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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

2011

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 2011, or tax year beginning , 2011, and ending Employer identification number Name of foundation 23-7025589 The Allyn Foundation, Inc. Number and street (or P O box number if mail is not delivered to street address) Telephone number (see the instructions) (978) 887-2464 Room/suite R 1420 Sheridan Road City or town State ZIP code C Wilmette IL 60091 If exemption application is pending, check here G Check all that apply Initial return Initial Return of a former public charity D 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check Address change Name change here and attach computation н Check type of organization: X Section 501(c)(3) exempt private foundation 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 Fair market value of all assets at end of year Accounting method: X Cash J (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination **►** \$ (Part I, column (d) must be on cash basis) 4,877,434. under section 507(b)(1)(B), check here Part I Analysis of Revenue and (a) Revenue and (c) Adjusted net (b) Net investment (d) Disbursements Expenses (The total of amounts in expenses per books income ıncome for charitable columns (b), (c), and (d) may not necespurposes sarily equal the amounts in column (a) (cash basis only) (see instructions).) 0. Contributions, gifts, grants, etc, received (att sch) 2 Ck ► X if the foundn is not req to att Sch B Interest on savings and temporary 39 cash investments 39 39 159,435. 159,435. 159,435.Dividends and interest from securities 5a Gross rents 0. O 0. b Net rental income or (loss) O 0 6a Net gain/(loss) from sale of assets not on line 10 REVENU b Gross sales price for all assets on line 6a 39,464 Capital gain net income (from Part IV, line 2) Net short-term capital gain 0 Income modifications Ó. 10 a Gross sales less returns and allowances 0 **b** Less Cost of goods sold 0. c Gross profit/(loss) (att sch) 0 0 0. 11 Other income (attach schedule) NONE 0 12 Total. Add lines 1 through 11 159,474. 198,938. 159,474. Ō. 13 Compensation of officers, directors, trustees, etc. Ō. Ο. Ö. 14 Other employee salaries and wages 0. 0. 0. 0. 0. 15 Pension plans, employee benefits 0. 0. 0. 8 16a Legal fees (attach schedule) . . . 0. 0. 0. 0. ADMINISTRATIVE **b** Accounting fees (attach sch) 0. 0. 0 0. 568 568<u>.</u> c Other prof fees (attach sch) . L-16c Stmt 0. 0 OPERAT 17 Interest Taxes (attach schedule)(see instrs) See Line 18 Stm 2,353 128 128 0. Depreciation (attach n O O sch) and depletion Ō. 20 Occupancy Ō. Ö. 0. Ō. 21 Travel, conferences, and meetings 0. 0. Ω. Printing and publications <u>399.</u> 399. 399. EXPERSES 0. 23 Other expenses (attach schedule) See Line 23 Stmt 572. 286. 286 286. Total operating and administrative expenses. Add lines 13 through 23 3,892 813. 813 854. Contributions, gifts, grants paid 235,000. 235,000. Total expenses and disbursements. Add lines 24 and 25 238,892 813 813 235,854. Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements -79,418198,125 **b** Net investment income (if negative, enter -0-) 158,661 C Adjusted net income (if negative, enter -0-)

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Page 2

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End of	year	
Pari	. !! _ ! !	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing	0.	4,320.	4,320.
	2	Savings and temporary cash investments	63,379.	32,702.	32,702.
	3	Accounts receivable 0.			
		Less: allowance for doubtful accounts	0.	0.	0.
	4	Pledges receivable O.			
		Less. allowance for doubtful accounts 0.	0.	0.	0.
	5	Grants receivable .	0.	0.	0.
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)	0.	0.	0.
Δ	7	Other notes and loans receivable (attach sch)			
ŝ	_	Less. allowance for doubtful accounts0.	0.	0.	0.
A S S E T	8	Inventories for sale or use	0.	0.	0.
	9	Prepaid expenses and deferred charges	0.	0.	0.
S	10 a	Investments – US and state government obligations (attach schedule)	0.	ا ۱	0
		Investments — corporate stock (attach schedule) L-10b Stmt	1,005,733.	992,136.	0. 3,266,927.
		: Investments — corporate stock (attach schedule) L-10c Stmt	1,345,000.	1,345,000.	1,573,485.
	11		1,343,000.	1,343,000.	1,373,403.
	''	equipment. basis			•
		Less, accumulated depreciation			
		(attach schedule)	0.	0.	0.
	12	Investments – mortgage loans	0.	0.	0.
	13	Investments — other (attach schedule)	0.	0.	0.
	14	Land, buildings, and equipment: basis ►0.			
		Less accumulated depreciation (attach schedule) • 0.	0.	0.	0.
	15	Other assets (describe	0.	0.	0.
		Total assets (to be completed by all filers — see the instructions Also, see page 1, item I)	2,414,112.	2,374,158.	4,877,434.
Ļ	17	Accounts payable and accrued expenses	0.	0.	
I A	18	Grants payable	0.	0.	
B	19	Deferred revenue	0.	0.	
Ł	20	Loans from officers, directors, trustees, & other disqualified persons	0.	0.	
Ī	21	Mortgages and other notes payable (attach schedule)	0.	0.	
i.	22	Other liabilities (describe	0.	0.	
E S	23	Total liabilities (add lines 17 through 22)			
	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here	0.	0.	
	1	and complete lines 24 through 26 and lines 30 and 31.			
N F E U	24	Unrestricted .			
T N	25	Temporarily restricted			
A D	26	•			
A S B S A E L		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
EL	₁ 27	Capital stock, trust principal, or current funds .	2,414,112.	2,374,158.	
SN	,28	Paid-in or capital surplus, or land, building, and equipment fund .	0.	0.	
O E	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
RS	30	Total net assets or fund balances (see instructions)	2,414,112.	2,374,158.	
	31	Total liabilities and net assets/fund balances (see instructions)	2 414 112	2 274 150	
Par	111	Analysis of Changes in Net Assets or Fund Balanc	2,414,112.	2,374,158.	· · · · · · · · · · · · · · · · · · ·
			*		
1	end-	net assets or fund balances at beginning of year — Part II, colun of-year figure reported on prior year's return)	nn (a), line 30 (must agre	e with	2,414,112.
2		r amount from Part I, line 27a		2	-79,418.
		increases not included in line 2 (itemize)	of securities	3	39,464.
		lines 1, 2, and 3			2,374,158.
5		ases not included in line 2 (itemize)	•	5	_, _, _, _, _,
6	Total	net assets or fund balances at end of year (line 4 minus line 5)	– Part II, column (b). line		2,374,158.

Par		osses for Tax on Investment	·				(4)
	(a) List and describe 2-story brick warehous	the kind(s) of property sold (e g , re e, or common stock, 200 shares ML(al estate, C Company)	(b) How acc P — Purch D — Dona	nase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a	2480 SHS TELEFONOS	DE MEXICO SA COMMON		D		12/08/93	11/22/11
t	APARTMENT INVESTMEN	T & MGMT CAP GAIN DIST	RIB	D		12/08/93	11/30/11
	VANGUARD LT INVEST	GRADE BOND FUND CAP GA	IN DISTRIB	P	_	07/01/89	12/29/11
	<u> </u>						
				<u></u>			<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa	le		(h) Gain or (e) plus (f) m	inus (g)
			1	3,597.			24,445.
t				0.			2,327.
	12,692.			0.			12,692.
	<u> </u>						
	i,	ng gain in column (h) and owned by	the foundation on 12/21/60				
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a		ç th	(1) Gains (Col gain minus column (an -0-) o r Losses (f	k), but not less
							24,445.
							2,327.
							12,692.
	d						
	e <u>'</u>						-
2	Capital gain net income or (net	capital loss)	enter in Part I, line 7 er -0- in Part I, line 7	•	2		39,464.
3	Net short-term capital gain or (le	oss) as defined in sections 1222(5) a	and (6).				
	If gain, also enter in Part I, line in Part I, line	8, column (c) (see instructions) If (i	loss), enter -0-	-	3		
Pai	rt V Qualification Under	Section 4940(e) for Reduce	d Tax on Net Investm	ent Inco	me		-
Was	es,' the foundation does not quali	is part blank. Ion 4942 tax on the distributable amount fy under section 4940(e). Do not com I each column for each year; see the	plete this part			Yes	X No
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as			(d) Distribution umn (b) divided	n ratio by column (c))
		215 020					
$\frac{}{}$	2010 2009	215,830. 190,806.		0,886.	-	 -	0.048601
	2009	233,526.		2,858.			0.048516
	2007	280,773.		2,301. 5,245.			0.049662 0.049386
	2006	261,789.		8,700.			0.048762
	Total of line 1, column (d)				2		0.244927
3	Average distribution ratio for the	e 5-year base period — divide the toth has been in existence if less than 5	al on line 2 by 5, or by the				
			•		3_		0.048985
4	Enter the net value of noncharit	able-use assets for 2011 from Part)	(, line 5	•	4		4,808,555.
5	Multiply line 4 by line 3				5		235,547.
6	Enter 1% of net investment inco	ome (1% of Part I, line 27b)			6		1,981.
7	Add lines 5 and 6				7		237,528.
8	Enter qualifying distributions fro	om Part XII, line 4			8		235,854.
	If line 8 is equal to or greater the Part VI instructions	an line 7, check the box in Part VI, I	ine 1b, and complete that [part using a	a 1%	tax rate. See the	е

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Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instru	ıctions)			
1 a	Exempt operating foundations described in section 4940(d)(2), check here				
	Date of ruling or determination letter (attach copy of letter if necessary — see instrs)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			3, 9	<u>963.</u>
	check here ▶ and enter 1% of Part I, line 27b				
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)				
•	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				
2	foundations only Others enter -0-) . 2				0.
3	Add lines 1 and 2			3,9	963.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			3,9	963.
6	Credits/Payments				
	2011 estimated tax pmts and 2010 overpayment credited to 2011 6a 3, 477.				
b	Exempt foreign organizations — tax withheld at source 6b 0.				j
c	Tax paid with application for extension of time to file (Form 8868) 6c 0.				
	Backup withholding erroneously withheld . 6d 0.				
	Total credits and payments. Add lines 6a through 6d			3.4	477.
8	Enter any penalty for underpayment of estimated tax. Check here	T			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	1			486.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	1			0.
	Enter the amount of line 10 to be: Credited to 2012 estimated tax	†	•		
	t VII-A Statements Regarding Activities				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Т	Yes	No
1 0	participate or intervene in any political campaign?		l a		Х
		_			
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	.	1 ь		x
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published	<u> </u>	-		
	or distributed by the foundation in connection with the activities		- 1		
c	Did the foundation file Form 1120-POL for this year?		1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.	<u> </u>	-		<u> </u>
	(1) On the foundation (2) On foundation managers		1		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				
_	If 'Yes,' attach a detailed description of the activities	<u> </u>	2		X
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? <i>If 'Yes,' attach a conformed copy of the changes</i>				<u> </u> -
42	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	<u> </u>	3	 -	X
	olf 'Yes,' has it filed a tax return on Form 990-T for this year?		4a		X
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	<u> </u>	4b		 , ,
J	If 'Yes,' attach the statement required by General Instruction T	⊢:	5		X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.	ŀ			
•	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?				ئــــا
7	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	<u> </u>	5	X	├
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions).	<u>-</u>	7	X	
	See States Registered In	-			
L.		_	1		
	of the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation		-		<u> </u>
٥			3 b	X	-
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If 'Yes,' complete Part XIV))(5)	9		
10		~	"		X
	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10	,		l v
ВАА			_	n-PF	<u> X</u> (2011)
		. 0			_~!!

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Part VII-A Statements Regarding Activities (continued)					
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 make a distribution to a donor advised fund over which the foundation or a disqualif advisory privileges? If 'Yes,' attach statement (see instructions)	ed person	had	12		Х
Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address N/A	applicatio	on?	13	Х	
14 The books are in care of ► <u>John W. Allyn, Jr.</u> Telepho	ne no. ►		887	-246	54
Located at		15			
At any time during calendar year 2011, did the foundation have an interest in or a signature or other 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 na	me of the		10		^
foreign country ► Part 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.			I	Yes	No
1a During the year did the foundation (either directly or indirectly)				162	NO
(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 disgualified person?	□Yes	X No			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No	ŀ		
(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			
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 instructions)	?		1 b		L.,
Organizations relying on a current notice regarding disaster assistance check here	•	` ∐			
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 2011?			<u>1c</u>		X
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))					
a At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011?	Yes	X No			
If 'Yes,' list the years ▶ 20, 20, 20			,		ļ
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942)	(a)(2) a)(2) to				
all years listed, answer 'No' and attach statement — see instructions)			2b		Х
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years 1 20, 20, 20, 20	nere				
3a 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			
b If 'Yes,' did it have excess business holdings in 2011 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 approve	_			•	
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 2011)	u				
		•	3 b		_X_
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4a		х
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 to 20112.				, 	
the tax year beginning in 2011?			4b		х

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Part VII-B Statements Regarding Activiti	es for Which Form	4720 May Be Requ	uired (continued)				
5a During the year did the foundation pay or incur (1) Carry on propaganda, or otherwise attempt	•	(saction 4945(o))?	☐ Yes X	No			
	-		L ies V				
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?							
(3) Provide a grant to an individual for travel, s	•	·	∐ Yes X	No			
(4) Provide a grant to an organization other that in section 509(a)(1), (2), or (3), or section	4940(d)(2)? (see instruc	ctions)	Yes X	No			
(5) Provide for any purpose other than religiou- educational purposes, or for the prevention	s, charitable, scientific, of cruelty to children or	literary, or r animals?	Yes X	No			
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in (see instructions)?	ne transactions fail to qua a current notice regardi	ualify under the exception ng disaster assistance	ns	5b			
Organizations relying on a current notice regard	ding disaster assistance	e check here	▶ []				
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsi	bility for the grant?		Yes	No .			
If 'Yes,' attach the statement required by Regul		• •					
6a Did the foundation, during the year, receive any on a personal benefit contract?	•	- · · · · ·	☐ Yes 🏻				
b Did the foundation, during the year, pay premium of 'Yes' to 6b, file Form 8870.	ims, directly or indirectly	y, on a personal benefit	contract?	6b	X		
7a At any time during the tax year, was the foundation	ation a party to a prohib	ited tax shelter transact	ion? Yes X	No '			
b If 'Yes,' did the foundation receive any proceed				7b			
Part VIII Information About Officers, Di and Contractors	rectors, Trustees,	Foundation Manag	gers, Highly Paid E	mployees,			
1 List all officers, directors, trustees, foundation	managers and their co	ompensation (see instru	ıctions).				
(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			
Margaret B. Allyn							
1420 Sheridan,	President, Dir.						
Wilmette IL 60091 John W. Allyn, Jr.	4.00	0.	0.		0.		
119 Bare Hill,	Vice Pres., Dir.						
Boxford MA 01921	3.00	0.	0.		0.		
Cynthia A. Stuhley							
1216 Casey Key Road Nokomis FL 34275	Director						
Nokomis FL 34275 Sharon A. Taylor	1.00	0.	0.	-	0.		
539 Princeton,	Director						
Hinsdale IL 60521	1.00		0.		0.		
2 Compensation of five highest-paid employees				r '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			
None			Jan				
0							
; 							
0							
0			<u> </u>				
Total number of other employees paid over \$50,000					None		
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P <u>art</u>	and Contractors (continued)	d Employees,	
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'		
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compe	nsation
<u>Non</u>	e		
 Total	number of others receiving over \$50,000 for professional services	•	None
	IX-A Summary of Direct Charitable Activities		
List the	e foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ations and other beneficiaries served, conferences convened, research papers produced, etc.	Exper	nses
	None		
			0.
2			
3			
4			
Par	: IX-B Summary of Program-Related Investments (see instructions)		
Desc	ribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amo	unt
1	None		
2			0.
All o	ther program-related investments. See instructions.		
3			
Total	Add lines 1 through 3	•	None
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Par			foundations,
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	1 a	4,778,295.
ŀ	Average of monthly cash balances .	1 b	103,487.
•	Fair market value of all other assets (see instructions)	1 c	
•	l Total (add lines 1a, b, and c) .	1 d	4,881,782.
•	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation) 1e 0.	li	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	4,881,782.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	73,227.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	4,808,555.
6	Minimum investment return. Enter 5% of line 5	6	240,428.
Par	TXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operand certain foreign organizations check here ► ☐ and do not complete this part.)	atıng	
1	Minimum investment return from Part X, line 6	1	240,428.
	Tax on investment income for 2011 from Part VI, line 5 2a 3, 963.]	
ı	Income tax for 2011. (This does not include the tax from Part VI.)		
•	Add lines 2a and 2b	2 c	3,963.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	236,465.
4	Recoveries of amounts treated as qualifying distributions .	4	0.
5	Add lines 3 and 4	5	236,465.
6	Deduction from distributable amount (see instructions)	6	0.
	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	236,465.
Pai	t XII Qualifying Distributions (see instructions)	· · · · · ·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	 1 a	235,854.
1	Program-related investments — total from Part IX-B	1 b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	0.
3	Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)	3a	0.
	Cash distribution test (attach the required schedule)	3 b	0.
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	235,854.
, 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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	235,854.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the qualifies for the section 4940(e) reduction of tax in those years	he fou	ndation

BAA

Form 990-PF (2011)

Form 990-PF (2011) The Allyn Foundation, Inc.

Part XIII Undistributed Income (see instructions)

1. Distributable amount for 2011 from Part XI, line? 2. Undestributed income, if any, as of the end of 2011, a can be end of 2011, a		(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
2. Understobuled increme, if any, as of the end of 2011, a Enter amount for 2010 only b Total for prine years 20, 20, 20					236,465.
b Total for prior years: 20 20 30	F				
3 Excess distributions carryover, if any, to 2011: a From 2006			Ţ	1,582.	
### From 2006	b Total for prior years 20, 20, 20				
b From 2007 . c From 2008	3 Excess distributions carryover, if any, to 2011:				
C From 2009	a From 2006				
d From 2010 e From 2010 1 Total of lines 3a through e 4 Qualifying distributions for 2011 from Part XII, Inne 4. P. \$ 2.35, 854. a Applied to 2010, but not more than line 2a b Applied to 2010, but not more than line 2a b Applied to quirided - see instructions; Cliciton required - see instructions; Cliciton required - see instructions; 0. c Treated as distributions out of corpus (Election required - see instructions) 0. d Applied to 2011 distributable amount e Remaining amount distributed out of corpus Excess distributes cirripver applied to 2011 (If an amount appears in column (a), the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below: a Carpus. Add lines 31, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed of from line 2b a Carpus. Add lines 31, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the net total of each column as indicated below: a Carpus. Add lines 31, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b a Carpus. Add lines 31, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b a Carpus. Add lines 30, 4c, and 4e Subtract line 4b from line 2b a Subtract line 6 from line 6b Taxable amount — see instructions 0. 1 Undistributed income for 2011. Subtract lines 4b dand 5 from line 1 This amount must be distributed in 2012 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 494(c)(3) (see instructions) 9 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) 9 Excess from 2007 0 DEX:exes from 2008 0 CEX:exes from 2009 0 CEX:exes from 2009 0 CEX:exes from 2000	b From 2007 0 .	1			
e From 2010	c From 2008 . 0.				
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4 Qualifying distributions for 2011 from Part XII, line 4. P. \$ 235, 854. a Applied to 2010, but not more than line 2a b Applied to undistributed income of prior years (Election required — see instructions) c Treated as distributions out of corpus (Election required — see instructions) d Applied to 2011 distributable amount e Remaining amount distributed out of corpus 5 bress distributions carryover applied to 2011 (If an amount appears in column (a)) 6 Enter the net total of each column as indicated below: a Corpus. Add lines 3(, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4 from line 2b 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) lish has been previously assessed d Subtract line 6c from line 6b Taxable amount — see instructions e Undistributed income for 2010. Subtract lines 4 from line 2a Taxable amount — see instructions e Undistributed income for 2010. Subtract lines 4 d and 5 from line 1 This amount must be distributed in 2012 7 Amounts readed as distributions out of corpus to safety requirements imposed by its excess fistibutions carryover from 2006 not applied on line 5 or line 7 (see instructions) 9 Excess fistibutions carryover from 2002. 9 Excess from 2008 0 C Excess from 2009 0 C Excess from 2000 0 Excess from 2000 0 Excess from 2000 0 Excess from 2000 0 Excess fr	e From 2010 0.				
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	e Excess from 2011 0.				

Part XVI Private Operating Foundations (see instructions and Part VII-A, question 9) N/A	form 990-PF (2011) The Allyn Founda				23-702558	
is effective for 2011, enter the date of the ruling Dicheck box of undcale whether the foundation is a private operating foundation described in section 2a Enter the lesser of the adjusted net income from Part I of the immunity moves the control of the part I of the immunity moves the control of the part I of the immunity moves the control of the part I of the immunity moves the control of the part I of the immunity moves the control of the part I of the immunity moves the control of the part I of the I I of						N/A
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Income from Part I or the minimum investment future from Part X or well completed in the program of the complete in the complete in the program of the complete in the complete in the program of the complete in th	·	•	erating foundation de	scribed in section	4942(J)(3) or	4942(j)(5)
income from Part I or the minimum investment found from Part X for investment found in Part X for investment for investment found in Part X for inves						
C Cushiyang distributions from Part XII, line 4 for each year instead. d Amounts included in line 2 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 C Complete 3a, b, or c for the alternative test enter. (1) Value of all assets (2) Value of assets qualifying under section 4942(0)(3(9)(0)) b Endownerd stiffnative test — enter. (1) Value of assets duplifying under section 4942(0)(3(9)(0)) b Endownerd stiffnative last — enter 27 at minimum investment return shawn in Part X, line 6 for each year listed c Support all assets (3) Total support other than gross investment income (interest, indicated) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	income from Part I or the minimum investment return from Part X for		(b) 2010	(c) 2009	(d) 2008	(e) Total
Inter 4 for each year isted	b 85% of line 2a .					
for active conduct of exempt activities © Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2 d 3 Complete 3a, b, or c for the alternative test relied upon a Nassets' alternative test – enter, (1) Value of all assets (2) Value of assets gualifying under section 4942(0)(3)(0) b Informent alternative test – enter 2/3 of minimum instruction in Pat X, line is for each year listed minimum instruction in Pat X, line is for each year listed minimum instruction of the patient of the patient in Come (interest, dividends, rents, payments on securities loans (sections) [1/2(0)(0)), or organizes (2) Support offing seeral public and 5 or mine seerant organizations as provided in section 4982(0)(3)(0), or organizes (3) Largest amount of support from an exempt organization of support from an exempt organization of support from assets at anny time during the year – see instructions.) Information Regarding Foundation Managers: a list any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than 35,000) (See section 507(d)(2)) None 2 Information Regarding Poundation Makes contributed more than 35,000 (See section 507(d)(2)) None 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs: Check here ►	c Qualifying distributions from Part XII, line 4 for each year listed					
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section 4942(i)(3)(E)(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 5)12(a)(5)), or royalties) (2) Support from general public and 5 or miner seemed organizations as provided in section 494(0)(3)(5)(ii) (3) Largest amount of support from an energial organization as provided in section 494(0)(3)(5)(iii) (3) Largest amount of support from an energial organization (a) and the seement organization in section 494(0)(3)(5)(iii) (3) Largest amount of support from an energial organization (a) assets at any time during the year — see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2)) None b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest None 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs: Check here \(^{\text{N}} \subseteq If the foundation makes gifts, grants, etc, (see instructions) to individuals or organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc, (see instructions) to individuals or organizations under other conditions, complete terms 2a, b, c, and d. b The form in which applications should be submitted and information and materials they should include. N/A d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors'				ļ		
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assets at any time during the year — see instructions.) 1 Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2)) None b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest None 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs: Check here ▶ ☑ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc, (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number of the person to whom applications should be addressed. N/A b The form in which applications should be submitted and information and materials they should include. N/A c Any submission deadlines N/A d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:						
a List any managers of the foundation who have contributed more than \$5,000) (See section 507(d)(2)) None b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest None 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs: Check here ► X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc, (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number of the person to whom applications should be addressed. N/A b The form in which applications should be submitted and information and materials they should include. N/A c Any submission deadlines N/A d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:	Part XV Supplementary Information □ assets at any time during t	(Complete thi ne year – see i	s part only if the instructions.)	e organization h	ad \$5,000 or mo	re in
a partnership or other entity) of which the foundation has a 10% or greater interest None 2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs: Check here ► ▼ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc, (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number of the person to whom applications should be addressed. N/A b The form in which applications should be submitted and information and materials they should include. N/A c Any submission deadlines N/A d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors.	a List any managers of the foundation who is close of any tax year (but only if they have	nave contributed m	nore than 2% of the to than \$5,000) (See :	otal contributions red section 507(d)(2))	ceived by the founda	ition before the
Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number of the person to whom applications should be addressed. N/A b The form in which applications should be submitted and information and materials they should include. N/A c Any submission deadlines N/A d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:	a partnership or other entity) of which the	own 10% or more of foundation has a 1	of the stock of a corp 10% or greater intere	oration (or an equal est	ly large portion of th	e ownership of
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c Any submission deadlines N/A d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:	· · · · · · · · · · · · · · · · · · ·	er of the person to	whom applications s	hould be addressed.		
n/A d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:) i	submitted and info	rmation and material	ls they should includ	e.	
	4 - 1					
		such as by geogra	phical areas, charita	ble fields, kinds of in	nstitutions, or other f	actors.

Form 990-PF (2011) The Allyn Foundation, Inc.

Part XV | Supplementary Information (continued)

3 | Grants and Contributions Paid During the Year or Approve

3 Grants and Contributions Paid During the Ye	ar or Approved for Futu	re Payment	· · · · · · · · · · · · · · · · · · ·	
Recipient	If recipient is an individual, show any relationship to any foundation manager or	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year				
ACCION USA				
56 Rowland Street, Suite 300		<u> </u>		1 000
Boston MA 02129		Exempt	Anti-poverty programs	1,000.
American Cancer Society				
P.O. Box 22178 Oklahoma City OK 73123		Exempt	Modical magazanah	7,000.
Oklahoma City OK 73123 American Heart Association		Exempt	Medical research	7,000.
208 S. LaSalle St., Suite 150				
Chicago IL 60604		Exempt	Medical research	7,000.
American Lung Association		DACIEDE	licardar researen	,,000.
1301 Pennsylania Ave. NW, Suite 800)			
Washington DC 20004		Exempt	Medical research	3,000.
American Red Cross			13332	0,000.
P.O. Box 4002018			1	
Des Moines IA 50340		Exempt	Family services	10,000.
Americares			,	20,0000
88 Hamilton Ave.			[
Stamford CT 06902		Exempt	Family services	2,000.
Art Institute of Chicago		1		·
111 S. Michigan Ave.				
Chicago IL 60603		Exempt	Museum programs	3,000.
Associated Colleges of Illinois				
70 E. Lake St., Suite 1418				
Chicago IL 60601		Exempt	Education programs	3,000.
Aurora Lakeland Medical Center				
W3985 County Road NN				
Elkhorn WI 53121		Exempt	Medical services	1,000.
See Line 3a statement				
				198,000.
Total .	<u> </u>		► 3a	225 000
b Approved for future payment		T	<u>▶</u> 3a	235,000.
b Approved for future payment				
i ,				
		!		
1				
į į				
T. Company				
1				
Total			► 3b	

Part XVI-A Analysis of Income-Producing Activities

nter gro	ss amounts unless otherwise indicated	Unrelate	d business income	Excluded by	section 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions)
	gram service revenue			code		
						·
				 		
_				- - -		
		11				
f		-				
a Fee	s and contracts from government agencies	1 - 1				
-	nbership dues and assessments		-			
	est on savings and temporary cash investments .			14	39.	
	dends and interest from securities .			14	159,435.	
5 Net	rental income or (loss) from real estate:					
a Deb	t-financed property					
b Not	debt-financed property					
6 Net i	ental income or (loss) from personal property .					
7 Oth	er investment income					
	on (loss) from sales of assets other than inventory					· · · · · · · · · · · · · · · · · · ·
	income or (loss) from special events			\bot		
	ss profit or (loss) from sales of inventory		· · · · · · · · · · · · · · · · · · ·			
11 Oth	er revenue					
		 				
_						
		 				
a		-				
e	<u> </u>	+		- - - 	159,474.	<u> </u>
10 0.1						
1	ototal. Add columns (b), (d), and (e)					
13 Tot	al. Add line 12, columns (b), (d), and (e)	une)			139,474.	
13 Tot See wor	al. Add line 12, columns (b), (d), and (e)				13	
13 Tot See wor	al. Add line 12, columns (b), (d), and (e)			npt Purpose	13	
13 Tot See wor	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation. //-B Relationship of Activities to the	e Accompl	ishment of Exen	<u> </u>	13	159,474.
13 Tot See wor Part X\ Line No	al. Add line 12, columns (b), (d), and (e) Asheet in line 13 instructions to verify calculations. 71-B Relationship of Activities to the	e Accompl	ishment of Exen	<u> </u>	13	159,474.
13 Tot See wor Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation. Al-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exen	<u> </u>	13	159,474.
13 Tot See wor Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation. Al-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exen	<u> </u>	13	159,474.
13 Tot See wor Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation. Al-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exen	<u> </u>	13	159,474.
13 Tot See wor Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation. Al-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exen	<u> </u>	13	159,474.
13 Tot See wor Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation. Al-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exen	<u> </u>	13	159,474.
13 Tot See wor Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation. Al-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exen	<u> </u>	13	159,474.
13 Tot See wor Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation. Al-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exen	<u> </u>	13	159,474.
13 Tot See wor Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation. Al-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exen	<u> </u>	13	159,474.
13 Tot See wor Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation. Al-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exen	<u> </u>	13	159,474.
13 Tot See wor Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation. Al-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exen	<u> </u>	13	159,474.
13 Tot See wor Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation. Al-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exen	<u> </u>	13	159,474.
13 Tot See wor Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation. Al-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exen	<u> </u>	13	159,474.
13 Tot See wor Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation. Al-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exen	<u> </u>	13	159,474.
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13 Tot See wor Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation. Al-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exen	<u> </u>	13	159,474.
13 Tot See wor Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation. Al-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exen	<u> </u>	13	159,474.
13 Tot See wor Part X\ Line No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation. Al-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exen	<u> </u>	13	159,474.
13 Tot See work Part X\	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation. Al-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	e Accompl	ishment of Exen	<u> </u>	13	159,474.

Form 990-PF (2011) The Allyn Foundation, Inc. 23-7025589

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

	Exempt Organiza	ations									
describe	organization directly o ed in section 501(c) of to political organization	the Code (other th	e in any of the follo nan section 501(c)(wing with an 3) organizati	y other organiz ions) or in secti	ation on 527,				Yes	No
-	rs from the reporting f		charitable exempt	organization	of]
(1) Cas	• =		•	Ū					1 a (1)		X
• •	er assets								1 a (2)		X
• •	ansactions.										
(1) Sale	es of assets to a nonc	haritable exempt o	rganization						1 b (1)		X
(2) Pur	chases of assets from	a noncharitable e	xempt organization	1					1 b (2)		X
(3) Ren	ital of facilities, equipr	nent, or other asse	ets						1 b (3)		X
(4) Reii	mbursement arrangen	nents						Γ	1 b (4)		X
(5) Loa	ns or loan guarantees								1 b (5)		Χ
(6) Per	formance of services (or membership or	fundraising solicita	tions					1 b (6)		X
c Sharing	of facilities, equipmen	nt, mailing lists, ot	her assets, or paid	employees					1 c		<u>x</u>
d If the ar the good any tran	nswer to any of the ab ds, other assets, or se nsaction or sharing arr	ove is 'Yes,' compervices given by the angement, show it	lete the following sereporting foundate column (d) the variations.	chedule. Col ion If the fou alue of the go	umn (b) should undation receive ods, other ass	always sh ed less tha ets, or ser	now the far an fair mai vices rece	r marke ket val ived.	et value ue in	of	
(a) Line no.	(b) Amount involved	(c) Name of non	charitable exempt organ	ization	(d) Description	of transfers,	transactions	, and sh	arıng arran	gement	s
			<u> </u>							_	
								,,			
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_											
					_						
		<u> </u>									
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_											
- 											
											
describe	oundation directly or in ed in section 501(c) of complete the followin	f the Code (other t	with, or related to, on the section 501(c)	one or more (3)) or in sec	tax-exempt org	anızatıons			Yes	X	No
(;	a) Name of organization	on	(b) Type of org	ganization		(c) De	scription of	of relati	onship		
_ _											
							<u>. </u>				
											
Sign Under correct	penalties of perjury, I declare t, and complete Declaration	e that I have examined the of preparer (other than the	his return, including acco axpayer) is based on all	, ,	_			owledge a	May the I	RS disc	uss
Here	Vern mi	A		16/12	Vice P	reside	nt		this retur preparer (see insti	shown t	pelow
Single	ature of officer or trustee	/	Date		Title				(see insti	Yes	ĺ No
	Print/Type preparer's nam	ne	Preparer's signature		Date		Check	ıf F	TIN		
Paid							self-employe	d_			
Preparer	NonamaBaid Pre	parer				Firm	s <u>E</u> IN ►				
Use Only	Firm's address										
						Pho	ne no				
BAA									Form 99	0-PF	(2011)

Form 990-PF, Page 1, Part I, Line 18

Line 18 Stmt

Taxes	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
2011 Form 990-PF estimated tax	2,200.	0.	0.	0.
2011 Delaware franchise tax	25.	0.	0.	<u> </u>
2011 Foreign taxes on dividends	128.	128.	128.	0.
Total	2,353.	128.	128.	0.

Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Mail	228.	114.	114.	114.
Office supplies	204.	102.	102.	102.
Safe deposit box	115.	58.	58.	58.
Filing fees	25.	12.	12.	12.

Total <u>572.</u> <u>286.</u> <u>286.</u> <u>286.</u>

Form 990-PF, Page 4, Part VII-A, Line 8a

States Registered In

IL - Illinois
DE - Delaware

Form 990-PF, Page 11, Part XV, line 3a

Line 3a statement

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year Aurora University P.O. Box 210, 350 Constance Blvd. Williams Bay WI 53191				Person or Business X
Big Brothers Big Sisters of Chicago		Exempt	Education programs	5,000. Person or
560 W. Lake St.				Business X
Chicago IL 60661		Exempt	Youth programs	3,000.
Boston Health Care for the Homeless				Person or
780 Albany Street				Business X
Boston MA 02118		Exempt	Medical services	1,000.
Boys & Girls Clubs of Chicago				Person or
550 W. Van Buren St., Suite 350				Business X
Chicago IL 60607		Exempt	Youth programs	3,000.
Chicago History Museum		l	l	Person or
1601 N. Clark St.				Business X
Chicago IL 60614	l	Exempt	Museum programs	3,000.

Form 990-PF, Page 11, Part XV, line 3a

Line 3a statement

Continued

Recipient	If recipient is	Foun-	Purpose of	Person or
	an ındıvıdual,	dation	grant or contribution	Business
Name and address	show any	status		Checkbox
(home or business)	relationship to	of re-		
	any foundation	cipient		Amount
	manager or			
	substantial			
	contributor			
a Paid during the year				
Chicago Symphony Orchestra				Person or
220 S. Michigan Ave				Business X
Chicago IL 60604		Exempt	Music programs	3,000.
Children's Home & Aid Society				Person or
125 S. Wacker Dr., 14th Floor			 	Business X
Chicago IL 60606		Exempt	Youth services	5,000.
Children's Memorial Hospital				Person or
Department 4586				Business X
Carol Stream IL 60122		Exempt	Medical services	10,000.
City Year				Person or
287 Columbus Ave.				Business X
Boston MA 02116		Exempt	Service programs	1,000.
Common Threads				Person or
5979 Siggelkow Rd.				Business X
McFarland WI 53558		Exempt	Family services	5,000.
Community Giving Tree				Person or
P.O. Box 508				Business X
West Boxford MA 01885		Exempt	Family services	5,000.
Cystic Fibrosis Foundation				Person or
220 N. Main St., Suite 104				Business X
Natick MA 01760		Exempt	Medical research	1,000.
Daniel Murphy Scholarship Fund				Person or
100 W. Monroe St., Suite 500			0-1-2	Business X
Chicago IL 60603		Exempt	Scholarships	1,000. Person or
P.O. Box 5023				Business X
Hagerstown MD 21741			Medical services	
Emmaus House		Exempt	Medical services	Person or
P.O. Box 568				Business X
Haverhill MA 01831		Exempt	Individual services	3,000.
Evans Scholars		Drempe	Individual Scrvices	Person or
1 Briar Rd.				Business X
Golf IL 60029		Exempt	Scholarships	1,000.
Fund for Johns Hopkins Medicine				Person or
100 N. Charles St., Suite 400				Business X
Baltimore MD 21201		Exempt	Medical research	3,000.
Girl Scouts of Chicago				Person or
20 S. Clark St., Suite 200				Business X
Chicago IL 60603		Exempt	Youth programs	3,000.
Girls Incorporated				Person or
2 Harris Street				Business .
Newburyport MA 01950		Exempt	Youth services	1,000.
Gulf Coast Heritage Association				Person or
P.O. Box 846				Business X
Osprey FL 34229	<u> </u>	Exempt	Museum programs	5,000.

99 Summer St.

Make A Wish Foundation

One Bullfinch Place, 2nd Floor

Boston MA 02114

Midwest Palliative & Hospice Care

2050 Claire Court

<u>MA</u> 02110

IL 60025

Boston

Glenview

Business

Person or

Business

Person or

Business

1,000.

1,000.

3,000.

X

Form 990-PF, Page 11, Part XV, line Line 3a statement	e 3a			Continued
Recipient	If recipient is	Foun-	Purpose of	Person or
	an individual,	dation	grant or contribution	Business
Name and address	show any	status	3 . • •. • • • • • • • • • • • • • •	Checkbox
(home or business)	relationship to	of re-		
, , , , , , , , , , , , , , , , , , ,	any foundation	cipient		Amount
	manager or	'		
	substantial			
	contributor			
a Paid during the year		ļi.		
Habitat for Humanity Greater Boston				Person or
240 Commercial Street, 4th Floor				Business X
Boston MA 02109		Exempt	Family services	1,000.
Hadley School for the Blind				Person or
700 Elm St.				Business X
Winnetka IL 60093		Exempt	Medical research	10,000.
Heartland Alliance				Person or
208 S. LaSalle St., Suite 1818				Business X
Chicago IL 60604		Exempt	Social services	3,000.
Illinois Institute of Technology				Person or
10 W. 35th St., Suite 1700				Business X
Chicago IL 60616		Exempt	Education programs	3,000.
Illinois Masonic Medical Center				Person or
205 W. Touhy Ave, Suite 225	1			Business X
Park Ridge IL 60068		Exempt	Medical services	3,000.
Infant Welfare Society of Evanston				Person or
2200 Main St.		-		Business X
Evanston IL 60202		Exempt	Youth services	5,000.
Jumpstart				Person or
308 Congress St., 6th Floor				Business X
Boston MA 02210		Exempt	Youth services	1,000.
Junior Achievement of Chicago		.		Person or
651 W. Washington St., Suite 404				Business X
Chicago IL 60661		Exempt	Youth programs	3,000.
Juvenile Diabetes Research Foundation				Person or
11 S. La Salle St., Suite 1800		.		Business
Chicago IL 60603		Exempt	Medical research	
Kishwauketoe Nature Conservancy		.		Person or
118 Circle Pkwy.		.		Business X
Williams Bay WI 53191		Exempt	Environmental programs	1,000.
Lincoln Park Zoo				Person or
2001 N. Clark St.				Business X
Chicago IL 60614		Exempt	Zoo programs	3,000.
MSPCA Angell				Person or
350 S. Huntington Ave.		·		Business X
Boston MA 02130		Exempt	Animal protection	1,000.
MSPCC 99 Summer St.				Person or
yy Summer St.	1	1	1	Rusiness X

Exempt

Family programs

Exempt | Elderly services

Form 990-PF, Page 11, Part XV, line 3a

Continued

Line 3a statement

Recipient	If recipient is an individual,	Foun- dation	Purpose of grant or contribution	Person or Business
Name and address	show any	status		Checkbox
(home or business)	relationship to	of re-		
,	any foundation	cipient		Amount
	manager or	·		
	substantial			
	contributor			
			<u> </u>	
a Paid during the year				
Museum of Science and Industry				Person or
5700 S. Lake Shore Drive				Business X
Chicago IL 60637		Exempt	Museum programs	3,000.
Music Institute of Chicago				Person or
517 Green Bay Rd.		<u></u>		Business X
Wilmette IL 60091		Exempt	Music programs	1,000.
National Multiple Sclerosis Society				Person or
P.O. Box 4527				Business X
New York NY 10163		Exempt	Medical research	3,000.
North Shore Senior Center				Person or Business X
161 Northfield Rd. Northfield IL 60093			Elderly services	-
	· · · · · · · · · · · · · · · · · · ·	Exempt	Elderly services	1,000. Person or
NorthShore University HealthSystem				Business X
1033 University Place, Suite 450 Evanston IL 60201	\		Medical services	
Northwestern University Settlement		Exempt	Medical services	Person or
1400 Augustana Blvd.				Business X
Chicago IL 60642		Exempt	Family services	4,000.
Parkinson's Disease Foundation		DACINGE	Tamily delvices	Person or
1359 Broadway Ave., Suite 1509				Business X
New York NY 10018		Exempt	Medical research	
Parkways Foundation				Person or
541 N. Fairbanks Ct., Suite 850				Business
Chicago IL 60611		Exempt	Family programs	3,000.
Pillars Community Services				Person or
333 N. LaGrange Rd.				Business X
LaGrange Park IL 60526		Exempt	Family services	2,000.
Pine Street Inn				Person or
444 Harrison Avenue				Business X
Boston MA 02118		Exempt	Individual services	1,000.
Ravinia Festival Association				Person or
418 Sheridan Rd.				Business X
Highland Park IL 60035		Exempt	Music programs	3,000.
Ray Graham Association				Person or
901 Warrensville Road, Suite 500				Business X
<u>Lisle</u> <u>IL 60532</u>		Exempt	Disability services	
Reading Is Fundamental				Person or
1255 23rd St. NW, Suite 300				Business X
Washington DC 20037		Exempt	Education programs	3,000.
Rehabilitation Institute of Chicago				Person or
345 E. Superior St.				Business X
Chicago IL 60611	ļ	Exempt	Medical services	
Rosie's Place				Person or
889 Harrison Avenue				Business X
Boston MA 02118	1	Exempt	Individual services	1,000.

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Continued

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				
Rush University Medical Center				Person or
1700 W. Van Buren St., Suite 250	1			Business X
Chicago IL 60612		, — — — —	Medical services	5,000.
Save The Children				Person or
54 Wilton St.				Business X
Westport CT 06880		Exempt	Child poverty programs	2,000.
Sierra Club Foundation				Person or
85 Second St., Suite 750				Business X
San Francisco CA 94105		Exempt	Environmental programs	10,000.
Talk About Curing Autism				Person or
222 Martin, Suite 140	 	 	 	Business . X
Irvine CA 92612		Exempt	Family Services	2,000.
Teach For America		<u>-</u>		Person or
315 W. 36th St., 7th Floor				Business X
New York NY 10018		Exempt	Education programs	5,000.
The Boston Foundation		_		Person or
75 Arlington St., 10th Floor				Business X
Boston MA 02116		Exempt	Community services	3,000.
The Field Museum				Person or
1400 S. Lake Shore Dr.				Business X
Chicago IL 60605		Exempt	Museum programs	3,000.
The Wetlands Initiative				Person or
53 W. Jackson Blvd., Suite 1015				Business X
Chicago IL 60604	 -	Exempt	Environmental programs	1,000.
United Cerebral Palsy				Person or
547 W. Jackson Blvd., Suite 225				Business X
Chicago IL 60661	1	Exempt	Medical research	
University of Michigan Trauma Burn Center Room UH-1C435				Person or Business X
Ann Arbor MI 48109		From	Medical services	
Urban Gateways	 	EXCILIPE	Medical services	Person or
205 W. Randolph St., Suite 1700				Business X
Chicago IL 60606		Exempt	Education programs	3,000.
Volunteer Center of the New Trier Township		Dicinge	Iddedction programs	Person or
520 Glendale Ave., Suite 3B				Business X
Winnetka IL 60093		Exempt	Community services	1,000.
Walworth County Arts Council			John Marie Communication of the Communication of th	Person or
641 Jackson Parkway				Business X
Williams Bay WI 53191		Exempt	Community services	1,000.
Wellness House				Person or
131 N. County Line Road				Business X
Hinsdale IL 60521		Exempt	Individual services	5,000.
Year Up		1	1	Person or
93 Summer St., 5th Floor				Business X
Boston MA 02110		Exempt	Youth services	1,000.

Form 990-PF, Page 11, Part XV, line 3a

Line 3a statement

Continued

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
a Paid during the year				

Total

198,000.

Form 990-PF, Page 1, Part I

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CT Corporation System	Representation	568.	0.	0.	568.
Total		568.	0.	0.	568.

Form 990-PF, Page 2, Part II, Line 10b

L-10b Stmt

	End of	f Year
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value
2100 shs Altria Group common	9,146.	62,265.
9290 shs America Movil SAB common	23,836.	209,954.
4848 shs Apartment Investment & Management Co. common	72,978.	111,068.
4460 shs BP PLC common	15,772.	190,620.
1702 shs Bank of America common	22,086.	9,463.
1800 shs Bank of New York Mellon Corp. common	15,712.	35,838.
502 shs ConocoPhillips common	15,265.	36,581.
600 shs International Business Machines common	8,063.	<u>110,328.</u>
1453 shs Kraft Foods common	9,387.	54,284.
365 shs Pepsico common	2,056.	24,218.
10200 shs Pfizer Inc. common	33,245.	220,728.
2100 shs Philip Morris International common	20,842.	164,808.
800 shs Time Warner Inc. common	24,950.	28,912.
200 shs Time Warner Cable common	8,798.	12,714.
16680.79 shs Vanguard 500 Index Fund	620,000.	<u>1,931,635.</u>
2908.016 shs Vanguard Total International Stock Fund	90,000.	63,511.

Total

992,136.

3,266,927.

Form 990-PF, Page 2, Part II, Line 10c

L- 10c Stmt

	End of Year		
Line 10c - Investments - Corporate Bonds:	Book Value	Fair Market Value	
152,914.042 shs Vanguard Long-Term Investment Grade Bond Fund	1,345,000.	1,573,485.	
Total	1,345,000.	1,573,485.	