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

2010

Department of the Treasury
Internal Revenue Service

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

For calendar year 2010, or tax year beginning

, and ending

G Check all that apply

☐ Initial return☐ Initial return of a former public charity☐ Final return☐ Amended return☒ Address change☐ Name change

Name of foundation

FITSIMONDS CHARITABLE TRUST
V08813004

A Employer identification number

31-1723311

Number and street (or P.O. box number if mail is not delivered to street address)

C/O JPMORGAN CHASE BANK, NA; P.O. BOX 3038

Room/suite

B Telephone number

414-977-1210

City or town, state, and ZIP code

MILWAUKEE, WI 53201

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

H Check type of organization

☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end of year

(from Part II, col (c), line 16)

\$ 3,289,327. (Part I, column (d) must be on cash basis.)

J Accounting method

☒ Cash☐ Accrual☐ Other (specify)**Part I Analysis of Revenue and Expenses**

(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)

(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

Revenue	1 Contributions, gifts, grants, etc., received	217,423.		N/A	
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	536.	522.		STATEMENT 1
	4 Dividends and interest from securities	45,299.	45,299.		STATEMENT 2
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	353,336.			
	b Gross sales price for all assets on line 6a	1,496,188.			
	7 Capital gain net income (from Part IV, line 2)		353,336.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income				
	12 Total. Add lines 1 through 11	616,594.	399,157.		OGDEN, UT
	13 Compensation of officers, directors, trustees, etc.	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees STMT 3	22,127.	0.		22,127.
	b Accounting fees				
	c Other professional fees STMT 4	15,024.	15,024.		0.
	17 Interest STMT 5	890.	890.		0.
	18 Taxes				
	19 Depreciation and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses				
	24 Total operating and administrative expenses. Add lines 13 through 23	38,041.	15,914.		22,127.
	25 Contributions, gifts, grants paid	120,000.			120,000.
	26 Total expenses and disbursements. Add lines 24 and 25	158,041.	15,914.		142,127.
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	458,553.			
	b Net investment income (if negative, enter -0-)		383,243.		
	c Adjusted net income (if negative, enter -0-)			N/A	

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Part II Balance Sheets <small>Attached schedules and amounts in the description column should be for end-of-year amounts only</small>		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing		120,707.	120,707.
	2 Savings and temporary cash investments	280,415.	109,149.	109,149.
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock STMT 7	2,131,898.	1,865,558.	2,227,384.
	c Investments - corporate bonds STMT 8	0.	775,749.	832,087.
11 Investments - land, buildings, and equipment basis ▶				
Less: accumulated depreciation ▶				
12 Investments - mortgage loans				
13 Investments - other				
14 Land, buildings, and equipment basis ▶				
Less: accumulated depreciation ▶				
15 Other assets (describe ▶)				
16 Total assets (to be completed by all filers)	2,412,313.	2,871,163.	3,289,327.	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
23 Total liabilities (add lines 17 through 22)	0.	0.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/>			
	and complete lines 24 through 26 and lines 30 and 31			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/>			
	and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	2,412,313.	2,871,163.	
	28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
29 Retained earnings, accumulated income, endowment, or other funds	0.	0.		
30 Total net assets or fund balances	2,412,313.	2,871,163.		
31 Total liabilities and net assets/fund balances	2,412,313.	2,871,163.		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	2,412,313.
2 Enter amount from Part I, line 27a	2	458,553.
3 Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 6	3	748.
4 Add lines 1, 2, and 3	4	2,871,614.
5 Decreases not included in line 2 (itemize) ▶ RETURN OF CAPITAL ADJUSTMENT	5	451.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	2,871,163.

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Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADED SECURITIES			
b CLASS ACTION SETTLEMENT			
c CAPITAL GAINS DIVIDENDS			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 1,494,435.		1,142,852.	351,583.
b 51.			51.
c 1,702.			1,702.
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			351,583.
b			51.
c			1,702.
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 }	2	353,336.
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) If (loss), enter -0- in Part I, line 8	{ }	3	N/A

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2009	161,611.	2,367,023.	.068276
2008	130,732.	2,376,382.	.055013
2007	146,405.	2,796,152.	.052359
2006	133,952.	2,694,343.	.049716
2005	125,035.	2,623,547.	.047659

2 Total of line 1, column (d)	2	.273023
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	.054605
4 Enter the net value of noncharitable-use assets for 2010 from Part X, line 5	4	2,668,983.
5 Multiply line 4 by line 3	5	145,740.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	3,832.
7 Add lines 5 and 6	7	149,572.
8 Enter qualifying distributions from Part XII, line 4	8	142,127.

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.

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary-see instructions)		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	7,665.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0.
3 Add lines 1 and 2	3	7,665.
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	7,665.
6 Credits/Payments		
a 2010 estimated tax payments and 2009 overpayment credited to 2010	6a	1,972.
b Exempt foreign organizations - tax withheld at source	6b	
c Tax paid with application for extension of time to file (Form 8868)	6c	6,028.
d Backup withholding erroneously withheld	6d	
7 Total credits and payments. Add lines 6a through 6d	7	8,000.
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	335.
11 Enter the amount of line 10 to be credited to 2011 estimated tax <input type="checkbox"/> 335. Refunded <input type="checkbox"/> 0.	11	0.

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ 0. (2) On foundation managers <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> WI		
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? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

N/A

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Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A	13	X	
14	The books are in care of ▶ JPMORGAN CHASE BANK, N.A. Telephone no ▶ 312-732-3564 Located at ▶ 10 SOUTH DEARBORN FL 8, CHICAGO, IL ZIP+4 ▶ 60603			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year ▶ 15 N/A			
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of the foreign country ▶	16	Yes	No
				X

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5)	Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here N/A ▶ <input type="checkbox"/>	1b	
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 2010?	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ▶		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions) N/A	2b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010) N/A	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b	X

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

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

N/A

5b

Organizations relying on a current notice regarding disaster assistance check here

☒

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

X

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

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

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 9		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

0

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Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

(continued)

3

Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0

Part IX-A

Summary of Direct Charitable Activities

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

Expenses

1	N/A	
		0.
2		
3		
4		

Part IX-B

Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

Amount

1	N/A	
		0.
2		
All other program-related investments See instructions		
3	N/A	
		0.
Total. Add lines 1 through 3		0.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	2,506,568.
b	Average of monthly cash balances	1b	203,059.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	2,709,627.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	2,709,627.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	40,644.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,668,983.
6	Minimum investment return. Enter 5% of line 5	6	133,449.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part)

1	Minimum investment return from Part X, line 6	1	133,449.
2a	Tax on investment income for 2010 from Part VI, line 5	2a	7,665.
b	Income tax for 2010 (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	7,665.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	125,784.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	125,784.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	125,784.

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	142,127.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	142,127.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	142,127.

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				125,784.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2010				
a From 2005	34,404.			
b From 2006	2,699.			
c From 2007	10,562.			
d From 2008	13,493.			
e From 2009	44,158.			
f Total of lines 3a through e	105,316.			
4 Qualifying distributions for 2010 from Part XII, line 4 ▶ \$ 142,127.				
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2010 distributable amount				125,784.
e Remaining amount distributed out of corpus	16,343.			
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	121,659.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable amount - see instructions		0.		
e Undistributed income for 2009 Subtract line 4a from line 2a Taxable amount - see instr			0.	
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 corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005 not applied on line 5 or line 7	34,404.			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	87,255.			
10 Analysis of line 9				
a Excess from 2006	2,699.			
b Excess from 2007	10,562.			
c Excess from 2008	13,493.			
d Excess from 2009	44,158.			
e Excess from 2010	16,343.			

N/A

☐ 4942(1)(3) or ☐ 4942(1)(5)

(4) Gross investment income

[illegible]

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

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

Recipient		If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)					
a Paid during the year					
SEE STATEMENT 10					
Total				3a	120,000.
b Approved for future payment					
NONE					
Total				3b	0.

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

FITZSIMONDS CHARITABLE TRUST
V08813004

Employer identification number

31-1723311

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

☒

501(c)(3) exempt private foundation

☐

4947(a)(1) nonexempt charitable trust treated as a private foundation

☐

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

☐

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year

▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Name of organization

FITZSIMONDS CHARITABLE TRUST
V08813004

Employer identification number

31-1723311

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	LEONA FITZSIMONDS C/O K. CHRISTIANSEN, 777 E. WISCONSIN AVE. MILWAUKEE, WI 53202	\$ 11,465.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	LEONA FITZSIMONDS C/O K. CHRISTIANSEN, 777 E. WISCONSIN AVE. MILWAUKEE, WI 53202	\$ 205,958.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Employer identification number

V08813004

31-1723311

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	VARIOUS SECURITIES _____ _____ _____ _____	\$ 488,535.	12/28/10
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_____	_____ _____ _____ _____	\$ _____	_____

Name of organization

FITZSIMONDS CHARITABLE TRUST

V08813004

Employer identification number

31-1723311

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 columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions) ▶ \$

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

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	AMOUNT
JPMORGAN MONEY MARKET FUNDS	38.
OTHER MMF INTEREST	498.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	536.

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
OTHER INTEREST & DIVIDENDS	47,001.	1,702.	45,299.
TOTAL TO FM 990-PF, PART I, LN 4	47,001.	1,702.	45,299.

FORM 990-PF LEGAL FEES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	22,127.	0.		22,127.
TO FM 990-PF, PG 1, LN 16A	22,127.	0.		22,127.

FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES	15,024.	15,024.		0.
TO FORM 990-PF, PG 1, LN 16C	15,024.	15,024.		0.

FORM 990-PF	TAXES	STATEMENT	5
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DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES WITHHELD	890.	890.		0.
TO FORM 990-PF, PG 1, LN 18	890.	890.		0.

FORM 990-PF	OTHER INCREASES IN NET ASSETS OR FUND BALANCES	STATEMENT	6
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DESCRIPTION	AMOUNT
TO REFLECT CORRECT BALANCE TRANSFER FROM OUTSIDE ACCOUNT	748.
TOTAL TO FORM 990-PF, PART III, LINE 3	748.

FORM 990-PF	CORPORATE STOCK	STATEMENT	7
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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
AGRIUM INC - 135 SHS	4,149.	12,386.
ATLAS COPCO AB SPONS ADR B - 378 SHS	1,928.	8,552.
CERNER CORP - 191 SHS	7,761.	18,095.
FLOWERVE CORP - 131 SHS	6,647.	15,618.
KEPPEL LTD SPONS ADR - 1284 SHS	10,426.	22,692.
T ROWE PRICE INTERNATIONAL FUNDS INC NEW ASIA FUND - 5010.692 SHS	64,602.	96,105.
SPDR S&P 500 ETF TRUST - 1808 SHS	215,630.	227,356.
SCHLUMBERGER LTD - 203 SHS	8,288.	16,951.
AVALONBAY COMMUNITIES INC - 137 SHS	8,698.	15,419.
THORNBURG VALUE FUND FD CL I - 1726.079 SHS	46,000.	59,463.
ISHARES S&P MIDCAP 400 INDEX FUND - 480 SHS	32,214.	43,531.
DODGE & COX INTERNATIONAL STOCK - 2914.421 SHS	92,880.	104,074.
ARBITRAGE FUNDS - I CL I - 4659.892 SHS	60,725.	59,600.
JPM US REAL ESTATE FD - SEL FUND 3037 - 7782.382 SHS	88,830.	121,250.
JPM INTREPID AMERICA FD - SEL FUND 1206 - 2710.666 SHS	46,000.	62,156.
JPM MARKET EXPANSION INDEX FD - SEL FUND 3708 - 5500.382 SHS	45,160.	59,184.
JPM ASIA 3 FD - SEL FUND 1134 - 3465.277 SHS	96,607.	131,265.
VANGUARD MSCI EMERGING MARKETS ETF - 2500 SHS	109,822.	120,365.
JPM US LRGE CAP CORE PLUS FD - SEL FUND 1002 - 4593.875 SHS	69,000.	94,955.

HARTFORD CAPITAL APPRECIATION FUND - 3596.56 SHS	92,000.	124,585.
MANNING & NAPIER FUND INC 3 SERIES - 6024.688 SHS	101,516.	116,096.
EATON VANCE MUT FDS TR GLOBAL MACRO - I - 8713.453 SHS	90,123.	89,487.
EAGLE SER MID CAP STK I - 2121.851 SHS	45,904.	59,497.
BARC ASIA MKT PLS NOTE 03/24/11 - 20000 SHS	20,000.	22,180.
CS SPX NOTE 05/02/11 - 53000 SHS	53,000.	56,244.
JPM RESEARCH MARKET NEUTRAL FD - SEL FUND - SEL - 1935.822 SHS	30,287.	29,889.
BARC BREN DJUBSF3 1/24/12 - 25000 SHS	25,000.	27,638.
HIGHBRIDGE DYNAMIC COMM STRG FD -SEL STRATEGY FUND - SE - 3888.819 SHS	65,693.	75,326.
GS EAFE NOTE 04/25/11 - 25000 SHS	25,000.	24,445.
BARC COMMODITY CPN 5/9/11 - 25000 SHS	25,000.	26,713.
HSBC GOLD CPN NOTE 10/21/11 - 25000 SHS	25,000.	25,388.
DB BREN ASIA BASKET 11/2/11 - 25000 SHS	25,000.	25,315.
MS BREN INDEX 11/23/11 - 35000 SHS	35,000.	35,572.
JPM BREN MID 12/1/11 - 50000 SHS	50,000.	51,050.
SG BREN EAFE 11/30/11 - 25000 SHS	25,000.	24,650.
BARC WTI QRN 12/21/11 - 25000 SHS	25,000.	25,250.
DB BREN EAFE 01/06/12 - 25000 SHS	25,000.	25,000.
DB BREN ASIA BASKET 01/06/12 - 25000 SHS	25,000.	25,178.
SG CONT BUFF EQ SPX 06/29/12 - 35000 SHS	35,000.	34,990.
DOLBY LABORATORIES INC CL A - 208 SHS	6,668.	13,874.
TOTAL TO FORM 990-PF, PART II, LINE 10B	1,865,558.	2,227,384.

FORM 990-PF	CORPORATE BONDS	STATEMENT	8
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DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
GOLDMAN SACHS TRUST HIGH YIELD FUND INSTITUTIONAL SHS - 5911.158 SHS	42,383.	43,151.
VANGUARD FIXED INCOME SECS F INTR TRM CP PT (FUND 71) - 5203.62 SHS	46,000.	51,620.
ISHARES BARCLAYS TIPS BOND FUND - 554 SHS	55,611.	59,566.
EATON VANCE MUT FDS TR FLT RT CL I - 5989.583 SHS	46,000.	53,667.
JPM HIGH YIELD FD - SEL FUND 3580 5.95% - 16936.672 SHS	115,000.	138,034.
JPM SHORT DURATION BOND FD - SEL FUND 3133 1.12% - 24848.807 SHS	265,641.	272,591.
DREYFUS/LAUREL FDS TR PRM EMRGN MK I - 2693.318 SHS	38,460.	38,945.
JPM STR INC OPP FD FUND 3844 2.00% - 10405.788 SHS	116,978.	123,100.
JPM INTL CURRENCY INCOME FD INCOME FUND 1.74% - 4570 SHS	49,676.	51,413.
TOTAL TO FORM 990-PF, PART II, LINE 10C	775,749.	832,087.

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 9

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
LEONA I. FITZSIMONDS 825 N. PROSPECT AVE #2202 MILWAUKEE, WI 53202-3966	TRUSTEE 1.00	0.	0.	0.
MICHAEL HEDRICK 25713 KNOLLWOOD DRIVE BARRINGTON, IL 60010-1495	TRUSTEE 1.00	0.	0.	0.
SUSAN L. HEDRICK 25713 KNOLLWOOD DRIVE BARRINGTON, IL 60010-1495	TRUSTEE 1.00	0.	0.	0.
STEPHEN FITZSIMONDS 2639 HURD AVENUE EVANSTON, IL 60201	TRUSTEE 1.00	0.	0.	0.
MARY ELLEN FITZSIMONDS 2639 HURD AVENUE EVANSTON, IL 60201	TRUSTEE 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

FORM 990-PF

GRANTS AND CONTRIBUTIONS
PAID DURING THE YEAR

STATEMENT 10

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
ADVOCATE LUTHERAN GENERAL HOSP 205 W TOUHY AVE STE 225 PARK RIDGE, IL 60068	NONE PROGRAM SUPPORT	PUBLIC CHARITY	2,000.
BARRINGTON HIGH SCHOOL MATH DEPARTMENT 616 W MAIN ST BARRINGTON, IL 60010	NONE PROGRAM SUPPORT	PUBLIC CHARITY	5,500.
BARRINGTON HIGH SCHOOL 616 W MAIN ST BARRINGTON, IL 60010	NONE PROGRAM SUPPORT	PUBLIC CHARITY	5,500.
BOY SCOUTS NORTHEAST ILLINOIS COUNCIL 2745 SKOKIE VALLEY RD HIGHLAND PARK, IL 60035	NONE PROGRAM SUPPORT	PUBLIC CHARITY	1,000.
BOYS AND GIRLS CLUB OF GREATER CHICAGO 550 W VAN BUREN ST STE 350 CHICAGO, IL 60607	NONE PROGRAM SUPPORT	PUBLIC CHARITY	5,000.
CARE POINT ADULT CHILD & FAMILY ASSOC 113 CUSTER AVE EVANSTON, IL 60202	NONE PROGRAM SUPPORT	PUBLIC CHARITY	2,000.
CASA OF COOK COUNTY 1100 S HAMILTON CHICAGO, IL 60612	NONE PROGRAM SUPPORT	PUBLIC CHARITY	2,000.
COLUMBIA ST. MARY'S FOUNDATION INC 4425 N PORT WASHINGTON RD GLENDALE, WI 53212	NONE PROGRAM SUPPORT	PUBLIC CHARITY	5,000.

EVANSTON MCGAW YMCA 1000 GROVE ST EVANSTON, IL 60201	NONE PROGRAM SUPPORT	PUBLIC CHARITY	1,000.
EVANSTON SCHOOL CHILDREN CLOTHING ASSOCIATION 1500 MCDANIEL AVE EVANSTON, IL 60201	NONE PROGRAM SUPPORT	PUBLIC CHARITY	2,000.
EVANSTON TOWNSHIP HIGH SCHOOL BOOSTERS 1600 DODGE AVE EVANSTON, IL 60201	NONE PROGRAM SUPPORT	PUBLIC CHARITY	5,000.
EVANSTON TOWNSHIP HIGH SCHOOL FOUNDATION 1600 DODGE AVE EVANSTON, IL 60201	NONE PROGRAM SUPPORT	PUBLIC CHARITY	6,000.
GIRL SCOUTS OF GREATER CHICAGO AND NORTHWEST INDIANA 222 S RIVERSIDE PLAZA CHICAGO, IL 60606	NONE PROGRAM SUPPORT	PUBLIC CHARITY	1,000.
ILLINOIS PROJECT FOR SPECIAL NEEDS CHILDREN 3305 CORNSTOCK CT MUNDELEIN, IL 60060	NONE PROGRAM SUPPORT	PUBLIC CHARITY	2,000.
KAPPA ALPHA THETA FOUNDATION 8740 FOUNDERS ROAD INDIANAPOLIS, IN 46268	NONE PROGRAM SUPPORT	PUBLIC CHARITY	2,000.
LAST CHANCE HOUSE INC 244 2ND ST CRYSTAL LAKE, IL 60014	NONE PROGRAM SUPPORT	PUBLIC CHARITY	5,000.
MEALS AT HOME PO BOX 279 WILMETTE, IL 60091	NONE PROGRAM SUPPORT	PUBLIC CHARITY	2,000.
MEDICAL COLLEGE OF WISCONSIN - EYE INSTITUTE 9200 W WISCONSIN AVE MILWAUKEE, WI 53226	NONE PROGRAM SUPPORT	PUBLIC CHARITY	5,000.

MILWAUKEE ART MUSEUM 700 N ART MUSEUM DRIVE MILWAUKEE, WI 53202	NONE PROGRAM SUPPORT	PUBLIC CHARITY	5,000.
ROGERS MEMORIAL HOSPITAL FOUNDATION INC 34700 VALLEY RD OCONOMOWOC, WI 53066	NONE PROGRAM SUPPORT	PUBLIC CHARITY	10,000.
SPECIAL OLYMPICS ILLINOIS 605 E WILLOW NORMAL, IL 61761	NONE PROGRAM SUPPORT	PUBLIC CHARITY	3,000.
UNITED PERFORMING ARTS FUND INC 929 N WATER ST MILWAUKEE, WI 53202	NONE PROGRAM SUPPORT	PUBLIC CHARITY	5,000.
UNITED WAY OF EVANSTON 400 E ILLINOIS RD LAKE FOREST, IL 60045	NONE PROGRAM SUPPORT	PUBLIC CHARITY	2,000.
UNITED WAY OF GREATER MILWAUKEE INC 225 W VINE ST MILWAUKEE, WI 53212	NONE PROGRAM SUPPORT	PUBLIC CHARITY	20,000.
WINGS PROGRAM INC PO BOX 95615 PALATINE, IL 60095	NONE PROGRAM SUPPORT	PUBLIC CHARITY	14,000.
YOUTH JOB CENTER OF EVANSTON INC 1114 CHURCH ST EVANSTON, IL 60201	NONE PROGRAM SUPPORT	PUBLIC CHARITY	2,000.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

120,000.

Application for Extension of Time To File an Exempt Organization Return

COPY

OMB No. 1545-1709

► **File a separate application for each return.**

- 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.

Type or print	Name of exempt organization FITZSIMONDS CHARITABLE TRUST V08813004	Employer identification number 31-1723311
File by the due date for filing your return. See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. C/O JPMORGAN CHASE BANK, NA; P.O. BOX 3038	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. MILWAUKEE, WI 53201	

Enter the Return code for the return that this application is for (file a separate application for each return)

0 4

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

JPMORGAN CHASE BANK, N.A.

- The books are in the care of ► **10 SOUTH DEARBORN FL 8 - CHICAGO, IL 60603-2003**
Telephone No. ► **312-732-3564** FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2011**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
► ☒ calendar year **2010** or
► ☐ tax year beginning , 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	\$	8,000.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	1,972.
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	\$	6,028.

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

LHA **For Paperwork Reduction Act Notice, see Instructions.**

Form **8868** (Rev. 1-2011)

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

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

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

Part II		Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).	
Type or print File by the extended due date for filing your return. See instructions.	Name of exempt organization FITZSIMONDS CHARITABLE TRUST	Employer identification number 31-1723311	
	Number, street, and room or suite no. If a P.O. box, see instructions. C/O JPMORGAN CHASE BANK, NA; P.O. BOX 3038		
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. MILWAUKEE, WI 53201		

Enter the Return code for the return that this application is for (file a separate application for each return)

0 4

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

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

JPMORGAN CHASE BANK, N.A.

- The books are in the care of **▶ 10 SOUTH DEARBORN FL 8 - CHICAGO, IL 60603-2003**

Telephone No. **▶ 312-732-3564**

FAX No. **▶**

- If the organization does not have an office or place of business in the United States, check this box ☐

- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) **▶** . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until **NOVEMBER 15, 2011**.

5 For calendar year **2010**, or other tax year beginning **▶**, and ending **▶**.

6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

7 State in detail why you need the extension

ADDITIONAL TIME IS NEEDED TO FILE A COMPLETE AND ACCURATE RETURN

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	8,000.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	8,000.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification

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

Signature **▶ Jack W. Smith** Title **▶ CPA**

Date **▶ 5/11/11**