

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990-PF

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0052

| For | calen | dar year 2010, or tax year beginning | | , and ending | | | |
|------------------------------|--------|--|---|---|--|--|--|
| G | heck | all that apply: Initial return Amended return | Initial return of a fo | ormer public charity | Final return Name change | | |
| Naı | ne of | foundation | | | A Employer identification | number | |
| | | PETER D. AND CAROL GO | 36-3730772 | | | | |
| Nur | nber a | nd street (or PO box number if mail is not delivered to street 219 CARY AVENUE | address) | Room/suite | 8 Telephone number 312-644-32 | 00 | |
| City | or to | own, state, and ZIP code | | <u>_</u> | C if exemption application is p | | |
| | | | 035 | | D 1. Foreign organizations | _ | |
| Н (| heck | type of organization: X Section 501(c)(3) ex | cempt private foundation | · · · · · · · · · · · · · · · · · · · | Foreign organizations me check here and attach co | eting the 85% test. | |
| | _ | · — | Other taxable private found | ation | 1 | | |
| I Fa | | rket value of all assets at end of year J Accounti | | Accrual | E If private foundation state under section 507(b)(1) | | |
| | | · / | ther (specify) | | 1 ' ' ' ' | • • | |
| ,,, | | 4,167,606. (Part I, colu | | basis.) | F If the foundation is in a (under section 507(b)(1) | (B) check here | |
| | rt I | Analysis of Revenue and Expenses | (a) Revenue and | (b) Net investment | (c) Adjusted net | (d) Disbursements | |
| | | (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).) | expenses per books | income | income | for charitable purposes (cash basis only) | |
| | | Contributions, gifts, grants, etc., received | | | A N/A | 在工程的基礎的 | |
| | 2 | Check If the foundation is not required to attach Sch. B | 企業企業文庫 | Contract to the | | 不够。我哪里的 | |
| | 3 | Interest on savings and temporary cash investments | 8,491. | 8,491 | | STATEMENT: 1 | |
| | 4 | Dividends and interest from securities | 68,848. | 68,848 | • | STATEMENT 2 | |
| | 5a | Gross rents | | | | | |
| | b | Net rental income or (loss) | 1604 | | WE SEPTEMBER IN | かに主て電影を | |
| ۵ | 6a | Net gain or (loss) from sale of assets not on line 10 | -38,386. | "" " " " " " " " " " " " " " " " " " " | | "可可以"的 的数数图 | |
| Ĕ | b | Gross sales price for all assets on line 6a 888,574. | 34. 54. 18. 27. 28. 18. 18. 18. 18. 18. 18. 18. 18. 18. 1 | | TO SERVE | REMERS THE | |
| Revenue | 7 | Capital gain net income (from Part IV, line 2) | "一种"原金"。 | 0 | · 魔,好家的家 | 記書 から (本) (本) | |
| Œ | 8 | Net short-term capital gain | A. CARRESTON TO THE STATE OF | | | 你有。并需要的 | |
| | 9 | Income modifications | | | | KEN JES THE | |
| | 10a | Gross sales less returns and allowances | | | | CEIVED 1 | |
| | b | Less Cost of goods sold | 医内裂针心脉溢 | (中国) · 多种性的 | The second secon | | |
| | С | Gross profit or (loss) | | 2. 体的重要。1965年 | ाप थि। | 1 A Office Of | |
| | 11 | Other income . | | | 14 | はさる場合の同 | |
| | 12 | Total. Add lines 1 through 11 . | 38,953. | 77,339 | | C TO THE SECOND PROPERTY OF THE SECOND PROPER | |
| | 13 | Compensation of officers, directors, trustees, etc | 0. | 0 | · L OG | DEN, UT 9. | |
| | 14 | Other employee salaries and wages | | | | | |
| ဟ | | Pension plans, employee benefits | | – | | | |
| penses | | Legal fees | ļ | | | | |
| | | Accounting fees | | 22.22 | | | |
| Ä | | Other professional fees STMT 3 | 22,299. | 22,299 | • | 0. | |
| tive | | Interest | | | <u> </u> | | |
| itra | | Taxes STMT 4 | 944. | 0 | • | 0. | |
| inis | | Depreciation and depletion | | | | 基合 解痛性 | |
| 튵 | | Occupancy | | <u> </u> | <u> </u> | | |
| Ā | | Travel, conferences, and meetings | | | | | |
| aŭ | | Printing and publications | <u> </u> | _ | · · · · · · · · · · · · · · · · · · · | | |
| ing | | Other expenses | | | | | |
| Operating and Administrative | 24 | Total operating and administrative | 00.040 | 00 000 | | | |
| Dee | | expenses. Add lines 13 through 23 | 23,243. | 22,299 | | 0. | |
| J | | Contributions, gifts, grants paid | 141,038. | | A SPACE OF THE PARTY OF THE PAR | 141,038. | |
| | 26 | Total expenses and disbursements. | 464.005 | | | | |
| | | Add lines 24 and 25 | 164,281. | 22,299 | • many many | 141,038. | |
| | 27 | Subtract line 26 from line 12: | | | | | |
| | | Excess of revenue over expenses and disbursements | -125,328. | dagea Karay | | 文章 (A) A A A A A A A A A A A A A A A A A A | |
| | | Net investment income (if negative, enter -0-) | | 55,040 | | A STOR THE BOOK SEE | |
| | C | Adjusted net income (if negative, enter -0-) | | NAME OF THE PARTY | ∄ N/A | THE WALL STATE OF THE STATE OF | |

UNED AUG 2 2 2011

LHA For Paperwork Reduction Act Notice, see the instructions.

| Part II Balance Sheets Attached schedules and amounts in the description | | Raismon Shoots Attached schedules and amounts in the description | Beginning of year | f year | |
|--|------|--|--|--|--|
| Conglish should be for each or year amounts only | | column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | 15,189. | 23,129. | 23,129. |
| | 2 | Savings and temporary cash investments | 29,744. | 67,581. | 67,581. |
| | | Accounts receivable | . , , , , , , , , , , , , , , , , , , , | 4 | ٠ - س ش ، |
| | | Less; allowance for doubtful accounts | | | |
| | 4 | Pledges receivable ▶ | ر معدد ا | | |
| 1 | | Less: allowance for doubtful accounts ▶ | | | |
| | 5 | Grants receivable | | | |
| | _ | Receivables due from officers, directors, trustees, and other | | | |
| | | disqualified persons | | | |
| | 7 | Other notes and loans receivable | · 1-1-1-024 | FRENCH CE COMMON | THE PARTY |
| | ľ | Less: allowance for doubtful accounts | 2011 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 | | |
| s | 8 | Inventories for sale or use | | · · · · · | |
| Assets | - | Prepaid expenses and deferred charges | 560. | 960. | 960. |
| As | | Investments - U.S. and state government obligations STMT 5 | 509,818. | | 540,801. |
| | | Investments - corporate stock STMT 6 | 2,545,000. | 2,169,702. | 2,974,685. |
| | | Investments - corporate bonds STMT 7 | 400,000. | 600,000. | 516,300. |
| | | Investments - land, buildings, and equipment basis | | 51518355" WAY | 图形型 在24年第36日 |
| | ۱'' | Less accumulated depreciation | GE -72.133) **** JAS. W-57.** | | The state of the s |
| | 12 | Investments - mortgage loans | | | |
| | | Investments - other | 96,120. | 99,913. | 44,150. |
| | | Land, buildings, and equipment basis | | | Carlo Alivertical |
| | l '' | Less accumulated depreciation | | 1200 MIX 341 - 100 - 101 - 1 - 1 - 1 - 1 - 1 - 1 - | <u> </u> |
| | 15 | Other assets (describe > | | | |
| | | | | | |
| | 16 | Total assets (to be completed by all filers) | 3,596, <u>4</u> 31. | 3,471,103. | 4,167,606. |
| | 17 | Accounts payable and accrued expenses | | | |
| | 18 | Grants payable | | | |
| S | 19 | Deferred revenue | | | |
| Liabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| iabi | 21 | Mortgages and other notes payable | | | |
| | 22 | Other liabilities (describe >) | | | |
| | | | | | |
| | 23 | Total liabilities (add lines 17 through 22) | 0. | 0. | 10.000 00 00 00 00 00 00 00 00 00 00 00 0 |
| | | Foundations that follow SFAS 117, check here | | | |
| s | | and complete lines 24 through 26 and lines 30 and 31. | | | |
| ces | 1 | Unrestricted | | | |
| alar | 25 | Temporarily restricted | | | |
| or Fund Balan | 26 | Permanently restricted | | | - 100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| Š | | Foundations that do not follow SFAS 117, check here | | | |
| Ä | | and complete lines 27 through 31. | 2 506 421 | 2 506 421 | |
| ţ | 27 | Capital stock, trust principal, or current funds | 3,596,431. | 3,596,431 | |
| Net Assets | 28 | Paid-in or capital surplus, or land, bldg., and equipment fund | 0. | -125,328 | 4 |
| ¥ A | 29 | Retained earnings, accumulated income, endowment, or other funds | 3,596,431. | 3,471,103 | |
| ž | 30 | Total net assets or fund balances | 3,330,431. | 3,411,103 | |
| | ١,, | Tatal liabilities and not assets fund halanese | 3,596,431. | 3,471,103 | |
| _ | | Total liabilities and net assets/fund balances | • | ., ., ., ., ., ., ., ., ., ., ., ., ., . | Lufferde (4 halls New 2 and 14 days 4 and 14 days 14 d |
| P | art | Analysis of Changes in Net Assets or Fund I | Baiances | | |
| - 1 | Tota | I net assets or fund balances at beginning of year - Part II, column (a), lini | e 30 | | |
| - | | st agree with end-of-year figure reported on prior year's return) | | 1 | 3,596,431. |
| 2 | | r amount from Part I, line 27a | | 2 | -125,328. |
| | | r increases not included in line 2 (itemize) | | 3 | |
| - | | lines 1, 2, and 3 | | 4 | |
| | | eases not included in line 2 (itemize) | | 5 | |
| 6 | Tota | I net assets or fund balances at end of year (line 4 minus line 5) - Part II, | column (b), line 30 | 6 | 3,471,103. |

023511 12-07-10

023521 12-07-10

| orm | | | <u> 3730</u> | | | age 4 |
|------|---|------------------|---|--------------------------------|-------------------------|------------------|
| | rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49 | 948 - | see i | nstru | ction | s) |
| 1a | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. | .2 | | | | - 1 |
| | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) | | , 23 Z | · · | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% | 1 | | 1 | .,10 |)1. |
| | of Part I, line 27b | • | أيج لا تأور | Marin | į . | - ' |
| C | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). | %. ⇔ | 4 4 2 | * = | | , |
| | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 2 | *************************************** | | | 0. |
| | Add lines 1 and 2 | 3 | | - | 1,10 | $\overline{01.}$ |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 4 | | | - | 0. |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | 5 | | | 1,10 | $\overline{01.}$ |
| 6 | Credits/Payments: | 1000 | | × , , , , , , , | | |
| | 2010 estimated tax payments and 2009 overpayment credited to 2010 6a 960. | | | | | 3. V. |
| | Exempt foreign organizations - tax withheld at source | | Andrew (| | | 1 |
| | Tax paid with application for extension of time to file (Form 8868) 6c 1,500. | | | | ห์ เลย | . : 4 |
| | Backup withholding erroneously withheld 6d | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | Kraik :/ | * 1 | 1 m |
| | Total credits and payments. Add lines 6a through 6d | 7 | 20 V Mar. 2 400 | بكسلشمت | 2,40 | 60. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | 8 | | | | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | 9 | | | | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 10 | | | L,3! | 5 9. |
| | Enter the amount of line 10 to be: Credited to 2011 estimated tax | 11 | | | , - | 0. |
| | rt-VII-A Statements Regarding Activities | | | | | |
| n.,, | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene | ın | | × | Yes | No |
| | any political campaign? | | | 1a | | X |
| h | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? | | | 1b | | X |
| • | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published | d or | - | | - (* * | |
| | distributed by the foundation in connection with the activities. | | | | | |
| c | Did the foundation file Form 1120-POL for this year? | | | 1c | أأدحد بمعظم | X |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | - | 1/57 8 | TEA. | , Š., A., S |
| Ĭ | (1) On the foundation. \triangleright \$ 0 • (2) On foundation managers. \triangleright \$ 0 • | | | | | |
| A | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | | | 10 m | |
| Ŭ | managers. ►\$ 0. | | | (3) (3) (8) (3) (4) (8) (8) | % . : } * . Q. | 1.00 |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | | 2 | idamen alikun | X |
| - | If "Yes," attach a detailed description of the activities. | | | - 315 | 44 77 | ~ . I |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, o | r | | f a | | ۲,,, |
| • | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | | 3 | r nin ilm ih | X |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | • | 4a | | Х |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | N | [/A | 4b | | |
| | | _ | - | 5 | | X |
| | If "Yes," attach the statement required by General Instruction T. | | | 1.14 | 4.7 | 2. 6. |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | 蓬盖 | i e | 1 2 4 |
| | By language in the governing instrument, or | | | 7.00 x | | |
| | • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state | law | | 33 | - Tr | 2 101 |
| | remain in the governing instrument? | | | 6 | X | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? | | | 7 | X | |
| | If "Yes," complete Part II, col. (c), and Part XV. | | | | \$ | ج × |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) | | | 15 to 1 | ing the second | 2 1 |
| | IL | | | 2.4 | , 1 | ` -: '- |
| 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) | | | | d 13 | 1 |
| | of each state as required by General Instruction G? If "No," attach explanation | | | 8b | X | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale | ndar | | 1 1/2 - | - ئىق ئ | -1. |
| | year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV | | | 9 | | X |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses | | | 10 | | X |
| | | | For | m 990 | -PF | (2010) |

| orm | 990-PF (2010) PETER D. AND CAROL GOLDMAN FOUNDATION 36-373 | 0772 | P | age 5 |
|-----------|---|---|---------------------------------------|---|
| P,a | rt VII-A Statements Regarding Activities (continued) | | | |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11 | | X |
| 12 | Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? | 12 | | x |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A | 13 | Х | |
| 1.4 | The books are in care of ▶ PETER GOLDMAN Telephone no. ▶847-8 | 31 - 9 1 | 598 | |
| 17 | Located at 219 CARY AVENUE, HIGHLAND PARK, IL ZIP+4 >6 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | | | |
| | and enter the amount of tax-exempt interest received or accrued during the year | N | /A | |
| 16 | At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, | | Yes | No |
| | securities, or other financial account in a foreign country? | 16 | | X |
| | See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of | () () () () () () () () () () | 23 | |
| D. | the foreign country | · 情。 情,使 | K. J. B. | .,m. 4 |
| <u>Pa</u> | irtiVII-Bi Statements Regarding Activities for Which Form 4720 May Be Required | ting the | Yes | No |
| 1. | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. During the year did the foundation (either directly or indirectly): | The Control | 2017 | 3.1 |
| 18 | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | |
| | a disqualified person? | | A CARLO | 40 |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No | 4 | A . 5.0 | 44 |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No | 10.00 | 14 - 400 14 - 15 | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | 200 | S Salvano | 331 |
| | for the benefit or use of a disqualified person)? | 90 | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | | | 120 |
| | If the foundation agreed to make a grant to or to employ the official for a period after | | | |
| | termination of government service, if terminating within 90 days.) | | | |
| ь | of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | | | |
| • | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 22 of the instructions)? N/A | 1b | 2_15_3 | لاستشاست |
| | Organizations relying on a current notice regarding disaster assistance check here | 38 | 14.63 | 7 6 7 |
| c | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | 200 | * 1 × 1 | : 4. |
| | before the first day of the tax year beginning in 2010? | 1c | | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation | ti.£ | J. W. | Se post |
| | defined in section 4942(j)(3) or 4942(j)(5)): | 344 | | |
| 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 | | 移 | 200 |
| | before 2010? | | | 14,23 (A)444 |
| | If "Yes," list the years 🛌 ,, | ** 1 | 18.4 | |
| 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 | 54 | | |
| | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach | | | <u> </u> |
| | statement - see instructions.) | 2b | | <u> </u> |
| C | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | 7.1 5 | 1 | F2. |
| | > | | 34.3 | - 2-7 |
| 3a | 1 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| | during the year? Yes 🗶 No | | | ر يا |
| b | olf "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after | 4.5 | | 12.2 |
| | 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 | 1535 | | |
| | 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, | | ďĸ | أأنشأ |
| | Form 4720, to determine if the foundation had excess business holdings in 2010.) | 3b | <u> </u> | \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ |
| | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | . 48 | 3 | X |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that | <u> </u> | ZUĄ. | X |
| | had not been removed from jeopardy before the first day of the tax year beginning in 2010? | 4b | DE | |
| | · · · · · · · · · · · · · · · · · · · | orm 99 0 | ,-r-t- (| (2010) |

12-07-10

| orm 990-PF (2010) PETER D. AND CAROL GOLDM | | | <u>36-37307</u> | 72 P | age 6 | | |
|---|---|------------------|--|--|--|--|--|
| Part VII-B Statements Regarding Activities for Which F | orm 4720 May Be F | Required (contin | ued) | | | | |
| 5a During the year did the foundation pay or incur any amount to: | | | | | , | | |
| (1), Carry on propaganda, or otherwise attempt to influence legislation (section | 4945(e))? | Y | es X No | | | | |
| (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, | | | | | | | |
| any voter registration drive? | | | es X No | | | | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes? | | Y | es X No | | | | |
| (4) Provide a grant to an organization other than a charitable, etc., organization | described in section | | | | 1 | | |
| 509(a)(1), (2), or (3), or section 4940(d)(2)? | | X Y | es LLI No | | | | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for | | | | | | | |
| the prevention of cruelty to children or animals? | | Y ₁ | es X No | | , | | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und | | n Regulations | _ | | | | |
| section 53.4945 or in a current notice regarding disaster assistance (see instru | • | | . — ⊢ | 5b | X | | |
| Organizations relying on a current notice regarding disaster assistance check hi | | | | . * | Ì | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr | om the tax because it maintai | | | . 1" " " | ." - | | |
| expenditure responsibility for the grant? | • | Ye | es 🗶 No | ´ . | | | |
| If "Yes," attach the statement required by Regulations section 53.4945 | | | | * . | 1 | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to p | pay premiums on | | | 75.0 × | | | |
| a personal benefit contract? | | Ye | es 🛣 No 📙 | *- | <u>" </u> | | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | ersonal benefit contract? | | <u> </u> | 6b | <u> </u> | | |
| If "Yes" to 6b, file Form 8870. | | | | ^T | | | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | | Ye | es XX No | , 6gi | , , | | |
| b If "Yes," did the foundation receive any proceeds or have any net income attribu | | | N/A | 7b | | | |
| Part VIII Information About Officers, Directors, Trustors Paid Employees, and Contractors | ees, Foundation Ma | inagers, Highly | y | | | | |
| List all officers, directors, trustees, foundation managers and their | compansation | | | | | | |
| List an officers, directors, a datees, foundation managers and then | · · · · · · · · · · · · · · · · · · · | (c) Compensation | (d) Contributions to | (a) Eyne | 9209 | | |
| (a) Name and address | (b) Title, and average hours per week devoted | (If not paid, | (d) Contributions to employee benefit plans and deferred | (e) Expe account, | other | | |
| PETER D. GOLDMAN | to position PRESIDENT | `enter'-0-) | compensation | allowan | ces | | |
| 219 CARY AVENUE | LVESIDENI | | | | | | |
| HIGHLAND PARK , IL 60035 | 0.00 | 0. | 0. | | 0. | | |
| ` | SECRETARY | | <u> </u> | | •• | | |
| 219 CARY AVENUE | DECKETAKI | | | | | | |
| HIGHLAND PARK , IL 60035 | 0.00 | 0. | 0. | | 0. | | |
| 110111111111111111111111111111111111111 | | | <u> </u> | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 2 Compensation of five highest-paid employees (other than those inc | luded on line 1). If none, | enter "NONE." | | 1 | | | |
| (-) Name and address of each ampleies need move than \$50,000 | (b) Title, and average | | (d) Contributions to employee benefit plans | (e) Expe | ense | | |
| (a) Name and address of each employee paid more than \$50,000 | hours per week devoted to position | (c) Compensation | and deterred compensation | account, allowan | | | |
| NONE | · · · · · · · · · · · · · · · · · · · | | | | | | |
| | | | | 1 | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | l | | | |
| | | | | L | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | <u> </u> | | | | | |
| Total number of other employees paid over \$50,000 | | | • | | 0 | | |

| | -3730772 | Page 7 |
|--|----------|--------------|
| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) | | |
| 3 Five highest-paid independent contractors for professional services. If none, enter "NONE." | | |
| (a) Name and address of each person paid more than \$50,000 (b) Type of service | (c) Co | mpensation |
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | 1 | |
| Total number of others receiving over \$50,000 for professional services | | 0 |
| Part IX-A Summary of Direct Charitable Activities | | <u></u> |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | Expens | ses |
| 1 NONE | | |
| | | _ |
| | | <u> </u> |
| 2 | 4 | |
| | ┪ | |
| 3 | | |
| |] | |
| | | |
| 4 | _ | |
| | 4 | |
| Part IX-B Summary of Program-Related Investments | | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. | Amou | int |
| 1 NONE | | |
| | 4 | 0 |
| | | 0. |
| 2 | | |
| | | |
| All other program-related investments. See instructions. | 1 | |
| 3 | _ | |
| | 4 | |
| Total Add lines 1 through 3 | _ | Ō. |
| Total. Add lines 1 through 3 | | -PF (2010) |

Page 8

| P | Minimum Investment Return (All domestic foundations must complete this part. Foreign fou | ndations, s | ee instructions.) |
|----|---|---------------|---------------------------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | 16.0 | |
| а | Average monthly fair market value of securities | 1a | 3,839,971. |
| | Average of monthly cash balances | 1b | 3,839,971. 59,501. |
| | Fair market value of all other assets | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 3,899,472. |
| 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 | 3,899,472. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 58,492. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 3,840,980. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 192,049. |
| P | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations check here and do not complete this part.) | nd certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 192,049. |
| 2a | Tax on investment income for 2010 from Part VI, line 5 | 111 | |
| b | Income tax for 2010. (This does not include the tax from Part VI.) | | |
| C | Add lines 2a and 2b | 2c | 1,101. 190,948. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 190,948. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 190,948. |
| 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 | 190,948. |
| P | Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | 111 | |
| a | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 141,038. |
| 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: | 1 | |
| 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 | 141,038. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | 1 1 | _ |
| | income. Enter 1% of Part I, line 27b | 5 | 0. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 141,038. |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation | qualifies for | the section |

Form **990-PF** (2010)

4940(e) reduction of tax in those years.

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, | y *- | · · · · · · · · · · · · · · · · · · · | | |
| line 7 | | | _ | 190,948. |
| 2 Undistributed income, if any, as of the end of 2010 | talk & to | | - | |
| a Enter amount for 2009 only | | | 133,905. | |
| b Total for prior years: | 71.2 F. 18.5 | - | 4 | |
| ,, | | 0. | | |
| 3 Excess distributions carryover, if any, to 2010: | | (va. 5) - 4 6 28 | ; | |
| a From 2005 | | A BENEFIT TOTAL | | |
| b From 2006 | | | * 1200 * 4000 * 11 | |
| c From 2007 | CANA CANA | | | |
| d From 2008 | | | | |
| eFrom 2009 | 4 33 4 506 11 1 | | | |
| 1 Total of lines 3a through e | 0. | · 下二、二基子。 為此經 | jai šier Šakks. | * * * * * * * * * * * * * * * * * * * |
| 4 Qualifying distributions for 2010 from | | | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · |
| Part XII, line 4: ▶\$ 141,038. | | | | 5 1 2 3 - 11 - 12/4. 5 1 1 2 2 1 2 2 2 2 3 3 3 3 3 3 3 3 3 3 3 |
| a Applied to 2009, but not more than line 2a | | | 133,905. | The state of the |
| b Applied to undistributed income of prior | | | LES BARRES | \$ 1 5 yy . 1 - ! |
| years (Election required - see instructions) | C. A. & A. & A | 0. | 1-5° 40 = 6° 100° 10° 10° 10° 10° 10° 10° 10° 10° 1 | 1. mil / 1 / 1 / 1 / 1 |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | 1. A T. W. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. | 7 422 |
| d Applied to 2010 distributable amount | | | | 7,133. |
| e Remaining amount distributed out of corpus | 0. | | | ** |
| 5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount | 0. | | | 0. |
| 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. | | | |
| b Prior years' undistributed income. Subtract | 1. (<u>*</u> , ,), | | | |
| line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' | | | TENTER CONTRACTOR | July 4.7 |
| undistributed income for which a notice of deficiency has been issued, or on which | | | ATTERIOR CONTRACTOR OF THE STREET | اه دخه څر اید که شر کمون کا د خر پرداده د |
| the section 4942(a) tax has been previously | | | | , 引导 (15 chan, 15 chan) |
| assessed | 1 2 4 1 | 0. | | , , % , & , & , & , , , , , , , , , , , |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount - see instructions | | 0. | 一一一 一一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 一 | Trans. |
| e Undistributed income for 2009. Subtract line | | | ١ , | |
| 4a from line 2a. Taxable amount - see instr. | | | U. | *,** |
| f Undistributed income for 2010. Subtract | | | | 1 |
| lines 4d and 5 from line 1. This amount must be distributed in 2011 | | L PARTAGOS | | 183,815. |
| 7 Amounts treated as distributions out of | TO STATE OF THE ST | | | 103,013. |
| corpus to satisfy requirements imposed by | | | 1 2 4 m m F | |
| section 170(b)(1)(F) or 4942(g)(3) | 0. | | | |
| 8 Excess distributions carryover from 2005 | <u>·</u> | | | i Turida, postacet ette in in in in |
| not applied on line 5 or line 7 | 0. | | | * |
| 9 Excess distributions carryover to 2011. | | 17.00 T. S. J. J. M. S. S. S. S. | 1 | |
| Subtract lines 7 and 8 from line 6a | 0. | | 47, | 8,00, A & A |
| 10 Analysis of line 9: | The state of the s | Sections in a sec. | A Section | |
| a Excess from 2006 | | 1 . 16 . 17 . 17 . 18 . 18 . 18 . 18 . 18 . 18 | | |
| b Excess from 2007 | | | | |
| c Excess from 2008 | | | | |
| dExcess from 2009 | | | | 7 * 1 |
| e Excess from 2010 | | , | | |
| | <u></u> | · | | Form 990-PF (2010) |

| Grants and Contributions Paid During the | Year or Approved for Future I | 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 | | |
| Paid during the year | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | ` | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| SEE STATEMENT 9 | | | | |
| Total | ! | L | > 3a | 141,0 |
| Approved for future payment | 1 | | | |
| , pprovod to ratero payment | | | | |
| | | | | |
| | | } | | |
| NONE | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | <u> </u> | | |
| | | | | |
| | | l | | |
| | | | | |
| | | 1 | 1 | 1 |
| | i | | | |

| Part XVI-A | Analysis of | Income-Producing | Activities |
|------------|---------------------------------|------------------|-------------------|
| | | | |

| *_4 | | | | | |
|---|--|-----------------------|-----------------------|--|--------------------------|
| Enter gross amounts unless otherwise indicated. | Unrelate (a) Business | d business income (b) | (C) Exclu- sion | (d) | (e) Related or exempt |
| 1 Program service revenue: | code | Amount | code | Amount | function income |
| a | | | | | |
| b | _ | · | | | |
| C | _ | | | | |
| d | | | | | |
| e | _ | | 1 | | |
| 1 | _ | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | ۱., | | |
| investments | | | 14 | | |
| 4 Dividends and interest from securities | | 12 mm | 14 | | |
| 5 Net rental income or (loss) from real estate: | W. N. C. | | | 然。 第二十五十五十五十五十五十五十五十五十五十五十五十五十五十五十五十五十五十五十五 | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal |] | | 1 | | |
| property . | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | 18 | -38,386. | |
| 9 Net income or (loss) from special events | | | | | |
| O Gross profit or (loss) from sales of inventory | | | | | |
| 1 Other revenue: | | | | | |
| a | _ | | | | |
| | 1 1 | | ı | | |
| D | | | | ļ | |
| b | | | | | |
| b | | | | | |
| C | | | | | |
| c | - Contraction of the contraction | C | | 38,953. | 0 |
| c d e 12 Subtotal. Add columns (b), (d), and (e) | - Control of the cont | C | - 30-2 | 38,953. | 38,953 |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) | | C | - 37-2 | • | 38,953 |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) |) | | • | 13 | 38,953 |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) | to the Acco | omplishment of | Exemp | ot Purposes | 38,953 |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Relationship of Activities Line No. Explain below how each activity for which in | s to the Acco | omplishment of | Exemp | ot Purposes | 38,953 |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part VI B Relationship of Activities Line No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Acco | omplishment of | Exemp | ot Purposes | 38,953 |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Relationship of Activities Line No. Explain below how each activity for which in | s to the Acco | omplishment of | Exemp | ot Purposes | 38,953 |
| c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part VIB: Relationship of Activities Line No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Acco | omplishment of | Exemp | ot Purposes | 38,953 |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part VI B Relationship of Activities Line No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Acco | omplishment of | Exemp | ot Purposes | 38,953 |
| c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part VIB: Relationship of Activities Line No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Acco | omplishment of | Exemp | ot Purposes | 38,953 |
| c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part VIB: Relationship of Activities Line No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Acco | omplishment of | Exemp | ot Purposes | 38,953 |
| c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part VIB: Relationship of Activities Line No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Acco | omplishment of | Exemp | ot Purposes | 38,953 |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part VI B Relationship of Activities Line No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Acco | omplishment of | Exemp | ot Purposes | 38,953 |
| c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part VIB: Relationship of Activities Line No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Acco | omplishment of | Exemp | ot Purposes | 38,953 |
| c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part VIB: Relationship of Activities Line No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Acco | omplishment of | Exemp | ot Purposes | 38,953 |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part VI B Relationship of Activities Line No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Acco | omplishment of | Exemp | ot Purposes | 38,953 |
| c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part VIB: Relationship of Activities Line No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Acco | omplishment of | Exemp | ot Purposes | 38,953 |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part VI B Relationship of Activities Line No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Acco | omplishment of | Exemp | ot Purposes | 38,953 |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part VI B Relationship of Activities Line No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Acco | omplishment of | Exemp | ot Purposes | 38,953 |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part VI B Relationship of Activities Line No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Acco | omplishment of | Exemp | ot Purposes | 38,953 |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Relationship of Activities Line No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Acco | omplishment of | Exemp | ot Purposes | 38,953 |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part VI B Relationship of Activities Line No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Acco | omplishment of | Exemp | ot Purposes | 38,953 |
| c d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Relationship of Activities Line No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Acco | omplishment of | Exemp | ot Purposes | 38,953 |

023621 12-07-10

| Part XVII | Information Re Exempt Organ | | ind Transactions ar | nd Relationships With Nonchar | itable | | | |
|---|-----------------------------------|--|--------------------------------|--|--------------------|----------|-----------------|--|
| 1 Did the o | | rectly engage in any of the following | g with any other organization | described in section 501(c) of | Y | 'es | No | |
| | | (3) organizations) or in section 52 | | | 1 | | ا ن | |
| a Transfers from the reporting foundation to a noncharitable exempt organization of: | | | | | | | | |
| (1) Cash | | | | | | | | |
| (2) Other assets | | | | | | | | |
| b Other transactions: | | | | | | | | |
| | | able evemnt organization | | | 1b(1) | | X | |
| (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization | | | | | | | | |
| • • | | · - | | • | 1b(2) 1b(3) | | X | |
| | tal of facilities, equipment, | | | | - ` ' - | \dashv | $\frac{\pi}{X}$ | |
| | nbursement arrangements | | | | 1b(4) | \dashv | X | |
| | ns or loan guarantees | | • | | 1b(5) | | X | |
| • • | | embership or fundraising solicitatio | | | 1b(6) | | | |
| - | | ailing lists, other assets, or paid em | | · | 1c | | <u> </u> | |
| | · | | | ays show the fair market value of the goods, o | | ts, | | |
| | | | ed less than fair market value | in any transaction or sharing arrangement, st | now in | | | |
| column (| · · | other assets, or services received. | | | | | | |
| (a)Line no | (b) Amount involved | (c) Name of noncharitable | exempt organization | (d) Description of transfers, transactions, and s | haring arra | ngeme | nts | |
| | | NOT APPLICABLE | | | | | | |
| 1 | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | <u> </u> | | | | |
| | | | · · · · | | | | | |
| | | | - | | | | | |
| | | <u> </u> | · | | | | | |
| | | | | | | - | | |
| | | | | | | | | |
| | | 1. | | | | | | |
| | | | | | ·· | | | |
| | ···· | | | | | | | |
| | | | | <u> </u> | | | | |
| | | | | | | | | |
| | | <u> </u> | | <u> </u> | | | | |
| ın sectio | • | ctly affiliated with, or related to, one er than section 501(c)(3)) or in sect hedule. | · - | ations described | Yes | X | No | |
| | (a) Name of or | ganization | (b) Type of organization | (c) Description of relations | hip | | | |
| NOT AP | PLICABLE | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Und | der penalties of perjury, I decla | re that I have examined this return, includ | ing accompanying schedules and | statements, and to the best of my knowledge and be | lief, it is tru | e, corr | ect, | |
| Sign Here | - Till | parer (other than taxpayer or fiduciary) is b | - Augu | #12,2011 President | 7 | | | |
| | Signature of officer or tr | | Date | / Title | | | | |
| _ | Print/Type preparer's n | name Preparer's s | ignature/ | Date Check If PTIN self- employed | | | | |
| Paid | RICHARD A. | REISIN /// | | 08/01/11 | | | | |
| | | TROW REISIM BERK | | TD. Firm's EIN ► | | | | |
| Preparer | | TIVOM VETSTW DEVV | ים יפומשעתטים די | riiii S C IIV | | | | |
| Use Only | | EE M CIMVIDAM | DIATA DETUE | CUTUR 15 | | | | |
| | | 55 N. CITYFRONT HICAGO, IL 60611 | | Phone no. 312- | 670- | 744 | 4 | |

| FORM 990-PF INTEREST ON SAV | INGS A | AND TEMI | PORARY CA | ASH IN | VESTMENTS | STATEMENT | 1 |
|--|--------|-----------------------|---------------------------|--------------|--|-----------|--------------|
| SOURCE | | | | | | AMOUNT | 1 |
| GOFEN & GLOSSBERG | | | | | | 8, | 491. |
| TOTAL TO FORM 990-PF, PART I | , LINE | 3, CO | LUMN A | | | 8, | 491. |
| FORM 990-PF DIVIDEN | DS ANI |) INTER | EST FROM | SECUR | ITIES | STATEMENT | 2 |
| SOURCE | | GROSS | AMOUNT | | TAL GAINS | COLUMN (| |
| AP ALTERNATIVE ASSETS - FLOW THRU K1 GOFEN & GLOSSBERG | | | 2,754. 66,094. | | 0. | | 754. 094. |
| TOTAL TO FM 990-PF, PART I, | LN 4 | | 68,848. | | 0. | 68, | 848. |
| FORM 990-PF | OTHER | PROFES | SIONAL F | EES | | STATEMENT | 3 |
| DESCRIPTION | EXPI | (A) ENSES BOOKS | (B) NET INV MENT IN | | (C) ADJUSTEI NET INCOM | | ABLE |
| CUSTODIAL & ADVISORY FEES K1 FLOW THRU INVESTMENT | | 20,152. | 20 | ,152. | | | 0. |
| FEES FILING FEES | | 2,132. 15. | 2 | ,132. 15. | | | 0. 0. |
| TO FORM 990-PF, PG 1, LN 16C | | 22,299. | 22 | ,299. | | | 0. |
| FORM 990-PF | | TAX | ES | | ······································ | STATEMENT | ր 4 |
| DESCRIPTION | EXPI | (A) ENSES BOOKS | (B) NET INV MENT IN | | (C) ADJUSTEI NET INCON | | TABLE |
| FEDERAL EXCISE TAX | | 944. | | 0. | | | 0. |
| TO FORM 990-PF, PG 1, LN 18 | | 944. | | 0. | | | 0. |

| FORM 990-PF U.S. AND STA | ATE/CITY GOV | ERNMENT | OBLIGATIONS | STATEMENT | 5 |
|--|---------------|----------------|-------------|----------------------|-----|
| DESCRIPTION | U.S. GOV'T | OTHER GOV'T | BOOK VALUE | FAIR MARKET VALUE | ı |
| INVESTMENTS - U.S. AND STATE GOVERNMENT OBLITAITONS | X | | 509,818. | 540,80 | 1. |
| TOTAL U.S. GOVERNMENT OBLIGATION | ONS | • | 509,818. | 540,80 | 1. |
| TOTAL STATE AND MUNICIPAL GOVER | RNMENT OBLIG | ATIONS | | | |
| TOTAL TO FORM 990-PF, PART II, | LINE 10A | : | 509,818. | 540,80 | 1. |
| FORM 990-PF | CORPORATE | STOCK | | STATEMENT | 6 |
| DESCRIPTION | | | BOOK VALUE | FAIR MARKET VALUE | , |
| INVESTMENTS - CORPORATE STOCKS | | • | 2,169,702. | 2,974,68 | 85. |
| TOTAL TO FORM 990-PF, PART II, | LINE 10B | : | 2,169,702. | 2,974,68 | 35. |
| FORM 990-PF | CORPORATE | BONDS | | STATEMENT | 7 |
| DESCRIPTION | | | BOOK VALUE | FAIR MARKET VALUE | ŗ |
| INVESTMENTS - CORPORATE BONDS | | • | 600,000. | 516,30 | 00. |
| TOTAL TO FORM 990-PF, PART II, | LINE 10C | : | 600,000. | 516,30 | 00. |
| FORM 990-PF | OTHER INVES | TMENTS | | STATEMENT | 8 |
| DESCRIPTION | | ATION HOD | BOOK VALUE | FAIR MARKET VALUE | |
| AP ALTERNATIVE ASSETS, LP | co | ST | 99,913. | 44,15 | 50. |
| TOTAL TO FORM 990-PF, PART II, | LINE 13 | | 99,913. | 44,15 | 50. |

9

STATEMENT

FORM 990-PF

| | RECIPIENT RELATIONSHIP | RECIPIENT | |
|--|-------------------------|-----------|--------|
| RECIPIENT NAME AND ADDRESS | AND PURPOSE OF GRANT | STATUS | AMOUNT |
| ACCESS LIVING 115 WEST CHICAGO AVENUE CHICAGO, IL 60654 | NONE GENERAL SUPPORT | 501(C)(3) | 500. |
| AM SHALOM 840 VERNON AVENUE GLENCOE, IL 60022 | NONE GENERAL SUPPORT | 501(C)(3) | 50. |
| AMERICAN CANCER SOCIETY 225 NORTH MICHIGAN AVENUE #1210 CHICAGO, IL 60601 | | 501(C)(3) | 350. |
| AMERICAN HEART ASSOCIATION 208 S LASALLE ST #1500 CHICAGO, IL 60604 | NONE GENERAL SUPPORT | 501(C)(3) | 100. |
| BREAST CANCER NETWORK 135 S. LASALLE ST SUITE 2000 CHICAGO, IL 60603 | NONE GENERAL SUPPORT | 501(C)(3) | 100. |
| CANADIANTIRE JUMPSTART 2180 YONGE STREET, P.O. BOX 700 TORONTO, ON, CANADA M4P 2V8 | NONE GENERAL SUPPORT | | 250. |
| CANCER WELLNESS CENTER 215 REVERE DRIVE NORTHBROOK, IL 60062 | NONE GENERAL SUPPORT | 501(C)(3) | 400. |
| CHICAGO BOTANIC GARDEN 1000 LAKE COOK RD GLENCOE, IL 60022 | NONE GENERAL SUPPORT | 501(C)(3) | 230. |

GRANTS AND CONTRIBUTIONS

PAID DURING THE YEAR

| PETER D. AND CAROL GOLDMAN FOUN | DATION | ; | 36-3730772 |
|---|-------------------------|-----------|------------|
| CHICAGO MARITIME SOCIETY 310 S RACINE AVE., #6N CHICAGO, IL 60607 | NONE GENERAL SUPPORT | 501(C)(3) | 100. |
| CHICAGO YC FOUNDATION 400 EAST MONROE STREET CHICAGO, IL 60603 | NONE GENERAL SUPPORT | 501(C)(3) | 500. |
| CHILDRENS MEMORIAL FOUNDATION 2300 N CHILDRENS PLZ #4 CHICAGO, IL 60614 | NONE GENERAL SUPPORT | 501(C)(3) | 350. |
| CHILDRENS MEMORIAL HOSPITAL 2300 CHILDREN'S PLAZA CHICAGO, IL 60614 | NONE GENERAL SUPPORT | 501(C)(3) | 500. |
| CHILDRENS ONCOLOGY SERVICES 213 WEST INSTITUTE PLACE #511 CHICAGO, IL 60610 | NONE GENERAL SUPPORT | 501(C)(3) | 100. |
| COL. YC LEGACY FOUNDATION 1660 LINCOLN, STE 2720 DENVER, CO 80264 | | 501(C)(3) | 100. |
| CONGREGATION SOLEL 1301 CLAVEY ROAD HIGHLAND PARK, IL 60035 | | 501(C)(3) | 2,850. |
| FRIENDS OF THE PARKS 17 N STATE ST #1450 CHICAGO, IL 60602 | NONE GENERAL SUPPORT | 501(C)(3) | 50. |
| G.I.R.F. 70 E LAKE ST #1015 CHICAGO, IL 60601 | NONE GENERAL SUPPORT | 501(C)(3) | 63,770. |
| GOLDEN CRADLE ADOPTION SERVICES 95 WEST GATE DRIVE CHERRY HILL, NJ 08034 | NONE GENERAL SUPPORT | 501(C)(3) | 50. |

| | | | | , |
|--|--------------------|--------|-----------|------------|
| PETER D. AND CAROL GOLDMAN FOUN | DATION | | | 36-3730772 |
| HAROLD EISENBERG FOUNDATION 1780 GREEN BAY ROAD HIGHLAND PARK, IL 60035 | | | 501(C)(3) | 100. |
| HIGHLAND PARK ART CENTER 1957 SHERIDAN ROAD HIGHLAND PARK, IL 60035 | | | 501(C)(3) | 100. |
| INVEST FOR KIDS 1775 SHERMAND ST #2075 DENVER , CO 80264 | NONE GENERAL SU | UPPORT | 501(C)(3) | 500. |
| J.G.A.S.F. 875 N. MICHIGAN AVE., SUITE 3718 CHICAGO , IL 60611 | NONE GENERAL SU | | 501(C)(3) | 11,200. |
| JUVENILLE DIABETES RESEARCH FOUNDATION 11 SOUTH LA SALLE ST. SUITE 1800 CHICAGO, IL 60603 | GENERAL SU | UPPORT | 501(C)(3) | 375. |
| KIDS UGANDA P.O. BOX 401 LAKE BLUFF, IL 60044 | NONE GENERAL SU | UPPORT | 501(C)(3) | 150. |
| LEPER FOUNDATION OF AMERICA 1 ALM WAY GREENVILLE, SC 29601 | | UPPORT | 501(C)(3) | 200. |
| LEUKEMIA & LYMPHOMA SOCIETY 651 W WASHINGTON BLVD #400 CHICAGO, IL 60661 | NONE GENERAL S | UPPORT | 501(C)(3) | 600. |
| LEUKEMIA RESEARCH FOUNDATION 3520 LAKE AVENUE, SUITE #202 WILMETTE, IL 60091 | NONE GENERAL S | UPPORT | 501(C)(3) | 50. |
| LINKS 1200 MASSACHUSETTS AVENUE WASHINGTON , DC 20005 | NONE GENERAL S | UPPORT | 501(C)(3) | 100. |

| • | | | 1 |
|---|-------------------------|-----------|------------|
| PETER D. AND CAROL GOLDMAN FOUN | DATION | | 36-3730772 |
| LUNG CANCER RESEARCH FOUNDATION 845 THIRD AVENUE, 6TH FLOOR NEW YORK, NY 10022 | | 501(C)(3) | 100. |
| MDA 3300 E. SUNRISE DRIVE TUSCON, AZ 85718 | NONE GENERAL SUPPORT | 501(C)(3) | 150. |
| MICHAEL ROLFE PANCREATIC CANCER FOUNDATION 17 NORTH STATE STREET, SUITE 1550 CHICAGO, IL 60602 | NONE GENERAL SUPPORT | 501(C)(3) | 1,000. |
| NORTH SUBURBAN MEDICAL RESEARCH 2300 CHILDREN'S PLAZA CHICAGO, IL 60614 | - | 501(C)(3) | 300. |
| NORTHWESTERN SCLERODERMA PROGRAM 675 NORTH ST. CLAIR, SUITE 14-100 CHICAGO, IL 60611 | NONE GENERAL SUPPORT | 501(C)(3) | 3,000. |
| RAVIANA FESTIVAL ASSOCIATION 201 SAINT JOHNS AVE HIGHLAND PARK, IL 60035 | | 501(C)(3) | 678. |
| REHABILITATION INSTITUTE OF CHICAGO 345 EAST SUPERIOR STREET CHICAGO, IL 60611 | NONE GENERAL SUPPORT | 501(C)(3) | 15,000. |
| RIC SPORTS & FITNESS 345 E. SUPERIOR STREET CHICAGO, IL 60611 | NONE GENERAL SUPPORT | 501(C)(3) | 300. |
| SCLERODERMA FOUNDATION 300 ROSEWOOD DRIVE, SUITE 105 DANVERS, MA 01923 | NONE GENERAL SUPPORT | 501(C)(3) | 3,885. |
| SONIA SHANKMAN ORTHOGENIC SCHOOL 1365 E. 60TH STREET CHICAGO, IL 60637 | | 501(C)(3) | 100. |

| | | | • |
|---|-------------------------|-----------|-----------|
| PETER D. AND CAROL GOLDMAN FOUN | DATION | 3 | 6-3730772 |
| TEAM PARADISE 2620 S. BAYSHORE DR. MIAMI, FL 33133 | | 501(C)(3) | 100. |
| THE JOSSELYN CENTER 405 CENTRAL AVENUE NORTHFIELD, IL 60093 | | 501(C)(3) | 50. |
| TRI CITY HEALTH PARTNERSHIP 318 WALNUT STREET ST. CHARLES, IL 60174 | NONE GENERAL SUPPORT | 501(C)(3) | 100. |
| TULANE UNIVERSITY 6823 ST. CHARLES AVENUE NEW ORLEANS, LA 70118 | NONE GENERAL SUPPORT | 501(C)(3) | 31,500. |
| UNITED WAY 560 WEST LAKE STREET CHICAGO, IL 60661 | NONE GENERAL SUPPORT | 501(C)(3) | 250. |
| URBAN GATEWAYS 205 W RANDOLP ST #1700 CHICAGO, IL 60606 | NONE GENERAL SUPPORT | 501(C)(3) | 250. |
| US HOLOCAUST MEMORIAL MUSEUM P.O. BOX 7022 ALBERT LEA, MN 56007 | NONE GENERAL SUPPORT | 501(C)(3) | 500. |
| VOLUNTEER POOL OF H.P. P.O. BOX 192 HIGHLAND PARK, IL 60035 | NONE GENERAL SUPPORT | 501(C)(3) | 50. |
| TOTAL TO FORM 990-PF, PART XV, LI | NE 3A | | 141,038. |

Gofen and Glossberg LLC
REALIZED GAINS AND LOSSES
G 763
Peter D. & Carol Goldman Foundation

From 01-01-10 Through 12-31-10

-

. 11-1

Gofen and Glossberg LLC
REALIZED GAINS AND LOSSES
G 763
Peter D. & Carol Goldman Foundation

From 01-01-10 Through 12-31-10

| Gain Or Loss | | Long Term | 7,252.11 | -3,815.22 | 00 46,683.75 | | | |
|--------------|-------|------------|-------------------|------------------|--------------|---------|----------------|--------------------------|
| Sair | | Short Term | | | 724.(| 00 0 | • | |
| | | Proceeds | 35,274.57 | 18,339.78 | | | 634,871.65 AZ | |
| | Cost | Basis | 28,022.46 | 22,155 00 | | | رخر 675,210.24 |) } |
| | | Security | Hewlett-Packard | 500.000 Walgreen | | | | -40,338.59 |
| | | Quantity | 850.000 | 200.000 | | | | AIN/LOSS |
| | Close | Date | 06-23-06 12-14-10 | 12-14-10 | AINS | OSSES | | TOTAL REALIZED GAIN/LOSS |
| | Open | Date | 06-23-06 | 10-11-05 | TOTALG | TOTAL L | | TOTAL R |

Gofen and Glossberg LLC REALIZED GAINS AND LOSSES

G 763EXC

Peter & Carol Goldman Foundation - Exclusion

From 01-01-10 Through 12-31-10

| | | | | | | Gain Or Loss | r Loss |
|--------------|-------------------|------------|--|---------------|---------------|---------------------------|--------------------------|
| Open Date | Close Date | Quantity | Security | Cost Basis | Proceeds | Short Term | Long Term |
| 08-14-08 | 08-20-10 | 10,000,000 | 10,000.000 UBS Return Opt S&P 500 | 100,000.00 | 86,764.56 | | -13,235.44 |
| 05-25-10 | 05-25-10 10-18-10 | 10,000.000 | 0.000% Due 08-20-10 10,000.000 UBS PS-CP DJUBS | 100,000.00 | 113,147.00 | 13,147.00 | |
| 09-27-10 | 09-27-10 12-21-10 | 5,000.000 | 0.000% Due 05-29-15 5,000.000 UBS PAS Best Global | 51,750.00 | 50,620.00 | -1,130.00 | |
| TOTAL G | AINS | | 0.000% Due 09-30-15 | | | 13,147.00 | 0.00 |
| TOTAL LOSSES | | | | 251,750.00 | 250,531.56 A3 | -1,130.00 \3 12,017.00 | -13,235.44 -13,235.44 |
| TOTAL R | TOTAL REALIZED GA | AIN/LOSS - | GAIN/LOSS -1,218.44 11,5 | | | ! | |

:

;

()

Ţ

* . G763 Accor 12/31/10 Realized Gains (Losses) Year to Date | Priced as of 12,741 -54,298 SHORT TERM LONG TERM 82 Original Appraisal Date 08/31/05 Gofern and Hossverg, LLC.
455 Cityfront Plaza, Chicago, Illinois 60611
(312) 828-1100

| | One (are) | | | | | | | | | | |
|----------------------------------|-------------------------------|--|----------------------------|-------------------------------|------------------------|-------------------------------|--|-----------------------------|-------------------------|-------------------------|-------------------------|
| Date Purchased | Quantity | Description | Interest or Dividend | Market Price | Unit | Market Value | Fotal Cost | | | % Mkt. A Value L | Annual Income |
| | | TAXABLE FIXED INCOME | | - 12, | (*) & °; | | - | , <u>-</u> | | • | |
| 01/15/09 03/10/09 04/23/09 | 100,000 215,554 206,680 | U S GOVERNMENT BONDS. Federal, Home, Loan Banks. 01/21/11 U S. Treasury, Infl. Index. 04/15/12 U S. Treasury Infl. Index. 04/15/14 | 1.625 2.000 1.250 | 100.063 103.633 105.164 | 99.880 97.278 | 100,063 223,385 217,353 | 53. 99,880 55 209,687 53 200,251 | | 183 13,698 17,102 | 2.4 5.3 5.1 | 1,625 4,311 2,584 |
| | | ED IN | | h (1) | • | 540,801 | |) | 30,983* 30,983* | 12.7 12.7 | 8,520 8,520 |
| | | CONVERTIBLE SECURITIES CONVERTIBLE PREFERRED STOCKS | ·· ÿ- | | | | | ; | | ţ | (|
| 01/25/06 02/07/06 | 200 200 | Newell Financial 5.25% Cvt Pfd Newell Financial 5.25% Cvt Pfd | 2.625 | 42.000 42.000 | 43.625 | 21,000 | • | 21,813 21,813 73,626* | -813 -813 1626* | 0.5 | 1,313 |
| | | Total CONVERTIBLE SECURITIES | | | | 42,000* | ' | 43,626*A | -1,626* | 1.0 | 2,626 |
| ; , , | | COMMON STOCKS CONSUMER DISCRETIONARY | | | | | | | | | |
| 05/12/08 | 2,000 | Comcast Cl A | 0.378 | 21.970 | 22.125 | | | | -310 | 1.0 | 756 |
| 04/17/07 08/31/05 | 2,000 | Staples Starbucks | 0.360 | 22.770 32.130 | 26.711 ₅ /8 | 240.0°C 64.260 | 10 53,422 50 97,0% 49,930 | | -7,882 15,230 | 1.1 | 720 1,040 |
| 08/31/05 | 1,000 | Tiffany | 1.000 | 62.270 | 37.420 |) | | ı | 24,850 | 1.5 | 1,000 |
| | | CONSUMER STAPLES | | 4 | | 216,010* | .0* -1-84,-1-22* -233, 15 72 | | 31,888* | 5.1 | 3,516 |
| 08/31/05 | 1,000 | Coca-Cola | 1.760 | 65.770 | 44.000 | 65,770 | | | 21,770 | 1.5 | 1,760 |
| 08/31/05 | 1,000 | Costco Wholesale, Nestle SA Shonsored ADR | 0.820 | 72.210, | 43.400 | 72,210 | .0 - 43,400 .3 34,964 | | 28,810 38,459 | 1.7 | 820 1,121 |
| 08/31/05 | 975 | Procter & Gamble | 1.927 | 64.330 | 53.870 | 62,722 | | | 10,199 | 1.5 | 1,879 |
| 10/11/05 | 500 | Walgreen | 0.700 | 38.960 | 44.310 | 19,480 | | | -2,675 | 0.5 | 350 |
| 10/13/09 | 1,000 | Walgreen | 0.700 | 38,900 | 38.900 | 332,565* | 5* 236,002* | | 96,563* | 7.8 | 6,630 |
| 08/31/05 | 200 | ENERGY Exxon Mobil | 1.760 | 73.120 | 59.900 | 36,560 | 0 29,950 | | 6,610 | 6.0 | 880 |
| 08/31/05 | 3,000 | Quicksilver Resources | 0.000 | 14.740 | , | 44,220 | | 7 - | -20,880 | 1.0 | 00 |
| 60/80/60 | 3,000 | Quicksilver Resources | 0.000 | 14./40 | 11.058 | 125,000* | 1 | 28,224* | .1,046 -3,224* | 2.9 | 880 |
| 02/26/92 | 780 | FINANCIALS American Express | 0.720 | 42.920 | 6.917 | 33.478 | v | | 28,083 | 0.8 | 562 720 |
| 08/31/05 02/17/10 08/31/05 | 1,000 400 1,000 | American Express Infercontinental Exchange | 0.000 | 42.320 119.150 42.420 | 102.230 § | 47,660 | | | 6,768 8,530 | 1.0 | 200 |
| TOTAL COO | 200. | | | | | | | · | | | , |
| | | | | | | | | | | | |

1

;

1 1

lossberg. LLC

3763 % Mikt. Value Profit/Loss Unrealized Accourt RHURH GERM Josses) Year 12, 13te | Priced as 12/31/10 Total Cost Market Value -54,298 Unit Cost **LONG TERM** Market Price 82 Appraisal Date 18/31/05 Description 455 Cityfront Plaza, Chicago, Illinois 60611 (312) 828-1100 Quantity

300 Annual Income 560 560 2,160 2,012 2,070 5,622 ,080 640 416 1,760 3,920 5,600 9,060 224 0.1 6.0 6.0 14,827* 25,720* 63,576* 123,403* *960,69 6,552 19,305 121,117 3,664 6,145 3,699 7,040 -15,070 61,651 67,560 6,593 38,170 30,613 9,262 198,541* 42,450 233,431* 36,055 39,710 82,757490,332 34,939 9,64 31,504 35,696 1,075 25,558 52,889 20,874 55,490 39,040 3,859 34,338 10,063 33,215 33,462 9,573 27,380 17,459 35,899 6,474 55,360 224,260* 36,925 49,490 34,820 248,258* 23,656 10,824 93,660 182,900 39,360 39,360 355,280* 40,460 38,640 38,640 9,769 27,910 34,820 114,540 114,564 298,744* 40,890 30,925 32,945 35,484 18,142 66,513 7,043 49,490 20,101 29.392 32.110 63.009 21.225 11.446 52.186 57.500 61.464 36.055 55.490 6.178 71.392 66.430 9.520 66.924 27.352 27.380 26.860 51.116 35.259 39.170 45.130 16.894 19.920 39.710 58.231 21.500 42.450 17.151 78.720 78.720 35.780 61.850 61.850 9.320 65.890 27.910 27.910 31,300 31.300 31.300 69.640 13.630 13.630 61.850 55.360 18.290 27.910 31:300 49.490 69.640 47.910 59.140 59.140 93.660 19.320 49.490 95.470 Interest or Dividend 0.690 1.950 0.560 1.700 1.700 0.000 0.640 0.640 0.000 2.160 0.000 0.200 0.640 0.200 0.200 0.200 1.120 0.200 1.800 *FELECOMMUNICATIONS SERVICES* NFORMATION TECHNOLOGY Old Republic International Old Republic International Verizor Communications Thermo Fisher Scient Jnited Technologies. Jnited Technologies Abbott Laboratories ohnson & Johnson ohnson & Johnson Tohnson & Johnson General Electric Mosaic Company HEALTH CARE Cisco Systems NDUSTRIALS OUALCOMM QUALCOMIN Caterpillar MATERIALS Corning Monsanto **Microsoft** Microsoft Monsanto Microsoft Corning Celgene Oracle Celgene ree Praxair Oracle Oracle Oracle 500 10,000 2,000 2,000 500 2,125 225 1,000 1,500 1,032 Purchased .,60/80/60 03/07/06 08/31/05 01/10/06 02/19/09 06/28/95 06/16/10 06/25/04 02/11/08 08/11/09 80/60/60 38/31/05 01/10/06 06/13/07 10/08/08 38/31/05 02/04/02 10/11/05 08/31/05 02/11/08 03/10/08 38/31/05 0/11/05 1/08/05 07/1:2/10 02/07/07 02/22/07 09/17/07 10/03/07 08/31/05

olen and Hosberg, i.e.

G 763

Accour

Priced as [2/31/10]

RHUK GHR (Losses) Year 19, Pate

0000000 649 1,920 3,448 10 234 268 482 1,404 1,404 14,580 Annual Income Unrealized | %Mkt. Profit/Loss | Value -42,325* 16,300* 23,263* -42,325* 350,130* -55,850 -29,846 5,269 4,099 -21,338 5,980 2,879 9,885 2,511 1,150 10,800 7,970 741 326,098 2,700 3,350 -16×.133 (2) (2) 150,000 50,000 50,000 500,000*[...] 100,000[\$] 271,289*(5) 371,289*(4) 85,605 t. Av 85,605* 16,900* *81-2-9-1-6-5-18* 9,319 2,870 32,158 40,666 8,659 28,815 36,189 100,000 50,000 4,122 25,483 26,581 4,711 Total Cost 40,164* 43,280* 43,280* 621,419* 722,160* 2,267,986* 31,850 38,700 38,700 160,800 44,150 14,639 31,850 102,700 8,810 10.840 10,820 100,741 480,319 51,150 53,350 50,000 7,001 516,300 Market Value -54,298 000.0 11.435 13.460 14.002 10.660 20.967 53.162 57.630 000.0 000.0 3.139 20.000 72.378 0.000 0.000 3.200 16.079 20.333 0.000 Unit Cost LONG TERM 10.740 8.830 9.830-40.920 63.700 10,270 10.230 10.720 25.170 25.170 5.410 5.410 5.410 5.410 63.700 77.400 77,400 0.670 Market 52.880 0.000 Price Interest or Dividend 0.368 0.000 0.070 0.030 0.030 1.140 0.240 0.240 0.240 0.963 0.963 2.807 0000 0.000 0.000 Total REAL ESTATE INVESTMENT TRUSTS REAL ESTATE INVESTMENT TRUSTS Original Appraisal Date 09/28/12 Sarclays PS-CP US Equity -10/30/15 03/31/15 11/28/14 03/31/15 Total INVESTMENT FUNDS CIA Paranaese Ener SP ADR CIA Saneamento Basico ADR CIA Paranaese Ener SP-ADR Total COMMON STOCKS STRUCTURED NOTES - EQUITY Description Barclays ROS-PP Gold Shares MSCI Brazil Index F Shares MSCI Asia Ex-Japan Shares MSCI Asia Ex-Japan Barclays PS-CP Intl Fd Bskt Shares MSCI Brazil Index I Vanguard GNMA Fd - Adm JBS ROS-CP Gbl Fd Bskt Kite Realty Group Trust **NVESTMENT FUNDS** MISCELLANEOUS ASSETS. Kite Realty Group Trust Columbia Acom Intl Ed-Z Kite Realty Group Trust AP Alternative Assets LP Kite Realty Group Trust TAXABLE BOND FUNDS. COMMON STOCK FUNDS MISCELLANEOUS UTILITIES HSBC PS - PP EQUITY REITS JBS.ROS XLF 455 Cityfront Plaza, Clucago, Illinois 60611 (312) 828-1100 500 5,000 2,000 2,706 1,294 9,380.863 000,01 5,000 15,000 5,000 500 Quantity Purchased 10/13/09 08/11/09 03/29/10 11/23/10 90/80/90 60//0//0 02/08/06 05/13/09 05/13/09 10/13/09 0/26/10 10/26/10 09/27/10 12/28/10 05/14/07 12/30/09 01/16/07 11/05/08 60/80/60 Date

| G 763 | d %Mtt. Annual | 50* 13.2 350 | 1.6 0 | 850,058* 100.0 71,077 |
|--|---------------------------------------|--------------------------|--|--------------------------------|
| Redliggly Grief Grant 19, Pariced as 12/31/10 Accourded 16 Accourded 1 | ost Unrealized %Mt. Profit/Loss Value | 600,000*40 -39,550* 13.2 | 67,581 🛠 | 3,394,197* 850,0. 3,446,652 |
| 12,04f Priced as -54,298 | Value Total Cost | \$60,450* 60 | 67,581 6 | 4,244,258* 3,399 3,44 |
| M -54 | Unit Market Value | | | 4,2 |
| RHURT GERN LONG TERM | Market Price | | |) . * |
| 8 | Interest or Dividend | - | | |
| Original Appraisal Date | Description | NEÓUS | | ACCOUNT |
| Joseph and Hosberg, L. L. C. 455 Cityfront Plaza, Chicago, Illinois 60611 | | Total MISCELLANEOUS | Cash | Total VALUE OF ACCOUNT |
| en and L Cityfront Plaza, Chu | (312) 828-1100 (312) 828-1100 | | - | |
| - 100 mg | Date Purchased | | ر المحالي المستوارية المستوارية المستوارية المستوارية المستوارية المستوارية المستوارية المستوارية المستوارية ا المستوارية المستوارية المستواري | |

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

| If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box | | | | | | X | |
|---|---|--------------------------|--|---------------------------------------|---------------------|---|--|
| If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). | | | | | | | |
| Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. | | | | | | | |
| Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation | | | | | | | |
| required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension | | | | | | | |
| of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain | | | | | | | |
| Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, | | | | | | | |
| visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. | | | | | | | |
| Part 1 Automatic 3-Month Extension of Time. Only submit original (no copies needed). | | | | | | | |
| A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete | | | | | | | |
| Part I only | | | | | | | |
| All oth | er corporations (including 1120-C filers), partnerships, REM | ICs, and t | rusts must use Form 7004 to request an | exten | sion of time | | |
| | ncome tax returns. | | • | | | | |
| Туре | | | | | oyer identification | number | |
| print | PETER D. AND CAROL GOLDMAN FOUNDATION 36-373077 | | | | | | |
| File by the due date filing you | date for Number, street, and room or suite no. If a P.O. box, see instructions. | | | | | | |
| return S instruction | City, town or post office, state, and ZIP code. For a for | Iress, see instructions. | | · · · · · · · · · · · · · · · · · · · | | | |
| | HIGHLAND PARK, IL 60035 | | | | | | |
| 5 5 | | | | | | | |
| Enter t | he Return code for the return that this application is for (file | e a separa | te application for each return) | | | 0 4 | |
| Annlination | | | | | | | |
| Application | | Return | Application | | | Return | |
| Is For | | Code | Is For | | | Code | |
| Form 990 Form 990-BL | | 01 | Form 990-T (corporation) Form 1041-A | | | 07 08 | |
| Form 990-EZ | | 03 | Form 4720 | | | 09 | |
| Form 990-PF | | 03 | Form 5227 | | | 10 | |
| Form 990-T (sec. 401(a) or 408(a) trust) | | | Form 6069 | | | 11 | |
| Form 990-T (trust other than above) | | 05 06 | Form 8870 | | | 12 | |
| PETER GOLDMAN | | | | | | | |
| • The books are in the care of ▶ 219 CARY AVENUE - HIGHLAND PARK, IL 60035 | | | | | | | |
| Telephone No. ► 847-831-9598 FAX No. ► | | | | | | | |
| If the organization does not have an office or place of business in the United States, check this box | | | | | | | |
| If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this | | | | | | | |
| box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for. | | | | | | | |
| 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until | | | | | | | |
| AUGUST 15, 2011 , to file the exempt organization return for the organization named above. The extension | | | | | | | |
| | is for the organization's return for: | | | | | | |
| ł | ▶ <u>X</u> calendar year <u>2010</u> or | | | | | | |
|) | tax year beginning | , an | d ending | | <u>.</u> . | | |
| | If the tay year entered in line 1 in far less than 10 months shock reason. | | | | | | |
| 2 1 | If the tax year entered in line 1 is for less than 12 months, check reason: Linitial return Linitial return | | | | | | |
| | Change in accounting period | | | | | | |
| 3a I | f this application is for Form 990-BL, 990-PF, 990-T, 4720, | or 6060 o | inter the tentative tay loss any | | | _ | |
| | nonrefundable credits. See instructions. | o, 0003, e | and the terrative tax, less arry | 3a | s 1 | ,500. | |
| - | f this application is for Form 990-PF, 990-T, 4720, or 6069, | enter any | refundable credits and | Ja | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| | estimated tax payments made. Include any prior year overp | • | | 3b | \$ | 0. | |
| - | Balance due. Subtract line 3b from line 3a. Include your pa | | | <u> </u> | | | |
| | by using EFTPS (Electronic Federal Tax Payment System). | - | | 3c | s 1 | ,500. | |
| Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions. | | | | | | | |
| HA For Paperwork Reduction Act Notice, see Instructions. Form 8868 (Rev. 1-2011) | | | | | | | |

023841 01-03-11