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Form 990-PF

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

OMB No 1545-0052

2010

| For | alen | dar year 2010, or tax | k year beginning | | | , and ending | | | |
|--|----------|---|--|---------------|-------------------------------------|---------------------------------------|--|--|--|
| G | heck | all that apply | Initial return | | Initial return of a fo | rmer public charity | | Final return | |
| | | [| Amended return | | X Address chang | ge <u> </u> | Name cha | inge | |
| Nar | ne of | foundation | | | | | A Emplo | yer identification | number |
| | | AMTCHC E | | | | | 26 | 2270162 | |
| Nun | her s | | FOUNDATION mber if mail is not delivered to s | treet address | <u> </u> | Room/suite | + | <u> -3378462</u> | |
| '' | iber a | | CHICAGO AVE | | 5) | 201 | | ione number 0-929-72 | 00 |
| City | or to | own, state, and ZIP co | | HOL | | 201 | 1. | ption application is p | |
| ", | 01 (0 | WESTMONT | | -1559 | | | | eign organizations | |
| H C | heck | type of organization | X Section 501(c)(| | | | 2. Fore | ign organizations me ck here and attach co | eting the 85% test, |
| | - | • | exempt charitable trust 🗓 | | taxable private founda | tion | | | tus was terminated |
| I Fa | ır ma | rket value of all assets | s at end of year J Acco | unting met | thod X Cash | Accrual | under | section 507(b)(1) | (A), check here |
| (fr | om F | Part II, col (c), line 1 | | Other (sp | | | F If the 1 | oundation is in a | 60-month termination |
| ▶\$ 16,099,434. (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check | | | | | | | | | |
| Pa | rt l | Analysis of Revenu (The total of amounts in necessarily equal the air | n columns (b), (c), and (d) may n | | a) Revenue and openses per books | (b) Net investment income | (c) | Adjusted net income | (d) Disbursements for chantable purposes (cash basis only) |
| | 1 | Contributions, gifts, | grants, etc , received | | 368,925. | | | N/A | |
| | 2 | | undation is not required to attach Sch. E | 3 | | | | | |
| | 3 | Interest on savings and to cash investments | temporary | | | | | | |
| | 4 | Dividends and interes | st from securities | | 348,712. | 348,712 | | | STATEMENT 1 |
| | 5a | Gross rents | | | | | | | The same of the sa |
| | b | Net rental income or (los | ss) | | | | - | DECEN | EU |
| ě | 6a | Net gain or (loss) from sa Gross sales price for all | ale of assets not on line 10 | | ,135,980. | | <u> </u> | A Start American | |
| Ę. | þ | assets on line 6a | 0,401,304 | <u>•</u> | | 1 125 000 | . 8 | .434 \$6 6. | 2011 3 |
| Revenue | 7 | Capital gain net income | | | | 1,135,980. | 1 181 | c t min | (401) |
| | 8 | Net short-term capita | • | - | | | | | TUT |
| | 9 | Income modifications Gross sales less returns | | | | | | OGDEN | 1.01 |
| | 10a | and allowances | . ——— | | | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | The state of the s | |
| | (| Less Cost of goods sold Gross profit or (loss) | | - | | | | | |
| | 11 | Other income | 1 | | 4,710. | 4,710 | | | STATEMENT 2 |
| | 12 | Total. Add lines 1 th | rough 11 | 1 | ,858,327. | 1,489,402 | | | |
| | 13 | | s, directors, trustees, etc | | 0. | 0. | | | 0. |
| | 14 | Other employee salar | ries and wages | | | | | | |
| | 15 | Pension plans, emple | oyee benefits | | | | | | |
| Ses | 16a | Legal fees | | | | | | | |
| per . | b | Accounting fees | STMT 3 | | 3,876. | 2,376 | • | | 1,000. |
| Ä | ı | Other professional fe | ees STMT 4 | | 44,624. | 44,624 | • | | 0. |
| and Administrative Expenses | 17 | Interest | amum F | | 20 754 | 22 754 | | | 0. |
| stra | l | Taxes | STMT 5 | | 32,754. | 32,754 | • | | 0. |
| Ë | 19 | Depreciation and dep | pletion | | | | | | |
| 퉏 | 20 21 | Occupancy Travel, conferences, | and mastings | - | | | | | |
| ğ | 22 | Printing and publicat | = | | | | + | | |
| e O | 23 | Other expenses | STMT 6 | | 520. | 0 . | _ | - | 510. |
| 뜵 | | Total operating and | | | | | | | |
| Operating | | expenses Add lines | | | 81,774. | 79,754 | . | | 1,510. |
| ō | 25 | Contributions, gifts, | • | | 750,700. | · · · · · · · · · · · · · · · · · · · | | | 1,510. 750,700. |
| | | Total expenses and | • | | • | | | | |
| _ | L. | Add lines 24 and 25 | | | 832,474. | 7 <u>9</u> ,754. | <u>. </u> | | 752,210. |
| | 27 | Subtract line 26 from | n line 12 | | | | | <u> </u> | |
| | а | Excess of revenue over | expenses and disbursements | 1 | ,025,853. | | <u> </u> | | |
| | b | Net investment inco | IM8 (if negative, enter -0-) | | | 1,409,648 | | | |
| | C | Adjusted net incomi | C (if negative, enter -0-) | | | | | N/A | |

023501 12-07-10 LHA For Paperwork Reduction Act Notice, see the instructions. Form **990-PF** (2010)

SCANNED JUN 1 3

| [m | | Balance Sheets Attached schedules and amounts in the description | Beginning of year | End | of year |
|---------------------------|------|---|-------------------|----------------|-----------------------|
| | art | column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | | 59,076 | . 59,076. |
| | 2 | Savings and temporary cash investments | 626,001. | 806,121 | |
| | 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 | | | |
| | ļ | Less allowance for doubtful accounts | | | |
| Assets | 8 | Inventories for sale or use | | | |
| Ass | 9 | Prepaid expenses and deferred charges | | | |
| • | | Investments - U S and state government obligations | 0.516.534 | 10.060.064 | 10.060.064 |
| | | Investments - corporate stock STMT 9 | 9,516,734. | 10,260,064 | . 10,260,064. |
| | Ι | Investments - corporate bonds STMT 10 | 3,267,152. | 4,297,255 | 4,297,225. |
| | 11 | Investments - land, buildings, and equipment basis | | | |
| | | Less accumulated depreciation | | | |
| | l | Investments - mortgage loans | 1 166 210 | 400 040 | 400 040 |
| | 13 | Investments - other STMT 11 | 1,166,210. | 489,048 | 489,048. |
| | 14 | Land, buildings, and equipment basis | 1 | | |
| | 15 | Less accumulated depreciation Other assets (describe ► VK INDUSTRIAL I LP) | 0. | 187,900 | . 187,900. |
| | 15 | Other assets (describe VK INDOSTRIAL I LIP) | | 107,300 | 107,300. |
| | 16 | Total seeste (to be completed by all filers) | 14,576,097. | 16,099,464 | . 16,099,434. |
| _ | 17 | Total assets (to be completed by all filers) Accounts payable and accrued expenses | 14,570,057. | 10,000,100 | 10/033/434. |
| | 18 | Grants payable | | | 1 |
| S | 19 | Deferred revenue | | | 1 |
| Liabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | 1 |
| abil | 21 | Mortgages and other notes payable | | | 1 |
| | 22 | · | | | 7 |
| | | , | | | 7 |
| _ | 23 | Total liabilities (add lines 17 through 22) | 0. | 0 | <u>.</u> |
| | | Foundations that follow SFAS 117, check here | | | |
| (0 | | and complete lines 24 through 26 and lines 30 and 31. | | | |
| ces | 24 | Unrestricted | | | |
| lar | 25 | Temporarily restricted | | | |
| Ä | 26 | Permanently restricted | | | |
| Š | | Foundations that do not follow SFAS 117, check here | | | |
| ř | | and complete lines 27 through 31. | | | |
| ţ | 27 | Capital stock, trust principal, or current funds | 2,171. | 2,171 0 | <u>-</u> |
| Net Assets or Fund Balanc | 28 | Paid-in or capital surplus, or land, bldg, and equipment fund | | | |
| Ϋ́ | 29 | Retained earnings, accumulated income, endowment, or other funds | 14,573,926. | 16,097,293 | |
| ž | 30 | Total net assets or fund balances | 14,576,097. | 16,099,464 | <u>•</u> |
| | L. | | 14 576 007 | 16 000 464 | |
| _ | 31 | Total liabilities and net assets/fund balances | 14,576,097. | 16,099,464 | • |
| P | art | Analysis of Changes in Net Assets or Fund B | alances | | |
| 1 | Tota | net assets or fund balances at beginning of year - Part II, column (a), line | 30 | | |
| | | st agree with end-of-year figure reported on prior year's return) | | 1 | |
| 2 | | r amount from Part I, line 27a | | 2 | 1,025,853. |
| | | r increases not included in line 2 (itemize) | SEE STA | ATEMENT 7 | 499,838. |
| 4 | Add | lines 1, 2, and 3 | | 4 | |
| 5 | Deci | eases not included in line 2 (itemize) | SEE ST | ATEMENT 8 | 2,324. |
| <u>6</u> | Tota | net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | lumn (b), line 30 | | 16,099,464. |

023511 12-07-10 Form **990-PF** (2010)

| | nd Losses for Tax on In the kind(s) of property sold (e g | | Income | (p) | How acquired | (c) Date | acquired | (d) Date sold |
|--|--|--|------------------------------------|--------------|--------------------------|---------------|---------------------------------------|--------------------------------|
| 2-story brick warel | nouse, or common stock, 200 sh | MLC Co) | | | - Purchase - Donation | `(mo , d | ay, yr) | (mo , day, yr) |
| a KOVITZ INVESTME | NT GROUP, LLC S | CHEDUL | E | | | | | |
| b ATTACHED | | | | <u> </u> | | VARI | ous | VARIOUS |
| c d | - ' | | | <u> </u> | | | | |
| <u>u</u> e | | | | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | 1 107 | t or other basis xpense of sale | | | | ain or (los: (f) minus | |
| 6,407,364. | | | 5,271,38 | 4. | | | | 1,135,980 |
| <u>c</u> | | | | | | | | |
| d e | 7/7. | | | | | | <u>.</u> | |
| Complete only for assets showing (| pain in column (h) and owned by | l the foundation | on 12/31/69 | | | (I) Gains (C | ol (h) nau | n minus |
| (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Ex | cess of col (i) col (j), if any | | | òl (k), but r | | an -0-) or |
| a | | | | | · · | | | |
| <u>b</u> | | | | | | | | 1,135,980 |
| d d | ****** | | | | | | | |
| e e | | | | | | | · · · · · · · · · · · · · · · · · · · | |
| Capital gain net income or (net capit | al loss) { If gain, also enter | r in Part I, line - in Part I, line | 7 7 | } | 2 | | | 1,135,980 |
| Net short-term capital gain or (loss) | • | | | | | | | |
| If gain, also enter in Part I, line 8, co | | (-7 | |) | | | 27/7 | |
| If (loss), enter -0- in Part I, line 8 Part V Qualification Unit | dou Continu 4040/a) fou | Dadwaad | T N-4 | | 3 | | N/F | 1 |
| 'as the foundation liable for the section "Yes," the foundation does not qualify | under section 4940(e) Do not co | mplete this pa | rt . | | | | | Yes X No |
| Enter the appropriate amount in eac | | uctions before | making any entri | | | | | (d) |
| Base periód years Calendar year (or tax year beginning | | tributions 7,766. | Net value of no | | ritable-use asse | | Distri (col (b) di | bution ratio vided by col (c)) |
| 2009 2008 | | 7,788. | | | ,423,50 ,364,68 | | | .05203 |
| 2007 | | 3,544. | | | ,335,07 | | | .04559 |
| 2006 | | 4,063. | | 13 | ,380,97 | 7. | | .04364 |
| 2005 | 54 | 7,459. | | 11 | ,774,67 | 4. | | .04649 |
| Total of line 1, column (d) | | | | | | 2 | | .24795 |
| Average distribution ratio for the 5-y the foundation has been in existence | | on line 2 by 5, | or by the number | of ye | ars | 3 | | .04959 |
| Enter the net value of noncharitable- | | line 5 | | | | 4 | 1 | 4,843,737 |
| Multiply line 4 by line 3 | | | | | | 5 | | 736,116 |
| Enter 1% of net investment income | (1% of Part I line 27h) | | | | | 6 | | 14,096 |
| Add lines 5 and 6 | (or r are r, mile 210) | | | | | 7 | | 750,212 |
| | last VII. line 4 | | | | | | _ | 752,210 |
| Enter qualifying distributions from P If line 8 is equal to or greater than lir See the Part VI instructions | | 1b, and comp | elete that part usin | ıg a 1 | % tax rate | 8 | | 132,210 |
| 23521 12-07-10 | | | | | | | | Form 990-PF (201 |

Form **990-PF** (2010)

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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

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

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

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2010)

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form **990-PF** (2010)

Х

Х

3b

4a

4h

Yes X No

N/A

during the year?

| orm 990 | -PF (20 | 10). AM | IICUS | FOU | NDATIO | <u> </u> | | | | | | 36-33 | 37 <u>84</u> 6 | <u>52 </u> | Page 6 | 6 |
|--|--|---|---|---|---|--|---|---|-----------------------------------|---------------|------------------------------------|--|------------------------|---|-------------------------------------|-----------|
| Part V | II-B | Statement | ts Rega | rding | Activitie | s for Wh | nich F | orm 4720 M | lay Be F | Requir | ed (contin | ued) | | | | _ |
| 5a Duri (1) (2) (3) (4) (5) b If an sect Orga | ng the carry of Influent any volume Provide 509(a) Provide the precipy answere answere of the precipy and the precipy and the precipy and the precipy answere of the precipy and the precipity and the precipy and the precipity and t | year did the found on propaganda, of the outcome of the registration did a grant to an original of the control | or otherwise of any specific rive? dividual for ganization or section 49 e other than y to childre 1)-(5), did ent notice is urrent notice stion 5a(4) or the grant | or incure attemper fire public religion or anii any of the regarding the regarding does the 2 | any amount t to influence ic election (s study, or oth- an a charitable t)? us, charitable mals? he transaction g disaster as ding disaster he foundation | e legislation de legislation de legislation de le section 4 er similar puble, etc., organis, scientific, de le sistance (se la sasistance de la claim exeminal de legislation de le legislatic de legislatic de le legislatic de le legislatic de le legislatic de legi | (section - 1955), or 1rposes? anization diterary, o alify unde e instruction check he inption fro | 4945(e))? to carry on, direct described in sec ir educational pu er the exceptions tions)? re m the tax because | ctly or indirection rposes, or to | ectly, for | Ye | es X N | | ib | | _ |
| | | ndation, during ti | | | | | | | | | | | | | | |
| a pe b Did | rsonal the fou | benefit contract? ndation, during the | he year, pa | • | | • | • • • | | | | Ye | es X N | , | ib | X | _ |
| | | during the tax ye | | e founda | tion a party i | to a prohibite | ed tax sh | elter transaction | 2 | | ☐ Y | es X N | lo İ | | | |
| | | the foundation r | | | | | | | | | | N/A | | /b | | _ |
| Part V | | Informatio Paid Empl ers, directors | oyees, | and C | ontracto | ors | | es, Founda | | | | | | | | _ |
| | | (a) |) Name and | l addres: | s | | | (b) Title, and hours per week to positi | k devoted | i (If n | npensation ot paid, ter -0-) | (d) Contrib employee ber and defe compens | nefit plans | acci | Expense ount, other lowances | r — |
| SEE : | STA. | rement 1 | 12 | | | | | | | | 0. | | 0. | | 0 | • |
| | | | | | | | | | | | | | | | | _ |
| 2 Com | pensa | tion of five hig | ghest-paid | d empl | oyees (oth | er than tho | se incl | | | enter " | NONE." | 1 (50 5 | | | | _ |
| | | ne and address o | of each emp | oloyee pa | aid more tha | n \$50,000 | | (b) Title, and hours per devoted to p | week * | (c) Cor | mpensation | (d) Contrib employee be and defi compens | nefit plans erred | acci al |) Expense ount, othe lowances | ·r |
| | N(| ONE | | | | · · · · · · · · · · · · · · · · · · · | | | | | | | | | | |
| | | | - | | | - | | | | | | | | | | _ |
| | | | | | | | | | | - | | | | | | - |
| | | | | | ,, | | | | | | | | | | | |
| Total nu | mber o | f other employee | es paid over | r \$50,00 | 0 | | | - | | • | | | Enro 4 | 200 | DE /2010 | <u>,,</u> |

023551 12-07-10

| Part VIII Information About Officers, Directors, Trustees, Foundatio Paid Employees, and Contractors (continued) | n Managers, Highly | |
|--|-------------------------------------|---------------------------|
| 3 Five highest-paid independent contractors for professional services. If none, enter "N | ONE." | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | (5))) | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Table and the second se | ······ | |
| Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities | · · - · · · · · · · · · · · · · · · | ▶ 0 |
| | | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce: | information such as the | Expenses |
| 1 N/A | 3, 610 | |
| | | |
| | | |
| 2 | - | |
| | | |
| | | |
| 3 | | |
| | | |
| | | |
| 4 | | |
| | | |
| Death IV D | | |
| Part IX-B Summary of Program-Related Investments | 440 | A |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 NONE | 1 and 2 | Amount |
| NONE | | |
| | | 0. |
| 2 | | <u> </u> |
| | | |
| | | |
| All other program-related investments. See instructions | | |
| 3 | | |
| | | |
| | | |
| Total. Add lines 1 through 3 | • | 0. |
| | | Form 990-PF (2010) |

| P | Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations | ndations, | , see instructions.) |
|----|---|------------------|---------------------------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes | | |
| а | Average monthly fair market value of securities | 1 _a 1 | 14,244,851. |
| b | Average of monthly cash balances | 1b | 14,244,851. 824,933. |
| C | Fair market value of all other assets | 10 | |
| d | Total (add lines 1a, b, and c) | 1d | 15,069,784. |
| 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 | 15,069,784. |
| 4 | Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 226,047. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. | 5 | 14,843,737. |
| 6 | Minimum investment return Enter 5% of line 5 | 6 | 742,187. |
| P | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.) | d certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 742,187. |
| 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 | 14,096. |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 14,096. 728,091. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 728,091. |
| 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 | 728,091. |
| = | Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | | 750 010 |
| a | Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 | 1a | 752,210. 0. |
| 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 | 750 010 |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 752,210. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | 14 000 |
| | Income Enter 1% of Part I, line 27b | 5 | 14,096. 738,114. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of | ualifies fo | or the section |
| | 4940(e) reduction of tax in those years | | |

Form **990-PF** (2010)

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 | | | | 728,091. |
| 2 Undistributed income, if any, as of the end of 2010 | | | | |
| a Enter amount for 2009 only | | | 263,333. | |
| b Total for prior years | | | | |
| | | 0. | | |
| 3 Excess distributions carryover, if any, to 2010 | | - | | |
| a From 2005 | | | | |
| b From 2006 | | | | |
| € From 2007 | | | | |
| d From 2008 | | | | |
| e From 2009 | | | | |
| f Total of lines 3a through e | 0. | | | |
| 4 Qualifying distributions for 2010 from | | ······································ | | ······································ |
| Part XII, line 4 \triangleright \$ 752,210. | | | | |
| a Applied to 2009, but not more than line 2a | | | 263,333. | |
| 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 | | | , | 488,877. |
| e Remaining amount distributed out of corpus | 0. | | | |
| 5 Excess distributions carryover applied to 2010 | 0. | | | 0. |
| (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: | | | | |
| 2 Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 0. | | | |
| 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 | | | | 239,214. |
| 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 | 0. | | | |
| 9 Excess distributions carryover to 2011 | | | | |
| Subtract lines 7 and 8 from line 6a | 0. | : | | |
| 10 Analysis of line 9 | | | | |
| a Excess from 2006 | 3 | | | |
| b Excess from 2007 | *************************************** | | | |
| c Excess from 2008 | *************************************** | | | |
| d Excess from 2009 | } | | | |
| e Excess from 2010 | | | | |
| - | | | | Form 990-PF (2010) |

Form **990-PF** (2010)

10480514 759574 1061

| Part XV Supplementary Information | <u> </u> | | | |
|--|--|----------------------|----------------------------------|----------|
| 3 Grants and Contributions Paid During the You | | Payment | | |
| Recipient Name and address (home or business) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount |
| | or substantial contributor | recipient | | |
| a Paid duning the year EASTER SEALS DUPAGE 830 S. ADDISON AVE VILLA PARK, IL 60181 | NONE | PUBLIC | UNRESTRICTED | 700. |
| FIDELITY CHARITABLE GIFT FUND PO BOX 770001 CINCINNATI, OH 45277 | NONE | PUBLIC | UNRESTRICTED | 700,000. |
| INSPIRATION CORPORATION 4554 N. BROADWAY #207 CHICAGO, IL 60640 | NONE | PUBLIC | UNRESTRICTED | 50,000. |
| | | | | |
| Total | | <u> </u> | ▶ 3a | 750,700 |
| b Approved for future payment NONE | | | | |
| | | | | |
| Total | | | ▶ 3h | 0 |

023611 12-07-10

| er gross amounts unless otherwise indicated | | ousiness income | | d by section 512, 513, or 514 | (e) |
|---|-------------------------|-------------------------|--|-------------------------------|--------------------------------------|
| Program service revenue | (a) Business code | (b) Amount | Exclu- sion code | (d) Amount | Related or exempt function income |
| - | Code | | | | ··· |
| | - | | | | |
| | | | | | |
| 1 | | | | | |
| 8 | | | | | |
| | _ | | | | |
| Fees and contracts from government agencies | | | | | |
| Membership dues and assessments | | | | | |
| nterest on savings and temporary cash | | | | | |
| nvestments | | | | | |
| Dividends and interest from securities | | | 14 | 348,712. | |
| Net rental income or (loss) from real estate | | | | | <u>,</u> |
| Debt-financed property | | | <u> </u> | | |
| Not debt-financed property | | | 1 | | |
| let rental income or (loss) from personal | | | | | |
| property | | | 1 1 | 4 710 | |
| Other investment income | | | 14 | 4,710. | |
| Gain or (loss) from sales of assets other | | | 1 , , | 1 125 000 | |
| han inventory | | | 14 | 1,135,980. | <u> </u> |
| Net income or (loss) from special events | | | | | |
| Gross profit or (loss) from sales of inventory Other revenue | | | + + | | |
| ANTICELLANEOUS | | | 1 1 | | |
| TAX REFUND | | | | | |
| | _ | | + | | |
| d | _ | | 1 1 | | |
| de | _ | | 1 1 | | |
| | _ | 0 | | 1,489,402. | |
| Subtotal Add columns (b) (d) and (e) | | | <u> </u> | 13 | 1,489,4 |
| Subtotal Add columns (b), (d), and (e) Total Add line 12 columns (b), (d), and (e) | | | | | |
| Total. Add line 12, columns (b), (d), and (e) |) | | | | |
| Fotal. Add line 12, columns (b), (d), and (e) a worksheet in line 13 instructions to verify calculations | | nplishment of E | xempt | Purposes | |
| Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations Relationship of Activities | s to the Accor | | | | nlichment af |
| Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activities te No. Explain below how each activity for which in | s to the Accor | column (e) of Part XVI- | | | plishment of |
| Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activities the No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accor | column (e) of Part XVI- | | | plishment of |
| otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activities e No. Explain below how each activity for which in | s to the Accor | column (e) of Part XVI- | | | plishment of |
| rotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations Relationship of Activities B No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accor | column (e) of Part XVI- | | | plishment of |
| rotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations Relationship of Activities B No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accor | column (e) of Part XVI- | | | plishment of |
| Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activities the No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accor | column (e) of Part XVI- | | | plishment of |
| Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activities the No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accor | column (e) of Part XVI- | | | plishment of |
| Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activities the No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accor | column (e) of Part XVI- | | | plishment of |
| Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activities the No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accor | column (e) of Part XVI- | | | plishment of |
| Fotal. Add line 12, columns (b), (d), and (e) Be worksheet in line 13 instructions to verify calculations Be Relationship of Activities Be No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accor | column (e) of Part XVI- | | | plishment of |
| Fotal. Add line 12, columns (b), (d), and (e) Be worksheet in line 13 instructions to verify calculations Be Relationship of Activities Be No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accor | column (e) of Part XVI- | | | plishment of |
| Fotal. Add line 12, columns (b), (d), and (e) Be worksheet in line 13 instructions to verify calculations Be Relationship of Activities Be No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accor | column (e) of Part XVI- | | | plishment of |
| Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activities the No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accor | column (e) of Part XVI- | | | plishment of |
| Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations art XVI-B Relationship of Activities ne No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accor | column (e) of Part XVI- | | | plishment of |
| Fotal. Add line 12, columns (b), (d), and (e) Be worksheet in line 13 instructions to verify calculations Be Relationship of Activities Be No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accor | column (e) of Part XVI- | | | plishment of |
| Fotal. Add line 12, columns (b), (d), and (e) Be worksheet in line 13 instructions to verify calculations Be Relationship of Activities Be No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accor | column (e) of Part XVI- | | | plishment of |

023621 12-07-10

| Pa | rt XVII | Information Re Exempt Organ | | sfers To | and Transactions | and Relation | ships With Non | charitable | | ige io |
|-----------|-------------|--|-----------------------|-----------------|---|---------------------|--|---------------------------------------|------------|--------|
| 1 | Did the o | rganization directly or indi | rectly engage in any | of the follows | ng with any other organizat | ion described in se | ction 501(c) of | | Yes | No |
| | | | | | 27, relating to political orga | | | | | |
| a | Transfers | s from the reporting found: | ation to a noncharita | ible exempt o | rganization of | | | | | |
| | (1) Cast | 1 | | | | | | 1a(1) | | X |
| | (2) Othe | | | | | | | 1a(2) | | X |
| | | nsactions | | | | | | | | |
| | | s of assets to a noncharital | | | | | | 1b(1) | | X |
| | | chases of assets from a nor | | organization | | | | 1b(2) | | X |
| | | tal of facilities, equipment, | | | | | | 1b(3) | | X |
| | . , | nbursement arrangements ns or loan guarantees | | | | | | 1b(4) | | X |
| | | ormance of services or me | mharchin ar fundra | cina caliaitatu | 000 | | | 1b(5) | | X |
| | | of facilities, equipment, ma | | - | | | | 1b(6) | | X |
| | | | | | edule Column (b) should a | lways show the fair | market value of the oc | | ets | |
| | or service | | oundation if the fou | ndation receiv | ed less than fair market val | | | | 010, | |
| (a) L | | (b) Amount involved | | | e exempt organization | (d) Descripti | on of transfers, transaction | s, and sharing arr | angeme | nts |
| | | <u> </u> | . , | N/A | | | | | | |
| | | | | | | | - | | | |
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| | | | ***** | | | | | | | |
| | | | | | | | | | | |
| | | - | | | | | | | | |
| | ın sectior | indation directly or indirect in 501(c) of the Code (other complete the following sche | than section 501(c | | e or more tax-exempt organ tion 527? | izations described | | Yes | X |] No |
| | | (a) Name of org | | | (b) Type of organization | | (c) Description of rela | ationship | | |
| | | N/A | | | | | | | | |
| | | | | | | | | | | |
| | | <u> </u> | | | | | | | | |
| | | · · · · · · · · · · · · · · · · · · · | - | | | | | | | |
| Sig He | gn and | | | | ding accompanying schedules are based on all information of which | | | | ie, correc | ct, |
| | | Signature of officer or tru | istee | / | Date | ▶ - | Title | | • | |
| | | Print/Type preparer's na | me | Preparer's s | | Date | | PTIN | | |
| | | | | H |)/ | 5/ / | self- employed | | | |
| Pai | id | GWEN HENRY | | Lu | ~ Horry | 116/11 | | | | |
| Pre | eparer | Firm's name ► DUG. | AN & LOPA | TKA, C | PA'S PC | - | Firm's EIN | | | - |
| Us | e Only | 10 | 4 E. ROOS | EVELT | ROAD SUITE 1 | 02 | | | | |
| | | Firm's address ► WH | EATON, II | 60187 | 7-5267 | | Phone no 63 | 0-665- | 444 | 0 |
| | | <u> </u> | | | | | | | | |
| | | | | | | | | Form 990 | -PF (| 2010) |

023622 03-04-11

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

Employer identification number

2010

AMICUS FOUNDATION 36-3378462 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a 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

Employer identification number

AMICUS FOUNDATION

36-3378462

| Part I | Contributors (see instructions) | | |
|------------|--|-----------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 1 | JOAN & HUBBARD ERICKSON 4929 FOREST AVE DOWNERS GROVE, IL 60515 | \$\$. | Person Payroll Noncash X (Complete Part II if there is a noncash contribution) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 2 | | \$ | 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 |
| 3 | PETER & CYRESE ERICKSON 212 OXFORD AVE CLARENDON HILLS, IL 60514 | \$\$. | Person Payroll Noncash X (Complete Part II if there is a noncash contribution.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| 0 | | \$ | Person X Payroll |
| (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.) |

Name of organization

AMICUS FOUNDATION

36-3378462

| Part | Part II N | Noncash Property (see instructions) | | |
|--|--------------|---------------------------------------|-------------------|----------------------|
| \$ 37,676. 05/18 (a) No. from Description of noncash property given A 1 600 SHS FRANKLIN RES INC; 2220 SHS BED BATH & BEYOND (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) The foot stimate (see instructions) (e) FMV (or estimate) (see instructions) (from Description of noncash property given (e) No. from Description of noncash property given (from Description of noncash property given (g) FMV (or estimate) (see instructions) (h) No. from Description of noncash property given (h) Description of noncash property given | No. from | | FMV (or estimate) | (d) Date received |
| (a) No. pescription of noncash property given | | OSHS BOEING; 220SHS FRANKLIN RESERVE | | |
| No. rorm Description of noncash property given (a) BATH & BEYOND (b) CFMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) Date rec (e) FMV (or estimate) (see instructions) (d) Date rec (e) FMV (or estimate) (see instructions) (f) FMV (or estimate) (see instructions) (g) Date rec (g) Date rec (g) Date rec (g) FMV (or estimate) (see instructions) (h) Description of noncash property given (g) Date rec (g) FMV (or estimate) (see instructions) (g) Date rec (g) FMV (or estimate) (see instructions) (g) Date rec (g) FMV (or estimate) (see instructions) (g) Date rec (g) FMV (or estimate) (see instructions) (g) Date rec (g) FMV (or estimate) (see instructions) (g) Date rec (g) FMV (or estimate) (see instructions) (g) Date rec (g) FMV (or estimate) (see instructions) (g) Date rec (g) FMV (or estimate) (see instructions) (g) Date rec (g) FMV (or estimate) (see instructions) (g) Date rec (g) FMV (or estimate) (see instructions) | | | \$ 37,676. | 05/18/10 |
| SEATH & BEYOND (a) (b) (c) FMV (or estimate) (see instructions) (d) Date rec (a) No. Torm Description of noncash property given (a) No. Torm Description of noncash property given (b) Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date rec (d) Date rec (d) Date rec (e) FMV (or estimate) (see instructions) (d) Date rec (e) FMV (or estimate) (see instructions) (d) Date rec (e) FMV (or estimate) (see instructions) (d) Date rec (e) FMV (or estimate) (see instructions) (d) Date rec (e) FMV (or estimate) (see instructions) (d) Date rec (e) FMV (or estimate) (see instructions) | No. rom | • • | FMV (or estimate) | (d) Date received |
| (a) No. rom Description of noncash property given (c) FMV (or estimate) (see instructions) (d) Date rec (see instructions) (e) Date rec (see instructions) (for instr | | | | |
| No. rom Description of noncash property given (a) No. (b) (c) FMV (or estimate) (see instructions) (b) Co FMV (or estimate) (d) Date recommendation of the property given (d) Date recommendation of the property given (e) (e) FMV (or estimate) (see instructions) (a) No. (b) (c) FMV (or estimate) (see instructions) (b) Co FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) Date recommendation of the property given (e) (figure instructions) (d) No. (from Description of noncash property given (figure instructions) (d) Date recommendation of the property given (figure instructions) (d) Date recommendation of the property given (figure instructions) (d) Date recommendation of the property given (figure instructions) | | | \$163,788. | 10/07/10 |
| (a) No. Poscription of noncash property given \$ (b) FMV (or estimate) (see instructions) \$ (c) FMV (or estimate) (see instructions) (d) Date rec (d) FMV (or estimate) (see instructions) (d) Date rec (d) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (for each instructions) (d) FMV (or estimate) (see instructions) (d) FMV (or estimate) (experimentary given) (d) Date rec | No. from | | FMV (or estimate) | (d) Date received |
| No. (b) FMV (or estimate) (see instructions) (a) No. (b) FMV (or estimate) (see instructions) (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (d) Date recommendation of noncash property given (d) Date recommendation of noncash property given (see instructions) (a) No. (b) FMV (or estimate) (see instructions) (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) Date recommendation of noncash property given (d) FMV (or estimate) (see instructions) | - - | | \$ | |
| (a) No. Irom Description of noncash property given (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) Date rec (a) No. (b) FMV (or estimate) (c) FMV (or estimate) (c) FMV (or estimate) (d) Description of noncash property given (d) Date rec | No. from | | FMV (or estimate) | (d) Date received |
| No. (b) FMV (or estimate) (see instructions) (a) No. (b) FMV (or estimate) (see instructions) (b) FMV (or estimate) (see instructions) (c) FMV (or estimate) (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) | _ | | \$ | |
| (a) No. (b) FMV (or estimate) from Description of noncash property given (c) FMV (or estimate) (see instructions) Date rec | No. rom | · · · · · · · · · · · · · · · · · · · | FMV (or estimate) | (d) Date received |
| No. (b) (C) (d) FMV (or estimate) Date rec | | | \$ | |
| | No. from | • • • | FMV (or estimate) | (d) Date received |
| | | | · | |

| Schadula P /F | n 990, 990-EZ, or 990-PF) (2010) | | |
|---------------------------|--|--|--|
| Name of organ | | | Page of of Part II Employer identification number |
| AMICUS Part III | more than \$1,000 for the year. Complete a Part III, enter the total of exclusively religiou | columns (a) through (e) and the foll s, charitable, etc., contributions of | 36-3378462 01(c)(7), (8), or (10) organizations aggregating owing line entry. For organizations completing |
| (a) No. | \$1,000 or less for the year. (Enter this infor | | |
| 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 | I ZIP + 4 | Relationship of transferor to transferee |
| (a) No. | (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 | I 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 | | Relationship of transferor to transferee |
| (a) No. | | | |
| (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

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

Relationship of transferor to transferee

023454 12-23-10

| FORM 990-PF DIVIDEND | S AND | INTER | EST FROM | M SECT | JRITIES | STATEMENT | 1 |
|--|-----------------------------|--------|---|---|-----------------------------------|---|------------------|
| SOURCE | | GROSS | AMOUNT | | PITAL GAINS DIVIDENDS | COLUMN (A AMOUNT |) |
| KOVITZ INVESTMENT/DIVIDENDS KOVITZ INVESTMENT/INTEREST VK INDUSTRIAL I | - | | 179,368 169,341 3 | • | 0. 0. 0. | 179,3 169,3 | |
| TOTAL TO FM 990-PF, PART I, L | N 4 = | _ | 348,712 | <u> </u> | 0. | 348,7 | 12. |
| FORM 990-PF | O'. | THER I | NCOME | | | STATEMENT | 2 |
| DESCRIPTION | | : | (A) REVENUI PER BOOI | | (B) NET INVEST- MENT INCOME | (C) ADJUSTE NET INCO | |
| VK INDUSTRIAL I MISCELLANEOUS INCOME | | | | ,721. ,989. | 2,721. 1,989. | | |
| | | | | | | | |
| TOTAL TO FORM 990-PF, PART I, | LINE | 11 | 4 | 710. | 4,710 | • | |
| TOTAL TO FORM 990-PF, PART I, | | | 4 | ,710. | 4,710 | STATEMENT | 3 |
| TOTAL TO FORM 990-PF, PART I, | ACC | COUNTI | NG FEES |) VEST- | (C) ADJUSTED NET INCOME | STATEMENT (D) CHARITA | BLE |
| TOTAL TO FORM 990-PF, PART I, FORM 990-PF DESCRIPTION | ACC (1 EXPEN | COUNTI | NG FEES (B NET IN MENT II |) VEST- | (C) ADJUSTED NET INCOME | STATEMENT (D) CHARITA | ES |
| TOTAL TO FORM 990-PF, PART I, FORM 990-PF DESCRIPTION LEGAL & ACCOUNTING | ACC (A EXPEN PER I | COUNTI | NG FEES (B NET IN MENT II |) VEST- NCOME | (C) ADJUSTED NET INCOME | STATEMENT (D) CHARITA E PURPOS | BLE ES |
| TOTAL TO FORM 990-PF, PART I, FORM 990-PF DESCRIPTION LEGAL & ACCOUNTING TO FORM 990-PF, PG 1, LN 16B | ACC () EXPEN PER I | COUNTI | NG FEES (B NET IN MENT II |) VEST- NCOME 2,376 | (C) ADJUSTED NET INCOME | STATEMENT (D) CHARITA E PURPOS 1,0 | BLE ES |
| TOTAL TO FORM 990-PF, PART I, FORM 990-PF DESCRIPTION LEGAL & ACCOUNTING TO FORM 990-PF, PG 1, LN 16B | ACC EXPENDED PER I | COUNTI | NG FEES (B NET IN MENT II |) VEST- NCOME 2,376 2,376 FEES | (C) ADJUSTED NET INCOME | STATEMENT (D) CHARITA PURPOS 1,0 1,0 STATEMENT (D) CHARITA | BLE ES 00. |
| TOTAL TO FORM 990-PF, PART I, FORM 990-PF DESCRIPTION LEGAL & ACCOUNTING TO FORM 990-PF, PG 1, LN 16B FORM 990-PF | EXPER I | COUNTI | NG FEES (B NET IN MENT II SIONAL (B NET IN MENT II |) VEST- NCOME 2,376 2,376 FEES | (C) ADJUSTED NET INCOME | STATEMENT (D) CHARITA PURPOS 1,0 1,0 STATEMENT (D) CHARITA | BLE ES 00. |

| FORM 990-PF | TAX | ES | S' | ratement 5 |
|--|------------------------------|-----------------------------------|-------------------------------|-------------------------------|
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| FOREIGN TAX EXCISE TAXES AMORTIZATION ON PREMIUMS | 1,166. 2,354. 29,234. | 1,166. 2,354. 29,234. | | 0. 0. 0. |
| TO FORM 990-PF, PG 1, LN 18 | 32,754. | 32,754. | | 0. |
| FORM 990-PF | OTHER E | XPENSES | S | ratement 6 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
| MEMBERSHIPS ILLINOIS CHARITABLE TRUST BUREAU MISCELLANEOUS | 495. 15. 10. | 0. | | 495. 15. 0. |
| TO FORM 990-PF, PG 1, LN 23 | 520. | 0. | | 510. |
| FORM 990-PF OTHER INCREASES DESCRIPTION UNREALIZED GAIN NON TAXABLE INTEREST | IN NET ASS | ETS OR FUND BA | ALANCES S | TATEMENT 7 AMOUNT 482,691. |
| TOTAL TO FORM 990-PF, PART II | I, LINE 3 | | | 499,838. |

| FORM 990-PF OTHER DECREASES | S IN NET ASSETS OR F | UND BALANCES | STATEMENT | 8 |
|---|------------------------------|-----------------------|---|-----|
| DESCRIPTION | | | AMOUNT | |
| BOOK TAX DIFFERENCE - PARTNERS | SHIP INVESTMENT | | 2,32 | 24. |
| TOTAL TO FORM 990-PF, PART II | I, LINE 5 | | 2,32 | 24. |
| FORM 990-PF | CORPORATE STOCK | | STATEMENT | 9 |
| DESCRIPTION | | BOOK VALUE | FAIR MARKET | |
| KOVITZ INVESTMENT ACCOUNT | | 10,260,064. | 10,260,06 | 54. |
| TOTAL TO FORM 990-PF, PART II | , LINE 10B | 10,260,064. | 10,260,06 | 54. |
| FORM 990-PF | CORPORATE BONDS | | STATEMENT | 10 |
| | | | | |
| DESCRIPTION | | BOOK VALUE | FAIR MARKET VALUE | [|
| DESCRIPTION KOVITZ INVESTMENT ACCOUNT | | BOOK VALUE 4,297,255. | | |
| | , LINE 10C | | VALUE | 25. |
| KOVITZ INVESTMENT ACCOUNT | , LINE 10C OTHER INVESTMENTS | 4,297,255. | VALUE 4,297,22 | 25. |
| KOVITZ INVESTMENT ACCOUNT TOTAL TO FORM 990-PF, PART II | | 4,297,255. | VALUE 4,297,22 4,297,22 | 25. |
| KOVITZ INVESTMENT ACCOUNT TOTAL TO FORM 990-PF, PART II FORM 990-PF | OTHER INVESTMENTS VALUATION | 4,297,255. | VALUE 4,297,22 4,297,22 STATEMENT FAIR MARKET | 11 |

| FORM 990-PF PART VIII - LIST TRUSTEES AND | OF OFFICERS, D FOUNDATION MANA | | STATI | EMENT 12 |
|---|-----------------------------------|-------------------|---------------------------------|----------|
| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | COMPEN- SATION | EMPLOYEE BEN PLAN CONTRIB | |
| JOHN H ERICKSON 98 E NAPERVILLE ROAD WESTMONT, IL 60559 | PESIDENT/DIREC | TOR 0. | 0. | 0. |
| JOAN C ERICKSON 98 E NAPERVILLE ROAD WESTMONT, IL 60559 | VP/DIRECTOR 2.00 | 0. | 0. | 0. |
| PETER H ERICKSON 98 E NAPERVILLE ROAD WESTMONT, IL 60559 | VP/DIRECTOR 2.00 | 0. | 0. | 0. |
| HUBBARD H ERICKSON JR 98 E NAPERVILLE ROAD WESTMONT, IL 60559 | TREASURER/DIRE 5.00 | CTOR 0. | 0. | 0. |
| MARY CHRISTINE FLANNERY 98 E NAPERVILLE ROAD WESTMONT, IL 60559 | SECRETARY/DIRE | CTOR 0. | 0. | 0. |
| MICHAEL G BEEMER 98 E NAPERVILLE ROAD WESTMONT, IL 60559 | ASST SECRETARY 2.00 | /DIRECTOR 0. | 0. | 0. |
| JANE H ERICKSON 98 E NAPERVILLE ROAD WESTMONT, IL 60559 | ASST TREASURER 2.00 | 0. | 0. | 0. |
| JOANNE E SMITH 98 E NAPERVILLE ROAD WESTMONT, IL 60559 | DIRECTOR 2.00 | 0. | 0. | 0. |
| KAREN E CRONIN 98 E NAPERVILLE ROAD WESTMONT, IL 60559 | DIRECTOR 2.00 | 0. | 0. | 0. |
| ERNEST A JANUS 98 E NAPERVILLE ROAD WESTMONT, IL 60559 | DIRECTOR 2.00 | 0. | 0. | 0. |
| TOTALS INCLUDED ON 990-PF, PAGE 6, | PART VIII | 0. | 0. | 0. |

13

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

NAME OF MANAGER

JOAN C ERICKSON PETER H ERICKSON HUBBARD H ERICKSON JR

Kovitz Investment Group, LLC REALIZED GAINS AND LOSSES AMICUS FOUNDATION

ADV-213311 M15 From 01-01-10 Through 12-31-10

| SSOT | Long Term | | | | 63 650 57 | 00,002.07 | 9,439 b5 | 1,090 03 | 2,128.90 | 2,038.88 | 0,00,00 | 2,014.98 | 4, 190.00 | | 16 200 70 | 0,203.70 | 26.226.00 | 1 025 61 | 1 146 10 | 1,140,13 | 3.304.17 | 5 464 32 | 15,363.48 | 50.203.31 | 22,414.32 | 34.183 17 | 3.407.24 | 148 506 26 | -13,627,81 | -19,037,04 | | | 18.217.29 | 21 425 53 |
|---------------|------------|---------------------------------|---|--|-----------------------------------|-----------------------------------|---------------------------|---------------------------|---------------------------|-------------------|---------------------------|---------------------------|---------------------------|---------------|---------------------------|----------------------------|------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|----------------------------|---------------------|---------------------|--------------|----------|---------------------------------|----------------------------|------------|-----------|--|----------------------------|---------------------------|
| Gain Or Loss | Short Term | 811 73 | -64 129 13 | 11 739 66 | | | | | | | | | 165.39 | 20 287 56 | 24,503,30 | | | | | | | | | | | | | | | | 90 099'9- | -4,492 33 | | |
| | Proceeds | 8 543 10 | 47 612 37 | 11,739,66 | 219 943 29 | 46 100 22 | 46,100 32 8 915 40 | 0,00,00 | 6,303 33 | 0,934 20 | 14 264 63 | 8 321 04 | 396.24 | 77 664 14 | 100 179 47 | 28 735 30 | 33 690 28 | 8.787.30 | 9.463.24 | 7 435 40 | 11,355 89 | 17.844 97 | 69.254.88 | 166.084 82 | 98,470 72 | 110,922 87 | 6,582 88 | 241,771 36 | 296,036 66 | 483,007 19 | 11,593 44 | 7,651 67 | 82,680 69 | 62 620 62 |
| Amort or | Accretion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Adjusted Cost | Basis | 7.731.46 | 111,741 50 | 000 | 156,290 72 | 36,660,67 | 7.218 55 | 7.77.7 | 4 895 32 | 7,307,95 | 8 749 65 | 4.130 66 | 230.85 | 53.380.58 | 83,889 69 | 26,223,59 | 59,917,27 | 7,761 69 | 8,317.05 | 5,685 20 | 8,051 72 | 12,380 65 | 53,891 40 | 115,881 51 | 76,056 40 | 76,739 70 | 3,175.64 | 93,265 10 | 309,664 47 | 502,044 23 | 18,253.50 | 12,144 00 | 64,463 40 | 01 5/17 10 |
| | Security | CALL 100 BBBY EXP 01-16-10 @ 40 | CALL 100 RYL CARIBBEAN EXP 1-16-10 @ 20 | CALL 100 MOHAWK INDS EXP 01-16-10 @ 60 | BURLINGTON NORTHN SANTA FE CP COM | ACCENTURE PLC IRELAND SHS CLASS A | BED BATH & BEYOND INC COM | BED BATH & BEYOND INC COM | BED BATH & BEYOND INC COM | BATH & BEYOND INC | BED BATH & BEYOND INC COM | BED BATH & BEYOND INC COM | BED BATH & BEYOND INC COM | BOEING CO COM | DIAGEO P L C SPON ADR NEW | PHILIP MORRIS INTL INC COM | PRIVATEBANCORP INC COM | ROBERT HALF INTL INC COM | HOBERT HALF INTL INC COM | ROBERT HALF INTL INC COM | ROBERT HALF INTL INC COM | HOBERT HALF INTL INC COM | UNITEDHEALTH GROUP INC COM | EMERSON ELEC CO COM | MOHAWK INDS INC COM | | | HOYAL CAMIBBEAN CRUISES LTD COM | ISHARES TR BARCLYS TIPS BD | | 9 | CALL 100 HYL CAHIBBEAN EXP 06-19-10 @ 28 | UNITEDHEALTH GROUP INC COM | BED BALH & BEYOND INC COM |
| | Quantity | -36 | -166 | -19 | 2,210 | 1,110 | 225 | 250 | 175 | 280 | 360 | 210 | 10 | 1,270 | 1,500 | 610 | 2,560 | 325 | 320 | 275 | 420 | 099 | 2,090 | 3,540 | 006'1 | 055,5 056 | 022 | 8,080 | 2,850 000 | 4,650 000 | o C | ر ان ان | 2,500 | 070'- |
| Close | Date | 01-13-10 | 01-13-10 | 01-19-10 | 01-28-10 | 02-03-10 | 02-03-10 | 02-03-10 | 02-03-10 | 02-03-10 | 02-03-10 | 02-03-10 | 02-03-10 | 02-03-10 | 02-03-10 | 02-03-10 | 02-03-10 | 02-03-10 | 02-03-10 | 02-03-10 | 02-03-10 | 02-03-10 | 02-03-10 | 02-16-10 | 02-50-10 | 03-01-10 | 03-03-10 | 07-02-10 | 03-02-10 | 03-03-10 | 03-03-10 | 03-03-10 | 03-11-0 | 2-1-2-22 |
| Open | Date | 08-26-09 | 08-24-09 | 04-24-09 | 01-12-09 | 01-12-09 | 09-59-08 | 10-01-08 | 10-08-08 | 10-21-08 | 10-23-08 | 11-18-08 | 02-04-09 | 02-04-09 | 01-12-09 | 01-12-09 | 01-21-10 | 90-10-01 | 80-62-60 | 10-08-08 | 10-21-08 | 01-12-08 | 01-12-09 | 02-04-09 | 60-71-10 | 11-05-08 | 12.00 | 07 10 00 | 07-10-08 | 04-22-00 | 01-12-10 | 20.00 | 02-04-09 | 00-10-30 |

This report does not include transactions in certain non-agency residential mortgage-backed securities (CMOs/MBSs) as information necessary to accurately portray realized gains and/or losses in these securities are held in your account, a separate schedule will be sent to you at a later date containing relevant tax information for transactions in Treasury Bill, no gain or loss will be reported in the above schedule. Instead, the discount on Treasury Bills is reported on Form 1099-Int provided by your custodian. While the securities transactions listed In the event that the above schedule reflects a situation where a Treasury Bill or Government Agency Discount Note was sold prior to maturity, it will be included in Short Term Gain or Loss column of this here are derived from records which we believe to be reliable and the calculations contained herein are based upon our best understanding of the proper methods for such calculations, no assurances are hereby given nor any representations made as to the accuracy or completeness of these reports. Therefore each individual investor should consult his/her tax consultant as to the matters addressed here report The gain or loss should be reported as ordinary interest income or as a reduction of ordinary interest income, as the case may be In the event that the above schedule reflects a maturity of a these securities

Kovitz Investment Group, LLC REALIZED GAINS AND LOSSES AMICUS FOUNDATION

ADV-213311 M15 From 01-01-10 Through 12-31-10

| Open Close | se | | Adjusted Cost | Amond to the | | Gain Or Loss | Loss |
|-------------------|-------------|---|---------------|--------------|------------|--------------|------------|
| Date Date | te Quantity | Security | Basis | Accretion | Proceeds | Short Term | Long Term |
| | | CARMAX INC COM | 00 6389 | | 16 880 03 | | 00000 |
| | Ø | CARMAX INC COM | 23.471.43 | | 75 236 98 | | 10,020 93 |
| | | PHILIP MORRIS INTL INC COM | 24,933.90 | | 30,262,36 | | 70000 |
| | _ | ROBERT HALF INTL INC COM | 20,165 45 | | 32,899,22 | | 10,733,77 |
| | | 3M CO COM | 24,364 72 | | 40 277 07 | | 15 010 25 |
| 09-15-09 04-15-10 | -10 300,000 | UNITED STATES TREAS NTS TIPS | 343,179 00 | 1,347 23 | 343,179 00 | 000 | 66.218,61 |
| | | 0 875% Due 04-15-10 Inflation factor 1 15444 | | | | | |
| 02-04-09 04-16-10 | 150 | BOEING CO COM | 6 304 70 | | 1 | | |
| 10-08-08 04-16-10 | -10 624 | CEMEX SAB DE CV SPON AND NEW | 0,400,0 | | 10,557 48 | | 4,252 69 |
| | 4 | CEMEN SAB DE CV SPON ADA NEW | 6,177,60 | | 6,582 47 | | 404 87 |
| _ | | OLIMEN SAB DE CV SPON ADRINEW | 35,325.56 | | 46,425 37 | | 11,099.81 |
| | | DIAGEO T L C OPON ADMINEW | 30,759 55 | | 38,937 77 | | 8,178 22 |
| | | GOEST DIAGNOSTICS INC COM | 7,584.68 | | 8,783 65 | | 1,198,97 |
| | | QUEST DIAGNOSTICS INC COM | 13,414 77 | | 16,396 14 | | 2,981.37 |
| | | DINITED PARCEL SVC INC CL B | 16,231 90 | | 21,864 48 | | 5,632.58 |
| | | PHIVALEBANCORP INC COM | 55,587 31 | | 37,196 21 | | -18,391 10 |
| 02-04-09 05-11-10 | _ | CONOCOPHILLIPS COM | 54,450 95 | | 68,492 57 | | 14.041.62 |
| | | UNITED PARCEL SVC INC CL B | 28,913 08 | | 38,362 55 | | 9 449 47 |
| | χÔ | HOYAL CARIBBEAN CRUISES LTD COM | 99,267 30 | | 254,612 61 | | 155 345 31 |
| | -, | | 5,601 07 | | 17,171 55 | | 11,570.48 |
| | رې | CALL 100 RYL CARIBBEAN EXP 06-19-10 @ 28 | 29,487 50 | | 21,100 07 | -8.387 43 | 2 |
| | | CEMEX SAB DE CV SPON ADR NEW | 3 40 | | 4 58 | ? | 1.18 |
| | | UNITEDHEALTH GROUP INC COM | 77,356 08 | | 85.962 74 | | 8 606 86 |
| | | CONOCOPHILLIPS COM | 175,249.68 | | 212.261 85 | | 37 012 17 |
| | | PHILIP MORRIS INTL INC COM | 84,689 29 | | 102,713 52 | | 18 024 23 |
| | | DIAGEO P L C SPON ADR NEW | 143,171 74 | | 167,331,74 | | 24 160 00 |
| | | DIAGEO P L C SPON ADR NEW | 54,483 01 | | 77 783 11 | | 23,200,40 |
| | -10 680 000 | ISHARES TR MSCI EAFE IDX | 36,056.50 | | 20 665 04 | | 01,000,03 |
| 04-12-10 09-01-10 | -10 30,000 | ALLEN TEX CMNTY DEV CORP SALES TAX | 30,000 00 | -252 80 | 30,000 00 | | -2,391 19 |
| 01-12-09 09-23-10 | -10 1,190 | ACCENTURE PLOTBELAND SHS CLASS A | 00 000 | | 000 | | |
| | | BERKSHIRE HATHAWAY INC DEL CL B NEW | 34.871.24 | | 50,428 79 | | 11,125 91 |
| _ | | FRANKLIN RES INC COM | 4.118 73 | | 8 301 95 | | 9,872 |
| 02-03-09 09-23-10 | -10 280 | 3M CO COM | 14,212 75 | | 24,048 62 | | 9.835.87 |
| | | | | | | | |

hereby given nor any representations made as to the accuracy or completeness of these reports. Therefore each individual investor should consult his/her tax consultant as to the matters addressed here.

This report does not include transactions in certain non-agency residential mortgage-backed securities (CMOs/MBSs) as information necessary to accurately portray realized gains and/or losses in these securities are held in your account, a separate schedule will be sent to you at a later date containing relevant tax information for transactions in report The gain or loss should be reported as ordinary interest income or as a reduction of ordinary interest income, as the case may be In the event that the above schedule reflects a maturity of a Treasury Bill, no gain or loss will be reported in the above schedule. Instead, the discount on Treasury Bills is reported on Form 1099-Int provided by your custodian. While the securities transactions listed In the event that the above schedule reflects a situation where a Treasury Bill or Government Agency Discount Note was sold prior to maturity, it will be included in Short Term Gain or Loss column of this here are denived from records which we believe to be reliable and the calculations contained herein are based upon our best understanding of the proper methods for such calculations, no assurances are

Kovitz Investment Group, LLC REALIZED GAINS AND LOSSES AMICUS FOUNDATION

ADV-213311 M15 From 01-01-10 Through 12-31-10

| Open | Close | | | | 1 | | Gain Or Loss | r Loss |
|----------------------|----------------------|-----------------|---|-------------------------|------------------------|-------------------------|--------------|-----------------------|
| Date | Date | Quantity | Security | Adjusted Cost Basis | Amort, or Accretion | Proceeds | Short Term | Long Term |
| 01-12-09 09-15-09 | 09-23-10 10-08-10 | 360 300,000 | UNITED PARCEL SVC INC CL B UNITED STATES TREAS NTS TIPS 2 375% Due 04-15-11 | 18,260 89 332,917.51 | -2,912 85 | 23,987 03 334,302 48 | | 5,726 14 1,384 97 |
| 09-15-09 | 10-08-10 | 300,000 | Inflation factor 1 10185 UNITED STATES TREAS NTS TIPS 0 625% Due 04-15-13 | 309,315 36 | 3,700 64 | 320,607 36 | | 11,292 00 |
| 01-12-09 | 10-18-10 | 250 1,300 | Inflation factor 1 03471 BERKSHIRE HATHAWAY INC DEL CL B NEW BERKSHIRE HATHAWAY INC DEL CL B NEW | 15,850 56 82,422 92 | | 20,849 59 107,010 56 | | 4,999 03 24.587 63 |
| 02-03-09 05-07-10 | 10-22-10 11-01-10 | 1,885 25,000 | 3M CO COM *MET GOVT NASHVILLE & DAVIDSON ETM | 95,682.29 | -404 50 | 170,100 36 | | 74,418 07 |
| 11-19-04 | 11-04-10 | 150,000 | 4 500% Due 11-01-10 MEHRILL LYNCH CO INC MTN BE FR 4 5%110410 4 500% Due 11 04 10 | 150,000 00 | -1,713 00 | 150,000 00 | | |
| 04-26-10 | 11-15-10 | 50,000 | A 200% Due 11-04-10 MASSAD ON Y INTERIM FIN AUTH 3-195% Due 11-15-10 | 20,000 00 | -537.00 | 50,000 00 | | |
| 04-16-10 | 11-15-10 | 50,000 | 3 250% Due 11:13:10 3 250% Due 14:15:10 | 50,000.00 | 00 699- | 20,000 00 | | |
| 04-27-10 | 11-23-10 | 50,000 | S 330% Due 11-13-10 NORTH CAROLINA MED CARE COMMN REV BDS | 52,263.89 | -1,178 11 | 52,253 25 | -10 64 | |
| 05-03-10 | 11-23-10 | 50,000 | S 250% Due 10-01-31 NORTH CAROLINA MED CARE COMMN REV BDS 5 250% Due 10-01-31 | 52,263 03 | -1,143 97 | 52,253 25 | 92 6- | |
| 04-28-10 | 12-01-10 | 25,000 | *COO% Cut 12-01-01 4 000% Die 12-01-10 8 000% Die 12-01-10 | 25,000.00 | -380 75 | 25,000 00 | | |
| 04-29-10 | 12-01-10 | 40,000 | HENNEPIN CITY MINN GO PRERE 12-1-10 4 375% Die 12-01-13 | 40,000 00 | -737 50 | 40,000 00 | | |
| 05-21-10 | 12-01-10 | 50,000 | PIERCE CNTY WASH SD #010 GO 4 500% Due 12-01-10 | 50,000.00 | -871 50 | 50,000 00 | | |
| 04-05-10 | 12-01-10 | 30,000 | A 000% Due 19-01-10 | 30,000 00 | -515 30 | 30'000 00 | | |
| 05-28-10 | 12-15-10 | 000'09 | NEW YORK TOTAL OF THE VALUE OF | 00 000'09 | -907 70 | 00 000'09 | | |
| 05-20-10 | 12-15-10 | 25,000 | PLAINFIELD IL GO PRERE 12-15-10 5 300% Due 12-15-16 | 25,000.00 | -552 75 | 25,000 00 | | |

This report does not include transactions in certain non-agency residential mortgage-backed securities (CMOs/MBSs) as information necessary to accurately portray realized gains and/or losses in these securities are held in your account, a separate schedule will be sent to you at a later date containing relevant tax information for transactions in Treasury Bill, no gain or loss will be reported in the above schedule. Instead, the discount on Treasury Bills is reported on Form 1099-Int provided by your custodian. While the securities transactions listed here are derived from records which we believe to be reliable and the calculations contained herein are based upon our best understanding of the proper methods for such calculations, no assurances are hereby given nor any representations made as to the accuracy or completeness of these reports. Therefore each individual investor should consult his/her tax consultant as to the matters addressed here. In the event that the above schedule reflects a situation where a Treasury Bill or Government Agency Discount Note was sold prior to maturity, it will be included in Short Term Gain or Loss column of this report. The gain or loss should be reported as ordinary interest income or as a reduction of ordinary interest income, as the case may be. In the event that the above schedule reflects a maturity of a

REALIZED GAINS AND LOSSES Kovitz Investment Group, LLC

ADV-213311 M15 From 01-01-10 Through 12-31-10 **AMICUS FOUNDATION**

| | | | | | | | Gain Or Loss | Loss |
|--------------|--------------------------|----------|--------------------------------------|---------------|-----------|--------------|--------------|--------------|
| Open | Close | : | : | Adjusted Cost | Amort. or | | į | |
| Date | Date | Quantity | Security | Basis | Accretion | Proceeds | Short Term | Long Term |
| 01-16-09 | 12-29-10 | 220 | BED BATH & BEYOND INC COM | 5,624 06 | | 10,946 30 | | 5,322.24 |
| 02-04-09 | 12-29-10 | 860 | BED BATH & BEYOND INC COM | 19,853 43 | | 42,790 09 | | 22,936 66 |
| 05-19-10 | 12-29-10 | 208 | BIGLARI HLDGS INC COM | 62,475 59 | | 88,053 02 | 25,577 43 | |
| 05-28-09 | 12-29-10 | 3,520 | CARMAX INC COM | 39,185 68 | | 114,294 23 | | 75,108.55 |
| 02-04-09 | 12-29-10 | 380 | CARMAX INC COM | 3,033 72 | | 12,338.58 | | 9,304.86 |
| 02-04-09 | 12-29-10 | 140 | FRANKLIN RES INC COM | 7,207 79 | | 15,446 47 | | 8,238 68 |
| 02-04-09 | 12-29-10 | 320 | FRANKLIN RES INC COM | 16,473 64 | | 35,306 21 | | 18,832 57 |
| 01-12-09 | 12-29-10 | 1,950 | PHILIP MORRIS INTL INC COM | 83,829 50 | | 114,425 73 | | 30,596.23 |
| 02-19-09 | 12-29-10 | 1,100 | PHILIP MORRIS INTL INC COM | 39,240 83 | | 64,547.84 | | 25,307.01 |
| 02-23-10 | 12-29-10 | 1,525 | VODAFONE GROUP PLC NEW SPONS ADR NEW | 33,212 70 | | 40,166 61 | 6,953 91 | |
| TOTAL GAINS | INS | | | | l | | 69,531 68 | 1,229,811.94 |
| TOTAL LOSSES | SSES | | | | | | -83,689.37 | -79,674.13 |
| | | | | 5,271,384.27 | -7,728.86 | 6,407,364.40 | -14,157.69 | 1,150,137.81 |
| TOTAL RE, | TOTAL REALIZED GAIN/LOSS | NLOSS | 1,135,980 13 | | | | | |

securities is not available as of the date of this report. If these securities are held in your account, a separate schedule will be sent to you at a later date containing relevant tax information for transactions in report. The gain or loss should be reported as ordinary interest income or as a reduction of ordinary interest income, as the case may be. In the event that the above schedule reflects a maturity of a Treasury Bill, no gain or loss will be reported in the above schedule. Instead, the discount on Treasury Bills is reported on Form 1099-Int provided by your custodian. While the securities transactions listed hereby given nor any representations made as to the accuracy or completeness of these reports. Therefore each individual investor should consult his/her tax consultant as to the matters addressed here. This report does not include transactions in certain non-agency residential mortgage-backed securities (CMOs/MBSs) as information necessary to accurately portray realized gains and/or losses in these here are derived from records which we believe to be reliable and the calculations contained herein are based upon our best understanding of the proper methods for such calculations, no assurances are In the event that the above schedule reflects a situation where a Treasury Bill or Government Agency Discount Note was sold prior to maturity, it will be included in Short Term Gain or Loss column of this these securities

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

| | | | | . L. | |
|---|--------------|---|--------------|-----------------|---------------------------------------|
| • If you are filing for an Automatic 3-Month Extension, compl | ete only P | art I and check this box | l | | ► X |
| If you are filing for an Additional (Not Automatic) 3-Month E | | | | | |
| Do not complete Part II unless you have already been granted | | | | | |
| Electronic filling (e-file). You can electronically file Form 8868 if | | | | | corporation |
| required to file Form 990-T), or an additional (not automatic) 3-m | | | | | |
| of time to file any of the forms listed in Part I or Part II with the e | | | | | |
| Personal Benefit Contracts, which must be sent to the IRS in pa | | | | | |
| visit www.irs.gov/efile and click on e-file for Charities & Nonprofi | | , | | | • |
| Part Automatic 3-Month Extension of Time | | ibmit original (no copies needed). | 1 | | |
| A corporation required to file Form 990-T and requesting an auto | | | mplete | | |
| Part I only | | | ' | | |
| All other corporations (including 1120-C filers), partnerships, REI to file income tax returns. | MICs, and t | trusts must use Form 7004 to request t | an exter | ision of time | |
| Type or Name of exempt organization print | | | Emp | loyer identific | stion number |
| AMICUS FOUNDATION | | | з | 6-33784 | 62 |
| due date for Number, street, and room or suite no. If a P.O. box, | | | | | |
| return. See Instructions. City, town or post office, state, and ZIP code. For a | | | | | · · · · · · · · · · · · · · · · · · · |
| WESTMONT, IL 60559-1559 | TOTOIGHT GGC | iros, sociisiaciono. | | | |
| | | | - ; - | | |
| Enter the Return code for the return that this application is for (fi | lle a separa | te application for each return) | | | 0 4 |
| Application - applicE | Return | Application | | | Return |
| Application is For | Code | Is For | - | | Code |
| Form 990 | 01 | Form 990-T (corporation) | - | | 07 |
| Form 990-BL DOWNERS | 02 | Form 1041-A | | | 08 |
| Form 990-EZ AAAV 1 3 2011 | 03 | Form 4720 | | | 09 |
| Form 990-PF | 04 | Form 5227 | | | 10 |
| Form 990-T (sec. 401(a) or 408(a) trust | 05 | Form 6069 | 1 | | 11 |
| Form 990-T (trust other than above) 37777777 | 08 | Form 8870 | | | 12 |
| MARY CHRIS FLA | NNERY | | i | | |
| The books are in the care of ► 98 E NAPERVILL | E ROAL | D - WESTMONT, IL 60 | <u> 559-</u> | 1559 | |
| Telephone No. ► 630-929-7900 | | FAX No. ▶ | | | |
| If the organization does not have an office or place of busines | ss in the Un | ilted States, check this box | | | ▶ □ |
| If this is for a Group Return, enter the organization's four digit | | | | | |
| box - If it is for part of the group, check this box - | | | | ers the extens | on is for. |
| 1 request an automatic 3-month (6 months for a corporatio | | | | | |
| AUGUST 15, 2011 to file the exemp | pt organiza | tion retum for the organization named | above. | The extension | |
| is for the organization's return for: | | | | | |
| ► X calendar year 2010 or | | | 1 | | |
| tax year beginning | , an | d ending | - ! | <u> </u> | |
| 6 16 16 1 1 1 1 1 1 1 1 1 1 | | | . ' | | |
| 2 If the tax year entered in line 1 is for less than 12 months, | check reas | on: Initial return Fir | nal retur | n | |
| Change in accounting period | | | | | |
| 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720. | or 6069, e | nter the tentative tax, less any | 1! | | 17 700 |
| nonrefundable credits. See instructions. | | | 3a | \$ | 17,700. |
| b If this application is for Form 990-PF, 990-T, 4720, or 6069 | | | | | 2 222 |
| estimated tax payments made. Include any prior year over | | | 3b | \$ | 3,200. |
| Balance due. Subtract line 3b from line 3a. Include your p | | | | | 14 500 |
| | | | | \$ | |
| by using EFTPS (Electronic Federal Tax Payment System). | See instru | ctions. | 30 | \$ | 14,500. |