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990-PF

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

OMB No 1545-0052

2010

Treated as a Private Foundation Department of the Treasury Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements Internal Revenue Service For calendar year 2010, or tax year beginning 07/01/10, and ending 06/30/11Initial return of a former public charity Final return Initial return G Check all that apply Address change Amended return Name change A Employer Identification number Name of foundation ARNOLD SIMONSEN FAMILY CHARITABLE 26-1624741 FOUNDATION, INC Telephone number (see page 10 of the instructions) Number and street (or P O box number if mail is not delivered to street address) Room/suite P.O. BOX 5139 If exemption application is pending, check here D 1. Foreign organizations, check here City or town, state, and ZIP code IL 60089 **BUFFALO GROVE** 2. Foreign organizations meeting the H Check type of organization |X| Section 501(c)(3) exempt private foundation 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Cash X Accrual J Accounting method Fair market value of all assets at end of year (from Part II, col (c), Other (specify) If the foundation is in a 60-month termination under section 507(b)(1)(B), check here 2,359,323 (Part I, column (d) must be on cash basis) line 16) ▶ \$ Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (d) Disbursements (b) Net investment (c) Adjusted net for charitable expenses per amounts in columns (b), (c), and (d) may not necessarily equal purposes books ıncome income the amounts in column (a) (see page 11 of the instructions)) (cash basis only) 755,000 1 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ▶ If the foundation is **not** required to attach Sch B 24,173 24,173 Interest on savings and temporary cash investments 3 Dividends and interest from securities 41,054 41,054 4 5a Gross rents b Net rental income or (loss) 15,434 6a Net gain or (loss) from sale of assets not on line 10 610,818 Gross sales price for all assets on line 6a 15,434 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns & allowances Less: Cost of goods sold h Gross profit or (loss) (attach schedule) Stmt 1 48 48 11 Other income (attach schedule) 835,709 80,709 0 Total. Add lines 1 through 11 Compensation of officers, directors, trustees, etc 13 14 Other employee salaries and wages 15 Pension plans, employee benefits 384 See Stmt 2 384 Legal fees (attach schedule) Stmt 3 4,910 4,910 Accounting fees (attach schedule) Other professional fees (attach schedule) c RECEIVED 17 Interest 70 Taxes (attach schedule) (see page 14 of the instructions) Stmt 4 1,366 18 80 5, I VON 2011 Depreciation (attach schedule) and depletion Ċ Occupancy 20 21 Travel, conferences, and meetings N. 115 Printing and publications 22 12,206 Stmt 5 12,206 Other expenses (att sch) Total operating and administrative expenses. 18,866 17,570 0 Add lines 13 through 23 46,000 46,000 25 Contributions, gifts, grants paid 17,570 0 64,866 46,000 Total expenses and disbursements. Add lines 24 and 25 26

770,843

63,139

Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)

Subtract line 26 from line 12

0

27

Fc	rm 990	PPF (2010) ARNOLD SIMONSEN FAMILY CHARITABLE	26-162474	1	Page 2
	Marine I	Palance Sheets Attached schedules and amounts in the description column	Beginning of year	End of	f year
	Part I	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
П	1	Cash—non-interest-bearing	97,310	220,720	220,720
ı	2	Savings and temporary cash investments			
	3	Accounts receivable		, , , , , ,	
	_	Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			<u> </u>
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see page 15 of the			
		instructions)]		
	7	Other notes and loans receivable (att schedule)			7
	•	Less allowance for doubtful accounts ▶ 0		Ī	
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			-
Š	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) See Stmt 6	1,365,663	1,972,248	2,138,603
	C	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis			······································
	• • •	Less accumulated depreciation (attach sch)			
	12	Investments—mortgage loans		~~~	
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis			······································
		Less accumulated depreciation (attach sch)		Ī	
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers—see the			
	10	instructions Also, see page 1, item I)	1,462,973	2,192,968	2,359,323
-	17	Accounts payable and accrued expenses	31,000	1,816	······
	18	Grants payable			
Liabilities	19	Deferred revenue			
Ξ	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable (attach schedule)			
Ë	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	31,000	1,816	
\dashv		Foundations that follow SFAS 117, check here	32,330		
'n		and complete lines 24 through 26 and lines 30 and 31.			
ë	24	Unrestricted	i i		
an	25	Temporarily restricted			
Net Assets or Fund Balances	26	Permanently restricted			
p	20	Foundations that do not follow SFAS 117, check here ▶ X			
п		and complete lines 27 through 31.			
ī	27	Capital stock, trust principal, or current funds			
0	20	Paid-in or capital surplus, or land, bldg , and equipment fund			
ets	28 29	Retained earnings, accumulated income, endowment, or other funds	1,431,973	2,191,152	
SS	30	Total net assets or fund balances (see page 17 of the		-,,	
t A	30	instructions)	1,431,973	2,191,152	
Ž	31	Total liabilities and net assets/fund balances (see page 17			
	3'		1,462,973	2,192,968	
_	Part I	of the instructions) Analysis of Changes in Net Assets or Fund Balances			·
		net assets or fund balances at beginning of year—Part II, column (a), line 30 (must a	agree with		
'		of year figure reported on prior year's return)	-g. 00 mill	1	1,431,973
-		r amount from Part I, line 27a		2	770,843
		r increases not included in line 2 (itemize) ▶		3	
		lines 1, 2, and 3		4	2,202,816
		eases not included in line 2 (itemize) See Statement 7		5	11,664
		net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), I	line 30	6	2,191,152
		The second of the second of the second of the second secon			

Part IV Capital Gains and	Losses for Tax on Investmen	Income				
	ne kind(s) of property sold (e g , real estate, use, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date a (mo , da		(d) Date sold (mo , day, yr)
1a DETAIL AVAIL ON F	REQUEST		P	Vario	ous	Various
b DETAIL AVAIL ON F	REQUEST		P	Vario	ous	Various
С						
d	.					
θ				· · · · · · · · · · · ·	4.50	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale			ı or (loss)) mınus (g)
a 57,344			48,351			8,993
ь 553,474			547,033			6,441
С						
<u>d</u>						
Complete only for agents showing go	in in column (h) and owned by the found	ation on 12/31/69				
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	s of col (ı) (j), ıf any	col (k), but not	(h) gain minus less than -0-) or om col (h))
a						8,993
b						6,441
С						····
d						
θ	If gain, also enter in Pa	et Line 7			-	
2 Capital gain net income or (net capital	If (loss), enter -0- in Pa	b		2		15,434
3 Net short-term capital gain or (loss) a	<u> </u>	,		_		
· -	umn (c) (see pages 13 and 17 of the inst	ructions)				
If (loss), enter -0- in Part I, line 8	<u> </u>			3		6,441
Part V Qualification Unde	er Section 4940(e) for Reduced	d Tax on Net II	nvestment Incor	ne		
(For optional use by domestic private four	ndations subject to the section 4940(a) to	ax on net investme	nt income)			
If section 4940(d)(2) applies, leave this pa	art blank					
Was the foundation liable for the section			e period?			Yes X No
If "Yes," the foundation does not qualify u						
1 Enter the appropriate amount in each	column for each year, see page 18 of th	e instructions beto		<u> </u>		(d)
Base period years	(b) Adjusted qualifying distributions	Net value	(c) of noncharitable-use ass	ets		ribution ratio
Calendar year (or tax year beginning in) 2009	31,	000	616,	446	(00) (0)	0.050288
2008	31,		595,			0.052050
2007	5,	000	567,	666		0.008808
2006						
2005						
						0 111146
2 Total of line 1, column (d)	and the total on the Control on the	hE. on h the		2		0.111146
3 Average distribution ratio for the 5-ye number of years the foundation has be		by 5, or by the		3		0.037049
number of years the foundation has t	been in existence in less than 5 years			<u>-</u>	†··	0.037013
4 Enter the net value of noncharitable-i	use assets for 2010 from Part X, line 5			4	Ì	1,844,280
	,					
5 Multiply line 4 by line 3				5		68,329
6 Enter 1% of net investment income (1% of Part I, line 27b)			6	1	631
				_		60 060
7 Add lines 5 and 6				7	 -	68,960
8 Enter qualifying distributions from Pa				8		46,000
If line 8 is equal to or greater than line	e 7, check the box in Part VI, line 1b, and	I complete that par	t using a 1% tax rate	See the		

Form 990-PF (2010)

	real and a fig	FAMILY CHARITAE		L624/41			Pa	ge 6
P		ctivities for Which Form	4720 May Be R	<u>equired (conti</u>	nued)	············		
5a	During the year did the foundation pay or incur	•		النبا	<u> </u>		1	
	(1) Carry on propaganda, or otherwise attempt	- ,		□,	Yes X No		I	
	(2) Influence the outcome of any specific public	election (see section 4955), or to	carry on,	_	-		1	
	directly or indirectly, any voter registration d	rive?			Yes X No		I	
	(3) Provide a grant to an individual for travel, st	• • • • • • • • • • • • • • • • • • • •		□ '	Yes X No		I	
	(4) Provide a grant to an organization other that	· · · · · · · · · · · · · · · · · · ·			(22)		1	
	section 509(a)(1), (2), or (3), or section 494		•	□'	Yes X No			
	(5) Provide for any purpose other than religious	•	educational		(₹9)		1	
	purposes, or for the prevention of cruelty to				Yes X No		1	
Ь	If any answer is "Yes" to 5a(1)–(5), did any of the				37/3		ŧ	
	Regulations section 53 4945 or in a current noti	• •		nstructions)?	N/A	5b	-	
	Organizations relying on a current notice regard						1	
C	If the answer is "Yes" to question 5a(4), does the		n the tax	NT / N	. 🗆		I	
	because it maintained expenditure responsibility	·		N/A 🗌	Yes No		I	
_	If "Yes," attach the statement required by Regul						Í	
6a	Did the foundation, during the year, receive any	runds, directly or indirectly, to pay	premiums	┌ .	, []		1	
	on a personal benefit contract?	diseasely as a second			Yes X No		ŧ	v
b	Did the foundation, during the year, pay premiui	ms, directly or indirectly, on a pers	onal benefit contract	(V		6b		<u>X</u>
_	If "Yes" to 6b, file Form 8870			.	, , , , , , , , , , , , , , , , , , ,		1	
	At any time during the tax year, was the foundar	• •			Yes X No N/A		1	
	If Yes, did the foundation receive any proceeds					7b	L	
Pa	Information About Officer	s, Directors, Trustees, Fo	undation Mana	igers, migrily i	-aid Employe	55,		
4 1	and Contractors ist all officers, directors, trustees, foundation	managers and their compensa	tion (see page 22 o	of the instructions	<u> </u>			—
, ,	list all officers, directors, trustees, foundation	i managers and their compensa	lion (see page 22 o		(d) Contributions to	γ		—
	(a) Name and addres	•	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	employee benefit	(e) Exp	ense acc	ount,
	(a) Name and address	•	devoted to position	-0-)	plans and deferred compensation	other	allowand	es
	NOLD J SIMONSEN	LONGBOAT KEY	DIR/PRES					—
	30 GRAND BAY BLVD, UNIT 366	FL 34228	5.00					0
	NJAMIN A HURWITZ	BUFFALO GROVE	DIR/VP/TREAS	<u> </u>	<u> </u>			
	90 BRANDYWYN LANE	IL 60089	5.00	١ .				0
	ARON BRENNAN	WINFIELD	DIR/VP/SEC	<u> </u>		ļ		<u> </u>
	599 AUGUSTA COURT	IL 60190	5.00	١ .				0
	333 110000111 000112							<u> </u>
-	Compensation of five highest-paid employed	es (other than those included or	line 1 — see page	23 of the instruc	tions).			
~	If none, enter "NONE."	150						
			(b) Title, and average		(d) Contributions to			
	(a) Name and address of each employee pa	id more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred		ense acc allowanc	
			devoted to position		compensation	Outer	allowalio	
NC	NE							_
						l		
					<u> </u>			
						<u></u>		
				<u> </u>				
Γota	I number of other employees paid over \$50,000		_			▶		0
					Fo	rm 99 0)-PF (2010)

Form 990-PF (2010	ARNOLD SIMONSEN FAMILY CHARITABLE	26-1624741	Page 7
	nformation About Officers, Directors, Trustees, Foundat and Contractors (continued)	ion Managers, Highly Paid Empl	oyees,
	-paid independent contractors for professional services (see page 23 o	f the instructions). If none, enter "NONE.	11
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
Total number of oth	ners receiving over \$50,000 for professional services	***	
Part IX-A	Summary of Direct Charitable Activities		
List the foundation's organizations and of	four largest direct charitable activities during the tax year. Include relevant statistical info	ormation such as the number of	Expenses
1 N/A			
2			-
3			
4		,	
	Company Deleted Investments (see page 2)	A of the instructions)	<u> </u>
Part IX-B	Summary of Program-Related Investments (see page 24 gest program-related investments made by the foundation during the tax year on lines 1		Amount
1 N/A	gest program-related investments indue by the roundation during the tax year en inces		Amount
2			
All other program-re	lated investments. See page 24 of the instructions		
•			

Total. Add lines 1 through 3

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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)

Adjusted qualifying distributions. Subtract line 5 from line 4

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

Form 990-PF (2010)

4

5

6

46,000

46,000

Excess from 2010

NONE

Form 990-PF (2010) ARNOLD SIMONSEN FAMILY CHARITABLE 26-1624741 Page 11 Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor Paid during the year LUPUS FOUNDATION CHARITABLE 2,000 20 E JACKSON CHICAGO IL 60604 RAINBOW HOUSE 20 E JACKSON CHARITABLE 5,000 CHICAGO IL 60604 RESTORATION URB MINISTRY CHARITABLE 15,000 1213 PARKLAND CHAMPAIGN IL 61826 SARASOTA OPERA CHARITABLE 20,000 61 N PINEAPPLE SARASOTA FL 34236 SAVE ABANDONED BABIES CHARITABLE 2,000 55 E ERIE CHICAGO IL 60611 WEST DUPAGE REC CHARITABLE 2,000 116 N SCHMALE CAROL STREAM IL 60188 46,000 ▶ 3a Total **b** Approved for future payment N/A

3b

Total

Part XVI-	A Analysis of Income-Producing Ac	tivities		_		
Enter gross an	nounts unless otherwise indicated		d business income	Exclude	d by section 512, 513, or 514	(e)
_		(0)	(h)	(c)	(4)	Related or exempt
		(a) Business code	(b) Amount	Exclusion	(d) Amount	function income (See page 28 of
1 Program s	ervice revenue	_		code		the instructions)
a						
				1		
		-				
f				_		
g Fees	and contracts from government agencies			_		· · · · · ·
_	ip dues and assessments	•				
	savings and temporary cash investments		·		-	24,173
	and interest from securities					41,054
	income or (loss) from real estate			1	_	
	inanced property			 		
		•		 	'	 .
	bt-financed property			 		
	income or (loss) from personal property			 		48
	stment income			 -	·	
•	ss) from sales of assets other than inventory			 		15,434
	e or (loss) from special events	-		 		
	it or (loss) from sales of inventory			 		
11 Other reve	nue a	-		 _	,	
b		-		ļ. —		
c		_		 		
d		_	<u></u>			
θ		_				
12 Subtotal A	Add columns (b), (d), and (e)		0		0	80,709
13 Total. Add	line 12, columns (b), (d), and (e)				13	80,709
(See workshee	et in line 13 instructions on page 29 to verify calculation	ns)				
Part XVI-I	Relationship of Activities to the A	ccomplishme	ent of Exempt Pเ	irposes	S	
Line No.	Explain below how each activity for which income	is reported in col	umn (e) of Part XVI-A	contribute	ed importantly to the	
▼	accomplishment of the foundation's exempt purpo	ses (other than b	y providing funds for s	uch purpo	oses) (See page 29 of	the
	instructions)					
N/A						
			** 			· · · · · · · · · · · · · · · · · · ·
		_				
	 					
						
						
	 					
	 					
	 		 _			
	 					
	<u> </u>					
		·				
						

Part X	•	mation Regariza	_	insfers To and	Transaction	ns and Relatio	nships With	n Noncharitable			
1 Did				ın any of the follow	ing with any oth	er organization des	scribed			Yes	No
	-			501(c)(3) organiza							
	inizations?	,			,	3	,		ļ		
- 0		reporting founds	ation to a non	charitable exempt	organization of						i
	Cash	. op og .ouu.		onamas onompt	o.ga,,,,a				1a(1)		X
	Other assets								1a(2)		X
• •	er transactions								(_/		
-		to a acadhasta	hla avamnt a	raanization					1b(1)	1 1	X
		to a noncharita	•	-				ľ			X
				xempt organization				ľ	1b(2)	_	X
		ies, equipment,		:15				ľ	1b(3)		X
• •		it arrangements						ľ	1b(4)		X
• •	Loans or loan g	•		£				ı	1b(5)		$\frac{\mathbf{x}}{\mathbf{x}}$
٠.			•	fundraising solicitat					1b(6)		X
	•	• •	•	er assets, or paid e	• •	(b) about distance	- b	1 1	1c		
	•			lete the following so							
				en by the reporting							
			T	, show in column (c	•						
(a) Line	e no (b) A	mount involved	(c) Name	of nonchantable exem	pt organization	(d) Descripti	on of transfers, tra	nsactions, and sharing a	rrange	ments	
N/A			-								
				-							
											
							 				
							 	 			
					·						
										-	
						·					
2a Is th	e foundation di	rectly or indirect	lv affiliated w	ith, or related to, or	ne or more tax-ex	empt organization	s				
		•	•	nan section 501(c)(ſ	٦ ٧	es X	No
		he following sch			-,, o occ				٠. ر		,
<u> </u>		of organization	cadic	(b) Type of o	rganization		(c) Descript	tion of relationship			
N/A								<u>'</u>			
	-										
		***		l							
		•									
							···				
			45-416		ludina nac			host of my learning		·	
	Under penalties of belief, it is true.	nt perjury, I declare or ect) and comple	that I have exacte Declaration	amined this return, inc of preparer (other tha	luding accompanyi n taxpayer or fiduc	ng schedules and star ary) is based on all in	tements, and to the formation of which	e best of my knowledge a preparer has any knowl	ina edge		
Sign		- XX			1 14	R U	N DDFC	IDENT			
Here	Signature of	officer or trustee	-		Date	9-11	Title	IDENI			
		' 					- IIUG		$\overline{}$		
	Print/Type prej	parersyname			Preparer's signa	lure		Date		Check	ır
Paid		<u> </u>						11/00	/	self-em	ployed
•	BENJAMIN			£!_]]	BENJAMIN	HUKWITZ	ı	11/08		0.4.7	
Jse Only	Firm's name			nfield LI						941	
	Firm's address			Day Road,				Firm's EIN ► 36-			
	I	Buffa	ilo Gro	ve, IL 6	0089-88(0		Phone no 847	- 94	T = 0	T00

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

Department of the Treasury Internal Revenue Service Name of the organization

ARNOLD SIMONSEN FAMILY CHARITABLE

For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule of Contributors

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

OMB No 1545-0047

2010

Employer identification number

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

FOUNDATION, INC 26-1624741 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 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. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Page 1 of 1 of Part I

Name of organization
ARNOLD SIMONSEN FAMILY CHARITABLE

Employer identification number 26-1624741

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ARNOLD J. SIMONSEN P.O. BOX 5139 BUFFALO GROVE IL 60089	s 755,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d) Type of contribution
No.	Name, address, and ZIP + 4	Aggregate contributions	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$ ·	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

11/8/2011 1:24 PM. 4 Adjusted Net Charitable Charitable Charitable Purpose Purpose Purpose Income 48 Net Investment Adjusted Net Adjusted Net Adjusted Net Income Statement 3 - Form 990-PF, Part I, Line 16b - Accounting Fees Statement 1 - Form 990-PF, Part I, Line 11 - Other Income Statement 2 - Form 990-PF, Part I, Line 16a - Legal Fees Statement 4 - Form 990-PF, Part I, Line 18 - Taxes 384 384 4,910 4,910 48 Revenue per Investment Investment Investment Federal Statements Books Š 1,296 1,366 384 384 4,910 4,910 Total Total Total S2057 ARNOLD SIMONSEN FAMILY CHARITABLE Description Description Description Description ACCOUNTING FEES FEDERAL TAXES FYE: 6/30/2011 OTHER INCOME Total Total LEGAL FEES Total Total 26-1624741 USER FEES

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11/8/2011 1:24 PM.		Charitable Purpose	w w		ဟ
	r Expenses	Adjusted			
Federal Statements	Part I, Line 23 - Othe	Net Investment	\$ 12,206		
CHARITABLE Federal	Statement 5 - Form 990-PF, Part I, Line 23 - Other Expenses	Total	\$ 12,206 \$ 12,206		
S2057 ARNOLD SIMONSEN FAMILY CHARITABLE 26-1624741 FYE: 6/30/2011	571	Description	Expenses ADMINISTRATIVE EXPENSE Total		

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S2057 ARNOLD SIMONSEN FAMILY CHARITABLE Federal Statements

26-1624741 FYE: 6/30/2011

Statement 6 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Description	STH 3RD BANK Total
Beginning of Year	\$ 1,365,663 \$ 1,365,663
End of Year	\$ 1,972,248 \$ 1,972,248
Basis of Valuation	
Fair Market Value	\$ 2,138,603

'S2057' ARNOLD SIMONSEN FAMILY CHARITABLE
'26-1624741 Federal Statements

FYE: 6/30/2011

Statement 7 - Form 990-PF, Part III, Line 5 - Other Decreases

Description	Amount	_
CUMULATIVE MARKET ADJUSTMENT	\$11,66	4
Total	\$11,66	4

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11/8/2011 1:24 PM. City, State, Zip Statement 8 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors BUFFALO GROVE IL 60089 S2057 ARNOLD SIMONSEN FAMILY CHARITABLE Federal Statements Address P.O. BOX 5139 Name ARNOLD SIMONSEN FYE: 6/30/2011

\$2057 ARNOLD SIMONSEN FAMILY CHARITABLE
26-1624741 Federal Statements

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FYE: 6/30/2011

Statement 9 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents

	Description	
REQUESTS SHO	OULD BE IN WRITING AND INCLUDE APPLICABLE INFORMATION	
	Form 990-PF, Part XV, Line 2c - Submission Deadlines	
	Description	
NONE		
	Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations	
	Description	
NONE		