, column (d) Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years A Enter the net value of noncharitable-use assets for 2010 from Part X, line 5 Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the			1	g arry error	<u> </u>	(d)	
2008 2007 2006 2005 2 Total of line 1, column (d) 2 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 3 4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5 5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) 6 7 Add lines 5 and 6 7 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the	Base period years Calendar year (or tax year		Net value of	sets	(colu	Distribution	
2006 2005 2 Total of line 1, column (d) 2 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 3 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5 4 Multiply line 4 by line 3 5 Enter 1% of net investment income (1% of Part I, line 27b) 6 Add lines 5 and 6 7 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the	2009						
2005 2 Total of line 1, column (d) 2 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 3 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5 4 Multiply line 4 by line 3 5 Enter 1% of net investment income (1% of Part I, line 27b) 6 Add lines 5 and 6 7 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the							
2 Total of line 1, column (d) 2 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 3 4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5 5 Multiply line 4 by line 3 5 Enter 1% of net investment income (1% of Part I, line 27b) 6 Enter 1% of net investment income (1% of Part XII, line 27b) 7 Add lines 5 and 6 7 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the							
2 Total of line 1, column (d) 2 3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 3 4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5 5 Multiply line 4 by line 3 5 Enter 1% of net investment income (1% of Part I, line 27b) 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 7 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the							
Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5 5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the	2005				I		
number of years the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5 5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the	2 Total of line 1, column (d)				2		
5 Multiply line 4 by line 3 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 7 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the					3	<u>.</u>	
6 Enter 1% of net investment income (1% of Part I, line 27b) 6 7 Add lines 5 and 6 7 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the	4 Enter the net value of noncha	ritable-use assets for 2010 from Part	X, line 5	-	4		
7 Add lines 5 and 6 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the	5 Multiply line 4 by line 3				5		
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the	6 Enter 1% of net investment in	come (1% of Part I, line 27b)			6		
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the	7 Add lines 5 and 6				7	4	
If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions	8 Enter qualifying distributions f	rom Part XII, line 4			8		
	If line 8 is equal to or greater Part VI instructions	than line 7, check the box in Part VI,	, line 1b, and complete that $\mathfrak p$	part using a	a 1%	tax rate See th	e

		.5003			age 4
	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see to	he ins	tructions)	
1 a	Exempt operating foundations described in section 4940(d)(2), check here			L	
	Date of ruling or determination letter: (attach copy of letter if necessary — see instr.)	.			_
t	Domestic foundations that meet the section 4940(e) requirements in Part V,	1			0.
	check here ► and enter 1% of Part I, line 27b	.			
(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	_ -	علاك أعلام	شسسند	
_	foundations only Others enter -0-).	2			<u>0.</u>
3	Add lines 1 and 2	3			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	S		0.
6	Credits/Payments	- -			",
	2010 estimated tax pmts and 2009 overpayment credited to 2010 Exempt foreign organizations — tax withheld at source 6b				ا ت را
				- (1)	
	· · · · · · · · · · · · · · · · · · ·		ا ز من د	: د دو ر	* * '
٠,		_		<u> </u>	
,	Total credits and payments Add lines 6a through 6d	7			0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9		-	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			0.
10	Enter the amount of line 10 to be Credited to 2011 estimated tax	11			
11	t VII-A Statements Regarding Activities				
			3-	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	1	No X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1ь	,	X
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials pub	lichad	,	١.	57.52
	or distributed by the foundation in connection with the activities	1131164	7× 0		. Dr. ("7%)
c	: Did the foundation file Form 1120-POL for this year?		1 c		X
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			8.0,3	,
_	(1) On the foundation \$ 0. (2) On foundation managers. \$		0.		
٠	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed of foundation managers • \$ 0.	11	,	3' .	, 5 ³ ,
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		-	٠.	5. (3)
_			'. ·	8 > 3	13.5
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	l Essimina.	X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		Х
	olf 'Yes,' has it filed a tax return on Form 990-T for this year?		4b	N	/A
			5		Х
	If 'Yes,' attach the statement required by General Instruction T		1, 40	7 - 35	3 1
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		*35	` '	, ,
	By language in the governing instrument, or			1.5	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that col	nflict	1		验二
	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	Х	
8 <i>a</i>	Enter the states to which the foundation reports or with which it is registered (see the instructions)		2, 5,	٠,-	
	N/A			- 4	71.
b	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			نينين	
	(or designate) of each state as required by General Instruction G ² If 'No,' attach explanation		8b	X	ļ
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	1 <u>9</u> 42(j)	(5)	in Lieu	
	for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' complete	Part X	KĪV 9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their na	imes	10		v
BAA	and addresses		10 Form 99	n.PF	2010)

Form 990-PF (2010) THE ROBERT LYON LI			26-15	00324 Page
Part VII-B Statements Regarding Activit	ies for Which Forn	n 4720 May Be Req	uired (continued)	
5a During the year did the foundation pay or incu	-			
(1) Carry on propaganda, or otherwise attemption	_		∐ Yes X	No Signature
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	Yes X	No Single		
(3) Provide a grant to an individual for travel,	No No			
(4) Provide a grant to an organization other to in section 509(a)(1), (2), or (3), or section	No No			
(5) Provide for any purpose other than religio educational purposes, or for the prevention	No 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 a current notice regar	qualify under the excep ding disaster assistance	tions	5b N/A
Organizations relying on a current notice rega	rding disaster assistan	ce check here	▶ [
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?	•	N/A Yes	No S
If 'Yes,' attach the statement required by Reg	ulations section 53 494	5-5(d)		
6a Did the foundation, during the year, receive an on a personal benefit contract?		, , , , , , , , , , , , , , , , , , ,	∐Yes X	No 🛴
b Did the foundation, during the year, pay prem If 'Yes' to 6b. file Form 8870	iums, airectly or mairec	cily, on a personal bene	iit contract?	6b X
7a At any time during the tax year, was the found	dation a party to a proh	iibited tax shelter transa	ction? Yes X	No
b If yes, did the foundation receive any proceed				7b
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	ers, Highly Paid E	mployees,
1 List all officers, directors, trustees, foundation	(b) Title and average	(c) Compensation	(d) Contributions to	(a) Expanse account
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expense account, other allowances
DONNA LYON	Executive Di	0.	0.	0.
3467 N MOORING WAY	0			
COCONUT GROVE, FL 33133				
_DAVID_LYON	Director	0.	0.	0.
1801 N SEDGWICK	0			
CHICAGO, IL 60614	· · · · · · · · · · · · · · · · · · ·			
2 Comments of five binback and annual				l work
2 Compensation of five highest-paid employee (a) Name and address of each employee	(b) Title and average	(c) Compensation	(d) Contributions to	T
paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense account, other allowances
None				
			•••	
			·	
Total number of other employees paid over \$50,000				0
BAA	TEEA0306L 0	7/23/10	, , , , , , , , , , , , , , , , , , , 	Form 990-PF (2010)

Form 990-PF (2010) THE ROBERT LYON LEUKEMIA FOUNDATION 26-150 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Each and Contractors (continued)	
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None	(o) os portos (or
	· · · · · · · · · · · · · · · · · · ·
Total number of others receiving over \$50,000 for professional services ▶	0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
 	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>	
	<u> </u>
2	
All other program related investments. See instructions	
All other program-related investments. See instructions 3	
~	
Total. Add lines 1 through 3 ▶	0.
BAA	Form 990-PF (2010)

Form 990-PF (2010) THE ROBERT LYON LEUKEMIA FOUNDATION	26-1500324	Page 8
Part X Minimum Investment Return (All domestic foundations must complete this part see instructions.)	Foreign found	lations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes a Average monthly fair market value of securities.	1a	
b Average of monthly cash balances	1 b	
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	0.
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	·····
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0.
6 Minimum investment return. Enter 5% of line 5	6	0.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operand certain foreign organizations check here ► ☐ and do not complete this	-	ations
1 Minimum investment return from Part X, line 6	1	
2a Tax on investment income for 2010 from Part VI, line 5	<u> </u>	
b Income tax for 2010 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2c	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	
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	0.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1a	171,000.
b Program-related investments — total from Part IX-B	1ь	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes.	2	
2. Amounts set aside for specific charitable projects that satisfy the		

3a 3ь

3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required) **b** Cash distribution test (attach the required schedule)

4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

171,000. 4 5 6 171,000.

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) Adjusted qualifying distributions. Subtract line 5 from line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7		X 3 7 3	Spr. St. Land	0.
2 Undistributed income, if any, as of the end of 2010:		, , , ,	, , ,	1 1/2 1 1/2
a Enter amount for 2009 only		ν.	0.	* , s.
b Total for prior years: 20, 20, 20	** / / · · · / / .	0.	***a,	, , , , , , , , , , , , , , , , , , , ,
3 Excess distributions carryover, if any, to 2010:		es.		. 4 . 74
a From 2005	,	~	į.	,
b From 2006	\` ₂	, , , , , , , , , , , , , , , , , , , ,	, K	
c From 2007) ; ;	`~. }	<u> </u>	√y * ∀y 4
d From 2008 57,000. e From 2009 172,185.				\$ () ** ₄ (*
f Total of lines 3a through e	229,185.			33.
4 Qualifying distributions for 2010 from Part	225,105.	, , , , , , , , , , , , , , , , , , , ,	× 38. • 17.	
XII, line 4 ► \$ 171,000.	5.5 K - 586 - 1		Although the state of the state	
a Applied to 2009, but not more than line 2a		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.	
b Applied to undistributed income of prior years	, sign of the same			vs 5' 85%
(Election required — see instructions)	, , , ,	0.		, , , , , , , , , , , , , , , , , , ,
c Treated as distributions out of corpus	_	, ,	` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	ight.
(Election required – see instructions)	0.	,		<u> </u>
d Applied to 2010 distributable amount	171 000	`*		0.
e Remaining amount distributed out of corpus	171,000.	3 4 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	· , , , , , , , , , , , , , , , , , , ,	22.2.3.4.4
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the	0.			0.
same amount must be shown in column (a))				
			The Market	
6 Enter the net total of each column as indicated below:	4, 4, 4		, 50,700	13 No. 10 No.
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	400,185.	A 1. 47 8 4		
b Prior years' undistributed income Subtract			, pm	, ,
line 4b from line 2b		0.	46	
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency				
has been issued, or on which the section				
4942(a) tax has been previously assessed	9 2	0.	ارئي يو دا ما الحرار المادي المادي المادي المادي الماد	- 1967 - 1969 - 1969 - 1969 - 1969 - 1969 - 1969 - 1969 - 1969 - 1969 - 1969 - 1969 - 1969 - 1969 - 1969 - 196
d Subtract line 6c from line 6b Taxable		0		
amount – see instructions		0. ** · **;	25 158 2	
 Undistributed income for 2009. Subtract line 4a from line 2a. Taxable amount — see instructions 		" " " " " " " " " " " " " " " " " " "	0.	
into Za. Taxable afficant. See histractions	12 7 2 20 7 20 7 20 7 20 7 20 7 20 7 20			
f Undistributed income for 2010 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2011.				0.
7 Amounts treated as distributions out of			5. 85 编元表第二	
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(q)(3)				
(see instructions)	0.			n 73 ; 20, 5 , 43
8 Excess distributions carryover from 2005 not	0			
applied on line 5 or line 7 (see instructions)	0.	2 2 2 2	2	
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	400,185.	San San San		
10 Analysis of line 9	100,200.	·	^ ,	
a Excess from 2006				3
b Excess from 2007	, , , , , , , , , , , , , , , , , , ,	2	\$	
c Excess from 2008 57,000.	3			
d Excess from 2009 172,185.	<u>,</u> -, ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	, ,	v v	
e Excess from 2010 171,000.	· ·			

Form 990-PF (2010) THE ROBERT LYON	26-1500324	4 Page 10			
Part XIV Private Operating Foundati		N/A			
1 a If the foundation has received a ruling or us effective for 2010, enter the date of the	ruling	·	-	· -	
b Check box to indicate whether the foundation		erating foundation d		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year (a) 2010	(b) 2009	Prior 3 years	(d) 2007	(a) Total
investment return from Part X for each year listed	(a) 2010	(b) 2009	(c) 2008	(a) 2007	(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					
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			L		
Part XV Supplementary Information assets at any time during the	(Complete this ne year — see ir	part only if the estructions.)	organization na	ia \$5,000 or mor	e in
Information Regarding Foundation Mana a List any managers of the foundation who close of any tax year (but only if they have None	have contributed m	nore than 2% of the than \$5,000) (See	total contributions resection 507(d)(2))	eceived by the found	dation before the
b List any managers of the foundation who a partnership or other entity) of which the None	own 10% or more of foundation has a 1	of the stock of a corp 0% or greater intere	poration (or an equalest	ally large portion of	the ownership of
Hone					
2 Information Regarding Contribution, Gra Check here In the foundation only requests for funds. If the foundation make complete items 2a, b, c, and d	makes contributions es gifts, grants, etc	s to preselected char , (see instructions) to	ritable organizations o individuals or orga	anizations under oth	
a The name, address, and telephone numb	er of the person to	whom applications s	should be addressed	d	
		-			
b The form in which applications should be	submitted and info	rmation and materia	ls they should inclu	de	
c Any submission deadlines					
d Any restrictions or limitations on awards,	such as by geograp	phical areas, charital	ble fields, kinds of i	nstitutions, or other	factors

3 Grants and Contributions Paid During the Year or Approved for Future Payment									
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	1	Amount					
Name and address (home or business)	substantial contributor	recipient							
a Paid during the year									
Total			► 3a	7120					
b Approved for future payment Total			► 3b						

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated						
	Unrelat	Unrelated business income Excluded t		d by section 512, 513, or 514	- (e)	
	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (see the instructions)	
1 Program service revenue			code			
ab			+			
	+		 			
cd			+			
e	-					
g Fees and contracts from government agencies	-		+			
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments			+			
4 Dividends and interest from securities			+			
5 Net rental income or (loss) from real estate	× , , , , ,	The state of the s	1 1/4		15.2% 14. 1 2.75.5	
a Debt-financed property	· · · · · · · · · · · · · · · · · · ·	3		/ / / / / / / / / / / / / / / / / / / /	, , , ,	
b Not debt-financed property		-	+			
6 Net rental income or (loss) from personal property						
7 Other investment income			14	66,671.		
			1 14	00,071.	-25,894.	
8 Gain or (loss) from sales of assets other than inventory			 		-25,694.	
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory	<u> </u>		5 . 5 ;	14 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	K\$ 0.77.57.4	
11 Other revenue	_^\\$	4 3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	2.18	****	32 77 77 1	
a	+		-	· · · · · · · · · · · · · · · · · · ·		
b	+		+			
c			-			
d	 		<u> </u>			
10 Cohlada Add aslamas (b) (d) and (a)	34.75 10 8 4		2 4 - gires	CC C71	25 004	
12 Subtotal Add columns (b), (d), and (e)	7.		, , , \$e.e.	66,671.	-25,894. 40,777.	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculated				13	40,777.	
						
	e Accompl	ishment of Exem	ot Purpe	oses		
Part XVI-B Relationship of Activities to th	e Accomp		•			
·				A contributed important such purposes) (See t	ly to the he instructions)	
Line No. Explain below how each activity for which accomplishment of the foundation's exemption				A contributed important such purposes) (See t	ly to the he instructions)	
· · · · · · · · · · · · · · · · · · ·				A contributed important such purposes) (See t	ly to the he instructions)	
Line No. Explain below how each activity for which accomplishment of the foundation's exemption				A contributed important such purposes) (See t	ly to the he instructions)	
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Line No. Explain below how each activity for which accomplishment of the foundation's exemption				A contributed important such purposes) (See t	ly to the he instructions)	

Form 990-PF (2010) THE ROBERT LYON LEUKEMIA FOUNDATION 26-1500324 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

								T & .		$\overline{}$
describe	organization directly ed in section 501(c) c to political organizat	of the Code (ot	ngage in any her than sect	of the following ion 501(c)(3) org	with any o janizations	ther organization or in section	on 527,		Yes	No
a Transfei	rs from the reporting	foundation to	a noncharitat	ole exempt organ	nzation of			3/2000 AL		1
(1) Cas	h							1a (1)		Х
(2) Oth	er assets							1a (2)		_X
b Other tr	ansactions							16.0 M	عَبُد سَبَدُ	ر در الراس در المحدد
(1) Sale	es of assets to a non-	charitable exe	mpt organizat	ion				1 b (1)		X
(2) Pure	chases of assets fron	n a noncharita	ble exempt o	rganization				1 b (2)		X
(3) Ren	tal of facilities, equip	ment, or other	rassets					1 b (3)		X
(4) Reir	nbursement arranger	ments						1b (4)		Х
(5) Loai	ns or loan guarantee:	s						1 b (5)		Х
(6) Perf	formance of services	or membershi	p or fundraisi	ng solicitations				1b (6)		X
c Sharing	of facilities, equipme	ent, mailing lis	ts, other asse	ts, or paid empl	oyees			1c		X
the good	nswer to any of the alds, other assets, or s isaction or sharing ar	ervices given	by the reporti	ng foundation. If	the found	ation received I	less than fair r	market value in	ue of	
(a) Line no	(b) Amount involved	(c) Name o	f noncharitable e	empt organization	(d)	Description of tran	nsfers, transaction	s, and sharing arran	gement	\$
N/A										
					ļ					
				·			<u>. </u>			
						311.				
describe	oundation directly or it ed in section 501(c) of complete the following	of the Code (ot	ated with, or r her than sect	elated to, one or non 501(c)(3)) or	more tax in section	-exempt organi 527?	zations	Yes	X	No
	Name of organization		(b) Ty	pe of organizati		(6	Description o	of relationship		
N/A	Name of organization	011	(6) 1)	pe of organizati	<u> </u>		, Description C	or relationship		
14/ 42				- 17.25						
		_		· · · · · · · · · · · · · · · · · · ·		·			·	
		 -								
										——
1 1	penalties of perjury, I declare and complete Declaration	e that I have exami of preparer (other t	ned this return, in han taxpayer or fi	cluding accompanying duciary) is based on a	schedules an Il information	d statements, and to of which preparer ha	o the best of my knows as any knowledge	owledge and belief, it	is true,	
Sign	to an	\mathcal{M}	T		1	21.11				
lere	natate of officer or trustee		\sim		Date	21.11	Title			
30	Print/Type preparer's nam	ne	Prenare	r's signature		Date		, PTIN		
	1 " ' '			ه ایماری	E * on	PA cohy	Check if	J"		
Paid	Scott W. Rit						self-employed	 		
Preparer	_			ional Cons		, Ltd.	Firm's EIN ► N	/ A		
Jse Only				oad, Suite	325		<u> </u>	0.47\ 400 0		
	De	eerfield,	IL 6001	5-5293			Phone по (847) 498-8		
BAA								Form 99 0)-PF (2010)

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

2010

Name of the organization		Employer identification number
THE ROBERT LYON LEUKEMIA FOUND	26-1500324	
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 as	a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a pri	vate foundation
	501(c)(3) taxable private foundation	
Check if your propagation is covered by the Co	moved Dude or a Casaid Bude	
Check if your organization is covered by the Ge Note. Only a section 501(c)(7), (8), or (10) orga	nization can check boxes for both the General Rule and 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 more	(in money or property) from any one
contributor (Complete rans rand ir)		
Special Rules		
	000 000 57 11 1 111 00 1/00	
509(a)(1) and 170(b)(1)(A)(vi), and received	orm 990 or 990-EZ, that met the 33-1/3% support test of the from any one contributor, during the year, a contribution of VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I a	of the greater of (1) \$5,000 or
For a section $501(c)(7)$, (8), or (10) organization	ation filing Form 990 or 990-EZ, that received from any one	e contributor, during the year.
aggregate contributions of more than \$1,000 the prevention of cruelty to children or animal) for use exclusively for religious, charitable, scientific, liter	rary, or educational purposes, or
For a section 501(c)(7), (8), or (10) organiza	ition filing Form 990 or 990-EZ, that received from any one	e contributor, during the year.
contributions for use exclusively for religious	s, charitable, etc. purposes, but these contributions did not	aggregate to more than \$1,000
purpose Do not complete any of the parts u	ontributions that were received during the year for an <i>excli</i> inless the General Rule applies to this organization because	<i>isively</i> religious, charitable, etc, se it received nonexclusively
religious, charitable, etc, contributions of \$5,		► \$
Caution: An organization that is not covered by	the General Rule and/or the Special Rules does not file So	chedule B (Form 990, 990-F7, or
990-PF) but it must answer 'No' on Part IV, line	2 of their Form 990, or check the box on line H of its Form	m 990-EZ, or on line 2 of its Form
	requirements of Schedule B (Form 990, 990-EZ, or 990-F	
BAA For Paperwork Reduction Act Notice, see 990EZ. or 990-PF.	e the Instructions for Form 990, Schedu	le B (Form 990, 990-EZ, or 990-PF) (2010)

Name of org		Employer identification number	
THE RO	DBERT LYON LEUKEMIA FOUNDATION		26-1500324
Part I [®]	Contributors (see instructions.)		N. 400 4100-
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(d) Type of contribution
1	DONNA LYON 1406 N ASTOR CHICAGO, IL 60610	\$173 <u>,</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(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 contribution	(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 contribution	(d) Type of contribution
		- \$ -	Person Payroll Complete Part II if there is a noncash contribution Page 1
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contribution	(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 contribution	(d) Type of contribution
		_ _\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
BAA	TEEA0702L 10/26/10	Schedule B (Fo	orm 990. 990-EZ, or 990-PF) (2010)

of 1

of Part I

Page 1

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2010)

	3 (Form 990, 990-EZ, or 990-PF) (2010)		Page		1 of Part I
Name of organization THE ROBERT LYON LEUKEMIA FOUNDATION				Employer identification number 26-1500324	
Part II 🗥	Noncash Property (see instructions)				
(a) No. from Part I	(b) Description of noncash property given		FMV (or	c) estimate) tructions)	(d) Date received
	N/A	<u> </u>			-
] \$_			
(a) No. from Part I	(b) Description of noncash property given		(FMV (or (see inst	c) estimate) tructions)	(d) Date received
		\$_			
(a) No. from Part I	(b) Description of noncash property given		FMV (or (see inst	c) estimate) ructions)	(d) Date received
		\$_			
(a) No. from Part I	(b) Description of noncash property given		FMV (or (see inst	c) estimate) ructions)	(d) Date received
		\$_			
(a) No. from Part I	(b) Description of noncash property given		(/ FMV (or (see inst	c) estimate) ructions)	(d) Date received
		 \$_			
(a) No. from Part I	(b) Description of noncash property given		(MV (or (see inst	c) estimate) ructions)	(d) Date received

TEEA0703L 10/26/10

Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

BAA

Name of organization

Employer identification number 26-1500324

THE ROBERT LYON LEUKEMIA FOUNDATION

Part III Exclusively religious, charitable, etc, individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete cols (a) through (e) and the following line entry

(a) No. from	(b)	(c)	(d)
Part I	Purpose of gift	Use of gift	Description of how gift is held
N/A			1
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a)	(b)	(c)	(d)
lo. from Part I	Purpose of gift	Use of gift	Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a)	(b)	(c)	(d)
o. from Part I	Purpose of gift	Use of gift	Description of how gift is held
		(e)	
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
(a) lo. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, addres:	(e) Transfer of gift s. and ZIP + 4	Relationship of transferor to transferee

2010	Federal Statements	Page 1
Client 18477	THE ROBERT LYON LEUKEMIA FOUNDATION	26- 15 00324
6/10/11		12 03PM
Statement 1 Form 990-PF, Part I, Line 11 Other Income		
	(a) (b) Net Revenue Investment per Books Income	(c) Adjusted Net Income
Other Investment Income	Total \$ 66,671. \$ 66,671.\$ 0.	\$ 0.
Statement 2 Form 990-PF, Part I, Line 16a Legal Fees		
MUCH SHELIST	(a) (b) Net (c) Expenses Investment Adjusted Per Books Income Net Income \$ 333. Total \$ 333. \$ 0. \$ 0.	(d) Charitable Purposes 0.
Statement 3 Form 990-PF, Part I, Line 18 Taxes		
US TREASURY	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 626. Total \$ 626. \$ 0. \$ 0.	(d) Charitable Purposes \$ 0.
Statement 4 Form 990-PF, Part I, Line 23 Other Expenses		· .
FILING FEES MARKETING WEBSITE	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 15.	(d) Charitable Purposes \$ 0.

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2010

Federal Statements

Page 2

Client 18477

THE ROBERT LYON LEUKEMIA FOUNDATION—

26-1500324

6/10/11

12 03PM

Statement 5 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:

RESEARCH

THE LEUKEMIA & LYMPHOMA SOCIETY

651 W WASHINGTON SUITE 400

CHICAGO, IL 60661 UNRELATED

NON PROFIT

\$ 160,000.

Class of Activity:

Donee's Name: Donee's Address:

Relationship of Donee:

Organizational Status of Donee:

Amount Given:

RESEARCH

CHILDRENS LEUKEMIA FOUNDATION OF MI

5455 Corporate Drive Suite 306

TROY, MI 48098

UNRELATED

NON PROFIT

10,000.

Class of Activity:

Donee's Name: Donee's Address:

Relationship of Donee: Organizational Status of Donee: Amount Given:

RESEARCH

ED RANDALL'S BAT FOR THE CURE 708 3rd Avenue-18th Floor

NEW YORK, NY 10017 UNRELATED

NON PROFIT

1,000.

Total \$ 171,000.

Form **8868**(Rev January 2011)

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 If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits Part I 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 complete Part I only All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns Name of exempt organization Employer identification number Type or print THE ROBERT LYON LEUKEMIA FOUNDATION 26-1500324 File by the due date for filing your return See Number, street, and room or suite number. If a P.O. box, see instructions 1801 N SEDGWICK instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions CHICAGO, IL 60614 Enter the Return code for the return that this application is for (file a separate application for each return) 04 Application Is For Return Application Return Code Is For Code Form 990 Form 990-T (corporation) 07 Form 990-BL Form 1041-A 08 Form 990-EZ 03 Form 4720 09 Form 5227 Form 990-PF 04 10 Form 990-T (section 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 The books are in the care of FAX No. ► Telephone No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box 🕒 If it is for part of the group, check this box 🕨 and attach a list with the names and EINs of all members the extension is for 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15 , 20 11 , to file the exempt organization return for the organization named above The extension is for the organization's return for. X calendar year 20 10 or tax year beginning _____, 20 ___, and ending 2 If the tax year entered in line 1 is for less than 12 months, check reason | Initial return Final return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 3a \$ 0. b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax 0. payments made Include any prior year overpayment allowed as a credit 3b|\$ c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions. 3c|\$ 0.

payment instructions.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for