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Form **990-PF**

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

OMB No 1545-0052 2010

Department of the Treasury Internal Revenue Service

Note The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2010, or tax year beginning , 2010, and ending G Check all that apply. Initial return Initial Return of a former public charity Final return Amended return Address change Name change Employer identification number The Kellcie Fund 36-4267581 1603 Orrington Ave #1275 В Telephone number (see the instructions) Evanston, IL 60201 847.328.2288 If exemption application is pending, check here 1 Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check Check type of organization X Section 501(c)(3) exempt private foundation here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated Ε Fair market value of all assets at end of year J Accounting method X Cash Accrual under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination ► S 2,483,251 (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here Part I Analysis of Revenue and (a) Revenue and (b) Net investment (d) Disbursements (c) Adjusted net Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) expenses per books income ıncome for charitable purposes (cash basis only) (see the instructions)) Contributions, gifts, grants, etc, received (att sch) 2,025,000 If the foundn is not req to att Sch B Interest on savings and temporary N/A 22 22 cash investments Dividends and interest from securities 41,840. 5a Gross rents b Net rental income or (loss) 43,190 REVENU 6a Net gain/(loss) from sale of assets not on line 10. b Gross sales price for all assets on line 6a 43,190 43,190 Capital gain net income (from Part IV, line 2) Net short-term capital gain KON S \Box Income modifications 10a Gross sales less returns and allowances Ť b Less Cost of goods sold 117 c Gross profit/(loss) (att sch) 11 Other income (attach schedule) Total. Add lines 1 through 11 43,212 2,110,052 13 Compensation of officers, directors, trustees, etc Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 1,667. 5,000 3,333 **b** Accounting fees (attach sch) See St 1 c Other prof fees (attach sch) 17 Interest 10. See Stm 2 10 Taxes (attach schedule)(see instr.) Depreciation (attach sch) and depletion Occupancy Travel, conferences, and meetings 21 Printing and publications EXPENSES 23 Other expenses (attach schedule) 26. 26 See Statement 3 Total operating and administrative expenses. Add lines 13 through 23 5,036 3,333 1,703. Contributions, gifts, grants paid Part XV 245,414 245,414. O Total expenses and disbursements. രാ Add lines 24 and 25 250,450 3,333 247,117. Subtract line 26 from line 12: a Excess of revenue over expenses 1,859,602 and disbursements 39,879 **b** Net investment income (if negative, enter -0-) . C Adjusted net income (if negative, enter -0-)

BAA For Paperwork Reduction Act Notice, see the instructions.

TEEA0504L 07/23/10

Form 990-PF (2010)

Par	TIII	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	of year
		(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing .			
	2	Savings and temporary cash investments	714,723.	2,574,122.	2,476,898.
	3	Accounts receivable			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable			
	1	Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)		<u>-</u>	
	7	Other notes and loans receivable (attach sch)		· · · · ·	
A		Less: allowance for doubtful accounts			
S	8	Inventories for sale or use		<u></u>	
A S E T S	9	Prepaid expenses and deferred charges			
Ś	ſ	a Investments — U.S. and state government obligations (attach schedule)			
	l i	b Investments — corporate stock (attach schedule)			
	l	c Investments — corporate bonds (attach schedule)	-	· · · · · · · · · · · · · · · · · · ·	
		Investments — land, buildings, and		·	
	''	equipment basis.			
		Less. accumulated depreciation (attach schedule)			
	12	Investments mortgage loans.			<u> </u>
	13	Investments — other (attach schedule) .			
	14	Land, buildings, and equipment. basis			
		Less: accumulated depreciation (attach schedule)			
		Other assets (describe ► See Statement 4)	6,150.	6,353.	6,353.
	16	Total assets (to be completed by all filers – see instructions Also, see page 1, item I)	720,873.	2,580,475.	2,483,251.
Ļ	17	Accounts payable and accrued expenses .			<u> </u>
Å	18	Grants payable .			1
A B I	19	Deferred revenue			
Ľ	20	Loans from officers, directors, trustees, & other disqualified persons St. 5	_100,000.	100,000.	
Ţ	21	Mortgages and other notes payable (attach schedule)		 	
Ţ	22	Other liabilities (describe]
E S	23	Total liabilities (add lines 17 through 22)	100,000.	100,000.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
ŊF	24	Unrestricted			
N F E U T N	25	Temporarily restricted]
D	26	Permanently restricted]
ASSET		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
EL	27	Capital stock, trust principal, or current funds	620,8 <u>73</u> .	2,480,475.	
SŅ	28	Paid-in or capital surplus, or land, building, and equipment fund			1
O E	29	Retained earnings, accumulated income, endowment, or other funds]
RS	30	Total net assets or fund balances (see the instructions)	620,873.	2,480,475.	į
	31	Total liabilities and net assets/fund balances	720,873.	2,580,475.	
Dar	 -	(see the instructions) Analysis of Changes in Net Assets or Fund Balance		2,300,473.	<u> </u>
					
1	Tota	I net assets or fund balances at beginning of year — Part II, colu	ımn (a), line 30 (must ag	ree with	620,873.
•		of-year figure reported on prior year's return)		2	1,859,602.
		er amount from Part I, line 27a		3	1,039,002.
		Increases not included in line 2 (itemize)		- - 4	2 400 475
		lines 1, 2, and 3			2,480,475.
		ases not included in line 2 (itemize)	D-41	5	2 400 475
6_	rota	I net assets or fund balances at end of year (line 4 minus line 5)	- Part II, column (b), II	ne 30 6	2,480,475.

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company) (b) How a P — Pur D — Dor					(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a Nort	hern Trust Inte	rmediate tax-exempt		P	Various	Various
		rmediate tax-exempt		P	Various	Various
с						
d						
<u>e</u>						
(e) G	ross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) m	
a	_10,624.					10,624.
b	32,566.					32 <u>,566</u> .
С						
d	<u></u>					
<u>e</u>			· · · · · · · · · · · · · · · · · · ·			
		ng gain in column (h) and owned by			(I) Gains (Colu	
	air Market Value s of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any) g th	ain minus column (k an -0-) or Losses (fr	om column (h))
a						10,624.
<u> </u>					·	32,566.
c						
<u>d</u>						
e			<u> </u>		r -	
2 Capital	gain net income or (net	capital loss) If gain, also If (loss), ent	enter in Part I, line 7 er -0- in Part I, line 7	2		43,190.
3 Net sho	ort-term capital gain or (I	loss) as defined in sections 1222(5)	and (6):			
lf gain.	also enter in Part I. line	8, column (c) (see the instructions)	If (loss), enter -0-			
ın Part	I, line 8			3	<u></u>	32,566.
Part V (Qualification Under	Section 4940(e) for Reduced	d Tax on Net Investmen	t Income		
If 'Yes,' the f	oundation does not quali	tion 4942 tax on the distributable am fy under section 4940(e) Do not col n each column for each year, see the	nplete this part		Yes	X No
Calenda	(a) se period years ar year (or tax year seginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asset	s (col	(d) Distribution umn (b) divided	
	2009	407,083.	765,	150.		
	2008	275,972.	903,	354.		
	2007	264,250.	0.54			0.305497
	2006	201/2001	851,	849.		0.532030 0.305497 0.310208
	2005	330,695.	761,	849. 372.		0.305497 0.310208 0.434341
				849. 372.		0.305497 0.310208 0.434341
		330,695.	761,	849. 372.		0.305497 0.310208 0.434341 0.356701
2 Total o	f line 1, column (d)	330,695.	761,	849. 372.		0.305497 0.310208 0.434341 0.356701
3 Averag	f line 1, column (d) e distribution ratio for the	330,695.	761, 734, tal on line 2 by 5, or by the	849. 372. 276.		0.305497 0.310208 0.434341 0.356701 1.938777
3 Averag number	f line 1, column (d) e distribution ratio for the r of years the foundation	330, 695. 261, 917.	761, 734, tal on line 2 by 5, or by the years	849. 372. 276.		0.305497 0.310208 0.434341 0.356701 1.938777
3 Averag number4 Enter the	f line 1, column (d) e distribution ratio for the r of years the foundation he net value of noncharit	a 330, 695. 261, 917. e 5-year base period – divide the to has been in existence if less than 5	761, 734, tal on line 2 by 5, or by the years	849. 372. 276.		0.305497 0.310208 0.434341 0.356701 1.938777 0.387755 1,626,232
3 Average number4 Enter the5 Multiply	f line 1, column (d) e distribution ratio for the r of years the foundation the net value of noncharit r line 4 by line 3	330, 695. 261, 917. e 5-year base period – divide the to has been in existence if less than 5 table-use assets for 2010 from Part	761, 734, tal on line 2 by 5, or by the years	849. 372. 276. 2 3 4		0.305497 0.310208 0.434341 0.356701 1.938777 0.387759 1,626,232
3 Average number4 Enter the state of the	f line 1, column (d) e distribution ratio for the r of years the foundation he net value of noncharit r line 4 by line 3 % of net investment inco	a 330, 695. 261, 917. e 5-year base period – divide the to has been in existence if less than 5	761, 734, tal on line 2 by 5, or by the years	849. 372. 276. 2 3 4 5		0.305497 0.310208 0.434341 0.356701 1.938777 0.387755 1,626,232 630,580
3 Average number4 Enter the state of the	f line 1, column (d) e distribution ratio for the r of years the foundation the net value of noncharit r line 4 by line 3	330, 695. 261, 917. e 5-year base period – divide the to has been in existence if less than 5 table-use assets for 2010 from Part	761, 734, tal on line 2 by 5, or by the years	849. 372. 276. 2 3 4		0.305497
 Average number Enter the second of the s	f line 1, column (d) e distribution ratio for the r of years the foundation he net value of noncharit r line 4 by line 3 % of net investment inco es 5 and 6 ualifying distributions fro	330, 695. 261, 917. e 5-year base period – divide the to has been in existence if less than 5 table-use assets for 2010 from Part tome (1% of Part I, line 27b)	761, 734, tal on line 2 by 5, or by the years X, line 5	849. 372. 276. 2 3 4 5 6 7		0.305497 0.310208 0.434341 0.356701 1.938777 0.387755 1,626,232 630,580 399 630,979 247,117

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Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the in	structi	ons)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.				
	Date of ruling or determination letter (attach copy of letter if necessary — see instr.)	l			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,				<u> 198.</u>
	check here ► and enter 1% of Part I, line 27b				1
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
	foundations only Others enter -0-).				0.
	Add lines 1 and 2				798.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			<u>_</u>	798.
	Credits/Payments				į
	2010 estimated tax pmts and 2009 overpayment credited to 2010 Exempt foreign organizations — tax withheld at source 6a 4, 666.				
	Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d 7			1 6	566.
	Enter any penalty for underpayment of estimated tax. Check here			7,0	, , , , , , , , , , , , , , , , , , ,
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	 		3.8	368.
	Enter the amount of line 10 to be: Credited to 2011 estimated tax			<u> </u>	0.
Part					<u> </u>
				Yes	No
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	F	1 a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?		1 b		x
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials publishe or distributed by the foundation in connection with the activities.	ıd			
	Did the foundation file Form 1120-POL for this year?		1 c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation (2) On foundation managers	0.			
e	(1) On the foundation \$ 0. (2) On foundation managers \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	—┤	1		
	foundation managers >\$ 0.	1			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	ļ	2		<u>X</u>
	If 'Yes,' attach a detailed description of the activities	ļ	- 1		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles				
	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		3		X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	.	4a		X
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?		_4b	N	/A
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		_5		X
	If 'Yes,' attach the statement required by General Instruction T		-		
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	İ			
	By language in the governing instrument, or	ľ		!	
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict	:	6	X	<u>-</u>
_	with the state law remain in the governing instrument?	ŀ	7	X	├──
	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV Enter the states to which the foundation reports or with which it is registered (see the instructions)	ŀ			
oa	IL	_			
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 <i>General Instruction G? If 'No,' attach explanation</i>		8b	X	[.]
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942 for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' complete Part	()(5) t XIV	9		
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		10		х_
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rai	t 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		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address • N/A			
14	The books are in care of ► Philip C. Fontana Telephone no ► 847.3	<u> 28.2</u>	<u> 288</u>	
	Located at ► 1603 Orrington Ave. Ste. 1275 Evanston IL ZIP + 4 ► 60201			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	N/A	>	
	and enter the amount of tax-exempt interest received or accrued during the year . 15		V	N/A
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the name of the foreign country ▶			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	igsqcup	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 X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			l
	(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)?. Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) Yes X No			
I	b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)?	 1 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here	1		1
(c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010?	 1c		<u>X</u>
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)).		!	1
	a At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010?			
	If 'Yes,' list the years ► 20 , 20 , 20			
	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 the instructions)	2b	N	/Ā
1	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, 20			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No			,
I	b If 'Yes,' did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010)	3b	N	/A
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its	4a		Х
	charitable purposes?		_	 ^
ı	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could			
	jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	46		,
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	,		- •	, · · · /

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Part VII-B Statements Regarding Activiti	es for Which Forn	1 4720 May Be Req	uired (continued)		
5a During the year did the foundation pay or incu(1) Carry on propaganda, or otherwise attempt	,	on (section 4945(e))?	☐ Yes X	No	
(2) Influence the outcome of any specific pub	lic election (see section				
on, directly or indirectly, any voter registra (3) Provide a grant to an individual for travel,		purposes?	Yes X	No No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, o 4940(d)(2)? (see instri	rganization described uctions)	Yes X] No	
(5) Provide for any purpose other than religio educational purposes, or for the preventio	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes X] No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regar	qualify under the excep ding disaster assistance	tions	5 b	N/A
Organizations relying on a current notice rega	rding disaster assistand	ce check here	▶ [
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response. If 'Yes,' attach the statement required by Region 1.	sibility for the grant?		N/A Yes] No	
6a Did the foundation, during the year, receive ar on a personal benefit contract?	-		Yes X]No	
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870.	iums, directly or indirec	ctly, on a personal bene	fit contract?	6b	X
7a At any time during the tax year, was the found			<u> </u>]No	
Part VIII Information About Officers, D				N/A 7b Employees	
and Contractors					
1 List all officers, directors, trustees, foundation	n managers and their		ructions).		
(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 other allow	
See Statement 6 ·					
	,	0.	0.	_	0.
			<u> </u>	<u> </u>	
~					
*					
2 Compensation of five highest-paid employee	s (other than those inc	l cluded on line 1— see ii	nstructions). If none, e	enter 'NONE.'	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allow	account, wances
None			***************************************		
~					
Total number of other employees paid over \$50,000) TEFA0306L	07/03/10		Form 990-	0 PE (2010

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments. See instructions

Total. Add lines 1 through 3

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see instructions.)	roreign f	oundations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes		
Average monthly fair market value of securities. b Average of monthly cash balances	1a	1,644,820.
	1 b	6,177.
c Fair market value of all other assets (see instructions)	1 c	1,650,997.
d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c	1-19-	1,030,337.
2 Acquisition indebtedness applicable to line 1 assets	<u>'</u>	0.
3 Subtract line 2 from line 1d	3	1,650,997.
		1,030,331.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	24,765.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,626,232.
6 Minimum investment return. Enter 5% of line 5	6	81,312.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private open	erating fo	undations
and certain foreign organizations check here ► and do not complete this	oart.)	
1 Minimum investment return from Part X, line 6	1	81,312.
2a Tax on investment income for 2010 from Part VI, line 5 . 2a 798	<u> </u>	
b Income tax for 2010 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2c	798.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	80,514.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	80,514.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	80,514.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes	1 a	247,117.
a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 b	247,117.
 b Program-related investments — total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc. purposes. 	2	
		
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	247,117.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	247,117.
	her the four	ndation
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whet qualifies for the section 4940(e) reduction of tax in those years		
BAA		Form 990-PF (2010)

Form **990-PF** (2010)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI, line 7				80,514.
2 Undistributed income, if any, as of the end of 2010	 			60,514.
a Enter amount for 2009 only			0.	
b Total for prior years. 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2010				
a From 2005 228, 867. b From 2006 293, 254.				
c From 2007 264, 250.				ļ
d From 2008 275, 972.				
e From 2009 407, 106.				
f Total of lines 3a through e	1,469,449.			
4 Qualifying distributions for 2010 from Part		-		
XII, line 4 ► \$ <u>247, 117.</u>				
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus (Election required – see instructions)	247,117.			
d Applied to 2010 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2010 .	80,514.			80,514.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	1,636,052.			i I
b Prior years' undistributed income. Subtract				
line 4b from line 2b .		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency				
has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
, ,		0.		
d Subtract line 6c from line 6b. Taxable amount — see instructions		0.		
e Undistributed income for 2009. Subtract line 4a from			0.	
line 2a Taxable amount — see instructions				
f Undistributed income for 2010. Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2011				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3)	0			
(see instructions)	0.			
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions)	148,353.			
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	1,487,699.			
10 Analysis of line 9				··· <u>· · · ·</u>
a Excess from 2006 293, 254.				
b Excess from 2007 264, 250.				
c Excess from 2008 275, 972.				
d Excess from 2009 407, 106.				
<u>e Excess from 2010</u> 247,117.				·

Form 990-PF (2010) The Kellcie Fund				36-426758:	l Page 10	
Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A						
1a If the foundation has received a ruling or on is effective for 2010, enter the date of the	ruling			n, and the ruling		
b Check box to indicate whether the foundate		erating foundation d	escribed in section	4942(j)(3) or	4942(j)(5)	
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	ļ	Prior 3 years			
investment return from Part X for each year listed .	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total	
b 85% of line 2a						
c Qualifying distributions from Part XII, line 4 for each year listed						
d Amounts included in line 2c not used directly for active conduct of exempt activities						
e Qualifying 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						
a 'Assets' alternative test — enter:						
(1) Value of all assets	ļ	ļ	<u></u>			
(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) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)						
•			1			
(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						
Supplementary Information assets at any time during the	(Complete this	part only if the	organization ha	d \$5,000 or moi	e in	
Information Regarding Foundation Managers of the foundation who close of any tax year (but only if they have Kenneth Lehman	gers:	ore than 2% of the	total contributions resection 507(d)(2))	eceived by the found	dation before the	
Nemicen Benman						
b List any managers of the foundation who a partnership or other entity) of which the None	own 10% or more of foundation has a 1	of the stock of a cor 10% or greater intere	poration (or an equa est	ally large portion of	the ownership of	
2 Information Departing Contribution Con	ot Citt Laan Caba	-levelin etc Bronne				
2 Information Regarding Contribution, Gran Check here In the foundation only requests for funds. If the foundation make	nakes contributions	s to preselected cha	ritable organizations			
a The name, address, and telephone number	or of the nerson to	whom applications	should be addressed			
a me name, address, and telephone name	or the person to	Whom applications	should be addressed	•		
See Statement 7						
b The form in which applications should be	submitted and info	rmation and materia	ils they should inclu	de		
See Statement for Line 2a			j			
c Any submission deadlines						
•						
See Statement for Line 2a d Any restrictions or limitations on awards,	such as by deodrar	phical areas charital	ble fields, kinds of i	nstitutions, or other	factors:	
	such as by geograf	omean areas, charita	2.5 Holds, Milds Of I		.20.0.0	
See Statement for Line 2a						
BAA	π	EEA0310L 02/16/11		F	orm 990-PF (2010)	

3 Grants and Contributions Paid During the Ye	ar or Approved for Fut	ure Paymen	<u> </u>	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
Name and address (home or business) a Paid during the year See attached grant list. ,	substantial contributor	recipient	All contributions were made for the general, charitable, educational or scientific purpose of each organization.	245,414.
Total			► 3a	245,414.
b Approved for future payment				
	·		► 3b	
Total			► 3b	l

nter gross amounts unless otherwise indicated	Unrelate	ed business income	Excluded by	section 512, 513, or 514	(e)	
Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (see the instructions)	
a			 	 -	· 	
b			+			
cd	1	-	1			
e	 					
f						
g Fees and contracts from government agencies						
2 Membership dues and assessments	<u></u>					
3 Interest on savings and temporary cash investments			14	22.		
4 Dividends and interest from securities			<u> </u>		41,840	
5 Net rental income or (loss) from real estate						
a Debt-financed property	ļi		 - 			
b Not debt-financed property			+			
 Net rental income or (loss) from personal property Other investment income 	ļ	····				
8 Gain or (loss) from sales of assets other than inventory	 		18	43,190.		
9 Net income or (loss) from special events.			+	43,130.		
10 Gross profit or (loss) from sales of inventory					· · · · · · · · · · · · · · · · · · ·	
11 Other revenue			1	. 		
a						
b						
С						
			1			
d						
de						
e Subtotal Add columns (b), (d), and (e)				43,212.		
d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)				43,212.		
d e Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)						
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 calculate	ons)	ishment of Exem	ot Purpose	13		
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 calculate Part XVI-B Relationship of Activities to the	ons)			13 <u></u>	85,052	
d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) 15 See worksheet in line 13 instructions to verify calculate 16 Part XVI-B Relationship of Activities to the 17 Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accomple ncome is report purposes (or	orted in column (e) of ther than by providing	Part XVI-A of	es contributed important ch purposes) (See t	ly to the he instructions)	
d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) 15 See worksheet in line 13 instructions to verify calculated and the columns (b). 16 Part XVI-B Relationship of Activities to the columns (b), (d), and (e).	e Accomple ncome is report purposes (or	orted in column (e) of ther than by providing	Part XVI-A of	es contributed important ch purposes) (See t	85,052 ly to the he instructions)	
d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) 15 See worksheet in line 13 instructions to verify calculate 16 Part XVI-B Relationship of Activities to the 17 Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accomple ncome is report purposes (or	orted in column (e) of ther than by providing	Part XVI-A of	es contributed important ch purposes) (See t	85,052 ly to the he instructions)	
d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) 15 See worksheet in line 13 instructions to verify calculate 16 Part XVI-B Relationship of Activities to the 17 Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accomple ncome is report purposes (or	orted in column (e) of ther than by providing	Part XVI-A of	es contributed important ch purposes) (See t	ly to the he instructions)	
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d e 12 Subtotal Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) 15 See worksheet in line 13 instructions to verify calculate 16 Part XVI-B Relationship of Activities to the 17 Line No. Explain below how each activity for which is accomplishment of the foundation's exemption.	e Accomple ncome is report purposes (or	orted in column (e) of ther than by providing	Part XVI-A of	es contributed important ch purposes) (See t	ly to the he instructions)	
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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 calculate Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exemp	ons) e Accompl ncome is report purposes (or	orted in column (e) of ther than by providing	Part XVI-A of	es contributed important ch purposes) (See t		
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 calculate Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exemp	ons) e Accompl ncome is report purposes (or	orted in column (e) of ther than by providing	Part XVI-A of	es contributed important ch purposes) (See t	ly to the he instructions)	
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 calculate Part XVI-B Relationship of Activities to the Line No. Explain below how each activity for which is accomplishment of the foundation's exemp	ons) e Accompl ncome is report purposes (or	orted in column (e) of ther than by providing	Part XVI-A of	es contributed important ch purposes) (See t	ly to the he instructions)	

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

					Yes	No
1 Did the organization direction 501 relating to political organization.	(c) of the Code (ot	ngage in any of the following wi ther than section 501(c)(3) organ	th any other organization nizations) or in section	on 527,		
J , J		a noncharitable exempt organiz	ation of			
(1) Cash		, -		1a	(1)	X
(2) Other assets				1a	(2)	X
b Other transactions						
(1) Sales of assets to a	noncharitable exe	mpt organization		1b	(1)	X
(2) Purchases of assets	s from a noncharita	able exempt organization		1b	(2)	X
(3) Rental of facilities,	equipment, or othe	r assets		1b	(3)	X
(4) Reimbursement arra	angements			1b	(4)	X
(5) Loans or loan guara	antees.			1 b	(5)	X
(6) Performance of serv	vices or membersh	ip or fundraising solicitations		1 b	(6)	X
c Sharing of facilities, equ	uipment, mailing lis	sts, other assets, or paid employ	ees	1c		X
the goods, other assets any transaction or share	the above is 'Yes,' , or services given ing arrangement, sl	complete the following schedule by the reporting foundation. If the how in column (d) the value of the	e Column (b) should alv ne foundation received he goods, other assets,	ways show the fair market less than fair market value , or services received	value of : in	
(a) Line no (b) Amount involv		of noncharitable exempt organization		nsfers, transactions, and sharing		nts
N/A						
	·					
		· · ·				
		ated with, or related to, one or r ther than section 501(c)(3)) or in	more tax-exempt organ n section 527?	izations	Yes X]No
b If 'Yes,' complete the fo	<u> </u>					
(a) Name of orga	nization	(b) Type of organization	1 (c) Description of relations	пр	
N/A						
		1				
Sign Here	declare that I have exam aration of preparer (other	nined this return, including accompanying sithan taxpayer or fiductary) is based on all	chedules and statements, and sinformation of which preparer h	to the best of my knowledge and because any knowledge PRES IDL		e,
Signature of officer or t	rustee	A A	Date	Title		
Print/Type prepare		Pregare's signature	Date /	Check if If PTIN		
TEDENT D		JEREMY DUBOW	— 11 <i> 14/</i>	self employed N/A		
ald		DUBOW & HARRIS LLC		Firm's EIN N/A		
Preparer Firm's name			18	THENS ELIN T 1V/ A		
Use Only Firm's address		IL 60604-3747	10	Phone no (312) 46	1-087	6
	CUICAGO,	TD 00004-3/4/			1 990-PF	
BAA				rorr	・ココリードト	(2010)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2010

Employer identification number Name of the organization 36-4267581 The Kellcie Fund Organization type (check one): Filers of: Section: _) (enter number) organization Form 990 or 990-EZ 501(c)(4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor (Complete Parts I and II) **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not aggregate to more than \$1,000 lf this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it must answer 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF) BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2010)	Page 1	of 1 of Part I
Name of org	anization Ellcie Fund	' '	Identification number
		30-42	267581
	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	New Prospect Foundation 1603 Orrington Ave. Ste. 1275 Evanston, IL 60201	\$2, <u>025,000</u> .	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		\$	
		٩	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		r.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
***		\$	
		-	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		^	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
<u> </u>			
-		<u></u>	
		\$	

BAA

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

Name of organization

Employer identification number

	llcie Fund		_	36-4267581	L	
Part III	Exclusively religious, charitable, et organizations aggregating more th	tc, individual contribution an \$1,000 for the year.Co	ns to section mplete cols (a) th	501(c)(7), (8), or (10) brough (e) and the following	ng line entry.	
	For organizations completing Part III, enter contributions of \$1,000 or less for the year	(Enter this information once. S	naritable, etc, ee instructions)	▶ \$	N/A	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gif	t is held	
	N/A					
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relation	ship of transferor to tran	sferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gif	t is held	
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gif	t is held	
	Transferee's name, addres:	Polation	nship of transferor to tran	cforee		
	Transferee S fiame, address	s, and zir + 4	Relation	isinp of transferor to trans		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	Transferee's name, address	(e) Transfer of gift s, and ZIP + 4	Relation	iship of transferor to tran	sferee	

2010	Federal Statements	Page 1
	The Kellcie Fund	36-4267581
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees	(a) (b) Net (c)	(d)
Accounting Fees .	Expenses Investment Adjusted Net Income \$ 5,000. \$ 3,333. Total \$ 5,000. \$ 3,333.	Charitable Purposes \$ 1,667. \$ 1,667.
Statement 2 Form 990-PF, Part I, Line 18 Taxes		
IL Taxes	(a) (b) Net (c) Expenses Investment Adjusted Per Books Income Net Income \$ 10. Total \$\frac{\$\dagger}{2}\$ 10. \$\dagger\$ 0.	(d) Charitable Purposes \$ 10. \$ 10.
Statement 3 Form 990-PF, Part I, Line 23 Other Expenses	,	
postage	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 26. Total \$ 26. \$ 0.	(d) Charitable Purposes \$ 26. \$ 26.
Statement 4 Form 990-PF, Part II, Line 15 Other Assets		
Other Asset	Book Value \$ 6,353. \$ Total \$ 6,353. \$	air Market Value 6,353. 6,353.
Statement 5 Form 990-PF, Part II, Line 20 Loans from Officers, Directors, Tru	stees, and Key Employees	
Lender's Name: Lender's Title: Date of Note: Maturity Date: Repayment Terms:	Amy Lehman Secretary 4/24/2009 12/31/2010 principle upon maturity	Balance Due

2010	F	ederal Statement	ts		Page 2		
	The Kellcie Fund				36-4267581		
Statement 5 (continued) Form 990-PF, Part II, Line 20 Loans from Officers, Directors, Trustees, and Key Employees							
Interest Rate: Security Provided: Purpose of Loan: Desc. of Consideration: FMV of Consideration:	n/a Mosq Cash 0.	uito Nets		<u>Bal</u>	Lance Due		
Original Amount: Balance Due:	000.		\$ Total \$	100,000.			
Statement 6 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trus	stees, and h	Key Employees					
Name and Address		Title and Average Hours Per Week Devoted	Compen- sation	Contri- bution to EBP & DC	Expense Account/ Other		
Kenneth Lehman 1603 Orrington Ave. Ste. Evanston, IL 60201		Co-President 2.00	\$ 0.		\$ 0.		
Lucy Lehman 1603 Orrington Ave. Ste. Evanston, IL 60201	1275	Co-President 2.00	0.	0.	0.		
Amy Lehman 1603 Orrington Ave. Ste. Evanston, IL 60201	1275	Secretary 0.50	0.	0.	0.		
Betsy Lehman 1603 Orrington Ave. Ste. Evanston, IL 60201	1275	Asst. Secretary 0.50	0.	0.	0.		
Peter Lehman 1603 Orrington Ave. Ste. Evanston, IL 60201	1275	Treasurer 0.50	0.	0.	0.		
Justin Levisay 1603 Orrington Ave. Ste. Evanston, IL 60201	1275	Asst. Treasurer 0.50	0.	0.	0.		
		Total	\$ 0.	\$ 0.	<u>\$ 0.</u>		

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The Kellcie Fund

36-4267581

Statement 7 Form 990-PF, Part XV, Line 2a-d **Application Submission Information**

Name of Grant Program:

Name: Care Of:

Kenneth Lehman KKP Group LLC

1603 Orrington Ave. Ste. 1275

Street Address: City, State, Zip Code:

Evanston, ĬL 60201 847.328.2288

Telephone: Form and Content:

No particular form is required. A letter is sufficient.

Submission Deadlines: No deadline exists.

Restrictions on Awards:

The organization must be qualified under IRS Sec 170(c).

2010

Federal Supplemental Information

Page 1

The Kellcie Fund

36-4267581

The Kellcie Fund C/O KKP Group, LLC 1603 Orrington Ave, ste 1275 Evanston, IL 60201 EIN # 36-4267581

Taxpayer respectfully requests a reasonable cause exemption for the late filing of this return. The additional extension was timely prepared, reviewed and delivered to an IRS office where it was received and stamped by agent with no objection. Due to a clerical error Form 8868, page 2 was inadvertently not signed despite clear efforts to file a valid and timely additional extension. Taxpayer has a history of timely filing and has attached the Internal Revenue Service stamped and dated copy of the Additional 3-Month Extension Form 8868.

Form **8868** (Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 1-2011)

If you are	e filing for an Automatic 3-Month Extension, con	nplete only	Part Land check this hox	<u>,+</u>	► X
	e filing for an Additional (Not Automatic) 3-Mont				<u>N</u>
Do not comp	plete Part II unless you have already been grante	d an autom	atic 3-month extension on a previously file	ed Form 8868	
					•
corporation r	ling (e-file). You can electronically file Form 8868 required to file Form 990-T), or an additional (not extension of time to file any of the forms listed in With Certain Personal Benefit Contracts, which means the form with the contracts of the form with the contracts of the form with the form	t automatic)	3-month extension of time. You can elec	tronically file Form 8	a 868 to
request an e	extension of time to file any of the forms listed in	Part I or Pa	art II with the exception of Form 8870, Info	ormation Return for	ransfers
electronic fili	ing of this form, visit www.irs.gov/efile and click o	on <i>e-file for</i>	Charities & Nonprofits	ns). For more details	on the
	utomatic 3-Month Extension of Time. C		<u> </u>		· · · ·
	n required to file Form 990-T and requesting an a			omplete Part I only .	▶ □
	porations (including 1120-C filers), partnerships,			•	to file
income tax r	returns.	TALIFICO, DI	na trasts mast ase roim 700+ to request t	pri exterision or time	to me
	Name of exempt organization			Employer identification nur	nber
Type or	1		}		
print	THE KELLCIE FUND			36-4267581	
File by the due date for	Number, street, and room or suite number. If a P.O. box, see in	structions			
filing your return See	1603 ORRINGTON AVE #1275				
instructions	City, town or post office, state, and ZIP code. For a foreign addr	ress, see instru	ctions		
	EVANSTON, IL 60201				
	· · · · · · · · · · · · · · · · · · ·				
Enter the Re	turn code for the return that this application is fo	r (file a sep	arate application for each return)		04
				·	
Application		Return	Application		Return
ls For		Code	is For		Code
Form 990		01	Form 990-T (corporation)		_07
Form 990-BL		02	Form 1041-A		08
Form 990-EZ	?	03	Form 4720		09
Form 990-PF		04	Form 5227		10
Form 990-T	(section 401(a) or 408(a) trust)	05	Form 6069		11
Form 990-T	(trust other than above)	06	Form 8870		12
Telephone If the org If this is	e No > 847.328.2288 ganization does not have an office or place of bus for a Group Return, enter the organization's four is box > if it is for part of the group, check	FAX No siness in the digit Group	Exemption Number (GEN) If t	his is for the whole g id EINs of all membe	• •
	nsion is for.			1200	
1 I reque	st an automatic 3-month (6 months for a corpora	ation require	ed to file Form 990-1) extension of time	VIERNING TO	· , ,
-	8/15 , 20 11 , to file the exempt org	janization re	eturn for the organization named above.	W &	
	tension is for the organization's return for:			CHICAGO,	L 60604
	calendar year 20 10 or	a a a l a a a l	20		
	tax year beginning, 20	, and endir	' [']	MAY 16	ZU11
_	ax year entered in line 1 is for less than 12 mont ange in accounting period	hs, check re	eason. Initial return Fina	return RECE!	V:=D
				2740	155
nonrefu	application is for Form 990-BL, 990-PF, 990-T, 47 undable credits. See instructions			3a \$	0.
b If this a paymer	application is for Form 990-PF, 990-T, 4720, or 60 nts made Include any prior year overpayment all	lowed as a	credit .	3b\$	4,666.
		r noumant u	is about force of required by using 13	Material Control	
<u>EFTPS</u>	e due. Subtract line 3b from line 3a. Include your (Electronic Federal Tax Payment System). See ou are going to make an electronic fund withdraw	instructions		39¢ S	<u>0.</u>

BAA For Paperwork Reduction Act Notice, see Instructions.

	8 (Rev 1-2011)				Page 2		
If you	are filing for an Additional (Not Automatic) 3-Mo	onth Extensio	n, complete only Part II and check	this box	► X		
Note. Only	y complete Part II if you have already been grant	led an automa	atic 3-month extension on a previou	sly filed Form 8868.			
● If you	are filing for an Automatic 3-Month Extension,	complete only	Part I (on page 1).	-			
Part	Additional (Not Automatic) 3-Month Ex	ctension of	Time. Only file the original (no copies needed).			
	Name of exempt organization			Employer Identification number			
Type or							
print	THE KELLCIE FUND			36-4267581			
Number, street, and room or suite number. If a P.O. box, see instructions.							
File by the extended	NAVIAUX, DUBOW & HARRIS LLC						
due date for filing the	53 WEST JACKSON BLVD. SUITE 7	18					
return See instructions	City, town or post office, state, and ZIP code. For a foreign ad		ions				
	CHICAGO, IL 60604-3747						
Enter the	Return code for the return that this application is	for (file a se	parate application for each return)		04		
Application	on	Return Code	Application Is For		Return Code		
Form 990		01					
Form 990-	BL	02	Form 1041-A		08		
Form 990-	EZ	03	Form 4720		09		
Form 990-	PF	04	Form 5227		10		
Form 990-	T (section 401(a) or 408(a) trust)	05	Form 6069		11		
Form 990-	T (trust other than above)	06	Form 8870		12		
STOP! Do	not complete Part II if you were not already gra	nted an autor	natic 3-month extension on a previ	ously filed Form 8868.			
Teleph If the c If this whole grow	oks are in care of ► PHILIP C. FONTANA none No. ► 847.328.2288 organization does not have an office or place of its for a Group Return, enter the organization's four, check this box ► If it is for part of the	FAX No. business in the bur digit Group	Exemption Number (GEN)	If this	s is for the		
	the extension is for						
	uest an additional 3-month extension of time un			20			
	calendar year 2010, or other tax year beginn				· - ·		
	e tax year entered in line 5 is for less than 12 mg	onths, check r	eason: Initial return	I Final return			
	Change in accounting period	TTTONET	TIME IC NEEDED TO CATU	רם און יישי דאורי	DMATTON		
	e in detail why you need the extension. ADI QUIRED TO PREPARE A COMPLETE AND ADDITIONAL PROPERTY OF THE PROPER						
nonr	s application is for Form 990-BL, 990-PF, 990-T, efundable credits. See instructions.	· · · · · · · · · · · · · · · · · · ·		. 8a\$	0.		
Payn	s application is for Form 990-PF, 990-T, 4720, oinents made. Include any prior year overpayment Form 8868	allowed as a	any refundable credits and estimate credit and any amount paid previou	d tax isly 8b \$	4,666.		
c Bala EFT	nce due. Subtract line 8b from line 8a. Include y PS (Electronic Federal Tax Payment System). Se	e instructions	<u>, ,,, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	. 8c \$	0.		
			d Verification				
Under penaltic correct, and c	es of perjury, I declare that I have examined this form, including a complete, and that I am authorized to prepare this form	accompanying sch	edules and statements, and to the best of my kn	owledge and belief, it is true,			
Signature	Title	<u> </u>		Date >			
BAA		FIF20502L	11/15/10	Form 8868	(Rev 1-2011)		

INTERNAL REVENUE SERVICE W & I - FIELD ASSISTANCE CHICAGO JI 1 0604

AUG 1 5 2011

