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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

2010

Check all that apply	Fo	r cal	endar year 2010, or tax	year beg	inning		, ;	and e	ending			
Name of foundation Section Application	G	Che	ck all that apply	Initial	return	Init	ial return of a fo	rmer	public cha	rity	Final re	turn
Name of foundation Se. 2657180 Se. 2657180 B Telephone number (see page 10 of the instructions) B Telephone number (see page 10 of the instructions) B Telephone number (see page 10 of the instructions) B Telephone number (see page 10 of the instructions) B Telephone number (see page 10 of the instructions) B Telephone number (see page 10 of the instructions) B Telephone number (see page 10 of the instructions) B Telephone number (see page 10 of the instructions) B Telephone number (see page 10 of the instructions) B Telephone number (see page 10 of the instructions) B Telephone number (see page 10 of the instructions) B Telephone number (see page 10 of the instructions) B Telephone number (see page 10 of the instructions) B Telephone number (see page 10 of the instructions) C C C C C C C C C C C C C C C C C C			,,,,	Amer	nded return				· —	-	hange	
Number and street (or P O box number if mail is not delivered to street address) Roomsule B Telephone number (see page 1 of the instructions)	Na	me of	foundation		- 					ΑE	mployer identification nu	mber
Number and street (or P O box number if mail is not delivered to street address) B Telephone number (see page 10 of the instructions)	РΑ	RA F	FAMILY CHARITABLE E	OUNDATI	ON INC						58-2657	190
City or tww, state, and ZiP code DOWNERS GROVE H. Check type of organization Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation Section 4947(a)(1) nonexempt Section 4947						dress	.)		Room/suite	ВТ		
City or tww, state, and ZiP code DOWNERS GROVE H. Check type of organization Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation Section 4947(a)(1) nonexempt chantable trust Other taxable private foundation Section 4947(a)(1) nonexempt Section 4947	14	30 BI	RANDING AVENUE						155		630-795-1	1159
DOWNERS GROVE Check Quality Check Qual								l	100	C If		
H Check type of organization X Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt chartable trust Other taxable private foundation T Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	DC	NW	ERS GROVE			11		605	15	_		
Section 4947(a)(1) nonexempti charitable trust			 	X Secti	on 501(c)(3) exe		private foundat			1		_
Fair market value of all assets at end of year (from Part II, ool (c), interest on some part of year (from Part II, ool (c), interest on source and Expenses (The total of amounts in column (a) (see page 11 of the instructions)									ndation		check here and attach con	nputation ▶
Other (specify)	T	Fair	market value of all asse	ts at end	-I Accounting	meth	nnd 🔽 Cas	h [¬ Accrual			
Interest on savings and temporary cash investments 1.0					Other (s	pecif	(v) —					_
## amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions) 1 Contributions, gifts, grants etc., received (attach schedule) 2 Check ▶ ☒ if the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 a Gross rents 5 b Net rental income or (loss) 6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6 a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10 a Gross sales less returns and allowances 10 a Gross sales less returns and allowances 10 a Gross sales less returns and allowances 11 Cher income (datach schedule) 12 Total. Add lines 1 through 1 RECEIVE		line	16) ▶ \$	106,777	(Part I, column (d) mi	ust be on cash ba	sis)				_
## amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page if of the instructions) books 1	Pa	ırt İ	Analysis of Revenue	and Expe	nses (The total of	T ,	a) Revenue and	Τ				
1 Contributions, gifts, grants, etc., received (attach schedule) 640 2 Check X if the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 4,373 4,373 4,373 4,373 4,373 4,373 4,373 5 A Gross rents 0 0 6 A Net gain or (loss) from sale of assets not on line 10 5 B Gross sales price for all assets on line 6a 0 7 Capital gain net income (from Part IV, line 2) 0 0 8 Net short-term capital gain 0 0 9 Income modifications 0 0 10 a Gross sales less returns and allowances 0 0 0 0 C Gross profit or (loss) (attach schedule) 0 0 0 0 12 Total. Add lines 1 through 1 RECENT 0 0 13 Compensation of officers, directors, frustees, etc 0 0 0 14 Other employee salaries and wages NOV 2 1 20 0 15 Rension plans, employee benefits 0 0 0 16 a Legal fees (attach schedule) 0 0 0 0 0 17 Interest 0 0 0 0 18 Taxes (attach schedule) 0 0 0 0 19 Depreciation (attach schedule) 0 0 0 0 10 0 0 0 0 11 10 10			amounts in columns (b), (c), a	and (d) may n	ot necessarily equal		•	(b	•	ent		
1 Contributions, gifts, grants, etc, received (attach schedule) 2 Check ►[X] if the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 a Gross rents 5 b Net rental income or (loss) 0 0 6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales pince for all assets on line 6a 0 7 Capital gain net income (from Part IV, line 2) 0 Net short-term capital gain 9 Income modifications 10 a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 0 Corporation of officers, directors, trustees, etc 0 O O O O O O O O O O O O O O O O O O O			the amounts in column (a) (se	e page 11 of	the instructions))		books		income		income	
3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5 a Gross rents 5 b Net rental income or (loss) 6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10 a Gross sales less returns and allowances 0 b Less Cost of goods sold 0 c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 1 RECEIVE 0 5,013 4,373 4,373 13 Compensation of officers, directors, trivistees, etc 14 Other employee salaries and wages NOV 2 1 20 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) 17 Interest 18 Taxes (attach schedule) and depletion 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 25 Contributions, gifts, grants paid 26 Contributions, gifts, grants paid 27 Contributions, gifts, grants paid 28 Add Ines 13 through 23 3,643 136 136 3,507		1	Contributions, gifts, grants, e	c , received (attach schedule)		640			-		-
## A Dividends and interest from securities 5 a Gross rents 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		2	Check ►X if the foundatio	n is not requi	red to attach Sch B							
Sa Gross rents Sa G		3	Interest on savings and to	emporary ca	ash investments		4,373	3	4	,373	4,373	
D Net rental income or (loss) 0	<u>e</u>	4	Dividends and interest from	m securitie	s		(<u> </u>		0		
6 a Net gain or (loss) from sale of assets not on line 10		5 :	a Gross rents					<u> </u>		0		
8] 1	•)						
8	Ĭ	6				<u> </u>	(<u> </u>				
8	Š	ا ـ ا	·					-				
9 Income modifications 10 a Gross sales less returns and allowances	ď	_	, -		/, line 2)			—		0		
10 a Gross sales less returns and allowances 0 0 0 0 0 0 0 0 0			• •	n				+			0	· · · · · · · · · · · · · · · · · · ·
b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 1 RECEIVED 5,5,013 4,373 4,373 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages NOV 2 1 20 15 Pension plans, employee benefits 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) 17 Interest 18 Taxes (attach schedule) 18 Taxes (attach schedule) (see page 14 of the instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. 25 Add lines 13 through 23 3,643 136 136 3,507 26 Contributions, gifts, grants paid				-11	1 0		 	╁				
C Gross profit or (loss) (attach schedule)								 				
11			=			+		1	·			
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The state of the professional fees (attach schedule) The person plans, employee benefits The person plans, employee bene			•		RECEIVE	D	5.013	1				
The state of the s	<u></u>	13					9,019			,575	4,575	
b Accounting fees (attach schedule)	Se	14				7 - 1						
b Accounting fees (attach schedule)	ē	15	Pension plans, employee	benefits	MAA A . FA	<u> </u>						-· · ···
b Accounting fees (attach schedule)	×	16		1 7 5	The second second second		III. (0	0	0
C Other professional fees (attach schedule) 0 0 0 0 0 0 0 0 0			b Accounting fees (attach s	chedule)	ogden.l		2,700			100	100	2,600
17 Interest 18 Taxes (attach schedule) (see page 14 of the instructions) 36 36 36 0 19 Depreciation (attach schedule) and depletion 0 0 0 20 Occupancy	.≥	(C Other professional fees (attach sche	dule)]	(0	0	0
18 Taxes (attach schedule) (see page 14 of the instructions) 36 36 36 0 19 Depreciation (attach schedule) and depletion 0 0 0 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 907 0 0 907 24 Total operating and administrative expenses. Add lines 13 through 23 3,643 136 136 3,507 25 Contributions, gifts, grants paid 43,834	tra	17	Interest					ļ				
Depreciation (attach schedule) and depletion Occupancy Travel, conferences, and meetings Printing and publications Other expenses (attach schedule) Total operating and administrative expenses. Add lines 13 through 23 Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25 Total expenses and disbursements. Add lines 24 and 25	nis.	18		_	•	L				36		0
Travel, conferences, and meetings Printing and publications Other expenses (attach schedule) Total operating and administrative expenses. Add lines 13 through 23 Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25 Total expenses and disbursements. Add lines 24 and 25	Ē	19		dule) and c	lepletion		(4		0	0	
Printing and publications Other expenses (attach schedule) Total operating and administrative expenses. Add lines 13 through 23 Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25 Total expenses and disbursements. Add lines 24 and 25	þ	20										
22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 . 3,643 136 136 3,507 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 47,477 136 136 136 137 244	g	21		meetings		-	 	┼				<u> </u>
24 Total operating and administrative expenses. Add lines 13 through 23 . 3,643 136 136 3,507 25 Contributions, gifts, grants paid 43,834 43,834 43,834	a	22	= :	(داریاه محاد				,				
Add lines 13 through 23 . 3,643 136 33,507 Contributions, gifts, grants paid 43,834 43,834 43,834 43,834 43,834	p	24			Avnonces		907	+			0	907
25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25	ati	~~		มอนสนVE	expenses.	1	2 643			136	126	2 507
26 Total expenses and disbursements. Add lines 24 and 25	ĕ	25	•	s paid						130	130	
	ŏ	26			lines 24 and 25	-				126	400	
27 Subtract line 26 from line 12						\vdash	47,477	 		136	136	47,341
a Excess of revenue over expenses and disbursements -42,464					shursemente		-42 464	ī				
b Net investment income (if negative, enter -0-) 4,237			· ·				72,70	1	4	.237		
c Adjusted net income (if negative, enter -0-)					· ·		·				4 237	

For Paperwork Reduction Act Notice, see page 30 of the instructions.

014-15

Form **990-PF** (2010)

SOUTH TO SE SOUTH

Page 2

Part II		Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year	
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash—non-interest-bearing				
	2	Savings and temporary cash investments .	149,241	106,777	106,777	
	3	Accounts receivable 0				
		Less allowance for doubtful accounts	0	0	0	
	4	Pledges receivable 0				
	ŀ	Less allowance for doubtful accounts	0	0	0	
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see page 15 of the		0		
	7	Instructions)	0	0	0	
Assets	'	Other notes and loans receivable (attach schedule)				
	8	Less allowance for doubtful accounts Inventories for sale or use	0	0	0	
SS						
⋖	9	Prepaid expenses and deferred charges	0			
	1	Investments—U.S. and state government obligations (attach schedule) D. Investments—corporate stock (attach schedule)	0	0	0	
		• • • • • • • • • • • • • • • • • • • •	0	0	0	
	11	Investments—corporate bonds (attach schedule)	U	0	0	
	''	Investments—land, buildings, and equipment basis				
	12	Less accumulated depreciation (attach schedule)	0	0	0	
	13	Investments—mortgage loans		-		
	14	Investments—other (attach schedule)	0	0	0	
	'*	Land, buildings, and equipment basis				
	15	Less accumulated depreciation (attach schedule)	0	0	0	
	16	Other assets (describe		0	0	
	10	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	140 241	400 777	400 777	
	17	Accounts payable and accrued expenses	149,241	106,777	106,777	
	18	Grants payable				
es	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	0			
abi	21	Mortgages and other notes payable (attach schedule)	0			
Ξ	22	Other liabilities (describe	0	0		
	23	Total liabilities (add lines 17 through 22)	0		j	
ý		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.				
nces	24	Unrestricted				
<u>a</u>	25	Temporarily restricted				
Ва	26	Permanently restricted		·		
Þ		Foundations that do not follow SFAS 117, check here				
בַּ		and complete lines 27 through 31.				
Net Assets or Fund Bala	27	Capital stock, trust principal, or current funds	149,241	106,777	į	
S	28	Paid-in or capital surplus, or land, bldg , and equipment fund	140,241	100,777		
šet	29	Retained earnings, accumulated income, endowment, or other funds				
ĄŠ	30	Total net assets or fund balances (see page 17 of the			}	
et/		instructions)	149,241	106,777		
ž	31	Total liabilities and net assets/fund balances (see page 17			ł	
		of the instructions)	149,241	106,777		
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances				
1	Total	net assets or fund balances at beginning of year—Part II, column (a), line	30 (must agree with			
		f-year figure reported on prior year's return)	-	_1	149,241	
2	Enter	amount from Part I, line 27a		2	-42,464	
3	Other	increases not included in line 2 (itemize)		3	0	
4 Add lines 1, 2, and 3						
5	Decre	ases not included in line 2 (itemize)		5	<u>106,777</u> 0	
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . 6						

Ρį	art IV Capital Gains an	d Losses for Tax on Investr	nent Inco				
	* *	e kind(s) of property sold (e g , real estate, se, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation		te acquired , day, yr)	(d) Date sold (mo , day, yr)
1a							
þ					-	·	
С							
d							
е							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale			or (loss) minus (g)
а	0	0		0			0
b	0	0		0			0
С	0	0		0			0
d	0	0		0			0
е	0	0		0			0
	Complete only for assets show	ing gain in column (h) and owned by	the foundate	on on 12/31/69		(I) Gains (Col	(h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	• •	ss of col (ı) l (j), ıf any	c		less than -0-) or om col (h))
a	0	0		0			0
b	0	0		0			0
С	0	0		0			0
d	0	0		0	-		0
е	0	0		0			0
2	Capital gain net income or ((net capital loss) { If gain, also If (loss), ent			2		0
3		or (loss) as defined in sections 1 line 8, column (c) (see pages 13	222(5) and	(6)			
	-		and ir oi	}	۱ .		•
Б	instructions) If (loss), enter	ler Section 4940(e) for Redu	T	Alat Income	3		0
W		ne section 4942 tax on the distrib not qualify under section 4940(e)			the bas	e period? [Yes X No
1	Enter the appropriate amo	ount in each column for each yea	r, see page	18 of the instruct	tions be	fore making	any entries.
	(a) Base period years	(b) Adjusted qualifying distributions	Net value	(c) of noncharitable-use as	ssets		(d)
	alendar year (or tax year beginning in 2009	53,32	3	124	,036	(001 (0) 0	vided by col (c)) 0.397826
	2008	42,46			,320		0.337620
	2007	59,22			,796		0.271042
	2006	23,30			,185		0 111924
	2005	44,64			,454		0 202532
	Total of line 1, column (d)		<u> </u>			2	1 280351
		· · · · · · · · · · · · · · · · · · ·	the total or	 Ine 2 by 5 or by		-	1 200331
J		indation has been in existence if				3	0.256070
4	Enter the net value of noncl	haritable-use assets for 2010 fro	m Part X, II	ne 5 .		4	123,696
5	Multiply line 4 by line 3					5	31,675
6	Enter 1% of net investment	income (1% of Part I, line 27b)				6	42
7	Add lines 5 and 6					7	31,717
8	Enter qualifying distribution If line 8 is equal to or greate the Part VI instructions on p	er than line 7, check the box in Pa	 art VI, line '	b, and complete		8 t using a 1%	47,341 % tax rate See

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

4b

								58-2	65719U	P	age o
Pa	rt VII-B Statements Regarding Activiti	es for V	Vhich Form	4720 May Be R	equi	ired (conti	nued)				
5a	During the year did the foundation pay or incur any	y amount t	to			_					
	(1) Carry on propaganda, or otherwise attempt t	o influenc	e legislation (se	ection 4945(e))?			Yes	X No	,		
	(2) Influence the outcome of any specific public	election (see section 49	55), or to carry			_				
	on, directly or indirectly, any voter registratio	n drive?					Yes	X No	,		
	(3) Provide a grant to an individual for travel, still	idy or oth	er sımılar nurn	nses?			Yes	X No	,		
	1.1	•				L	103	<u></u>			
	• •						lvaa l	V No			
			· · -	•			res		'		
	* * * * * * * * * * * * * * * * * * * *			- ·			Yes	X No	,		
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transactio	ns fail to qualify	under the exception	ons de	escribed in					
	Regulations section 53 4945 or in a current notice	regarding	disaster assist	ance (see page 22	of the	e instructions	3)?		5b	N/A	
	Organizations relying on a current notice regarding	g disaster	assistance che	ck here			•				
C	If the answer is "Yes" to question 5a(4), does the f	foundation	claım exempti	on from the							
	tax because it maintained expenditure responsibilit	ty for the o	grant?				Yes	No		1	
	If "Yes," attach the statement required by Regulati	ons sectio	on 53 4945–5(d)							
6a	Did the foundation, during the year, receive any ful	nds, direc	tly or indirectly,	to pay							
	premiums on a personal benefit contract?			. •			Yes	X No	.		
b	Did the foundation, during the year, pay premiums	, directly o	or indirectly, on	a personal benefit	contra	act?		_	6b		X
	If "Yes" to 6b, file Form 8870	•	•	·							
7a	At any time during the tax year, was the foundation	n a party t	o a prohibited t	ax shelter transactı	on?		Yes	X No	.		
						tion?			—	N/A	
							ahly F	Paid F			
		,	,	.,			g, .		թ.оу	000,	
1	VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued) uring the year did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, public election (see section 4955), or to carry on, directly or indirectly, any other registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (3) Provide a grant to an organization of the fina a charitable, etc., organization described in section 599(q1)(1, 2); or section 4940(p(2)? (see page 22 of the instructions) (5) Provide for any purpose other than religious, charitable, etc., organization described in section 599(q1)(1, 2); or section 4940(p(2)? (see page 22 of the instructions) (5) Provide for any purpose of the finan religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (6) Provide for any purpose of the finan religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (7) Yes X No (8) Provide for any purpose of the finan religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (8) Provide for any purpose of for the prevention of cruelty to children or animals? (8) Provide for any purpose of for the prevention of cruelty to religious, charitable, scientific, literary, or educations section 53 4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? (9) Provide for any purpose, or for the prevention of cruelty to religious children or animals? (9) Yes X No (1) All the foundation, during the year, receive any funds, directly or indirectly, to pay reminish or the statement required by Regulations section 53 4945–5(d) (1) All the foundation, during the ye										
		(b) Title,	and average	(c) Compensation	<u> </u>						ınt
	(a) Name and address										
во	B PARA, 1430 BRANDING, STE 155	1			and	a deserred com	pensano				
				0				ol			n
		SECRE		<u> </u>							
				0				ol			O
		TREASI						1			
	WNERS GROVE IL 60515		1	0				ما			0
								1			
			00	0				ol			0
2	Compensation of five highest-paid employ	vees (ot		se included on li	ne 1-	-see page	23 of	the in	structio	ns)	
	If none, enter "NONE."	_ \			- •	3				-,-	
		(b)	Title, and average	T		(d) Contrib	utions to				
(a)	Name and address of each employee paid more than \$50,				on			(, ,		
		de	voted to position			•			otner all	owance:	S
NO	NE					33					
_			C	ool	o			ol			0
						·				-	
				0	o			0			0
		T			\Box						
				00	0			o			0
										_	
			c	00	0			0			0
			0	00	_0			0			0
T - 4	al number of other employees hald over \$50.0	000									

Form 990-PF (2010) PARA FAMILY CHARITABLE FOUNDATION, INC.		58-2657190 Page 7
Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Paid	d Employees,
3 Five highest-paid independent contractors for professional services (see	page 23 of the instructions). If none, enter	er "NONE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		0
		0
		0
		0
		0
Total number of others receiving over \$50,000 for professional services		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant the number of organizations and other beneficiaries served, conferences convened, research p		Expenses
1 <u>N/A</u>	·	-
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see	page 24 of the instructions)	
Describe the two largest program-related investments made by the foundation during the tax yes	ar on lines 1 and 2	Amount
1 <u>N/A</u>		
2		
All other program-related investments See page 24 of the instructions		
3		
•••••		0

Total. Add lines 1 through 3

Form **990-PF** (2010)

0

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	47.7	
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	47,341
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		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	47,341
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 page 26 of the instructions)	5	42
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	47,299
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	e foundation	

qualifies for the section 4940(e) reduction of tax in those years

	Onaleti Batea Meen	, , , , , , , , , , , , , , , , , , ,	(a)	(b)	(c)	(d)
1	Distributable amount for 2010 froline 7	om Part XI,	Corpus	Years prior to 2009	2009	2010 6,143
2	Undistributed income, if any, as	of the end of 2010				0,140
a		0. 0.0 0.10 0. 20.0			0	
	Total for prior years 20,	20 . 20		0		
3	Excess distributions carryover, i					
а		38,884				
b	From 2006	12,925				
c	From 2007	49,673				
c	From 2008	34,647				
e	From 2009	46,693				
f	Total of lines 3a through e		182,822			
4	Qualifying distributions for 2010	from Part				<u> </u>
	XII, line 4 ► \$	47,341				
а	Applied to 2009, but not more th	an line 2a			0	
b	Applied to undistributed income	of prior years				
	(Election required—see page 26	of the instructions)		0		
C	Treated as distributions out of co	orpus (Election				
	required-see page 26 of the ins	structions)	0			
C	Applied to 2010 distributable am	nount				6,143
е	Remaining amount distributed o	ut of corpus	41,198			
5	Excess distributions carryover a	pplied to 2010	0			0
	(If an amount appears in column same amount must be shown in			;		
6	Enter the net total of each colindicated below:	umn as				
а	Corpus Add lines 3f, 4c, and 4e	Subtract line 5	224,020			
b						· · · · · · · · · · · · · · · · ·
	line 4b from line 2b			o		
C	Enter the amount of prior years'	undistributed				
	income for which a notice of def	iciency has				
	been issued, or on which the se	ction 4942(a)				
	tax has been previously assesse	ed				
d	Subtract line 6c from line 6b Ta	xable				
	amount—see page 27 of the ins	tructions		0		
е	Undistributed income for 2009	Subtract line	:			
	4a from line 2a Taxable amount	t—see page 27 of the				
	instructions			· · · · · · · · · · · · · · · · · · ·	0	
f	Undistributed income for 2010 S	Subtract				
	lines 4d and 5 from line 1 This a	amount must				
_	be distributed in 2011					0
7	Amounts treated as distributions					
	corpus to satisfy requirements in					
	section 170(b)(1)(F) or 4942(g)(3	3) (see page 27 of				
_	the instructions)					
8	Excess distributions carryover fr					
	not applied on line 5 or line 7 (se	ee page 27 of the	00.004			
0	instructions)	-4- 2044	38,884			
9	Excess distributions carryove		405 400			
10	Subtract lines 7 and 8 from line	oa	185,136		*	
	Analysis of line 9	42.005				
_	Excess from 2006	12,925			ļ	!
	Excess from 2007	49,673				, i
d		34,647				
_	Excess from 2010	46,693 41,198				
	EA0633 HOIH 2010					_

	n 990-PF (2010) PARA FAMILY CHARITABL rt XIV Private Operating Foundations (s			nd Dort VIII A . au	58-2657	190 Page 10
	If the foundation has received a ruling or determination, and the ruling is effective for 2010, ent	ation letter that it is a	private operating	Nu Fait VII-A, qu	estion 9) I	WA
t	Check box to indicate whether the foundation is a		-	n section	4942(J)(3) or	4942(j)(5)
2 a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum investment return from Part X for each	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
	year listed .	0	0	0	0	0
b	85% of line 2a	0	0	0	0	0
C	Qualifying distributions from Part XII, line 4 for each year listed	0	0	0	0	0
c	Amounts included in line 2c not used directly for active conduct of exempt activities					0
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	0	0	0	0	0
3 a	Complete 3a, b, or c for the alternative test relied upon "Assets" alternative test—enter					7
	(1) Value of all assets					0
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	0	0	0	0	0
c	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)	-				0
	(3) Largest amount of support from an exempt organization					0
	(4) Gross investment income					0
Pa	rt XV Supplementary Information (Cor	nplete this part	only if the four	ndation had \$5,0	000 or more in	
	assets at any time during the year	ar—see page 28	of the instruct	tions.)		
1 a	Information Regarding Foundation Manag List any managers of the foundation who have con before the close of any tax year (but only if they ha	tributed more than 2			he foundation	-
	B PARA		·			
	List any managers of the foundation who own 10% ownership of a partnership or other entity) of which				rtion of the	
<u>N//</u>						
2	Information Regarding Contribution, Gran Check here X if the foundation only makes unsolicited requests for funds. If the foundation ma under other conditions, complete items 2a, b, c, an	contributions to pres	selected charitable o	organizations and do	es not accept ividuals or organization	ons
a	The name, address, and telephone number of the		lications should be a	addressed		
b	The form in which applications should be submitted	d and information and	d materials they sho	ould include		
С	Any submission deadlines	<u> </u>				· · · ·
d	Any restrictions or limitations on awards, such as b factors	y geographical areas	s, charitable fields, l	kinds of institutions, o	or other	

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid Durin	for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	351111341311	
a Paid during the year SEE STATEMENT ATTACHED	or substantial contributor	recipient		43,83
Total		· · · ·	▶ 3a	43,834
b Approved for future payment				
Total	L	1	▶ 3h	

Part XVI-A Analysis of Income-Producing Activ	rities				,
Enter gross amounts unless otherwise indicated	Unrelated bus	iness income	Excluded by section	n 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of
1 Program service revenue				0	the instructions)
a h		0		0	
b		0		0	<u>`</u>
d		0		0	
u A	<u> </u>	0		0	
f		0		0	
g Fees and contracts from government agencies				<u> </u>	<u> </u>
2 Membership dues and assessments					-
3 Interest on savings and temporary cash investments			14	4,373	
4 Dividends and interest from securities				.,	
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property		, ,			
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory				0	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a		0		0	0
b		0		0	
c		0		0	
d		0		0	
e		0			
e		0		4,373	0
e	ulations)				
e		0	Irnosas	4,373	0
e	omplishment	of Exempt P	<u> </u>	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0
e	complishment is reported in colu	of Exempt Pu	/I-A contributed in	4,373 13	0

Form 990-PF (2010) Page 13 PARA FAMILY CHARITABLE FOUNDATION, INC 58-2657190 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described Yes No in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of 1a(1) (2) Other assets . 1a(2) Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements . 1b(4) (5) Loans or loan quarantees . . . 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees. 1c If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements ON/A 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No If "Yes." complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge Sign

Preparer's signature

Firm's address ► 1979 N MILL ST, SUITE 105, NAPERVILLE, IL 60563

Date

11/11/2011

Here

Paid

Preparer

Use Only

Signature of officer or trustee Print/Type preparer's name

JANSEY

► JANSEY & CO, LTD

ROBERT A

Firm's name

P00432233

36-3735172

(630) 355-1551

PTIN

Check If

self-employed

Firm's EIN

Phone no

2010

PART I: ANALYSIS OF REVENUE AND EXPENSES

LINE 1 - CONTRIBUTIONS TO THE FOUNDATION

DESCRIPTION		DONOR	AMOUNT OR FAIR MARKI VALUE	
CASH	VARIOUS DONORS			40
			\$ 64	40

2010

PART I: ANALYSIS OF REVENUE AND EXPENSES

LINES 13-24: OPERATING AND ADMINISTRATIVE EXPENSES

LINE#	DESCRIPTION	EXP	EVENUE AND ENSES BOOKS	IN۱	(b) NET VESTMENT INCOME	(c) DJUSTED T INCOME	(d) SBURSEMENTS OR CHARITABLE PURPOSES
16b	ACCOUNTING FEES						
100	JANSEY & CO., LTD	\$	2,700	\$	100	\$ 100	\$ 2,600
	0/11/0E1 a 00., 215	\$	2,700		100	\$ 100	 2,600
18	TAXES SEC 4940 EXCISE TAXES	\$ \$	36 36	\$	36 36	\$ 36 36	\$
23	OTHER EXPENSES WEBSITE STATE REGISTRATION & FILING FEES AUTO AND TRUCK CREDIT CARD PROCESSING FEES SUPPLIES	\$	168 45 76 565 53	\$	- - - -	\$ - - - -	\$ 168 45 76 565 53
	0011 2120	\$	907	\$	<u> </u>	\$ 	\$ 907

2010

PART XV: SUPPLEMENTARY INFORMATION

LINE 3a: GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT NAME AND ADDRESS	RECIPIENT STATUS	PURPOSE OF GRANT	AMOUNT
MISERICORDIA 6300 N RIDGE, CHICAGO, IL 60660	PUBLIC	FOR ACTIVITIES	25,615
FORT WORTH COUNTRY DAY SCHOOL 4200 COUNTRY DAY LANE, FORT WORTH, TX 76109	PRIVATE	FOR SCHOLARSHIPS	5,750
SUSAN G KOMEN FOUNDATION 8765 W HIGGINS RD, STE 401, CHICAGO, IL 60631	PUBLIC	FOR RESEARCH	5,100
RML SPECIALTY HOSPITAL 5601 SOUTH COUNTY LINE RD, HINSDALE, IL 60521	PUBLIC	FOR ACTIVITIES & PROGRAMS	2,800
CHICAGO IRISH BROTHERHOOD C/O TIMOTHY EGAN, PO BOX 1054, LA GRANGE PARK, IL 60526	PRIVATE	FOR IFSA "I AM ME" BURNCAMP ACTIVITIES	1,000
WARRENVILLE CENACLE 3 S 230 WARREN AVE, WARRENVILLE, IL 60555	PRIVATE	FOR PROGRAMS	709
ST GABRIEL CATHOLIC CHURCH 4522 S WALLACE ST, CHICAGO, IL 60609	PRIVATE	FOR PROGRAMS	600
FLAGS CLUB 552 WEST 47th ST, CHICAGO, IL 60609	PUBLIC	FOR PROGRAMS	500
COMMUNITY HOUSE 415 W 8TH ST, HINSDALE, IL 60521	PUBLIC	FOR PROGRAMS	500
ASSOCIATION OF HORIZON, INC 3712 N BROADWAY, #335, CHICAGO, IL 60613	PUBLIC	FOR PROGRAMS	480
WILLIAM K WARREN FOUNDATION P O BOX 470372, TULSA, OK 74147	PUBLIC	FOR PROGRAMS	250
NOTRE DAME COLLEGE PREP 7655 W DEMPSTER ST, NILES, IL 60714	PRIVATE	FOR SCHOLARSHIPS	200
LEGACY MEMORIAL SCHOLARSHIP FUND c/o THE O'DONNELLS, 9 ENNIS CT, BOLINGBROOK, IL 60440	PRIVATE	FOR SCHOLARSHIPS	180
AMERICAN CANCER SOCIETY 225 N MICHIGAN AVE, CHICAGO, IL 60601	PUBLIC	FOR PROGRAMS	50
AIDS FOUNDATION CHICAGO 200 W JACKSON BLVD, SUITE 2200, CHICAGO, IL 60606	PUBLIC	FOR PROGRAMS	50
DONORSCHOOSE ORG 213 W 35th, 2nd FLOOR EAST, NEW YORK, NY 10001	PUBLIC	FOR PROGRAMS	50
		- -	\$ 43,834

2010

PART VII-A: LINE 8 b

THE STATE OF GEORGIA DOES NOT REQUIRE THE ORGANIZATION TO FILE A COPY OF FORM 990-PF UNLESS REVENUES EXCEED \$25,000

Form 8868

(Rev January 2011)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

▶ File a separate application for each return.

If you are	e filing for an Automatic 3-Month Extensi e filing for an Additional (Not Automatic) oplete Part II unless you have already be	3-Month E	extension, complete only Part II (or	n page 2 of this		▶ X	
a corporation 8868 to require Return for Tenstructions	filing (e-file). You can electronically file Form 990-T), or an addition required to file Form 990-T), or an addition uest an extension of time to file any of the fransfers Associated With Certain Persona.) For more details on the electronic filing o	onal (not a forms listed I Benefit C f this form,	utomatic) 3-month extension of time. d in Part I or Part II with the exception ontracts, which must be sent to the IF visit www.irs.gov/efile and click on	You can electr n of Form 8870 RS in paper for e-file for Charit	onically fi Informat mat (see	le Form ion	
Part I	Automatic 3-Month Extension of T	ime. Onl	y submit original (no copies neede	ed).			
Part I only .						. ▶ 🗌	
All other co	rporations (including 1120-C filers), partnei	ships, REI	MICs, and trusts must use Form 7004	1 to request an	extensior) of	
time to file i	ncome tax returns.						
Type or	Name of exempt organization		Į E	mployer identif	ication nu	mber	
print	PARA FAMILY CHARITABLE FOUNDAT			8-2657190			
File by the	Number, street, and room or sulte no. If a P O	. box, see ir	nstructions.				
due date for	1430 BRANDING AVENUE, Room No. 15	55					
filing your return See	City, town or post office, state, and ZIP code	For a foreigi	n address, see instructions				
instructions	DOWNERS GROVE			IL60) 515		
Enter the R	eturn code for the return that this application	n is for (file	e a separate application for each retu	ırn)		04	
Annilondia		Return	Analisation			Return	
Applicatio	п		Application Is For			Code	
Is For		Code					
Form 990		01	Form 990-T (corporation)			07	
Form 990-l	BL	02	Form 1041-A			08	
Form 990-	EZ	03	Form 4720			09	
Form 990-PF		04	Form 5227			10	
Form 990-T (sec 401(a) or 408(a) trust)		05	Form 6069		11		
Form 990-T (trust other than above)		06	Form 8870			12	
Telephone No. ► 630-795-1159 FAX No ► If the organization does not have an office or place of business in the United States, check this box.							
3a If this	application is for Form 990-BL, 990-PF, 9	90-T, 4720	, or 6069, enter the tentative tax, less	sany			
nonrefundable credits. See instructions.			42				
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and			_				
	nated tax payments made Include any prior			3b	\$		
	nce due. Subtract line 3b from line 3a Incl						
	EFTPS (Electronic Federal Tax Payment System) See instructions 3c \$			42			
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO							
for paymen	t instructions						

LOUÚI 000	o (REV	1-2011)						Page ∠
• if yo	ou are	filing for an Additional (Not Automatic)	3-Month I	Extension, complete only Part II a	nd check t	his bo	x	▶ 🗓
Note.	Only o	complete Part II if you have already been o	granted an	automatic 3-month extension on a	previously	filed F	orm 8	868.
• If yo	ou are	filing for an Automatic 3-Month Extensi	on, comp	lete only Part I (on page 1).				_
Part I		Additional (Not Automatic) 3-Month	Extensio	n of Time. Only file the original	(no copies	need	led).	
Туре о		Name of exempt organization			Employer i			number
print	-	PARA FAMILY CHARITABLE FOUNDAT	ION. INC.		58-265719	7190		
File by the								
extended		1430 BRANDING AVENUE, Room No. 15						
due date for filing your	OF .	City, town or post office, state, and ZIP code.		n address, see instructions				
return See			. o. a to.o.g	ii dadiaaa, aaa iiiataatana	11			60515
instructions	5	DOWNERS GROVE			IL			60515
Enter th	he Re	eturn code for the return that this application	on is for (fil	le a separate application for each re	eturn)			. 04
Applic	ation		Return	Application				Return
Is For			Code	Is For				Code
							- <u>-</u>	ľ
Form 9			01		· · · · · · · · · · · · · · · · · · ·		<u> </u>	
Form 9			02	Form 1041-A				08
Form 9			03	Form 4720				09
Form 9			04	Form 5227				10
		(sec. 401(a) or 408(a) trust)	05	Form 6069				11
		(trust other than above) t complete Part II if you were not already gra	06	Form 8870				12
If the lifthing for the list with the list	e organis is is for the interest of the formal care	anization does not have an office or place or a Group Return, enter the organization's group, check this box	s four digit If it is for p sion is for. e until eginning 2 months,	t Group Exemption Number (GEN) part of the group, check this box	ending Fina	l retur	If	this is and attach a
<u>r</u>	onre	application is for Form 990-BL, 990-PF, 99 fundable credits. See instructions.			ss any	8a	\$	42
		application is for Form 990-PF, 990-T, 472		•		.		
		ited tax payments made. Include any prior	r year over	payment allowed as a credit and ar	ny	نسننا		
a	mou	nt paid previously with Form 8868.				8b	\$	42
		ce due. Subtract line 8b from line 8a. Incl S (Electronic Federal Tax Payment Syster			y using	8c	\$	0
				and Verification			•	_
		of perjury, I declare that I have examined this form, inc. and complete, and that I am authorized to prepare this	luding accom		best of my kn	owledge	and bel	ief,
Cianatura		Of for F	Fills & A.	D. A.	-	\ ~		450044
agnature		Il E. Gyran :	Title ► C.I	т.н.		ate 🕨		/15/2011
	//	u				Forn	n 8868	B (Rev 1-2011)