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DLN: 93491193005011

OMB No 1545-0052

2010

Form 990-PF

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

Treated as a Private Foundation Department of the Treasury **Note.** The foundation may be able to use a copy of this return to satisfy state reporting requirements Internal Revenue Service For calendar year 2010, or tax year beginning 01-01-2010 , and ending 12-31-2010 Initial return Initial return of a former public charity Final return **G** Check all that apply A mended return Address change Name change

		undation 4S FAMILY FOUNDATION			er identification nu	mber
C/	O VOGE	EL CONSULTING SC		36-34133	27	
		d street (or P O box number if mail is not delivered to street address	ss) Room/suite	B Telepho	ne number (see page	10 of the instructions)
34	15 GAT	TEWAY ROAD		(262) 790	-4960	
Cıty	or towi	n, state, and ZIP code		C If exem	nption application is pe	nding, check here 🕨 🦵
BRO	OKFIEL	D, WI 53045		D 1. Fore	ign organizations, che	ck here
H C	heck t	ype of organization Section 501(c)(3) exempt priv	ate foundation	2. Fore	eign organizations mee	ting the 85% test.
		n 4947(a)(1) nonexempt charitable trust Cher tax		l .	ck here and attach con	
		ket value of all assets at end J Accounting method		E If priva	nte foundation status w section 507(b)(1)(A),	vas terminated
		(from Part II, col. (c), Other (specify)	-		oundation is in a 60-m	
	-	•\$ 6,749,699 (Part I, column (d) mus	t be on cash basis.)		section 507(b)(1)(B),	check here
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions)	(a) Revenue and expenses per books	(b) Net investme income	ent (c) Adjusted n	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)				
	2	Check 🕨 🔽 if the foundation is not required to attach Sch B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	206,293	206,	,293	
	5a	Gross rents				
	b	Net rental income or (loss)				
φ	6a	Net gain or (loss) from sale of assets not on line 10	24,269			
Revenue	b	Gross sales price for all assets on line 6a 2,117,615				
ě	7	Capital gain net income (from Part IV, line 2)		24	1,269	
<u> </u>	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	C	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)		220	F63	
	12	Total. Add lines 1 through 11	230,562		,562	
	13	Compensation of officers, directors, trustees, etc Other employee salaries and wages			0	
φŞ	14	Pension plans, employee benefits				
Š	15 16a	Legal fees (attach schedule)				
Expenses	b	Accounting fees (attach schedule)	5,852	4	,245	1,607
		Other professional fees (attach schedule)	8,311		,311	1,007
₽	17	Interest	3,311		·	
tra	18	Taxes (attach schedule) (see page 14 of the instructions)	4,167	2.	,004	
Admını strative	19	Depreciation (attach schedule) and depletion	% 240		0	
Ë	20	Occupancy				
Ā	21	Travel, conferences, and meetings				
and	22	Printing and publications				
	23	Other expenses (attach schedule)		2,	,784	
Operating	24	Total operating and administrative expenses.			·	
ě		Add lines 13 through 23	21,354	17,	,344	1,607
õ	25	Contributions, gifts, grants paid				263,505
	26	Total expenses and disbursements. Add lines 24 and 25	284,859		,344	265,112
	27	Subtract line 26 from line 12				
	a	Excess of revenue over expenses and disbursements	-54,297			
	Ь	Net investment income (If negative, enter -0-)		213,	,218	
	c	Adjusted net income (If negative, enter -0-)				
For	Drivac	v Act and Panerwork Reduction Act Notice see page 30	n of the instructions	Cat No. 112	807 =	orm 990-DF (2010)

) a	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year				year
			(a) Book Value	(b) Boo	k Value	-	(c) Fair Market Value
	1	Cash—non-interest-bearing	2,617		394,1	104	394,194
	2	Savings and temporary cash investments	2,017		354,1	194	
	3	Accounts receivable Less allowance for doubtful accounts					
	4	Pledges receivable				-	
	4	Less allowance for doubtful accounts					
	5	Grants receivable				+	
	6	Receivables due from officers, directors, trustees, and other					
	0	disqualified persons (attach schedule) (see page 15 of the					
		instructions)					
	7	Other notes and loans receivable (attach schedule)					
	•						
ا د		Less allowance for doubtful accounts 🟲					
Š	8	Inventories for sale or use				_	
€	9	Prepaid expenses and deferred charges					
	10a	Investments—U S and state government obligations (attach schedule)	591,832		516,3	-	537,074
	Ь	Investments—corporate stock (attach schedule)	2,932,195	_	2,486,8	\rightarrow	3,192,064
	С	Investments—corporate bonds (attach schedule)	1,746,883	159 159	1,812,6	607	1,943,817
	11	Investments—land, buildings, and equipment basis					
	4.5	Less accumulated depreciation (attach schedule)					
	12	Investments —mortgage loans	463,880	⊈	468,4	150	678,006
	13	Investments—other (attach schedule)	+05,000	<u> </u>	+00,-	733	
	14	Less accumulated depreciation (attach schedule) 240	0	19 3	4.	544	4,544
	15	Other assets (describe)	J	29	.,,	+	
	16	Total assets (to be completed by all filers—see the					
		instructions Also, see page 1, item I)	5,737,407		5,683,0	037	6,749,699
	17	Accounts payable and accrued expenses					
	18	Grants payable					
e l	19	Deferred revenue					
≝∣	20	Loans from officers, directors, trustees, and other disqualified persons					
	21	Mortgages and other notes payable (attach schedule)					
╛	22	Other liabilities (describe)					
_	23	Total liabilities (add lines 17 through 22)	0				
		Foundations that follow SFAS 117, check here F and complete lines 24 through 26 and lines 30 and 31.					
S.	24	Unrestricted					
or Fund Balances	25	Temporarily restricted					
<u> 연</u>	26	Permanently restricted					
<u> </u>	20	Foundations that do not follow SFAS 117, check here					
5		and complete lines 27 through 31.					
-	27	Capital stock, trust principal, or current funds	6,430,745		6,430,7	745	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0			0	
Assets	29	Retained earnings, accumulated income, endowment, or other funds	-693,338		-747,7	708	
	30	Total net assets or fund balances (see page 17 of the					
펄		ınstructions)	5,737,407		5,683,0	037	
	31	Total liabilities and net assets/fund balances (see page 17 of					
		the instructions)	5,737,407		5,683,0	037	
Pa	rt II	Analysis of Changes in Net Assets or Fund Balances					
1		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must a	gree			
				-	1		5,737,407
2		Enter amount from Part I, line 27a			2		-54,297
3		Other increases not included in line 2 (itemize)			3		0
4		Add lines 1, 2, and 3			4		5,683,110
5		Decreases not included in line 2 (itemize) 🟲			5		73
6		Total net assets or fund balances at end of year (line 4 minus line 5)—P		ine 30 . .	6		5,683,037

	• •	e kınd(s) of property sold (e g , re e, or common stock, 200 shs M		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	NORTHERN TRUST SEC	CURITIES		Р	2010-01-01	2010-12-31
b	NORTHERN TRUST SEC	CURITIES		Р	2009-01-01	2010-12-31
С	NORTHERN TRUST SEC	CURITIES		Р	2010-01-01	2010-12-31
d	NORTHERN TRUST SEC	CURITIES		Р	2009-01-01	2010-12-31
e	CAPITAL GAINS DIVID	DENDS		Р		
(€	e) Gross sales price	(f) Depreciation allowed (or allowable)	1 10	t or other basis xpense of sale		or (loss)) mınus (g)
а	828,	235		818,08	2	10,15
b	1,104,	539		1,160,81	5	-56,27
С		862				86
d	129,9	948		114,44	9	15,49
e	54,0	031				54,03
Со	mplete only for assets show	wing gain in column (h) and owne	d by the foundatio	n on 12/31/69	(I) Gains (Col	
(i)	FM V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (ı) col (j), ıf any	col (k), but not l Losses (fr	ess than -0-) or om col (h))
а						10,15
b						-56,27
С						86
d						15,49
е						54,03
3		ain or (loss) as defined in section t I, line 8, column (c) (see pages			,	
·	If (loss), enter -0- in Par V Qualification Unc	rt I, line 8	educed Tax o	 n Net Investme		
or opt secti	If (loss), enter -0- in Par V Qualification Unc cional use by domestic priva on 4940(d)(2) applies, leave e foundation liable for the se	rt I, line 8	educed Tax or	n Net Investment on net investment	Income	┌ Yes ┌ No
or opt secti as the "Yes,	If (loss), enter -0- in Par V Qualification Unc cional use by domestic priva on 4940(d)(2) applies, leave e foundation liable for the se "the foundation does not qu	rt I, line 8	educed Tax or ection 4940(a) tax able amount of any not complete this	Net Investment on net investment year in the base p	ent Income Income) eriod?	┌ Yes ┌ No
sections the "Yes, Base	If (loss), enter -0- in Par V Qualification Unc cional use by domestic priva on 4940(d)(2) applies, leave e foundation liable for the se "the foundation does not qu	rt I, line 8	educed Tax or ection 4940(a) tax able amount of any not complete this	Net Investment on net investment year in the base p part nstructions before	ent Income Income) eriod?	n ratio
sections the "Yes, Base	If (loss), enter -0- in Par V Qualification Unc cional use by domestic prival on 4940(d)(2) applies, leave e foundation liable for the se "the foundation does not quality ter the appropriate amount (a)	rt I, line 8	educed Tax or ection 4940(a) tax able amount of any not complete this see page 18 of the i	Net Investment on net investment year in the base p part nstructions before	ent Income Income) eriod? making any entries (d) Distribution	n ratio by col (c))
sections the Yes,	If (loss), enter -0- in Par V Qualification Uncertainty cional use by domestic privation 4940(d)(2) applies, leave e foundation liable for the ser the foundation does not quality ter the appropriate amount (a) peniod years Calendar or tax year beginning in) 2009 2008	rt I, line 8	educed Tax or ection 4940(a) tax able amount of any not complete this see page 18 of the i	n Net Investment year in the base propert nstructions before 5,788,110 6,560,892	ent Income Income) eriod? making any entries (d) Distribution	n ratio by col (c)) 0 050996 0 044224
r optoection s the Yes,	V Qualification Uncomment of the foundation does not qualified the appropriate amount (a) period years Calendar or tax year beginning in) 2009 2008 2007	rt I, line 8	educed Tax or ection 4940(a) tax able amount of any not complete this see page 18 of the i	n Net Investment year in the base propert nstructions before 5,788,110 6,560,892 6,487,412	ent Income Income) eriod? making any entries (d) Distribution	n ratio by col (c)) 0 050996 0 044224 0 050049
r opt ecti s the Yes, 1 En	U Qualification Uncompanies on 4940(d)(2) applies, leaves foundation liable for the segment the foundation does not quality the foundation does not quality the appropriate amount (a) appropriate amount (b) approved years Calendar for tax year beginning in) 2009 2008 2007 2006	rt I, line 8	educed Tax or ection 4940(a) tax able amount of any not complete this see page 18 of the i	n Net Investment year in the base propert nstructions before 5,788,110 6,560,892 6,487,412 5,400,666	ent Income Income) eriod? making any entries (d) Distribution	n ratio by col (c)) 0 050990 0 044224 0 050049
sections the "Yes, Base	V Qualification Uncomment of the foundation does not qualified the appropriate amount (a) period years Calendar or tax year beginning in) 2009 2008 2007	rt I, line 8	educed Tax or ection 4940(a) tax able amount of any not complete this see page 18 of the i	n Net Investment year in the base propert nstructions before 5,788,110 6,560,892 6,487,412	ent Income Income) eriod? making any entries (d) Distribution	n ratio by col (c)) 0 050996 0 044224 0 050049
sections the "Yes, Base	V Qualification Uncommon variable for the set of the foundation does not qualified the appropriate amount (a) 1. period years Calendar for tax year beginning in) 2009 2008 2007 2006 2005	rt I, line 8	educed Tax or ection 4940(a) tax able amount of any not complete this ee page 18 of the i	n Net Investment year in the base propert nstructions before 5,788,110 6,560,892 6,487,412 5,400,666 5,078,444	ent Income Income) eriod? making any entries (d) Distribution	n ratio by col (c)) 0 050996 0 044224 0 050049 0 052559
r opt ecti s the Yes, 1 En Base ear (U Qualification Uncommon violation luse by domestic privation 4940(d)(2) applies, leaves foundation liable for the set of the foundation does not quality the foundation does not quality the appropriate amount of the set of tax year beginning in) 2009 2008 2007 2006 2005 Total of line 1, column (dial verage distribution rational description of the set of t	rt I, line 8	educed Tax or ection 4940(a) tax able amount of any not complete this ee page 18 of the interest of noncharacteristics.	n Net Investment year in the base propert nstructions before 5,788,110 6,560,892 6,487,412 5,400,666 5,078,444	ent Income Income Income) eriod? making any entries (d) Distribution (col (b) divided	0 05099 0 04422 0 05004 0 05255 0 05457
or options of the section of the sec	U Qualification Uncommon and use by domestic privation 4940(d)(2) applies, leaver foundation liable for the set of the foundation does not quarter the appropriate amount (a) period years Calendar for tax year beginning in) 2009 2008 2007 2006 2005 Total of line 1, column (dia A verage distribution ration the number of years the foundation ration in the number of years the foundation used in the number of years the number of years the number of years	rt I, line 8	educed Tax or ection 4940(a) tax able amount of any not complete this ee page 18 of the recommendation of any not value of noncharged the total on line of the straight of of	n Net Investment year in the base propert instructions before 5,788,110 6,560,892 6,487,412 5,400,666 5,078,444 he 2 by 5, or by or sirs he ne 2 by 5, or by or sirs	ent Income Income Income) eriod? making any entries (d) Distribution (col (b) divided	0 05048
s the secti s the Yes, 1 En Base year (U Qualification Uncommon and use by domestic privation 4940(d)(2) applies, leaver foundation liable for the set of the foundation does not qualified the appropriate amount (a) approved the experimental form of the set of the appropriate amount (b) approved the appropriate amount (a) approved the appropriate amount (b) approved the set of the set of the foundation does not qualified the set of	rt I, line 8	educed Tax or ection 4940(a) tax able amount of any not complete this ee page 18 of the recommendation of any not value of noncharged the total on line of the straight of of	n Net Investment year in the base propert instructions before 5,788,110 6,560,892 6,487,412 5,400,666 5,078,444 he 2 by 5, or by or sirs he ne 2 by 5, or by or sirs	ent Income Income Income) eriod? making any entries (d) Distribution (col (b) divided	0 050996 0 044224 0 050049 0 052559 0 054578 0 25240 0 05048
secti s the Yes, 1 En Baseear (U Qualification Uncommon variable for the set of foundation liable for the set of the foundation does not qualified the appropriate amount (a) Expensed years Calendar for tax year beginning in) 2009 2008 2007 2006 2005 Total of line 1, column (did A verage distribution ration the number of years the foundation of the number of the set of the s	der Section 4940(e) for R ate foundations subject to the serve this part blank ection 4942 tax on the distribute ualify under section 4940(e) Do in each column for each year, serve (b) Adjusted qualifying distributions 295,171 290,152 324,688 283,851 277,170 d)	educed Tax or ection 4940(a) tax able amount of any not complete this see page 18 of the interpretation of a second secon	n Net Investment year in the base propert nstructions before 5,788,110 6,560,892 6,487,412 5,400,666 5,078,444	ent Income Income Income) eriod? making any entries (d) Distribution (col (b) divided	0 050996 0 044224 0 050049 0 052559 0 054578 0 25240 0 05048 6,293,28
por option of the section of the sec	U Qualification Uncommon variable for the set of foundation liable for the set of the foundation does not qualified the appropriate amount (a) Expensed years Calendar for tax year beginning in) 2009 2008 2007 2006 2005 Total of line 1, column (did A verage distribution ration the number of years the foundation of the number of the set of the s	rt I, line 8	educed Tax or ection 4940(a) tax able amount of any not complete this see page 18 of the interpretation of a second secon	n Net Investment year in the base propert nstructions before 5,788,110 6,560,892 6,487,412 5,400,666 5,078,444	ent Income Income Income) eriod? making any entries (d) Distribution (col (b) divided)	

Par	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18	of the inst	ructio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here F and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			4	4,264
	here 🟲 🦵 and enter 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-)				0
3	Add lines 1 and 2			4	4,264
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			4	1,264
6	Credits/Payments				
а	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 2,171				
b	Exempt foreign organizations—tax withheld at source 6b				
c	Tax paid with application for extension of time to file (Form 8868) 6c 3,500				
d	Backup withholding erroneously withheld 6d				
7	Total credits and payments Add lines 6a through 6d			ļ	5,671
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached.				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9				
.0	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid • 10	,			1,407
.1	Enter the amount of line 10 to be Credited to 2011 estimated tax 1,407 Refunded 11				0
Par	rt VII-A Statements Regarding Activities				
.a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did			Yes	No
	ıt partıcıpate or ıntervene ın any political campaign?		1a		No
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 1	.9 of			
	the instructions for definition)?		1b		No
	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?		1c		No
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 🕨 \$0				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impose	d l			
	on foundation managers 🕨 \$0				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? $$. $$.		2		No
	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, artic	les			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		No
la	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		No
	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?		6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV		7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the				
	instructions) 🕨 🗓				
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	Yes	
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 o	n l			
	page 27)? If "Yes," complete Part XIV		9		No
.0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		No

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		No
4.7			-	
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12	ļ.,	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ►N/A	13	Yes	<u> </u>
14	The books are in care of ►VOGEL CONSULTING SC Telephone no ►(262)	790-	4960	
	Located at 3415 GATEWAY ROAD BROOKFIELD WI ZIP+4 53045			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here			▶ ┌
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over			l
	a bank, securities, or other financial account in a foreign country?	16		No
	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			
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			т
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes V 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? Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	ıf the foundatıon agreed to make a grant to or to employ the official for a period			
	after termination of government service, if terminating within 90 days) Yes 🔽 No			
Ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2010?	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2010?			
	If "Yes," list the years 🕨 20, 20, 20			
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 page 20 of the 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			
	▶ 20, 20, 20			
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			
	ıf the foundation had excess business holdings in 2010.)	3Ь		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	charitable numbers that had not been removed from jeopardy before the first day of the tay year beginning in 20102	1 4b	1	l Na

Pai	rt VII-B	Statements Rega	rdin	g Activities for	Wh	ich Form 4720	May	Be Required (cont	inue	1)		
5a		e year did the foundation										
	(1) Carry	on propaganda, or other	wise	attempt to influence	e leg	ıslatıon (section 49	45(e))?	√ No			
	(2) Influe	ence the outcome of any	speci	fic public election (see	section 4955), or to	car	ry				
		rectly or indirectly, any v							- No			
	•	de a grant to an individua		-				┌ Yes ┡				
		de a grant to an organiza		, ,,		• •	scrib					
						· -		ctions) T Yes F	- No			
		de for any purpose other						, , , , , , , , , , , , , , , , , , , ,				
									- No			
b								exceptions described in				
_								page 22 of the instruction		5b		
_	Organizations relying on a current notice regarding disaster assistance check here											
·		•		•		•		T Yes 「	- _{No}			
							•	, res ,	140			
c -		attach the statement requi										
оа	6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay											
	premiums on a personal benefit contract?								NI.			
Ь	, , , , , , , , , , , , , , , , , , , ,						6b		No			
_		o 6b, file Form 8870.							.			
7a												
_ь	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 Employee											
Pa	rt VIII	Information About and Contractors	Offi	cers, Directors	5, Ti	rustees, Founda	atio	n Managers, Highly	Paid	Emp	loyee	es,
	List all off		fou	ndation managers a	ınd t	heir compensation (see i	page 22 of the instruction	ne)			
		Todio, unicotoro, trabicoo		Fitle, and average		c) Compensation		(d) Contributions to				
	(a) Na	me and address		ours per week		If not paid, enter	е	mployee benefit plans			e acco owance	
			dev	oted to position		-0-)	and	deferred compensation	011	ici uii	- Walle	
See	A dditional	Data Table										
	Compensati	tion of five highest-paid	emnl	ovees (other than	t hos	e included on line 1-	-see	page 23 of the instruction	ons).			
_	•	nter "NONE."	Ср.	o, cco (center enum				page 15 or the morraction	,.			
				(b) Title, and aver	206			(d) Contributions to				
(a)		l address of each employ	ee	hours per week	_	(c) Compensation	n	employee benefit	1	•	e acco	
	paid r	more than \$50,000		devoted to positi	on			plans and deferred compensation	oti	ner all	owance	es
NON	lF											
									<u> </u>			
-												
Tota	Laumbara	fother employees hald o	var e	F0 000		•						

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 3. Five highest-paid independent contractors for professional services (see page 23 of the instructions). 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. O	Form 990-PF (2010)		Page 7
(c) Compensation NONE Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services. Total number of others receiving over \$50,000 for professional services.		rustees, Foundation Managers, Highly	Paid Employees,
Total number of others receiving over \$50,000 for professional services. Description Descripti	3 Five highest-paid independent contractors for professional serv	vices (see page 23 of the instructions). If none, e	:nter "NONE".
Total number of others receiving over \$50,000 for professional services. Del the foundation's four largest direct charitable Activities List the foundation's four largest direct charitable activities during the lax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 2 3 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 Amount Total. Add lines 1 through 3.	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Dart IX-B Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. 1 2 3 3 4 4 Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 A mount 1 A mount	NONE		
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All other program-related investments See page 24 of the instructions Total. Add lines 1 through 3			A mount
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All other program-related investments See page 24 of the instructions Total. Add lines 1 through 3			•
All other program-related investments See page 24 of the instructions Total. Add lines 1 through 3			-
All other program-related investments See page 24 of the instructions Total. Add lines 1 through 3	2		
3	•		-
3			•
3	All other program-related investments. See page 24 of the instru	ctions	
Total. Add lines 1 through 3		ctions	
Total Add Illies I tillough St	<u> </u>		1
Total Add Illies I tillough St			1
Total Add Illies I tillough St		_ 1	
	Iotal. Add lines 1 through 3		

Form	990-PF (2010)		Page 8
Pa	Minimum Investment Return (All domestic foundations must complete this part. For see page 24 of the instructions.)	reign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	A verage monthly fair market value of securities	1a	6,103,298
b	A verage of monthly cash balances	1b	285,826
c	Fair market value of all other assets (see page 24 of the instructions)	1 c	0
d	Total (add lines 1a, b, and c)	1d	6,389,124
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	6,389,124
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see page 25		
	of the instructions)	4	95,837
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	6,293,287
6	Minimum investment return. Enter 5% of line 5	6	314,664
Da	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) pr	ivate operating
EGI	foundations and certain foreign organizations check here 🕨 🗀 and do not complete t	his pa	art.)
1	Minimum investment return from Part X, line 6	1	314,664
2a	Tax on investment income for 2010 from Part VI, line 5 2a 4,264		
b	Income tax for 2010 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	4,264
3	Distributable amount before adjustments Subtract line 2c from line 1	3	310,400
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	310,400
6	Deduction from distributable amount (see page 25 of the instructions)	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	310,400
Par	Qualifying Distributions (see page 25 of the instructions)		
1	A mounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	265,112
b	Program-related investments—total from Part IX-B	1b	0
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	A mounts set aside for specific charitable projects that satisfy the		
а	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	265,112
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	-	203,112
_	income Enter 1% of Part I, line 27b (see page 26 of the instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	265,112
U	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whetl		•
	the section 4940(e) reduction of tax in those years	iiei till	c roundation qualifies for

Fori	m 990-PF (2010)				Page 9
Р	art XIII Undistributed Income (see page	26 of the instruct	ons)		
		(a)	(b)	(c)	(d)
1	Distributable amount for 2010 from Part XI, line 7	Corpus	Years prior to 2009	2009	2010
	· •				310,100
	Undistributed income, if any, as of the end of 2010 Enter amount for 2009 only			0	
a	· · · · · · · · · · · · · · · · · · ·		0	0	
ь			0		
	Excess distributions carryover, if any, to 2010 From 2005				
a L	From 2006				
	From 2007				
٦	From 2008				
- u	From 2009				
f	Total of lines 3a through e	38,596			
	Qualifying distributions for 2010 from Part	·			
•	XII, line 4 > \$ 265,112				
а	Applied to 2009, but not more than line 2a			0	
	Applied to undistributed income of prior years				
_	(Election required—see page 26 of the instructions)		0		
С	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)	0			
d	Applied to 2010 distributable amount				265,112
е	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2010	38,596			38,596
	(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: Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
	Prior years' undistributed income Subtract				
Ь	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)		0		
	tax has been previously assessed		0		
d	Subtract line 6c from line 6b Taxable		0		
_	amount—see page 27 of the instructions Undistributed income for 2009 Subtract line				
-	4a from line 2a Taxable amount—see page 27				
	of the instructions			0	
f	Undistributed income for 2010 Subtract				
	lines 4d and 5 from line 1 This amount must				6,692
_	be distributed in 2011				0,032
,	A mounts treated as distributions out of corpus to satisfy requirements imposed by				
	section 170(b)(1)(F) or 4942(g)(3) (see page 27				
	of the instructions)	0			
8	Excess distributions carryover from 2005 not				
	applied on line 5 or line 7 (see page 27 of the	0			
	Instructions)				
9	Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9				
	Excess from 2006				
ь					
С	Excess from 2008				
d	Excess from 2009				
e	Excess from 2010				

1a	If the foundation has received a ruling or d foundation, and the ruling is effective for 2		•	•		
b	Check box to indicate whether the organiz	ation is a private o	perating foundation	n described in secti	on 「 4942(j)(3) o	or — 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year (a) 2010	(b) 2009	Prior 3 years (c) 2008	(d) 2007	(e) Total
	Investment return from Part X for each year listed					
	85% of line 2a					
	Qualifying distributions from Part XII, line 4 for each year listed					
	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Q ualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test—enter					
	(1) Value of all assets(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c	"Support" alternative test—enter		1	1		
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Pa	rt XV Supplementary Information assets at any time during				on had \$5,000	or more in
1	Information Regarding Foundation Manage	ers:				
а	List any managers of the foundation who habefore the close of any tax year (but only i					dation
b	List any managers of the foundation who or ownership of a partnership or other entity)		•		lly large portion of t	he
2	Information Regarding Contribution, Gran	t, Gift, Loan, Scho	larship, etc., Progra	ıms:		
	Check here F if the foundation only ma unsolicited requests for funds. If the found under other conditions, complete items 2 a	atıon makes gıfts,	to preselected char grants, etc (see p	ritable organizations age 28 of the instru	s and does not acce actions) to individual	pt Is or organizations
а	The name, address, and telephone numbe	r of the person to v	whom applications s	should be addressed	d	
b	The form in which applications should be s	submitted and info	rmation and materi	als they should incl	ude	
c	Any submission deadlines					
d	Any restrictions or limitations on awards, factors	such as by geogra	aphical areas, chari	table fields, kinds o	f institutions, or oth	er

Part XV Supplementary Inform	nation (continued)			Page 1
3 Grants and Contributions Paid		proved for F	uture Payment	
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
a Paid during the year	or substantial contributor	recipient		
See Additional Data Table				
				263,50
b Approved for future payment				
_				

	PF (2010)	ing Astivitis				Page 12
	I-A Analysis of Income-Products amounts unless otherwise indicated		usiness income	Excluded by section	n 512, 513, or 514	(e) Related or exempt
1 Progran	n service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	function income (See page 28 of the instructions)
	and contracts from government agencies					
2 Membe	ership dues and assessments					
3 Interest	on savings and temporary cash investments					
	nds and interest from securities			14	206,293	
	ntal income or (loss) from real estate					
	-financed property					
	lebt-financed property					
	investment income					
	(loss) from sales of assets other than inventory			18	24,269	
	come or (loss) from special events					
	profit or (loss) from sales of inventory					
11 Other	revenue a					
ь						
с						
d						
	al Add columns (b), (d), and (e).		0		230,562	
	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions on page 2			:	L3	230,562
	I-B Relationship of Activities to			xempt Purpos	es	
Line No.	Explain below how each activity for whithe accomplishment of the organization page 28 of the instructions)					
	<u> </u>					

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations 1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash		Yes	No
501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash			140
(1) Cash. (2) Other assets. b Other transactions (1) Sales of assets to a noncharitable exempt organization. (2) Purchases of assets from a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Reimbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. c Sharing of facilities, equipment, mailing 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 me of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair ma in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.			
(2) Other assets. b Other transactions (1) Sales of assets to a noncharitable exempt organization. (2) Purchases of assets from a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Reimbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. c Sharing of facilities, equipment, mailing 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 no fithe goods, other assets, or services given by the reporting foundation. If the foundation received less than fair main any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.			
b Other transactions (1) Sales of assets to a noncharitable exempt organization. (2) Purchases of assets from a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Reimbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. c Sharing of facilities, equipment, mailing 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 no fithe goods, other assets, or services given by the reporting foundation. If the foundation received less than fair main any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.	1a(1)		No
(1) Sales of assets to a noncharitable exempt organization. (2) Purchases of assets from a noncharitable exempt organization. (3) Rental of facilities, equipment, or other assets. (4) Reimbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. c Sharing of facilities, equipment, mailing 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 mof the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair main any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.	1a(2)		No
(2) Purchases of assets from a noncharitable exempt organization			
(3) Rental of facilities, equipment, or other assets. (4) Reimbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. c Sharing of facilities, equipment, mailing 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 nof the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair main any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.	. 1b(1)		No
 (4) Reimbursement arrangements. (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. c Sharing of facilities, equipment, mailing 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 nof the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair main any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. 	. 1b(2)		No
 (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. c Sharing of facilities, equipment, mailing 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 nof the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair main any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. 	. 1b(3)		No
 (5) Loans or loan guarantees. (6) Performance of services or membership or fundraising solicitations. c Sharing of facilities, equipment, mailing 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 nof the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair main any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. 	1b(4)		No
 c Sharing of facilities, equipment, mailing lists, other assets, or paid employees			No
 c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1b(6)		No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair nof the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair main any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services rece	<u> </u>		No
of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair main any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services rece		L	
	ved		nts
	maning arre	geiiiei	
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 relative to the following schedule	T Y d	es F	√ No
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and s	tatement	s, and	to
the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpay based on all information of which preparer has any knowledge ******* 2011-07-07 ********	er or fidu	ıcıary)	IS
Signature of officer or trustee Date Title			
, , , , , , , , , , , , , , , , , , ,	PTIN		
gr Date Check if self-	PIIN		
Preparer's SHANNON M ZUR Signature employed F			
VOGEL CONSULTING GROUP SC	<u> </u>		
3415 GATEWAY ROAD			
Firm's address > BROOKFIELD, WI 53045			

Software ID: Software Version:

EIN: 36-3413327

Name: THE SIMMS FAMILY FOUNDATION

C/O VOGEL CONSULTING SC

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JOHN D SIMMS	PRES, TREAS,	0	0	0
PO BOX 523 PARK RIDGE,IL 60068	DIRECTOR 0 00			
JEAN M SIMMS	SECRETARY,	0	0	0
PO BOX 523 PARK RIDGE,IL 60068	DIRECTOR 0 00			
FREDERICK V SIMMS	VP & DIRECTOR	0	0	0
PO BOX 523 PARK RIDGE,IL 60068	0 00			
JOHN D SIMMS JR	VP & DIRECTOR	0	0	0
PO BOX 523 PARK RIDGE,IL 60068	0 00			
MARY JEAN BECK-CALCAGNO	ASST TREASURER,	0	0	0
PO BOX 523 PARK RIDGE,IL 60068	DIRECTOR 0 00			

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
ADMIRAL NIMITZ FOUNDATION PO BOX 1188 FREDERICKBURG,TX 78624	NONE		CHATITABLE	150
ALZHEIMERS FOUNDATION 1556 HIGHLAND AVE ARLINGTON HTS,IL 60004	NONE		CHATITABLE	250
AMERICAN AIR MUSEUM US MEMBERSHIP CENTER WASHINGTON,DC 200777039	NONE		CHATITABLE	250
AMERICAN BORDER PATROL PO BOX 26845 TUCSON,AZ 85726	NONE		CHATITABLE	100
AMERICAN DIABETES ASSOCIATION PO BOX 96911 WASHINGTON, DC 200906911	NONE		CHATITABLE	150
ANNUAL CATHOLIC APPEAL 835 N RUSH ST CHICAGO,IL 60611	NONE		CHATITABLE	1,000
ARTHRITIS FOUNDATION PO BOX 1187 CHICAGO,IL 60690	NONE		CHATITABLE	150
AVENUES TO INDEPENDENCE FOUNDATION 515 BUSSE HWY PARK RIDGE,IL 60068	NONE		CHATITABLE	1,000
AVENUES TO INDEPENDENCE FOUNDATION 515 BUSSE HWY PARK RIDGE,IL 60068	NONE		CHATITABLE	1,000
AVENUES TO INDEPENDENCE FOUNDATION 515 BUSSE HWY PARK RIDGE,IL 60068	NONE		CHATITABLE	15,000
AVOW HOSPICE 1095 WHIPPOORWILL LANE NAPLES,FL 34105	NONE		CHATITABLE	1,000
BCCA SCHOLARSHIP FUND 8700 BAY COLONY DR NAPLES,FL 34108	NONE		CHATITABLE	500
BLOCK MUSEUM 2020 RIDGE AVE EVANSTON,IL 60208	NONE		CHATITABLE	500
BLUE GAVEL SCHOLARSHIP FUND INC 700 S FOURTEENTH AVE NAPLES,FL 341087396	NONE		CHATITABLE	1,000
BOCA BALLET THEATRE COMPANY 131-B SE MIZNER BLVD BOCA RATON, FL 33432	NONE		CHATITABLE	10,000
Total				263,505

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
BOCA RATON COMMUNITY HOSPITAL 745 MEADOWS RD BOCA RATON,FL 33486	NONE		CHATITABLE	1,000
BOCA RATON HISTORICAL SOCIETY 71 N FEDERAL HIGHWAY BOCA RATON,FL 33432	NONE		CHATITABLE	100
BOCA RATON MUSEUM OF ART 801 W PALMETTO PARK RD BOCA RATON,FL 334863599	NONE		CHATITABLE	100
BOY'S & GIRL'S CLUB OF COLLIER COUNTY 6060 PELICAN BLVD NAPLES,FL 34108	NONE		CHATITABLE	200
BRICKTON ART CENTER 147 VINE AVE PARK RIDGE,IL 60068	NONE		CHATITABLE	100
CENTER OF CONCERN 1580 N NORTHWEST HWY PARK RIDGE,IL 60068	NONE		CHATITABLE	1,000
CHICAGO ARCHITECTURE FOUNDATION 224 S MICHIGAN AVE CHICAGO,IL 606049721	NONE		CHATITABLE	500
CHICAGO BOTANIC GARDEN 1000 LAKE COOK RD GLENCOE,IL 600220400	NONE		CHATITABLE	2,500
CHICAGO BOTANIC GARDEN 1000 LAKE COOK RD GLENCOE,IL 600220400	NONE		CHATITABLE	300
CHICAGO PUBLIC RADIO 135 S LASALLE CHICAGO,IL 60674	NONE		CHATITABLE	365
CONSERVANCY OF SOUTHWEST FLORIDA THE 1450 MERRIHUE DR NAPLES,FL 34108	NONE		CHATITABLE	35,000
DISABLED AMERICAN VETERANS PO BOX 14301 CINCINNATI,OH 45250	NONE		CHATITABLE	100
ELKS NATIONAL FOUNDATION 495 LEE ST DES PLAINES,IL 60016	NONE		CHATITABLE	200
EVERGREEN COUNTRY DAY SCHOOL 1093 SWEDE GULCH RD EVERGREEN,CO 80439	NONE		CHATITABLE	1,000
FOUNDERS FUND INC THE 707 GULF PARK DR NAPLES,FL 33963	NONE		CHATITABLE	125
Total				263,505

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
FOUNDERS FUND INC THE 707 GULF PARK DR NAPLES,FL 33963	NONE		CHATITABLE	100
FOUNDERS FUND INC THE 707 GULF PARK DR NAPLES,FL 33963	NONE		CHATITABLE	2,000
FRANK LLOYD WRIGHT PRESERVATION TRUST 951 CHICAGO AVE OAK PARK,IL 60302	NONE		CHATITABLE	250
GENEVA AREA FOUNDATION INC PO BOX 71 LAKE GENEVA, WI 53147	NONE		CHATITABLE	500
GENEVA LAKE ASSOCIATION PO BOX 412 LAKE GENEVA, WI 53147	NONE		CHATITABLE	30
GENEVA LAKE CONSERVANCY PO BOX 588 FONTANA, WI 53125	NONE		CHATITABLE	500
GENEVA LAKE CONSERVANCY PO BOX 588 FONTANA, WI 53125	NONE		CHATITABLE	3,000
GENEVA LAKE MUSEUM 255 MILL ST LAKE GENEVA, WI 53147	NONE		CHATITABLE	500
GENEVA LAKE SAILING SCHOOL PO BOX 304 FONTANA, WI 53125	NONE		CHATITABLE	500
GENEVA LAKE SAILING SCHOOL PO BOX 304 FONTANA, WI 53125	NONE		CHATITABLE	500
GENEVA LAKE SAILING SCHOOL PO BOX 304 FONTANA, WI 53125	NONE		CHATITABLE	5,000
GENEVA LAKE SAILING SCHOOL PO BOX 304 FONTANA, WI 53125	NONE		CHATITABLE	3,000
GEORGE SNOW SCHOLARSHIP FOUNDATION 998 S FEDERAL HWY STE 203 BOCA RATON,FL 33432	NONE		CHATITABLE	10,000
GEORGE WILLIAMS COLLEGE PO BOX 210 WILLIAMS BAY, WI 531910210	NONE		CHATITABLE	10,000
GEORGE WILLIAMS COLLEGE PO BOX 210 WILLIAMS BAY, WI 531910210	NONE		CHATITABLE	3,000
Total				263,505

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
GEORGE WILLIAMS COLLEGE PO BOX 210 WILLIAMS BAY, WI 531910210	NONE		CHATITABLE	20,000
GOW SCHOOL THE 2491 EMERY RD SOUTH WALES,NY 141399985	NONE		CHATITABLE	5,000
GUADALUPE CENTER OF IMMOKALEE 509 HOPE CIRCLE IMMOKALEE, FL 34142	NONE		CHATITABLE	1,000
HABITAT FOR HUMANITY OF COLLIER COUNTY INC 11145 TAMIAMI TRAIL NAPLES,FL 34113	NONE		CHATITABLE	500
HAVE DREAMS 515 BUSSE HWY PARK RIDGE,IL 60068	NONE		CHATITABLE	1,000
HERITAGE FOUNDATIONTHE 214 MASSACHUSETTS AVE WASHINGTON, DC 200024999	NONE		CHATITABLE	500
INFANT WELFARE SOCIETY AUXILIARY 3600 W FULLERTON CHICAGO,IL 60647	NONE		CHATITABLE	110
INLAND LAKE YACHTING ASSOC PO BOX 311 FONTANA, WI 53125	NONE		CHATITABLE	1,000
KIDS WISH NETWORK PO BOX 968 WILTON,NH 03086	NONE		CHATITABLE	250
KNIGHTS OF COLUMBUS 1009 S KNIGHT PARK RIDGE,IL 60068	NONE		CHATITABLE	100
KNIGHTS OF COLUMBUS 1009 S KNIGHT PARK RIDGE,IL 60068	NONE		CHATITABLE	100
KRAVIS CENTER FOR THE PERFORMING ARTS 701 OKEECHOBEE BLVD WEST PALM,FL 33401	NONE		CHATITABLE	300
LATIN AMERICAN MEDICAL PROVIDERS 578 SUNSET RIDGE RD NORTHFIELD,IL 60093	NONE		CHATITABLE	2,500
THE LEADERSHIP INSTITUTE 1101 N HIGHLAND ST ARLINGTON, VA 22201	NONE		CHATITABLE	500
LUTHERAN SOCIAL SERVICES OF IL LSSI 1001 E TOUHY AVE DES PLAINES,IL 60018	NONE		CHATITABLE	5,000
Total				263,505

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Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
LUTHERAN SOCIAL SERVICES OF IL LSSI 1001 E TOUHY AVE DES PLAINES,IL 60018	NONE		CHATITABLE	6,000
LYNN UNIVERSITY 3601 N MILITARY TRAIL BOCA RATON,FL 33431	NONE		CHATITABLE	500
MAINE CENTER FOR MENTAL HEALTH 832 BUSSE HIGHWAY PARK RIDGE,IL 60068	NONE		CHATITABLE	1,000
MAX MCGRAW WILDLIFE FOUNDATION PO BOX 9 DUNDEE,IL 60118	NONE		CHATITABLE	7,000
MAX MCGRAW WILDLIFE FOUNDATION PO BOX 9 DUNDEE,IL 60118	NONE		CHATITABLE	5,000
MEMORIAL SLOAN-KETTERING CANCER CENTER 1275 YORK AVE NEW YORK,NY 100216094	NONE		CHATITABLE	200
MERCY HOSPITAL LAKE GENEVA 1000 MINERAL POINT AVE JANESVILLE, WI 53547	NONE		CHATITABLE	5,000
MISERICORDIA HEART OF MERCY 6300 N RIDGE CHICAGO,IL 606302788	NONE		CHATITABLE	3,000
MISERICORDIA HEART OF MERCY 6300 N RIDGE CHICAGO,IL 606302788	NONE		CHATITABLE	3,000
MOUNT VERNON LADIES ASSOC PO BOX 110 MOUNT VERNON,VA 22121	NONE		CHATITABLE	100
MULTIPLE SCLEROSIS FOUNDATION 6350 N ANDREWS AVE FT LAUDERDALE, FL 33309	NONE		CHATITABLE	500
NAPLES MUSEUM OF ART 5833 PELICAN BAY BLVD NAPLES,FL 34108	NONE		CHATITABLE	1,000
NAPLES PHILHARMONIC CENTER FOR THE ARTS 5833 PELICAN BAY BLVD NAPLES,FL 34108	NONE		CHATITABLE	1,000
NAPLES PHILHARMONIC CENTER FOR THE ARTS 5833 PELICAN BAY BLVD NAPLES,FL 34108	NONE		CHATITABLE	1,500
NAPLES PHILHARMONIC LEAGUE 5833 PELICAN BAY BLVD NAPLES,FL 34108	NONE		CHATITABLE	1,600
Total				263,505

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor			
a Paid during the year				
NATIONAL SPACE SOCIETY 600 SE PENNSYLANNIA AVE WASHINGTON,DC 20003	NONE		CHATITABLE	600
NCH HEALTHCARE FOUNDATION PO BOX 234 NAPLES,FL 341013029	NONE		CHATITABLE	5,000
NCH HEALTHCARE FOUNDATION PO BOX 234 NAPLES,FL 341013029	NONE		CHATITABLE	2,500
NORTHWESTERN UNIVERSITY 1501 CENTRAL AVE EVANSTON,IL 602083630	NONE		CHATITABLE	500
NORTHWESTERN UNIVERSITY 1501 CENTRAL AVE EVANSTON,IL 602083630	NONE		CHATITABLE	11,000
NORWOOD LIFE CARE FOUNDATION 6016 N NINA AVE CHICAGO,IL 60631	NONE		CHATITABLE	500
NORWOOD LIFE CARE FOUNDATION 6016 N NINA AVE CHICAGO,IL 60631	NONE		CHATITABLE	5,000
PARALYZED VETERAN OF AMERICA 7 MILL BROOK RD WILTON,NH 03086	NONE		CHATITABLE	150
PARK RIDGE CIVIC ORCHESTRA PO BOX 717 PARK RIDGE,IL 60068	NONE		CHATITABLE	11,000
PARK RIDGE COMMUNITY FUND 515 BUSSE HWY PARK RIDGE,IL 60068	NONE		CHATITABLE	500
PARK RIDGE FINE ARTS 303 MESSNER DR WHEELING,IL 60090	NONE		CHATITABLE	5,000
PARK RIDGE HISTORICAL SOCIETY 733 PROSPECT AVE PARK RIDGE,IL 60068	NONE		CHATITABLE	1,000
PARK RIDGE LIONS CLUB PO BOX 200 PARK RIDGE,IL 60068	NONE		CHATITABLE	100
PLANETARY SOCIETY THE 65 N CATALINA AVE PASADENA,CA 91106	NONE		CHATITABLE	600
RAINBOW HOSPICE 444 N NORTHWEST HWY PARK RIDGE,IL 60068	NONE		CHATITABLE	500
Total				263,505

				-
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
·	or substantial contributor			
a Paid during the year				
RAINBOW HOSPICE 444 N NORTHWEST HWY PARK RIDGE,IL 60068	NONE		CHATITABLE	500
RAINBOW HOSPICE 444 N NORTHWEST HWY PARK RIDGE,IL 60068	NONE		CHATITABLE	1,000
RAVINIA ANNUAL FUND ASSOCIATION 1575 OAKWOOD AVE HIGHLAND PARK,IL 600359919	NONE		CHATITABLE	6,000
RESURRECTION DEVELOPMENT FOUNDATION 7435 W TALCOTT CHICAGO,IL 60631	NONE		CHATITABLE	1,000
SALVATION ARMY THE PO BOX 4121 CAROL STREAM, IL 60197	NONE		CHATITABLE	500
SMILE TRAINTHE PO BOX 96231 WASHINGTON,DC 200906231	NONE		CHATITABLE	250
SMITHSONIAN MUSEUM PO BOX 9016 PITTSFIELD,MA 012029951	NONE		CHATITABLE	350
ST BENEDICT 137 DEWEY AVE FONTANA, WI 53125	NONE		CHATITABLE	1,000
ST JUDE CHILDREN RESEARCH HOSP PO BOX 167 MEMPHIS,TN 38101	NONE		CHATITABLE	300
ST NECTARIOS GREEK ORTHODOX CHURCH 133 S ROSELLE RD PALATINE,IL 60067	NONE		CHATITABLE	200
ST NORBERT COLLEGE ANNUAL FUND 100 GRANT ST DEPERE, WI 54115	NONE		CHATITABLE	500
ST PAUL OF THE CROSS 320 S WASHINGTON ST PARK RIDGE, IL 60068	NONE		CHATITABLE	5,000
ST SCHOLASTICA ACADEMY 7416 N RIDGE CHICAGO,IL 60648	NONE		CHATITABLE	5,000
TOWN OF LINN FIRE AND EMS PO BOX 130 ZENDA, WI 53195	NONE		CHATITABLE	700
USO PO BOX 96898 WASHINGTON, DC 200906860	NONE		CHATITABLE	200
Total				263,505

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
VETERANS OF FOREIGN WARS PO BOX 8958 TOPEKA,KS 66608	NONE		CHATITABLE	150
WALWORTH COUNTY FAIR FOUNDATION 411 EAST COURT ST ELKHORN, WI 53121	NONE		CHATITABLE	2,000
WATER SAFETY PATROL PO BOX 98 LAKE GENEVA, WI 53147	NONE		CHATITABLE	500
WATER SAFETY PATROL PO BOX 98 LAKE GENEVA, WI 53147	NONE		CHATITABLE	1,000
WORLD WAR II VETERANS COMMITTEE PO BOX 96543 WASHINGTON, DC 200906543	NONE		CHATITABLE	200
WTTW CHANNEL 11 PBS 5400 N ST LOUIS AVE CHICAGO,IL 60625	NONE		CHATITABLE	250
WTTW CHANNEL 11 PBS 5400 N ST LOUIS AVE CHICAGO,IL 60625	NONE		CHATITABLE	175
YOUTH CAMPUS 733 N PROSPECT AVE PARK RIDGE,IL 600682799	NONE		CHATITABLE	2,000
FRIENDS OF THE ORPHANS 134 NORTH LA SALLE STREET SUITE 500 CHICAGO,IL 60602	NONE		CHATITABLE	1,000
AURORA HEALTH CARE FOUNDATION 750 W VIRGINIA ST MILWAUKEE, WI 53204	NONE		CHATITABLE	2,000
Total				263,505

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Depreciation and Amortization

(Including Information on Listed Property)

DLN: 93491193005011

OMB No 1545-0172

Form **4562**

Department of the Treasury Internal Revenue Service (99)	•	See separate in	st ruct ions.	► Attach	to your	tax re	eturn.		Sequence No 67
Name(s) shown on return THE SIMMS FAMILY FOU	NDATION		Business	or activity to w	hıch th	ıs forn	n relates	10	dentifying number
C/O VOGEL CONSULTIN			FORM 990	O-PF PAGE 1				3	6-3413327
<u> </u>	To Expense (Certain Prop	erty Unc	ler Section	179			<u> </u>	
Note: If y	ou have any li	sted property	, complet	e Part V befo	re yo	и соп	iplete Part I.		
1 Maximum amount See	the instructions	for a higher lin	nıt for certa	ın busınesses	•			1	500,000
2 Total cost of section 1	79 property plac	ced in service (:	see instruc	tions) .				2	
3 Threshold cost of sect	ion 179 property	y before reducti	on ın lımıta	tıon (see ınstr	uctions			3	2,000,000
4 Reduction in limitation	Subtract line 3	from line 2 If z	ero or less	enter - 0 -				4	
5 Dollar limitation for tax				•	ገ- Ifm	arried	filing		
separately, see instruc		mic 4 from fine	1 1120100	1 1033, 011001	J 11111	unicu	iiiiig	5	
Separatery, See motivate			· · · ·	(b) Cost (bu	· ·		· · · ·		
6 (a)	Description of pr	roperty		on (b)		use	(c) Elected	cost	
									1
									1
7 Listed property Enter	the amount from	ılıne 29 🔒				7			1
8 Total elected cost of s	ection 179 prop	ertv Addamou	nts ın colur	mn (c). lines 6	and 7	<u> </u>		8	1
9 Tentative deduction E				(0),		-		9	
10 Carryover of disallowe				 n 4562	•			10	
•		•			·	• stions\			
11 Business income limitation								11	
12 Section 179 expense of		•			n line 1	1 .		12	
13 Carryover of disallowe	d deduction to 2	011 Add lines 9	9 and 10, le	ess line 12	.►	13			
Note: Do not use Part									
									y) (See instructions)
14 Special depreciation a tax year (see instruction)		lified property (other than I	listed property) place	d in se	rvice during the	14	
15 Property subject to se	ction 168(f)(1) e	election .						15	
16 Other depreciation (in	cluding ACRS)							16	
Part IIII MACRS De	preciation (I	Do not includ	e listed pr	operty.) (Se	e insti	ructio	ns.)		•
				ction A			•		
17 MACRS deductions for	assets placed ı	n service in tax	years begi	nnıng before 2	010			17	
18 If you are electing t	o group any a	ssets placed	ın service	during the t	ax yea	ar into	one or more		
general asset accou	ınts, check hei	re					▶□		
Section B—Ass	ets Placed in	Service Du	ring 201	O Tax Year	Using	the	General Dep	recia	tion System
		(c) Basis	for						-
(a) Classification of	(b) Month and	depreciat		(d) Recovery			(6) 14	.	(g)Depreciation
property	year placed in service	(business/inv use	estment	period	(e) C	onvent	ion (f) Meth	od	deduction
	Service	only—see insti	ructions)						
L 9a 3-year property									
b 5-year property		See Ad	d'l Data						
c 7-year property									
d 10-year property									
e 15-year property									
f 20-year property									
g 25-year property				25 yrs			S/L		
h Residential rental				27 5 yrs	N	1 M	S/L		
property				27 5 yrs	N	1 M	S/L		
i Nonresıdentıal real				39 yrs	N	1 M	S/L		
property					N	1 M	S/L		
Sect io	n C—Assets Plac	ced in Service D	uring 2010	Tax Year Using	g the A	lterna	tive Depreciatio	n Syst	em
20a Class life							S/L		
b 12-year				12 yrs			S/L		
c 40-year				40 yrs	1	м м	S/L		
	y (see instruc								T
21 Listed property Enter	amount from line	28						21	
22 Total. Add amounts fro and on the appropriate								22	240
23 For assets shown above portion of the basis att	e and placed in	service during t	he current			23		•	

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

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

(a) (b) Business/ (d) (e) (f) (f) (Type of property (list Date placed in Investment Cost or other (business/investment Cost) (husiness/investment Cost) (hus	es," is the g) hod/ ention 25 r," or rel ompleting	e evidence (h Depreci deduc	yritten?) ation/ ttion	Yes see vehicle	(i) Elected ection 179 cost
(a) (b) Date placed in investment use percentage percentage which dispersed to the percentage percentage basis for depreciation (business/investment use only) and percentage percentage percentage basis (business/investment use only) and percentage percentage basis (business/investment use only) and percentage percentage basis (business/investment use only) and percentage basis (business use 26 Property used more than 50% in a qualified business use 27 Property used more than 50% in a qualified business use 28 Property used 50% or less in a qualified business use 29 Property used 50% or less in a qualified business use 29 Property used 50% or less in a qualified business use 29 Property used 50% or less in a qualified business use 29 Property used 50% or less in a qualified business use 20 Property used 50% or less in a qualified business use 20 Property used 50% or less in a qualified business use 20 Property used 50% or less in a qualified business use 20 Property used 50% or less in a qualified business use 20 Property used 50% or less in a qualified business use 20 Property used 50% or less in a qualified business use 20 Property used 50% or less in a qualified business use 20 Property used 50% or less in a qualified business use 20 Property used 50% or less in a qualified business use 20 Property used 50% or less in a qualified business use 20 Property used 50% or less in a qualified business use 20 Property used 50% or less in a qualified business use 20 Property used 50% or less in a qualified business use 20 Property used 50% or less in a qualified business use 20 Property used 50% or less in a qualified business use 20 Property used 50% or less in a qualified business use 20 Property used 50% or l	g) hod/ ention 25 r," or rel mpleting	(h) Deprecial deduction de	s on for those	e vehicle	(i) Elected ection 179 cost
(a) Date placed in service whether the property (list vehicles first) which service whether service during the tax year and used more than 50% in a qualified business use 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use 26 Property used more than 50% in a qualified business use 27 Property used 50% or less in a qualified business use 27 Property used 50% or less in a qualified business use 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1	r," or rel	29 elated persthis section (d)	s on for those	e vehicle	Elected ection 179 cost
26 Property used more than 50% in a qualified business use	r," or rel	elated pers this section (d)	for those	:)	(f)
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27 Property used 50% or less in a qualified business use	r," or rel	elated pers this section (d)	for those	:)	(f)
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% %	r," or rel	elated pers this section (d)	for those	:)	(f)
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1	r," or rel	elated pers this section (d)	for those	:)	(f)
28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1	r," or rel	elated pers this section (d)	for those	:)	(f)
Section B—Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner from you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner from you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to complete this section C to see if you meet an exception to complete this section C to see if you meet an exception to complete this section C to see if you meet an exception to complete this section C to see if you meet an exception to complete in Section C to see if you meet an exception to see if you meet an exception to complete in Section C to see if you meet an exception to see if you meet an exception to complete in Section C to see if you meet an exception to see if you meet an exception to complete in Section B for vehicles owners or related person? Section C—Questions for Employers Who Provide Vehicles for Use the sequence of the provide vehicles of the provide vehicles of the sequence of the provide vehicles of the pro	r," or rel	elated pers this section (d)	for those	:)	(f)
Section B—Information on Use of Vehicles Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to or 30 Total business/investment miles driven during the year (do not include commuting miles)	mpleting	elated pers this section (d)	for those	:)	(f)
Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner from your provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to complete this section C to see if you meet an exception to complete the your devehicles to your employees, first answer the questions in Section C to see if you meet an exception to complete the your developed your meet an exception to complete the your meet an exception to complete your meet an exception to complete your meet an exception to complete year. 31 Total commuting miles driven during the year and lines 30 through 32	mpleting	this section (d)	for those	:)	(f)
If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing Section B for vehicles of the see if you meet an exception to completing Section B for vehicles of the see if you meet an exception to completing Section B for vehicles of the see if you meet an exception to completing Section B for vehicles of the see if you meet an exception to complete year and see if you meet an exception to complete year (do not include commuting miles driven during the year of t	mpleting	this section (d)	for those	:)	(f)
30 Total business/investment miles driven during the year (do not include commuting miles)		(d)	(е	:)	(f)
year (do not include commuting miles)	3 V 6	ehicle 4	Vehic	le 5	
31 Total commuting miles driven during the year 32 Total other personal(noncommuting) miles driven 33 Total miles driven during the year Add lines 30 through 32					
33 Total miles driven during the year Add lines 30 through 32					
33 Total miles driven during the year Add lines 30 through 32					
through 32					
during off-duty hours?					
35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use? Section C—Questions for Employers Who Provide Vehicles for Use Answer these questions to determine if you meet an exception to completing Section B for vehicles owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except comemployees? See the instructions for vehicles used by corporate officers, directors, or 1% or metal.	o Yes	es No	Yes	No	Yes No
owner or related person?					
Section C—Questions for Employers Who Provide Vehicles for Us Answer these questions to determine if you meet an exception to completing Section B for vehicles 5% owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including employees?					
Answer these questions to determine if you meet an exception to completing Section B for vehicles owners or related persons (see instructions) 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including employees?					
 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except comemployees? See the instructions for vehicles used by corporate officers, directors, or 1% or maintain. 					ot more th
as Do you maintain a written policy statement that prohibits personal use of vehicles, except comemployees? See the instructions for vehicles used by corporate officers, directors, or 1% or many contents.	commu	uting by w	/OUT		N
employees? See the instructions for vehicles used by corporate officers, directors, or 1% or m				Ye	s No
employees? See the instructions for vehicles used by corporate officers, directors, or 1% or m				<u> </u>	-
39 Do you treat all use of vehicles by employees as personal use?					
40 Do you provide more than five vehicles to your employees, obtain information from your employ vehicles, and retain the information received?	ees abo	out the us	e of the	!	
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instru	ctions))			
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the cover	ed vehic	cles			
Part VI Amortization					
(b) (c) (d) (A.				(f)	
(a) Date Amortizable Code Ar	(e)		A mor	tızatıor	ı for
. I amount I section I	nortizatio		th	ns year	
42 A mortization of costs that begins during your 2010 tax year (see instructions)	nortizatio period or	-			
	nortizatio				
	nortizatio period or				
43 A mortization of costs that began before your 2010 tax year	nortizatio period or				

44 Total. Add amounts in column (f) See the instructions for where to report

44

Additional Data

Software ID: Software Version:

EIN: 36-3413327

Name: THE SIMMS FAMILY FOUNDATION

C/O VOGEL CONSULTING SC

Form 4562, Part III, Line 19, Section B—Assets Placed in Service During 2010 Tax Year Using the General Depreciation System:

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g)Depreciation deduction
b 5-year property]	1,931	5 0	HY	200 DB	97
b 5-year property		403	5 0	HY	200 DB	20
b 5-year property]	2,450	5 0	HY	200 DB	123

TY 2010 Accounting Fees Schedule

Name: THE SIMMS FAMILY FOUNDATION

C/O VOGEL CONSULTING SC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
VOGEL CONSULTING GROUP	5,852	4,245		1,607

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2010 Depreciation Schedule

Name: THE SIMMS FAMILY FOUNDATION

C/O VOGEL CONSULTING SC

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
HARDWARE	2010-12-26	1,931		200DB	5 000000000000	97	0		
SOFTWARE	2010-12-26	403		200DB	5 000000000000	20	0		
HARDWARE	2010-10-11	2,450		200DB	5 00000000000	123	0		

TY 2010 Investments Corporate Bonds Schedule

Name: THE SIMMS FAMILY FOUNDATION

C/O VOGEL CONSULTING SC

Name of Bond	End of Year Book Value	End of Year Fair Market Value
ABBOTT LABS 3.75% DUE 03-15-2011	49,165	50,346
PITNEY BOWES INC 4.625% DUE 10-01-2012	50,910	52,463
BANK AMER CORP SR NT 4.875% DUE 01-15-2013 BEO	102,389	104,208
CISCO SYS INC 5.25% DUE 02-22-2011	100,356	100,627
GEN ELEC CAP CORP MEDIUM TERM NTS BO TRANCHE # TR 00714 5 DUE 11-15-2011	99,355	103,815
SBC COMMUNICATIONS 5.875% DUE 08-15-2012	100,562	107,741
MFB NORTHERN FUNDS BD INDEX FD	475,650	487,283
MFB NORTHN HI YIELD FXD INC FD	684,301	788,214
MFC ISHARES TR BARCLAYS 1-3 YR CR BD FD	149,919	149,120
DIAGEO CAP PLC NT 4.375% DUE 05-03-2010 BEO	0	0
HSBC FIN CORP NT 4.75% DUE 04-15-2010 BEO	0	0
HOME DEPOT INC 4.625% DUE 08-15-2010	0	0
ANHEUSER-BUSCH COS INC MEDIUM TERM NTS BTRANCHE # TR 00003 5.625 10-1-10BEO	0	0

TY 2010 Investments Corporate Stock Schedule

Name: THE SIMMS FAMILY FOUNDATION

C/O VOGEL CONSULTING SC

Name of Stock	End of Year Book Value	End of Year Fair Market Value
MFB NORTHN MULTI-MANAGER MID CAP FD	50,000	88,661
MFB NORTHN MULTI-MANAGER SMALL CAP FD	150,000	150,483
MFB NORTHN FDS MULTI-MANAGER EMERGING MKTS EQTY FD	409,417	638,393
MFB NORTHN MULTI-MANAGER INTL EQTY FD	631,934	761,976
NORTHERN TRUST #2640801 (SEE ATTACHMENT)	1,245,522	1,552,551

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93491193005011 **TY 2010 Investments Government**

Obligations Schedule

Name: THE SIMMS FAMILY FOUNDATION

C/O VOGEL CONSULTING SC

537,074

0

0

EIN: 36-3413327

US Government Securities - End of

Year Book Value: 516,360

US Government Securities - End of

Year Fair Market Value:

State & Local Government

Securities - End of Year Book

Value:

State & Local Government

Securities - End of Year Fair Market Value:

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491193005011

TY 2010 Investments - Other Schedule

Name: THE SIMMS FAMILY FOUNDATION

C/O VOGEL CONSULTING SC

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
MFC SPDR GOLD TR GOLD SHS	AT COST	226,945	293,393
MFB NORTHN FDS MULTI-MANAGER GLOBAL REALESTATE FD	AT COST	147,662	232,827
MFO PIMCO FDS PAC INVT MGMT SER COMMODITY REALRETURN STRATEGY FD INS	AT COST	93,852	151,786

TY 2010 Land, Etc. Schedule

Name: THE SIMMS FAMILY FOUNDATION

C/O VOGEL CONSULTING SC

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
HARDWARE	1,931	97	1,834	0
SOFTWARE	403	20	383	0
HARDWARE	2,450	123	2,327	0



Name: THE SIMMS FAMILY FOUNDATION

C/O VOGEL CONSULTING SC

Description	Amount
PRIOR PERIOD ADJUSTMENT	73

TY 2010 Other Expenses Schedule

Name: THE SIMMS FAMILY FOUNDATION

C/O VOGEL CONSULTING SC

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FILING FEES	25	25		0
DUES	1,495	1,495		0
POSTAGE	402	402		0
NT FEES	862	862		0

TY 2010 Other Professional Fees Schedule

Name: THE SIMMS FAMILY FOUNDATION

C/O VOGEL CONSULTING SC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT SERVICES	8,311	8,311		0

TY 2010 Taxes Schedule

Name: THE SIMMS FAMILY FOUNDATION

C/O VOGEL CONSULTING SC

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX WITHHELD	2,004	2,004		0
FEDERAL TAX PAYMENTS	2,163	0		0