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Form **990-PF** Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

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

2010

OMB No 1545-0052

- For	calendar year 2010, or tax year be	ginning		, and ending		
· G (Check all that apply: Initi	al return	Initial return of a for	mer public charity	Final return	1
	Ame	ended return	Address chang	e	Name change	·
Na	me of foundation				A Employer identification	number
	THE EXPERIME	ENTAL STAT	ION			
	C/O DANIEL A	PETERMAN			32-0017985	· ·
Nur	mber and street (or P O box number if mail	is not delivered to street	address)	Room/suite	B Telephone number	
	6100 S BLACK	STONE			773-241-54	.58
Cit	y or town, state, and ZIP code				C If exemption application is p	ending, check here
	CHICAGO, IL	60637			D 1. Foreign organizations	
Н (Check type of organization:	Section 501(c)(3) ex	empt private foundation		2 Foreign organizations me check here and attach co	eeting the 85% test, omputation
	Section 4947(a)(1) nonexempt ch	naritable trust	Other taxable private foundat	ion	E If private foundation sta	
l Fa	aır market value of all assets at end o	f year J Accounting	ng method: Cash	X Accrual	under section 507(b)(1)	
(fi	rom Part II, col. (c), line 16)	Ot	her (specify)		F If the foundation is in a	60-month termination
•	\$ 123,5	92. (Part I, colu	mn (d) must be on cash b	asis)	under section 507(b)(1	
Pa	art Analysis of Revenue and Ex	penses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	(The total of amounts in columns (in necessarily equal the amounts in columns)	o), (c), and (d) may not column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc	c., received	262,558.			
	2 Check If the foundation is not					
_	3 Interest on savings and temporary cash investments		1.	1	. 1.	STATEMENT 1
20 <u>%</u>	4 Dividends and interest from se	ecurities				
20	5a Gross rents		34,268.	34,268	. 34,268.	STATEMENT 2
10	b Net rental income or (loss)	-21,215.				STATEMENT 3
න ී	62 Net gain or (loss) from sale of assets	•				
	b Gross sales price for all assets on line 6a					
NOV Revenue	7 Capital gain net income (from Part IV	V, line 2)		0	•	
ے ش	8 Net short-term capital gain				0.	
<u>iii</u>	9 Income modifications					100000
Š	10a Gross sales less returns and allowances	114,313.				STATEMENT 4
SCANNED NOV	- b-Less Cost of goods sold	96,357.				
		7	17,956.		17,956.	
90	c GREPOTO WED		63,967.	0	. 63,967.	STATEMENT 5
	Total Add lines 1 through of	31	378,750.	34,269	. 116,192.	
	Compensation of officers, directors	trustees, etc	27,549.	0	. 0.	27,549.
- 1	14_Other employee salaries and	ages	63,845.	0	. 0.	63,845.
- 1	15 (Persion plans employee bene	fris				
že S	15 Preston lans employee bene 16e Legal tees.			-		
ě	b Accounting fees	STMT 6	5,862.	0	. 0.	5,862.
and Administrative Expens	c Other professional fees	STMT 7	42,779.	0		
Š.	17 Interest					
rati:	18 Taxes	STMT 8	22,715.	0		22,715.
iist	19 Depreciation and depletion		5,195.	3,116	. 3,116.	
<u> </u>	20 Occupancy		69,433.	42,031		27,402.
Ad	21 Travel, conferences, and meet	ings	12,058.	0	. 0.	12,058.
P	22 Printing and publications	-	8,973.	6,862	6,862.	
<u> </u>	23 Other expenses	STMT 9	105,067.	3,474		
Operating	24 Total operating and administ					
ber	expenses. Add lines 13 through		363,476.	55,483	. 55,483.	305,914.
ō	25 Contributions, gifts, grants pai	-	0.			0.
	26 Total expenses and disburser	i				
	Add lines 24 and 25		363,476.	55,483	. 55,483.	305,914.
	27 Subtract line 26 from line 12:					
	Excess of revenue over expenses ar	nd disbursements	15,274.			
	b Net investment income (if nega			0	•	
	c Adjusted net income (if negative	i			60,709.	
0235		·				5 000 PE (0040C

Form 990-PF (2010) THE EXPERIMENTAL STATION

C/O DANIEL A PETERMAN

Fo	rm 99	00-PF (2010) C/O DANIEL A PETERMAN		32-0	0017985 Page 2
F	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
_	_	Column Should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing	43,106.	78,304.	78,304.
		Savings and temporary cash investments			
	3	Accounts receivable 6,060.			
		Less: allowance for doubtful accounts	7,775.	6,060.	6,060.
	4	Pledges receivable ►			
	İ	Less: allowance for doubtful accounts			
	1 -	Grants receivable	20,000.	9,135.	9,135.
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
ssets		Inventories for sale or use	3,523.	3,598.	3,598.
SS		Prepaid expenses and deferred charges	3,000.	2,968.	2,968.
Ř	1	Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis 44, 266.			
		Less accumulated depreciation STMT 10► 20,739.	26,072.	23,527.	23,527.
	15	Other assets (describe)			
_	$\overline{}$	Total assets (to be completed by all filers)	103,476.	123,592.	<u> 123,592.</u>
		Accounts payable and accrued expenses	7,562.	13,404.	
	18	Grants payable			
es	19	Deferred revenue	24,750.	23,750.	
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)			
			22 242	25.454	
_	23	Total liabilities (add lines 17 through 22)	32,312.	37,154.	
		Foundations that follow SFAS 117, check here			
φ		and complete lines 24 through 26 and lines 30 and 31.	40 -40	44 444	
Net Assets or Fund Balances	24	Unrestricted	-12,769.	-13,039.	
ajai	25	Temporarily restricted	83,933.	99,477.	
B	26	Permanently restricted			
Š		Foundations that do not follow SFAS 117, check here			
౼		and complete lines 27 through 31.			
ts	27	Capital stock, trust principal, or current funds			
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Ϋ́	29	Retained earnings, accumulated income, endowment, or other funds			
Ž	30	Total net assets or fund balances	71,164.	86,438.	
	l ₋ .		100 456	100 500	
_	31	Total liabilities and net assets/fund balances	103,476.	123,592.	
P	art	III Analysis of Changes in Net Assets or Fund Ba	lances		
_	T				· · · · · · · · · · · · · · · · · · ·
1		net assets or fund balances at beginning of year - Part II, column (a), line 30	J		E4 464
	•	agree with end-of-year figure reported on prior year's return)		1	71,164.
		amount from Part I, line 27a		2	15,274.
		rincreases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	86,438.
		eases not included in line 2 (itemize)	(h) L 00	5	0.
6	rotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	mn (b), line 30	6	86,438.
					Form 990-PF (2010)

Part IV Capital Gains a	and Losses for Tax on Ir	rvestment	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.)					How acquired - Purchase - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1a								
b NOI	NE							
<u>c</u>				<u> </u>				
<u>d</u>				<u> </u>			····	
<u>e</u>				<u> </u>				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis xpense of sale			(h) Gain or (loss (e) plus (f) minus		
a .		 						
<u>b</u>		 						
C		 						
<u>d</u>		-				 .		
Complete only for assets showing	g gain in column (h) and owned by	the foundation	on 12/31/69			(I) Gains (Col. (h) gain	minue	
	(j) Adjusted basis		cess of col. (i)		С	ol. (k), but not less tha	n -0-) or	
(i) F.M.V. as of 12/31/69	as of 12/31/69		col. (j), if any			Losses (from col. ((h))	
a								
<u>b</u>								
C								
d				一				
e								
	(If nam, also enter	r in Part I line	7					
2 Capital gain net income or (net cap	pital loss) $ \begin{cases} \text{If gain, also enter} \\ \text{If (loss), enter -0} \end{cases} $	- in Part I, line	7	•	2			
3 Net short-term capital gain or (los	•							
If gain, also enter in Part I, line 8,		id (0).)				
If (loss), enter -0- in Part I, line 8				ľ	3			
Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Inv	estment In	come		
(For optional use by domestic private	foundations subject to the section	4940(a) tax on	net investment in	come	9.)		N/A	
If anotion 4040(d)(2) applies Joseph th	us nort blank							
If section 4940(d)(2) applies, leave th	is part biarik.							
Was the foundation liable for the sect	ion 4942 tax on the distributable am	nount of any ye	ar in the base per	°bor			Yes No	
If "Yes," the foundation does not quali								
	ach column for each year; see instri	uctions before	making any entri	es.				
(a) Base period years	(b)	tributions	Not value of ne	(c)	otable was asset	Distrit	(d) outlon ratio	
Calendar year (or tax year beginnin	ng in) Adjusted qualifying dis	uributions	ivet value of no	ncnar	aritable-use assets (col. (b) divided by col. (c))			
2009								
2008		_						
2007								
2006		_						
2005			-					
a was after 4 color 40								
2 Total of line 1, column (d)			an booth a			2		
3 Average distribution ratio for the 5		on line 2 by 5,	or by the number	of ye	ars			
the foundation has been in existen	ice it less than 5 years					3		
4 Enter the net value of noncharitable	le-use assets for 2010 from Part X,	line 5				4		
5 Multiply line 4 by line 3						5		
	(40) (5)							
6 Enter 1% of net investment incom	e (1% of Part I, line 27b)					6		
- A141 F - 10						_		
7 Add lines 5 and 6						7		
6 Falor qualificate distributions ()	Port VII line 4							
8 Enter qualifying distributions from						8		
	line 7, check the box in Part VI, line	1b, and comp	lete that part usin	g a 19	% tax rate.			
See the Part VI instructions.								

THE EXPERIMENTAL STATION

Form 990-PF (2010) C/O DANIEL A PETERMAN 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 X and enter "N/A" on line 1. (attach copy of letter if necessary-see instructions) Date of ruling or determination letter: b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% N/A 1 of Part I, line 27b 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-) 3 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 0. Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 Credits/Payments: a 2010 estimated tax payments and 2009 overpayment credited to 2010 b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6c 6d d Backup withholding erroneously withheld 0. 7 Total credits and payments, Add lines 6a through 6d Enter any **penalty** for underpayment of estimated tax. Check here _____ if Form 2220 is attached 8 0. 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 11 Enter the amount of line 10 to be: Credited to 2011 estimated tax Refunded > 11 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 X any political campaign? 1a b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-POL for this year? Х 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. > \$ 0 • (2) On foundation managers. ▶ \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 0. managers. > \$ Х 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 If "Yes," attach a detailed description of the activities 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes X X 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? **4a** N/A b if "Yes," has it filed a tax return on Form 990-T for this year? 4b X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 If "Yes," attach the statement required by General Instruction T 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? Х 7 Did the foundation have at least \$5,000 in assets at any time during the year? 7 If "Yes," complete Part II, col (c), and Part XV 8a Enter the states to which the foundation reports or with which it is registered (see instructions) TI 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 8b Х 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 vear 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses

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Pa	art VII-A Statements Regarding Activities (continued)	, , , ,		
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
•	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before	<u> </u>		
'-	August 17, 2008?	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	х	
	Website address ► WWW.EXPERIMENTALSTATION.ORG		**	
14	The books are in care of ▶ DAN PETERMAN Telephone no. ▶ 773 – 24	1-5	458	
•	Located at ►6100 S BLACKSTONE, CHICAGO, IL ZIP+4 ►60			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			$\overline{\Box}$
	and enter the amount of tax-exempt interest received or accrued during the year	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,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	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	ļ		
Pa	rt 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? X Yes No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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.)			
Ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	١		7.7
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)?	1b_		X
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	۱.,		X
	before the first day of the tax year beginning in 2010? Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1c		Λ_
2	defined in section 4942(j)(3) or 4942(j)(5));			
9	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			
u	before 2010?			
	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.)	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?			
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		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	_	<u>X</u>
þ	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		<u>X</u>

THE EXPERIMENTAL STATION Form 990-PF (2010) . C/O DANIEL A PETERMAN 32-0017985 Page 6 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: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? 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 」Yes ☐ No expenditure responsibility for the grant? N/A 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 Yes X No a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? X 6b 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 X No b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted to position (c) Compensation (e) Expense account, other (If not paid, enter -0-) (a) Name and address allowances SEE STATEMENT 11 0 0. 0.

				1	i
2	Compensation of five highest-paid employees (other than those in	ncluded 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				
_					
_		<u>_</u> .			
			1		
_			_		
_		_			
_					
		_	İ		
_					
<u>T(</u>	otal number of other employees paid over \$50,000			▶ i	(

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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	<u> </u>
Part IX-A Summary of Direct Charitable Activities	T
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 BLACKSTONE BICYCLE WORKS - APPROXIMATELY 100 YOUTHS IN	
PROGRAM LEARNING BIKE REPAIR; \$110,000 IN EARNED REVENUE.	
	145,988
261ST STREET FARMERS MARKET - STARTED PROGRAM; 12 VENDORS;	1
DEVELOPED EDUCATIONAL OUTREACH PROGRAM AND TRAINING OTHER	
MARKETS TO ACCEPT FOOD STAMPS.	171,391
3 INVISIBLE INSTITUTE - BEGAN TO FUNDRAISE FOR LOCAL	
INVESTIGATIVE REPORTING PROGRAM	
	8,108
4 TENANT PROGRAM - BACKSTORY CAFE OPENED IN MAY '08; YAMAGUCHI	-
INSTITUTE RENTAL	46.056
Part IV-R Common of Decrees Deleted Investments	46,056
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
	Amount
1 <u>N/A</u>	-
	-
	-
	-
All other program-related investments. See instructions.	
3	
	1
	1
Total. Add lines 1 through 3	0.

F	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	indations, s	ee 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	0.
b	Average of monthly cash balances	1b	<u>0.</u> 45,377.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	45,377.
е	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	1 2	0.
3	Subtract line 2 from line 1d	3	45,377.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	681.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	44,696.
6	Minimum investment return. Enter 5% of line 5	6	2,235.
P	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here X and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2010 from Part VI, line 5		
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	
<u>7_</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
Р	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	305,914.
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	305,914.
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	305,914.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for t	ne section

Form **990-PF** (2010)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income	see instructions)	N/A		
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2009	2009	2010
1 Distributable amount for 2010 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only				
b Total for prior years:				
g rotal for prior yourg.				
3 Excess distributions carryover, if any, to 2010:	,			
a From 2005		•		
b From 2006	1			
c From 2007				
d From 2008				
e From 2009	-			
f Total of lines 3a through e	1			
4 Qualifying distributions for 2010 from			<u> </u>	
Part XII, line 4: ► \$				
a Applied to 2009, but not more than line 2a				
b Applied to undistributed income of prior				
years (Election required - see instructions)				
c Treated as distributions out of corpus				
(Election required - see instructions)			· · · · · · · · · · · · · · · · · · ·	
d Applied to 2010 distributable amount			<u></u>	
e Remaining amount distributed out of corpus			<u> </u>	
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount				
must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income. Subtract				
line 4b from line 2b				
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously				
assessed				
d Subtract line 6c from line 6b. Taxable				
amount - see instructions				
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.				
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)				
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7				
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007				
c Excess from 2008				
d Excess from 2009				
e Excess from 2010				

	NIEL A PETERM			32-001	7985 Page 1
Part XIV Private Operating F	-oundations (see instr	uctions and Part VII-A	, question 9)		
1 a If the foundation has received a ruling	or determination letter that it	is a private operating			
foundation, and the ruling is effective for	or 2010, enter the date of the	ruling	▶ 01/2		
b Check box to indicate whether the foun	dation is a private operating	foundation described in	section X 49	42(j)(3) or 4942	?(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed	2,235.	4,066.	0.	0.	6,301
b 85% of line 2a	1,900.	3,456.	0.	0.	5,356
c Qualifying distributions from Part XII,		0/1000			
line 4 for each year listed	305,914.	224,472.	268,022.	114,468.	_912,876
d Amounts included in line 2c not	303/3220	221/1/20	200,0220	113/1001	
used directly for active conduct of					
exempt activities	0.	0.	0.	0.	0.
e Qualifying distributions made directly				<u> </u>	
• •		1			
for active conduct of exempt activities.		224 472	260 222	114 460	010 076
Subtract line 2d from line 2c Complete 3a, b, or c for the	305,914.	224,472.	268,022.	114,468.	912,876
alternative test relied upon:					
a "Assets" alternative test - enter:					_
(1) Value of all assets					0.
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					0.
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)		342,378.	317,513.	171,513.	831,404
, , , , , , , ,		342,370.	317,313.	1/1,313.	021,404
(2) Support from general public and 5 or more exempt					
organizations as provided in		242 270	217 512	171,513.	021 404
section 4942(j)(3)(B)(iii)	-	342,378.	317,513.	1/1,513.	831,404
(3) Largest amount of support from		22 222	20.000	25 222	77 000
an exempt organization		22,000.	30,000.	25,000.	77,000.
(4) Gross investment income		46,280.	37,670.	17,922.	101,872.
Part XV Supplementary Info	the year-see the ins		the foundation na	ad \$5,000 or more	e in assets
		structions.)			
1 Information Regarding Foundation	-				
a List any managers of the foundation where the same and			outions received by the fou	indation before the close	of any tax
year (but only if they have contributed	more man \$5,000). (See Sect	1011 507 (0)(2).)			
NONE					
b List any managers of the foundation w	no own 10% or more of the s	tock of a corporation (or	an equally large portion o	of the ownership of a parti	nership or
other entity) of which the foundation ha	as a 10% or greater interest.				
NONE					
2 Information Regarding Contribut					
Check here ► X if the foundation the foundation makes gifts, grants, etc.	only makes contributions to p . (see instructions) to individi	preselected charitable or lals or organizations und	ganizations and does not a ler other conditions, comp	accept unsolicited reques ilete items 2a, b, c, and d.	ts for funds. If
a The name, address, and telephone nun					
		, ,	··· * ····		
b The form in which applications should	be submitted and information	and materials they show	rild include.		
2 , which applications official	22 Soommod and anormation	. and materials they still	g.a maidao,		
c Any submission deadlines:					
• Ally Submission deadines.					
d Any restrictions or limitations on award	te such as by apparantical a	reae charitable fielde le	nde of inetitutions, or other	r factore:	
w may reservations or minitations on await	io, ouon ao ny yeograpinoara	rous, orial habit litius, Kli	1100 OF MOULUMOND, OF ORM	i idoloi a.	

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Part XV | Supplementary Information (continued)

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Tart XV Supplementary informa				
3 Grants and Contributions Paid During t	he 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	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year				
-				
NONE			l l	
•				
		1		
Total		1	▶ 3a	0.
b Approved for future payment	- 1			
• Approved for future payment				
		[
NONE				
NONE				
	_			
			İ	
, and the second second second second second second second second second second second second second second se				
	ĺ]		
Total		1	▶ 3b	0.
IOTAI			► 3D	υ.

Part XVI-A

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513 or 514	(e)
•	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	sion	Amount	function income
a FARMER'S MARKET FEES					45,056.
b OTHER FEES					16,243.
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	1.	
4 Dividends and interest from securities				= -	
5 Net rental income or (loss) from real estate:					
a Debt-financed property				<u>.</u>	
b Not debt-financed property			16	-21,215.	·
6 Net rental income or (loss) from personal				21,213.	
property					
7 Other investment income					-
8 Gain or (loss) from sales of assets other					
than inventory	`				
9 Net income or (loss) from special events			01	2,668.	
10 Gross profit or (loss) from sales of inventory	900099	17,956.	<u> </u>	2,000	
11 Other revenue:	300033	17,550.			
_					
ab					
_	 			-	
d					
0					
12 Subtotal. Add columns (b), (d), and (e)		17,956.		-18,546.	61,299.
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>	17,550			60,709.
(See worksheet in line 13 instructions to verify calculations.)				· · · · · · · · · · · · · · · · · · ·	00,703.
					
Part XVI-B Relationship of Activities t	o the Acco	mplishment of Ex	emp	t Purposes	
Line No. Explain below how each activity for which inco	me is renorted in	n column (e) of Part XVI-A	contrib	uited importantly to the accom	inlishment of
the foundation's exempt purposes (other than		, ,	O O THE ID	rated importantly to the accom-	phonnent of
1A THE ORGANIZATION'S PROC			IINN	TNG OF A BICY	CLE SHOP TO
TRAIN YOUTH AND TO PROV					
AS PART OF THIS PROGRAM					
SALES OF BICYCLES AND I					
THE ORGANIZATION ALSO		FARMER'S MAR	кет	FOR THE COMM	INTTY.
VENDORS PAY A FEE TO PA					
VIIIDOND III II III IO II		110 111 1110 10			
<u> </u>					<u></u>
	<u></u>		_		
					
					
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Page 13

Part XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable	Part)		rarding Tran			and Relationsh	ins With Noncharita		Page 13
1 Dut the organization directly or indirectly engage in any of the following with any other organization discribed in section 501(c) of the Code (other than section 501(c) of organizations) or wisection 527, relating to political organizations? 1 Transfer from the reporting foundation to a noncharitable exempt organization of. (1) Cash (2) Other assets 1 18(2) X (3) Saler assets on a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Pertal of facilities, expendently or other assets (4) Remiturement arrangements (5) Loss or of man guarantees (6) Loss or of man guarantees (6) Fedormance of services or membership or fundracing solicitations (6) Fedormance of services or membership or fundracing solicitations (6) Fedormance of services or membership or fundracing solicitations (6) Fedormance of services or fundracing solicitations (6) Fedormance of services or fundracing solicitations (6) Amount involved (c) Reime of inoncharitable exempt organization (d) Description of relative value of the popols, other assets, or services given by the reporting foundation. If the foundation releved inset share that market value any arrangement, show in organization or sharing arrangement, show in organization or sharing arrangement, show in a section 501(c) of the Code (other than section 501(c)(3)) or in section 527? 22 Is the foundation directly or indirectly affiliated with, or related to, one or more the exempt organization (d) Description of relationship N/A (a) Remain of organization (b) Type of organization (d) Description of relationship N/A (b) Amount involved (c) Reims of inoncharitable exempt organization or an exempt organization or sharing arrangement, show in a correlate to pulse of the Code (other than section 501(c)(3)) or in section 527? (b) Type of organization (d) Type of organization or sharing arrangement, show in the section 501(c)(3) or in section 527? (a) The section of the Code (other than section 501(c)(3)) or in section 527? (b) Type of	· uit			131613 10 6	and manisactions		ips with NonChanta	DIC	
the Code (other than section 501(c)(3) or ganzations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of. (1) Cash (2) Other assets (3) Rental of backlets, equipment, or other assets (3) Rental of backlets, equipment, or other assets (4) Rentalization and arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) Subset of assets from a noncharitable exempt organization (8) Loans or loan guarantees (9) Arromant end and above is "Fee; complete the following schedule. Column (8) should always show the fair market value of the goods, other assets, or services previous or by the reporting foundation. If the foundation releved the stan fair market value in any transaction or sharing arrangements are necessary to the reporting foundation. If the foundation releved test than fair market value in any transaction or sharing arrangements are services. (9) Arromant involved (9) Arromant involved (1) Arromant involved (1) Arromant involved (1) Arromant involved (1) Arromant involved (2) Name of noncharitable exempt organization (3) Description of relationship (4) Description of relationship N/A (5) Loans or loan guarantees (6) Performance or services reported to service the services received. (8) Arromant involved (9) Arromant involved (1) Arromant involved (1) Arromant involved (1) Arromant involved (1) Arromant involved (2) Arromant involved (3) Involve previous or involved arrowance or involved previous organization or services reported by the reported previous organization. (8) Performance organization (9) Description of relationship (9) Description of relationship (10) Description of relationship (11) Arrowance organization (12) Arromant involved (13) Arromant involved (14) Arromant involved (15	1 Did			of the following	in with any other organizati	on described in section	n 501(c) of	Ye	s No
a Treasfer from the reporting foundation to a noncharitable exempt organization of: (1) Casks of assets to a noncharitable exempt organization (2) Purchases of assets to an anoncharitable exempt organization (3) Renation facilities, equipment, or other assets (4) Renation facilities, equipment and other assets (5) Loss or other angularities (6) Potromance of services or membership or fundasiang solicitations (7) Sales of angularities (8) Potromance of services or membership or fundasiang solicitations (9) Potromance of services or membership or fundasiang solicitations (9) Annount included of the goods, other assets, or paid employees (1) Loss or for fangularities (1) Annount included (2) Name of noncharitable example organization (3) the value of the goods, other assets, or services received. (1) Annount included (2) Name of noncharitable example organization (4) Description of varieties, transactions, and sharing arrangements. (a) Annount included (2) Name of noncharitable example organization (4) Description of relationship (a) Name of organization (b) Type of organization (c) Description of relationship (a) Name of organization (b) Type of organization (c) Description of relationship (a) Name of organization (b) Type of organization (c) Description of relationship (a) Name of organization (b) Type of organization (c) Description of relationship (b) Type of organization (c) Type of organization (c) Description of relationship (a) Type of organization (c) Type of organization (c) Description of relationship (b) Description of relationship (c) Description of relationship (d) Description of relationship (e) Description of relationship (e) Description of relationship (f) Firm's EIN ►							00 .(0) 0.	1	+
(1) Sales of assets to a noncharitable exempt organization (2) Purchase of assets from a noncharitable exempt organization (3) Select all assets to a noncharitable exempt organization (4) Reimbursone of assets from a noncharitable exempt organization (5) Loans or loan guarantees (6) Performance of reserves or membership or fundrating solicitations (6) Performance of assets from a membership or fundrating solicitations (6) Performance of assets from each organization or selection of									
(i) Other assets 0 Other transactions; (1) Salks of assets to a noncharidable exempt organization (2) Purchases of assets from a noncharidable exempt organization (3) Rental of Sections, equipment, or other assets (4) Rental of Sections, equipment, or other assets (5) Loans or loan guarantees (6) Loans or loan guarantees (6) Loans or loan guarantees (7) The salks of the salks or services or membership or fundraising solicitations (8) Performance of services or membership or fundraising solicitations (9) Interest of loans guarantees (9) Interest of loans guarantees (10) Intere		·			g -		11	(1)	x
b. Other transactions: (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of Sectices, equipment, or other assets (4) Rental of Sectices, equipment, or other assets (5) Loans or Bean quarantees (6) Performance of services or membership or fundrasing solicitations (7) It is an answer to any the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting fundation. If the organization of services given by the reporting fundation is reviewed. 2a. Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of seasters, bransactions, and sharing arrangement, show in column (b) the value of the goods, other assets, or services received. 2a. Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organization (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of seasters, bransactions, and sharing arrangements. An An Annual Involved (a) Name of organization (b) Type of organization (c) Description of relationship N/A (a) Name of organization (b) Type of organization (c) Description of relationship N/A (a) Name of organization (b) Type of organization of the based of my knowledge and belief, it is true, correct and complete obsertified of a require logist given tax-eye or disciplination of which prepare to supplications of the high primary and to the based of my knowledge and belief, it is true, correct and complete obsertified of a require logist given tax-eye or disciplination of which prepare to supplications of the high primary and to the based of my knowledge and belief, it is true, correct and complete obsertified of a require logist given tax-eye or disciplination of which prepare to supplications of	٠,								
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(a) Remain of facilities, equipment, or other assets (b) Loars or licen guerantees (c) Performance of services or membership or fundraising solicitations (d) Performance of services or membership or fundraising solicitations (e) Performance of services or membership or fundraising solicitations (e) Performance of services or membership or fundraising solicitations (e) Sharing of facilities, equipment imaking lists, other assets, or paid employees (e) If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services given by the reporting foundation. If the foundation december of the services of the goods, other assets, or services given by the reporting foundation. If the foundation december of the goods, other assets, or services given by the reporting foundation. If the goods, other assets, or services given by the reporting foundation. If the goods, other assets, or services given by the reporting foundation. If the goods, other assets, or services given by the reporting foundation. If the goods, other assets, or services given by the reporting foundation. If the goods, other assets, or services given by the reporting foundation. If the good of the goods, other assets, or services given by the good of the goods, other assets, or services given by the reporting foundation. If the good of goods, other assets, or services given by the good of goods, other assets, or services given by the good of goods, other assets, or services given by the good of goods, other assets, or services given by the good of goods, other assets, or services given by the good of goods, other assets, or services given by the good of goods and services. If the good of good of good of good of good of good of good of good of good of good of	(2)	Purchases of assets from a nonc	haritable exempt	organization					
(4) Rembursement amagements (5) Loans or loan guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) Life in the services of services or membership or fundrasing solicitations (8) Performance of services or membership or fundrasing solicitations (8) Loans or loany of the above size size, complete the following solicitations (9) Life assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (8) the value of the goods, other assets, or services received. (9) Amount involved (9) Amount involved (9) Amount involved (9) Amount involved (9) Name of noncharitable exempt organization (9) Amount involved (9) Amount involved (9) Name of noncharitable exempt organization (9) Conscription of transfers, transactions, and sharing arrangements N/A 11 Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A 12 Life in involved (b) Type of organization (c) Description of relationship (c) Description of relationship (e) Description of relationship (e) Description of relationship (e) Description of relationship (e) Description of relationship (e) Description of relationship (e) Description of relationship (e) Description of relationship (e) Description of relationship (e) Description of relationship (f) Type of organization (f) Type of organization (f) Type of organization (f) Type of organization (f) Type of organization (f) Description of relationship (f) Type of organization (f) Description of relationship (f) Type of organization (f) Type of organization of which prepare has any honovietic description of the property of the property of decise that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete Destription of property of the property of the prop	(3)	Rental of facilities, equipment, or	other assets				16	(3)	
(e) Performance of services or membership or fundrasing solicitations c Sharing of facilities, equipment, mailing lets, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services gowen by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (g) the value of the goods, other assets, or services received. (a) Line to (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements. N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? If Yes, complete the following schedule.	(4)	Reimbursement arrangements					115	(4)	
c Sharing of facilities, equipment, making lists, other assets, or paid employees d if the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. A	(5)	Loans or loan guarantees					16	(5)	X
d if the answer to any of the above is "es," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services greened (b) the value of the goods, other assets, or services received. a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A	(6)	Performance of services or mem	bership or fundra	ısıng solicitatio	ins		16	(6)	X
or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements. N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)) 3) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under remaitize of paying I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete Description of forganization of which prepare has any knowledge. Sign Praid Print/Type preparer's name Preparer's signature Preparer's signature Preparer's signature Print/Type preparer's name	c Sha	ring of facilities, equipment, mailir	ng lists, other asse	ets, or paid em	ployees		1	<u>c </u>	X
column (4) the value of the goods, other assets, or services received. (a) Live no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of triansfers, transactions, and sharing arrangements N/A 2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? Yes X No bit Yes, complete the following schedule. (a) Name of organization (b) Type of organization (e) Description of relationship N/A Under penalties of paraging I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete Description of filters of trustee Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Primty self-employed Firm's self Pirm's self Pir									
(a) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangaments N/A 2a. Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)) of the Code (other than section 501(c)) of the Code (other than section 501(c)) of the Code (other than section 501(c)) of in section 52?? In Yes, complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A					ed less than fair market val	ue in any transaction o	r sharing arrangement, show	ın	
N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? □ Yes ▼ No b If Yes,* complete the following schedule. (a) Name of organization N/A Complete the following schedule. (a) Name of organization N/A Complete the following schedule. (b) Type of organization (c) Description of relationship N/A Signature Signature Signature Date Signature Date Signature Print/Type preparer's name Preparer's signature Date Signature Signature Print/Type preparer's name Preparer's signature Date Signature Print/Type preparer's name Preparer's signature Date Signature Signature Print/Type preparer's name Preparer's signature Signature Print/Type preparer's name Preparer's signature Signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Date Signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Preparer's signature Print/Type preparer's name Prepare									
2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52?? Yes	(a) Line no	(b) Amount involved	(c) Name o		e exempt organization	(d) Description of	f transfers, transactions, and sharing	g arranger	nents
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes				N/A					
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes									
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes					·		···		
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes									
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes		+			····				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes									
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes		-		···					
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes									
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes									
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes					- 111				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes									
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes		+			·······				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes		-							
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes		-			·				
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes		-				-			
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes	2a Is th	e foundation directly or indirectly	affiliated with or	related to one	or more tax-exempt organ	zations described			
Sign Here Print/Type preparer of trustee Date Print/Type preparer Signature of officer or trustee Date Check If PTIN Self-employed Preparer University Prim's name RUZICKA & ASSOCIATES, LTD. Firm's RIN Firm's					· -	ications sood ibs		es [X No
(a) Name of organization N/A Under penalties of perjumal declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete Declaration of preparer (object than taxpayer or fiducisor) is based on all information of which preparer has any knowledge. Signature of officer or trustee Print/Type preparer's name Preparer's signature Date Title Print/Type preparer's name Preparer's signature Firm's name RUZICKA & ASSOCIATES, LTD. Firm's EIN Firm's EIN		` ' '		/(-//					
Sign Here Under penalties of perpuy, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge. Signature of officer or trustee Print/Type preparer's name Preparer's signature Date Check If PTIN self- employed Firm's name ▶ RUZICKA & ASSOCIATES, LTD. Firm's EIN ▶					(b) Type of organization	(c)	Description of relationship		
Sign Here Augustic of preparer (other than taxpayer or fiducian) is based on all information of which preparer has any knowledge. Signature of officer or trustee Date Title		N/A			-				
Sign Here Augustic of preparer (other than taxpayer or fiducian) is based on all information of which preparer has any knowledge. Signature of officer or trustee Date Title									
Sign Here Augustic of preparer (other than taxpayer or fiducian) is based on all information of which preparer has any knowledge. Signature of officer or trustee Date Title									
Sign Here Augustic of preparer (other than taxpayer or fiducian) is based on all information of which preparer has any knowledge. Signature of officer or trustee Date Title					10-711-21		773774		
Sign Here Augustic of preparer (other than taxpayer or fiducian) is based on all information of which preparer has any knowledge. Signature of officer or trustee Date Title		T			<u>.</u>				
Sign Here Signature of officer or trustee Date Title								s true, cor	rect
Signature of officer or trustee Date Title Print/Type preparer's name Preparer Preparer Prim's name Prim's name Prim's EIN Firm's EIN Print/Type preparer's name Preparer Use Only		IMMA	1/		11/	2 d/ F	73 // 5/ =		
Print/Type preparer's name Preparer's signature Date Check ☐ if self- employed Preparer Firm's name ► RUZICKA & ASSOCIATES, LTD: Firm's EIN ►	неге		<u> </u>				<u> </u>		
Paid Preparer Use Only Paid Prim's name ► RUZICKA & ASSOCIATES, LTD. Firm's EIN ►		L <u>' </u>		Dronewaria		1			
Paid Preparer Use Only Prim's name ► RUZICKA & ASSOCIATES, LTD. Firm's EIN ►		Printrype preparer's nam	е	Preparer's si	gnature _	1 1 1			
Preparer Firm's name ► RUZICKA & ASSOCIATES, LTD: Firm's EIN ►	Daid	Auga DI	Duris.	Para	O War to	1/9/. Is	en- employeu		
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Phone no.

NORTHBROOK, IL 60062

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

2010

Employer identification number

THE EXPERIMENTAL STATION C/O DANIEL A PETERMAN 32-0017985 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 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 J 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)

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2 of Part I Employer identification number

Name of organization THE EXPERIMENTAL STATION C/O DANIEL A PETERMAN

32-0017985

Part I	Contributors (see instructions)		2-001/985
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	CEC ARTS LINK AVAILABLE UPON REQUEST CHICAGO, IL	\$ <u>14,325.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	CHICAGO COMMUNITY TRUST AVAILABLE UPON REQUEST CHICAGO, IL	\$ 44,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	CITY OF CHICAGO AVAILABLE UPON REQUEST CHICAGO, IL	\$35,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	ARTS WORK FUND AVAILABLE UPON REQUEST CHICAGO, IL	\$8,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	GRAHAM FOUNDATION AVAILABLE UPON REQUEST CHICAGO, IL	\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6	USDA AVAILABLE UPON REQUEST CHICAGO, IL	\$15,408.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)

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2 of Part I

Name of organization

THE EXPERIMENTAL STATION

C/O DANIEL A PETERMAN

Employer identification number 32-0017985

Part 1	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	RICHARD DRIEHAUS FOUNDATION AVAILABLE UPON REQUEST CHICAGO, IL	\$20,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
8	SPRINGBOARD FDN AVAILABLE UPON REQUEST CHICAGO, IL	\$12, 4 50.	Person X Payroll
(a) No	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
9	HARPER COURTS ARTS COUNCIL AVAILABLE UPON REQUEST CHICAGO, IL	s10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
10	CIRCLE OF SERVICE FOUNDATION AVAILABLE UPON REQUEST CHICAGO, IL	\$9,135.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution)

Page

of Part II

Name of organization
THE EXPERIMENTAL STATION
C/O DANIEL A PETERMAN

Employer identification number 32-0017985

Part II Noncash Property (see instructions)

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) . Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
a) lo. om art l	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_ -		 \$	
53 12-23-1	n		990, 990-EZ, or 990-PF) (2

Schedule B (Form 990, 990-EZ, or 990-PF) (2010) of Part III Name of organization Employer identification number THE EXPERIMENTAL STATION C/O DANIEL A PETERMAN 32-0017985 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, chantable, 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 (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (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 (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

2010 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

990-PF

Current Year Deduction	500.	333.	1,359.	913.	98.	315.	1,326.	1,326.	266.	147.	0	.09	323.
Current C Sec 179		o	0				0	0					
Accumulated Depreciation	2,063.	999.	4,903.	4,222.	324.	788.	5,334.	5,334.	_	368.	63.	.06	484.
Basis For Depreciation	7,500.	5,000.	20,384.	6,388.	687.	2,208.	9,283.	9,283.	2,650.	1,030.	63.	300.	1,615.
Reduction In Basis		0	o		-		0	0					
Bus % Excl													
Unadjusted Cost Or Basis	7,500.	5,000.	20,384.	6,388.	687.	2,208.	9,283.	9,283.	2,650.	1,030.	63.	300.	1,615.
Line No	0017	0017		17	17	17			19B	17	16	16	16
Life	15.00	15.00		7.00	7.00	7.00			5.00	7.00	1.00	5.00	5.00
Method	SL	TS.		31.	J.						31.] SL
Date Acquired	1001055L 110106SL	09050681		060105SL	071006SL	070107SL			041510SL	070107SL	070108SL	070108SL	070108SL
Description	BUILDINGS LEASEHOLD 2IMPROVEMENTS LEASEHOLD 4IMPROVEMENTS	Η ,	S 90-FF FG I TOTAL MACHINERY & EQUIPMENT	30VEN	SOVEN	8OVEN * 990-be bo 1 momat	Y & EQ	H 보 H	1EQUIPMENT	FORMITORE & 9FIXTURES	12MARKET STOVE	13TABLES	14MARKET CANOPIES
Asset	(1 4			(T) 	<u>ц)</u>	ω			П	σ	12	13	14

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2010 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

990-PF

		\vdash					-				
Date Acquired	Method	- por	Lıfe	No No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
070108SL	8ST	<u>rv</u>	5.00	16	250.			250.	75.		50.
070109SL	9SL	<u>ν</u>	5.00	16	793.			793.	46.		159.
			-		6,701.		0	6,701.	1,126.	0	1,005.
					6,701.		Ö	6,701.	1,126.	0	1,005.
070107SL	SL	<u> </u>	5.00	17	1,592.			1,592.	796.		318.
070108SL	SL	Ŋ	5.00	16	1,625.	-		1,625.	488		325.
070109SL	SL	Ŋ	5.00	16	162.			162.	16.		32.
					3,379.		0	3,379.	1,300.	0	675.
					3,379.		.0	3,379.	1,300.	0	675.
		<u>.</u>		 -	-						
062906SL	SL	<u>m</u>	3.00 1	17	1,648.			1,648.	1,648.		0.
07 <mark>01</mark> 07 <mark>SL</mark>	SL	<u>_</u>	3.00	17	762.			762.	635.	•	127.
070108SL	SI	ĸ	3.00	16	741.	-		741.	370.		247.
071009SL	SL	<u>m</u>	3.00	16	1,368.			1,368.	228.		456.
					4,519.		0	4,519.	2,881.	0	830.
				•	4,519.		0	4,519.	2,881.	0	830.
				\dashv	44,266.		0	44,266.	15,544.	0	5,195.

(D) - Asset disposed

* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

FORM 990-PF INTEREST ON SA	AVINGS AND TEMPORARY	CASH INVESTMENTS	STATEMENT	1
SOURCE			AMOUNT	
HARRIS BANK		r		1.
TOTAL TO FORM 990-PF, PART	I, LINE 3, COLUMN A			1.
FORM 990-PF	RENTAL INCOME		STATEMENT	2
KIND AND LOCATION OF PROPER	RTY	ACTIVITY NUMBER	GROSS RENTAL INC	OME
LEASE RENTALS EVENT RENTALS		1 2	20,2 14,0	
	T T-1 F3		34,2	 68.
TOTAL TO FORM 990-PF, PART	I, LINE 5A	-	====	
TOTAL TO FORM 990-PF, PART FORM 990-PF	RENTAL EXPENSES	-	STATEMENT	3
		Y AMOUNT		
FORM 990-PF DESCRIPTION INSURANCE OCCUPANCY DEPRECIATION SUPPLIES INSURANCE	RENTAL EXPENSES ACTIVITY	2,821. 33,929. 2,597. 2,036.	STATEMENT	3
FORM 990-PF DESCRIPTION INSURANCE OCCUPANCY DEPRECIATION SUPPLIES INSURANCE OCCUPANCY DEPRECIATION CLEANING, MAINTENANCE AND F SUPPLIES AND OTHER EXPENSES	RENTAL EXPENSES ACTIVITY NUMBER - SUBTOTAL - 1	2,821. 33,929. 2,597. 2,036.	STATEMENT	3
FORM 990-PF DESCRIPTION INSURANCE OCCUPANCY DEPRECIATION SUPPLIES INSURANCE OCCUPANCY DEPRECIATION CLEANING, MAINTENANCE AND F	RENTAL EXPENSES ACTIVITY NUMBER - SUBTOTAL - 1	2,821. 33,929. 2,597. 2,036. 653. 8,102. 519. 1,055.	TOTAL 41,3	83.

FORM 990-PF INCOME AND COST OF GOODS SOI INCLUDED ON PART I, LINE 10		STATEMENT 4
INCOME		
1. GROSS RECEIPTS	114,313	114,313
4. COST OF GOODS SOLD (LINE 15)	96,357	17,956
6. OTHER INCOME		
7. GROSS INCOME (ADD LINES 5 AND 6)		17,956
COST OF GOODS SOLD		
8. INVENTORY AT BEGINNING OF YEAR 9. MERCHANDISE PURCHASED	3,523 27,352 69,080	99,955
14. INVENTORY AT END OF YEAR	3,598	96,357

FORM 990-PF	OTHER 3	INCOME		STATEMENT 5
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
FARMER'S MARKET FEES OTHER FEES	_	45,056. 16,243.	0.	45,056. 16,243.
GROSS INCOME FROM SPECIAL FUNDRAISING EVENTS		2,668.	0.	2,668.
TOTAL TO FORM 990-PF, PART I	, LINE 11	63,967.	0.	63,967.
FORM 990-PF	ACCOUNT	ING FEES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS			
ACCOUNTING & AUDIT	5,862.	. 0	. 0	5,862.
TO FORM 990-PF, PG 1, LN 16B	5,862.	. 0	. 0	5,862.
FORM 990-PF	OTHER PROFES	SSIONAL FEES		STATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OTHER	42,779.	. 0	. 0	. 42,779.
TO FORM 990-PF, PG 1, LN 16C	42,779.	0	. 0	. 42,779.

FORM 990-PF	TAX	ES	S'.	PATEMENT 8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PAYROLL TAXES LICENSES AND FEES SALES TAX PAID	15,599. 10. 7,106.	0.	0.	15,599. 10. 7,106.
TO FORM 990-PF, PG 1, LN 18	22,715.		0.	22,715.
FORM 990-PF	OTHER E	XPENSES	Si	PATEMENT 9
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADVERTISING AND PROMOTION POSTAGE AND SUPPLIES INSURANCE BANK CHARGES REIMBURSEMENTS BAD DEBTS OTHER INSURANCE INSURANCE	8,029. 12,979. 6,113. 4,901. 49,970. 9,150. 10,451. 2,821. 653.	0. 0. 0. 0. 0. 0. 2,821. 653.	0. 0. 0. 0. 0. 0. 2,821. 653.	8,029. 12,979. 6,113. 4,901. 49,970. 9,150. 10,451. 0.
TO FORM 990-PF, PG 1, LN 23	105,067.	3,474.	3,474.	101,593.
FORM 990-PF DEPRECIATION OF DESCRIPTION	cos	T OR ACCU	MULATED	CATEMENT 10
EQUIPMENT LEASEHOLD IMPROVEMENTS OVEN LEASEHOLD IMPROVEMENTS OVEN GREEN ROOF COMPUTER EQUIPMENT OVEN FURNITURE & FIXTURES BBW TOOLS COMPUTER		2,650. 7,500. 6,388. 7,884. 687. 5,000. 1,648. 2,208. 1,030. 1,592. 762.	266. 2,563. 5,135. 2,367. 422. 1,332. 1,648. 1,103. 515. 1,114. 762.	2,384. 4,937. 1,253. 5,517. 265. 3,668. 0. 1,105. 515. 478. 0.

MADICIDE COLUMN		2		_	
MARKET STOVE		3.		53.	0.
TABLES	30			50.	150.
MARKET CANOPIES	1,61			07.	808
CHAIRS	25			25.	125.
BBW TOOLS	1,62			13.	812.
COMPUTER	74			17.	124.
CANOPY & RACKS	79			05.	588.
BBW TOOLS	16			48.	114.
COMPUTER	1,36	8. — —	68	84. ———————	684.
TOTAL TO FM 990-PF, PART II,	LN 14 44,26	6. 	20,73	39. — —	23,527.
	LIST OF OFFICERS			STAT	EMENT 11
NAME AND ADDRESS	TITLE AND AVRG HRS/W		OMPEN-	EMPLOYEE BEN PLAN CONTRIB	
CONDITE CONTENT DUD					
CONNIE SPREEN, PHD	EXECUTIVE D 40.00	IRECTOR	0.	0.	0.
DAN PETERMAN	PRESIDENT				
D12(1212-22)	LUDGIDENI				
2.1. 1212-11.	4.00		0.	0.	0.
LINDA GLASS		ENT	0.	0.	0.
	4.00	ENT	0.	0.	0.
	4.00 VICE PRESID	ENT		0.	0.
LINDA GLASS	4.00 VICE PRESID 2.00	ENT			
LINDA GLASS	4.00 VICE PRESID 2.00 TREASURER 2.00 DIRECTOR	ENT -	0.	0.	0.
LINDA GLASS MARTY FRIEDMAN	4.00 VICE PRESID 2.00 TREASURER 2.00	ENT ·	0.	0.	0.
LINDA GLASS MARTY FRIEDMAN	4.00 VICE PRESID 2.00 TREASURER 2.00 DIRECTOR 1.00	ENT -	0.0.	0. 0.	0.
LINDA GLASS MARTY FRIEDMAN VINCENT AFZAL	4.00 VICE PRESID 2.00 TREASURER 2.00 DIRECTOR 1.00	ENT	0.	0.	0.

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TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII

4562

Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization 990-PF

(Including Information on Listed Property)

See separate instructions.

► Attach to your tax return.

Business or activity to which this form relates

2010

Attachment Sequence No 67

THE EXPERIMENTAL STATION C/O DANIEL A PETERMAN FORM 990-PF PAGE 1 32-0017985 Part I | Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I 1 Maximum amount (see instructions) 500,000. 2 Total cost of section 179 property placed in service (see instructions) 2 2,000,000. 3 Threshold cost of section 179 property before reduction in limitation 3 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-4 5 5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (c) Elected cost (a) Description of property (b) Cost (business use only) 7 7 Listed property. Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 9 10 Carryover of disallowed deduction from line 13 of your 2009 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 11 12 Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11 12 13 Carryover of disallowed deduction to 2011. Add lines 9 and 10, less line 12 13 Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year 14 15 Property subject to section 168(f)(1) election 15 1.652. 16 Other depreciation (including ACRS) 16 MACRS Depreciation (Do not include listed property.) (See instructions) Part III Section A 17 3,277 17 MACRS deductions for assets placed in service in tax years beginning before 2010 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B - Assets Placed in Service During 2010 Tax Year Using the General Depreciation System (b) Month and year placed in service (c) Basis for depreciation (business/investment use only - see instructions) (d) Recovery (a) Classification of property (e) Convention (g) Depreciation deduction 3-year property 19a 2,650. 5 YRS. SL 5-year property HY 266 b 7-year property C 10-year property d 15-year property е 20-year property f S/L 25-year property 25 yrs g 27 5 yrs ММ S/L h Residential rental property MM 27 5 yrs S/L мм S/L 39 yrs. i Nonresidential real property MM Section C - Assets Placed in Service During 2010 Tax Year Using the Alternative Depreciation System 20a Class life S/I b 12-year 12 yrs. S/L ММ 40-year 40 yrs S/L Part IV | Summary (See instructions.) 21 Listed property Enter amount from line 28 21 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 5,195. Enter here and on the appropriate lines of your return Partnerships and S corporations - see instr 22 23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs 23

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Part V		ty (Include a	utomobiles,	certain c	ther vehi	cles, ce	rtaın con	nputer	s, and pro	perty us	sed for e	ntertain	ment, rec	reation,	or	
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25 Speci	al depreciation allo	wance for a	ualified liste	ed proper	ty placed	in servi	ce durin	a the t	ay vear ar	.L		<u> </u>			7.51	
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37 Do you	u maintain a writte	n policy stat	ement that	prohibits	all persor	nal use	of vehicle	es, ıncl	uding con	nmuting	, by you	ır		Yes	No	
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39 Do you	u treat all use of ve	hicles by en	nployees as	persona	l use?											
40 Do you	u provide more tha	ın five vehicl	es to your e	mployee	s, obtain i	ınforma	tion from	your e	employees	about						
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41 Do you	u meet the requirei	ments conce	erning qualif	ied autor	nobile de	monstra	ation use	?								
Note:	If your answer to 3	7, 38, 39, 40), or 41 is "Y	∕es," do r	ot compl	ete Sec	tion B fo	r the c	overed ve	hıcles						
Part VI	Amortization											-		-		
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	Description of	costs	D	ate amortizatioi begins	amortization Amortiza					Code section		ation rcentage	An for	nortization this year		
42 Amort	zation of costs tha	at begins dui	ring your 20		ar	•								-	-	
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43 Amorti	zation of costs tha	at began bef	ore your 20	10 tax ve	ar							43		-		
	Add amounts in co	-	-	•		report						44				

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 II and check this box If you are filing for 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 onginal (no copies needed) Name of exempt organization THE EXPERIMENTAL STATION COD DANIEL A PETERMAN Number, street, and room or suite no if a P O. box, see instructions 100 S BLACKSTONE CHICAGO, IL 60637 Enter the Return code for the return that this application is for (file a separate application for each return) Application S For Code Is For Code Form 990-BL Command S For Code Form 990-Form Form 8868 (Rev. 1-2011)					-	Page 2			
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EFTPS (Electronic Federal Tax Payment System) See instructions 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.			vment wit	h this form if required by using	OD 1	Ψ			
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.		•	-	and form, it required, by using	8	\$	- 0.		
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, t is true, correct, and complete, and that I am authorized to prepare this form.				d Verification	_ ~ _				
		e that I have examined this form, includ	ling accomp		best of	f my knowledge and be	elief,		
		•		AGENT	Date	-			

Form 8868 (Rev. 1-2011)

Form **8868** (Rev. January 2011)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 1-2011)

	you are filing for an Automatic 3-Month Extension, comple					- X			
 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.									
Elec	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								
requ	red to file Form 990-T), or an additional (not automatic) 3-mo	nth exten	sion of time. You can electronically file F	orm 8	868 to request an e	xtension			
of tir	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	visit www.irs.gov/efile and click on e-file for Chanties & Nonprofits.								
-	Part 1/ Automatic 3-Month Extension of Time. Only submit original (no copies needed).								
	poration required to file Form 990-T and requesting an autor			•					
	only				_. ▶				
	her corporations (including 1120-C filers), partnerships, REM income tax returns.	ICs, and t	rusts must use Form 7004 to request ar	n exter	nsion of time				
Турє	or Name of exempt organization			Emp	loyer identification	number			
print	THE EXPERIMENTAL STATION			ŀ					
 .	C/O DANIEL A PETERMAN			3	2-0017985				
File by due da	te for Number, street, and room or suite no. If a P.O. box, s	ee instruc	tions.						
filing y retum.	See 0100 5 DHACKSTONE								
instruc	only, to the or post office, state, and 21, code, total	oreign add	Iress, see instructions.						
	CHICAGO, IL 60637								
Ente	the Return code for the return that this application is for (file	e a separa	te application for each return)			0 1			
		a sopula	and approaches to such retain,	••••••		<u> </u>			
Appl	cation	Return	Application			Return			
ls Fo		Code	Is For		Code				
Form	990 .	01	Form 990-T (corporation)		07				
Form	990-BL	02	2 Form 1041-A						
Form	990-EZ	03	Form 4720		09				
Form 990-PF			Form 5227			10			
Form	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11			
	990-T (trust other than above)	06	Form 8870			12			
	DAN PETERMAN								
• Tr	e books are in the care of > 6100 S BLACKSTO	ONE -	CHICAGO, IL 60637						
Te	ephone No. ► <u>773-241-5458</u>		FAX No. ▶						
• If t	ne organization does not have an office or place of business	in the Un	nited States, check this box						
	nis is for a Group Return, enter the organization's four digit (heck this			
box]	- 1		ch a list with the names and EiNs of all						
1	I request an automatic 3-month (6 months for a corporation	required t	to file Form 990-T) extension of time unt	ıl					
	AUGUST 15, 2011 , to file the exempt	organizat	tion return for the organization named a	bove.	The extension				
is for the organization's return for:									
N									
tax year beginning Internal Revenue Service May 1330									
Into									
2	2 If the tax year entered in line 1 is for less than 12 months, check reason. Final return								
	Change in accounting period		venue s						
			MAY , Service						
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative fax, 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									
	and the state of t		The BAD records	3b_	\$	0.			
С	Balance due. Subtract line 3b from line 3a. Include your pay	ment with	n this form, if required						
	by using EFTPS (Electronic Federal Tax Payment System) S	ee instruc	ctions.	3с	\$	0.			
Cauti	n. If you are going to make an electronic fund withdrawal w	th this Fo	rm 8868, see Form 8453-EO and Form	8879-E	O for payment insti	uctions			

For Paperwork Reduction Act Notice, see Instructions.

LHA

Form 8868 (Rev 1-2011)					Page 2			
• If you are filing for an Additional (Not Automatic) 3-Month Ex	ktension, o	complete only Part II and check this b	юх	>	X			
Note. Only complete Part II if you have already been granted an				368				
• If you are filing for an Automatic 3-Month Extension, comple								
Part II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the original (no	copies ne	eded)				
Name of exempt organization				yer identification	number			
THE EXPERIMENTAL STATION				•				
print C/O DANIEL A PETERMAN			32	-0017985				
File by the extended Number, street, and room or suite no. If a P.O. box, s	see instruc	tions.						
due_date for 6100 S BLACKSTONE								
return See City, town or post office, state, and ZIP code. For a fe	oreign add	ress, see instructions						
CHICAGO, IL 60637	J							
				•				
Enter the Return code for the return that this application is for (file	e a separa	te application for each return).			0 1			
		INTERNAL	REVE		<u> </u>			
Application	Return	Application SCHILLER	FILE	VE SERVICE	Return			
Is For	Code	Is For	PARK	SISTANCE"	Code			
Form 990	01	加速源在2.据记录记录		0176	影響等			
Form 990-BL	02	Form 1041-A	18 2	n.	08			
Form 990-EZ	03	Form 4720	 	011	09			
Form 990-PF	04	Form 5227	FIVE		10			
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069 3 3	7812		11			
Form 990-T (trust other than above)	06	Form 8870	413		12			
STOP! Do not complete Part II if you were not already granted	an autom		ıslv filed	Form-8868.				
DAN PETERMAN								
• The books are in the care of ▶ 6100 S BLACKST	ONE -	CHICAGO, IL 60637						
Telephone No. ► 773-241-5458		_FAX No. →						
 If the organization-does not have an office or place of business 	s in the Un	ited States, check this box						
 If this is for a Group Return, enter the organization's four digit 					eck this			
box ▶ . If it is for part of the group, check this box ▶		ch a list with the names and EINs of all						
4 I request an additional 3-month extension of time until		BER 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, c	heck reaso	on: Initial return	Final reti	urn				
Change in accounting period								
7 State in detail why you need the extension								
THE AUDIT OF THE ORGANIZATION								
TIME TO FILE IS RESPECTFULLY I	REQUES	STED SO THAT THE RET	URN	CAN BE FII	LED			
WITH AUDITED INFORMATION.								
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, er	nter the tentative tax, less any	1 1					
nonrefundable credits. See instructions			8a :	\$	0.			
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated	12 - 12 - 1 1 - 12 - 12 - 12 - 12 - 12 -					
tax payments made. Include any prior year overpayment all	owed as a	credit and any amount paid						
previously with Form 8868.				\$	0.			
c Balance due: Subtract line 8b from line 8a Include your pa	yment with	n this form, if required, by using						
EFTPS (Electronic Federal Tax Payment System). See instru	ictions.		8c _ \$	\$	0.			
Signa	ture an	d Verification		· · · · · · · · · · · · · · · · · · ·				
Inder penalties of perjury, I declare that I have examined this form, including	ing accomp	anying schedules and statements, and to th	e best of m	ny knowledge and bel	ief,			
t is true, correct, and complete, and that am authorized to prepare this fo	rm.	•		-	•			
Signature Carl My has Title > (CPA -	AGENT	Date_	8.14-11				
				Form 8868 (Rev	. 1-2011)			