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

Treated as a Private Foundation

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

OMB No 1545-0052

For calendar year 2011 or tax year beginning , and ending A Employer identification number Name of foundation THE EXPERIMENTAL STATION 32-0017985 C/O DANIEL A PETERMAN Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 773-241-5458 6100 S BLACKSTONE City or town, state, and ZIP code C If exemption application is pending, check here CHICAGO, IL 60637 Initial return G Check all that apply: Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year J Accounting method: Cash X Accrual If the foundation is in a 60-month termination Other (specify) under section 507(b)(1)(B), check here (from Part II, col (c), line 16) 206, 178. (Part I, column (d) must be on cash basis) ▶\$ Part I Analysis of Revenue and Expenses (a) Revenue and (c) Adjusted net (d) Disbursements for charitable purposes (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) ) expenses per books income income (cash basis only) 450,189. Contributions, gifts, grants, etc., received 2 Check I if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 4 Dividends and interest from securities 32,604. 32.604.STATEMENT 32,604 5a Gross rents -16,714. STATEMENT b Net rental income or (loss) RECEIVED 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0 0. 7 Capital gain net income (from Part IV, line 2) NOV 1 9 2012 Ś 0. 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances OGDEN. STATEMENT 123,293. STATEMENT 157,930. b Less Cost of goods sold -34,637-34,637 c Gross profit or (loss) 36,219 36,219.STATEMENT 0 11 Other income 484,375 32,604 34,186 12 Total Add lines 1 through 11 30,921 0. 30,921. 0. Compensation of officers, directors, trustees, etc 0. 110,098. 110.098. 0. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 0 0. 7,265. STMT 6 7,265. **b** Accounting fees STMT 41,027. 0. 39,819. c Other professional fees 7 0. 17 Interest 11,358. 11,358. 0. STMT 8 18 Taxes 5,718. 5,718. 5,718. 19 Depreciation and depletion 54,493. 40,741. 40,741. 13,752. 20 Occupancy 3,654. 3,654. 0. 0. 21 Travel, conferences, and meetings 13,388. 1,753. ,753 11,635. 22 Printing and publications 47,736. Operating STMT 9 51,285. 3,549. 3,549. 23 Other expenses 24 Total operating and administrative 329,207 51,761 51,761 276,238. expenses. Add lines 13 through 23 43,200 43,200. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 51,761 51,761 319,438. Add lines 24 and 25 372,407 27 Subtract line 26 from line 12: 111,968 8 Excess of revenue over expenses and disbursements 0. b Net investment income (if negative, enter -0-) 0. c Adjusted net income (if negative, enter -0-)

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				
Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
1 Cash - non-interest-bearing	78,304.	149,766.	149,766.			
2 Savings and temporary cash investments						
3 Accounts receivable ► 24,296.						
Less: allowance for doubtful accounts ▶	6,060.	24,296.	24,296.			
4 Pledges receivable ►						
Less: allowance for doubtful accounts ▶						
5 Grants receivable	9,135.	785.	785.			
6 Receivables due from officers, directors, trustees, and other						
disqualified persons						
7 Other notes and loans receivable						
Less; allowance for doubtful accounts						
	3,598.	5,371.	5,371.			
8 Inventories for sale or use 9 Prepaid expenses and deferred charges  100 Investments - U.S. and state government obligations	2,968.	3,218.	3,218.			
10a Investments - U.S. and state government obligations	2,500.	3,210.	3,210.			
b Investments - corporate stock			***************************************			
-						
c Investments - corporate bonds						
11 Investments - land, buildings, and equipment basis						
Less accumulated depreciation						
12 Investments - mortgage loans						
13 Investments - other						
14 Land, buildings, and equipment; basis ► 49,039.	22 525	22 542	00 540			
Less accumulated depreciation STMT 10► 26,297.	23,527.	22,742.	22,742.			
15 Other assets (describe ►)						
16 Total assets (to be completed by all filers)	123,592.	206,178.	<u> 206,178.</u>			
17 Accounts payable and accrued expenses	13,404.	7,772.				
18 Grants payable						
g 19 Deferred revenue	23,750.					
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable						
21 Mortgages and other notes payable						
22 Other liabilities (describe >)						
23 Total liabilities (add lines 17 through 22)	37,154.	7,772.				
Foundations that follow SFAS 117, check here						
and complete lines 24 through 26 and lines 30 and 31.						
8 24 Unrestricted	-13,039.	108,363.				
25 Temporarily restricted	99,477.	90,043.				
26 Permanently restricted						
25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances						
and complete lines 27 through 31.						
27 Capital stock, trust principal, or current funds						
28 Paid-in or capital surplus, or land, bldg., and equipment fund						
29 Retained earnings, accumulated income, endowment, or other funds						
30 Total net assets or fund balances	86,438.	198,406.				
Z 50 Total liet assets of fully balalices	00, 230.	130,400.				
31 Total liabilities and net assets/fund balances	123,592.	206,178.				
		200,170.				
Part III Analysis of Changes in Net Assets or Fund Ba	lances					
1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30	<u></u> า	-				
(must agree with end-of-year figure reported on prior year's return)	J		86,438.			
		1	111,968.			
2 Enter amount from Part I, line 27a		2				
3 Other increases not included in line 2 (itemize)		3	199 406			
4 Add lines 1, 2, and 3		4 -	198,406.			
5 Decreases not included in line 2 (itemize)	(1) 1 22	5	100 406			
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	ırnın (b), iine 30	6	198,406. Form <b>990-PF</b> (2011)			

	Part IV Capital Gains and	Losses for Tax on In	vestmen	t Income				
	(a) List and describe t 2-story brick wareho	he kınd(s) of property sold (e.g. use; or common stock, 200 shs	, real estate, . MLC Co.)		( <b>b)</b> I	How acquired - Purchase - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
18	1				<u> </u>			
	NONE				<u> </u>			
_	<u> </u>				<u> </u>			
_	i		_					<del></del>
_		(5) Degreesstop allowed	(a) Ca	est or other basis	<u> </u>		(h) Gain or (loss	\ \
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)		expense of sale			(e) plus (f) minus	
_			_					
	0							
_(	1							
_	Occupation and of the contract	n and particular (h) and average by t	ha faundatia	n on 19/21/60			(I) Cours (Col. (b) sour	
-	Complete only for assets showing ga	······································					(I) Gains (Col. (h) gain ol. (k), but not less tha	
_	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		xcess of col. (1) r col. (1), if any			Losses (from col. (	(h))
	a							
_	)							
_	1							
_'				-				
_	<u></u>	∫ If gain, also enter	ın Part I line	7	1			
2	Capital gain net income or (net capital	A + ·			}	2		
3	Net short-term capital gain or (loss) as							
u	If gain, also enter in Part I, line 8, colui		u (0 <i>)</i> .		]			
-	If (loss), enter -0- in Part I, line 8	40.40( )				3		
_		er Section 4940(e) for					icome	37/3
(F	or optional use by domestic private four	ndations subject to the section 4	1940(a) tax o	n net investment ir	come	9.)		N/A
lf	section 4940(d)(2) applies, leave this pa	ırt blank.	~					
14/	as the foundation liable for the section 4	1049 tay on the distributable am	ount of any	vaar in tha haca na	rınd2			Yes No
	"Yes," the foundation does not qualify u			•	ilou.			
<u>"</u>	Enter the appropriate amount in each	column for each year; see instru	ictions befor	e making any entri	es.			
	(a) Base period years Calendar year (or tax year beginning in	(b) Adjusted qualifying dist	ributions	Net value of no	(c) ncha	ritable-use asse	ts Distrit	(d) oution ratio rided by col. (c))
_	2010							
	2009							
_	2008							
_	2007							
_	2006			!			<del> </del>	
2	Total of line 1, column (d)						2	
	Average distribution ratio for the 5-year	r base period - divide the total o	n line 2 by 5	, or by the number	of ye	ars		
	the foundation has been in existence if	•					3	
4	Enter the net value of noncharitable-us	e assets for 2011 from Part X, I	ıne 5				4	
5 Multiply line 4 by line 3					5			
6	Enter 1% of net investment income (19	% of Part I line 27h)					6	
•								<del></del>
7	Add lines 5 and 6						7	
8	Enter qualifying distributions from Part	XII, line 4					8	
	If line 8 is equal to or greater than line See the Part VI instructions.	7, check the box in Part VI, line	1b, and com	plete that part usin	g a 1	% tax rate.		

THE EXPERIMENTAL STATION

	n 990-PF (2011) C/O DANIEL A PETERMAN		0017			Page 4
_	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see I	nstr	ICTIO	ns)
18	a Exempt operating foundations described in section 4940(d)(2), check here ▶ X and enter "N/A" on line 1.		İ			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 📖 and enter 1%	1	<del> </del> -	_N/	A	
	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, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				
3	Add lines 1 and 2	3	<u> </u>			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5				0.
6	Credits/Payments:					
а	a 2011 estimated tax payments and 2010 overpayment credited to 2011 6a 6a					
	Exempt foreign organizations - tax withheld at source 6b					
	Tax paid with application for extension of time to file (Form 8868)	7				
	1 Backup withholding erroneously withheld 6d 6d	7				
	Total credits and payments. Add lines 6a through 6d	7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	. 9				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11						
	art VII-A Statements Regarding Activities		4			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interve	ne in		]	Yes	No
	any political campaign?			1a		Х
	o Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	<b>)</b>		1b		X
	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials publis					<del>  ••</del>
	distributed by the foundation in connection with the activities.	nea or				
	Did the foundation file Form 1120-POL for this year?			1c		x
	·			16		122
u	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0					ŀ
_		•				
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ 0 •					
•				2		х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			-	<u> </u>	Α_
•	If "Yes," attach a detailed description of the activities	0.5				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	, UI		_		₩.
4	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	18.7	r / 7s	4a		<u> </u>
	of "Yes," has it filed a tax return on Form 990-T for this year?	IN	I/A	4b		v
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			Ī		
	By language in the governing instrument, or				1	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state of the state	ite iaw				٦,
_	remain in the governing instrument?			6	77	X
7	,			7	X	<del>                                     </del>
	If "Yes," complete Part II, col. (c), and Part XV.				ļ	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	IL -					
b	off 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			8b	X	├─
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for call	ilendar				
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV			9_	X	<del> </del>
<u>10</u>	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X
			For	п <b>990</b>	-PF	(2011)

THE EXPERIMENTAL STATION

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Pa	art VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			}
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u> </u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► WWW.EXPERIMENTALSTATION.ORG			
14	777	41-5	458	
	Located at ▶6100 S BLACKSTONE, CHICAGO, IL ZIP+4 ▶6	0637		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b></b>	
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	· 16		_X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign			
	country			
Pε	art 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.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No			
	(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)?			
	(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.)			
b	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> 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)?	1b_		X
	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?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5));			
а	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 ▶			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect	] [		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	1 1		
	<u> </u>	1 1		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
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 approved by the Commissioner under section 4943(c)(7)) to dispose		ļ	
	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,		ĺ	
	Form 4720, to determine if the foundation had excess business holdings in 2011.)  N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
þ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b		<u> </u>

4b X Form **990-PF** (2011)

THE EXPERIMENTAL STATION 32-0017985 Form 990-PF (2011) C/O DANIEL A PETERMAN Page 6 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section \_\_\_ Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained \_\_] Yes [\_\_\_] No N/A expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? 6b X b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870 Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? 7b N/A b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Part VIII Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to (c) Compensation (e) Expense account, other allowances (b) Title, and average ployee benefit plans and deferred compensation hours per week devoted to position (If not paid, (a) Name and address enter -0-) 0 0. SEE STATEMENT 11 30,921 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred (e) Expense account, other (b) Title, and average (a) Name and address of each employee paid more than \$50,000 'hours per week (c) Compensation devoted to position allowances NONE

Form **990-PF** (2011)

Total number of other employees paid over \$50,000

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount N/A All other program-related investments. See instructions. Total. Add lines 1 through 3

Form **990-PF** (2011)

C/O DANIEL A PETERMAN

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	ee instructions )
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	1a	0.
	Average of monthly cash balances	1b	0. 110,728.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	110,728.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	110,728.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,661.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	109,067.
6	Minimum investment return. Enter 5% of line 5	6	5,453.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here   X and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011. (This does not include the tax from Part VI.)		
	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	,
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	- · · · · · · · · · · · · · · · · · · ·
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	319,438.
	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	319,438.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	319,438.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q	ualifies for t	
	4940(e) reduction of tax in those years.		

Form **990-PF** (2011)

Part XIII Und	distributed Income	(see instructions)	N/A		
		(a)	(b)	(c)	(d)
		Corpus	Years prior to 2010	2010	2011
1 Distributable amo	unt for 2011 from Part XI,		<del> </del>		
line 7	<b>,</b>				
2 Undistributed income	e, if any, as of the end of 2011				
a Enter amount for					
<b>b</b> Total for prior yea		-			<del></del>
3 Excess distributio	ns carryover, if any, to 2011:				
<b>a</b> From 2006					
<b>b</b> From 2007	<u>.</u>				
c From 2008	- 1.0				
<b>d</b> From 2009					
e From 2010	7.1.	1			
f Total of lines 3a th	nrough e	1			
4 Qualifying distribu				<del></del>	
Part XII, line 4: ►					
•	out not more than line 2a				
	buted income of prior		<del> </del>	<del></del>	
	quired - see instructions)				
c Treated as distribu	•		<del></del>		
	- see instructions)				-
d Applied to 2011 di	•	-			
	t distributed out of corpus		· · · · · · · · · · · · · · · · · · ·		
5 Excess distributions of	•			1	
(If an amount appears	in column (d), the same amount				
must be shown in col	* * *				
6 Enter the net total indicated below:	or each column as				
•	4c, and 4e Subtract line 5				
	ributed income. Subtract		**		
line 4b from line 2l					
c Enter the amount of	-		-		
undistributed inco	me for which a notice of				
	n issued, or on which				
the section 4942(a assessed	i) tax has been previously				]
d Subtract line 6c fro	om line 6h. Tayahle			<del>                                     </del>	
amount - see instri					
	me for 2010. Subtract line				
	xable amount - see instr.				
	me for 2011. Subtract	-	-	· <del> </del>	
	n line 1. This amount must				
be distributed in 20					
7 Amounts treated as					
	equirements imposed by				
section 170(b)(1)(l					
	s carryover from 2006				
not applied on line					
	ns carryover to 2012.	·	<del>-</del>		
Subtract lines 7 and	·				
O Analysis of line 9:	a o nom mic va	<del></del>	<del>                                     </del>	<del>                                     </del>	
a Excess from 2007	1				
<b>b</b> Excess from 2008					
c Excess from 2009	<del></del>				
d Excess from 2010	<del></del>				
e Excess from 2011	<del></del>				
LAUGOS II UIII ZU I I	L		I	ſ	İ

Form 990-PF (2011)

C/O DANIEL A PETERMAN

Pa	art XIV Private Operating Fo	oundations (see inst	ructions and Part VII-	A, question 9)						
1 :	a If the foundation has received a ruling or	r determination letter that i	t is a private operating							
	foundation, and the ruling is effective for 2011, enter the date of the ruling									
-	b Check box to indicate whether the found	lation is a private operating	foundation described in	section X	1942(j)(3) or 49	42(j)(5)				
2 :	a Enter the lesser of the adjusted net	Tax year		Prior 3 years						
	income from Part I or the minimum	(a) 2011	<b>(b)</b> 2010	(c) 2009	(d) 2008	(e) Total				
	investment return from Part X for	'								
	each year listed	0.	2,235.	4,066.	0.	6,301				
1	b 85% of line 2a	0.	1,900.	3,4 <u>56</u> .	0.	5,356				
(	c Qualifying distributions from Part XII,									
	line 4 for each year listed	319,438.	305,914.	224,472.	268,022.	1,117,846				
(	d Amounts included in line 2c not									
	used directly for active conduct of					_				
	exempt activities	0.	0.	0.	0.	0 .				
(	e Qualifying distributions made directly									
	for active conduct of exempt activities.									
	Subtract line 2d from line 2c	319,438.	305,914.	224,472.	268,022.	1,117,846				
3	Complete 3a, b, or c for the alternative test relied upon:									
	a "Assets" alternative test - enter:									
	(1) Value of all assets					0.				
	(2) Value of assets qualifying					_				
	under section 4942(j)(3)(B)(i)					0.				
	b "Endowment" alternative test - enter 2/3 of minimum investment return	-								
	shown in Part X, line 6 for each year					0				
	listed					0.				
•	c "Support" alternative test - enter:									
	(1) Total support other than gross investment income (interest,		1							
	dividends, rents, payments on									
	securities loans (section			242 270	217 512	6E0 001				
	512(a)(5)), or royalties)			342,378.	317,513.	659,891.				
	(2) Support from general public and 5 or more exempt									
	organizations as provided in			342,378.	317,513.	659,891.				
	section 4942(j)(3)(B)(iii)  (3) Largest amount of support from			344,376.	317,313.	039,091				
	` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			22,000.	30,000.	52,000.				
	an exempt organization (4) Gross investment income			46,280.	37,670.	83,950				
P	art XV   Supplementary Info	rmation (Complete	e this part only i							
•••	at any time during the			i ino roundation	1144 40,000 01 1110	,, o accord				
1	Information Regarding Foundation	<del></del>	•			·				
	a List any managers of the foundation who	_	an 2% of the total contri	ibutions received by the fo	oundation before the clos	se of any tax				
	year (but only if they have contributed m			,						
NO	ONE									
	b List any managers of the foundation who	own 10% or more of the	stock of a corporation (d	or an equally large portion	of the ownership of a pa	artnership or				
	other entity) of which the foundation has	a 10% or greater interest.								
NO	ONE									
2	Information Regarding Contribution	on, Grant, Gift, Loan, S	Scholarship, etc., Pro	ograms:						
	Check here 🕨 🗶 if the foundation or									
	the foundation makes gifts, grants, etc. (	see instructions) to individ	uals or organizations un	ider other conditions, con	nplete items 2a, b, c, and	d				
8	a The name, address, and telephone numb	er of the person to whom	applications should be a	iddressed:						
b	<b>b</b> The form in which applications should be	e submitted and informatio	n and materials they sho	ould include:						
	<u> </u>				<del>.</del>	<del>.</del>				
C	Any submission deadlines:									
						<del></del>				
d	Any restrictions or limitations on awards.	, such as by geographical a	areas, charitadie fields, k	anus of institutions, or oti	ier iactors:					

Form 990-PF (2011) C/O DANIEL A PETERMAN

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Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution show any relationship to any foundation manager or substantial contributor Foundation status of Amount Name and address (home or business) recipient a Paid during the year VARIOUS GRANTS TO FARMERS FOR LINK UP 43,200. PROGRAN ▶ 3a Total 43 200 b Approved for future payment NONE Total

Form 990-PF (2011)

C/O DANIEL A PETERMAN

Part XVI-A	<b>Analysis of Income-Producing Activities</b>
-	

nter gross amounts unless otherwise indicated.	Unrelated b	usiness income		y section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a FARMER'S MARKET FEES	Code	<del>.</del>	-		7,496.
b OTHER FEES	_				8,178.
•					0/2/01
	_     _				
			<del></del>		
e		_	+ + -		
g Fees and contracts from government agencies					<del></del>
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					·· <u>·</u>
<b>b</b> Not debt-financed property			16	-16,714.	<del></del>
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events			01	7,834.	
O Gross profit or (loss) from sales of inventory	900099	-34,637		1.3.2	
1 Other revenue:					
a OTHER					5,015.
b					
C					
d					
e					
2 Subtotal. Add columns (b), (d), and (e)		-34,637	' • <b>·</b>	-8,880.	20,689.
3 Total. Add line 12, columns (b), (d), and (e)	<del></del>			13	-22,828.
See worksheet in line 13 instructions to verify calculations.	.)				
Part XVI-B Relationship of Activities	s to the Accom	olishment of	Exempt Pr	ırnoses	
Taraction in Activities					- <u>-</u> -
Line No. Explain below how each activity for which in	ncome is reported in co	lumn (e) of Part XV	-A contributed	importantly to the accompa	lishment of

LIIIE NO.	Explain below now each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of							
	the foundation's exempt purposes (other than by providing funds for such purposes).							
1A	THE ORGANIZATION'S PROGRAM INCLUDES THE RUNNING OF A BICYCLE SHOP TO							
	TRAIN YOUTH AND TO PROVIDE EMPLOYMENT FOR YOUTH IN THE NEIGHBORHOOD.							
	AS PART OF THIS PROGRAM, FEES ARE CHARGED FOR REPAIR, MAINTENANCE AND							
	SALES OF BICYCLES AND PARTS.							
	THE ORGANIZATION ALSO RUNS A FARMER'S MARKET FOR THE COMMUNITY.							
	VENDORS PAY A FEE TO PARTICIPATE IN THE MARKET							
<del></del>								
	·							

32-001<u>7985 Page 13</u>

	XVII		egarding Tran	sfers To	and Transactions	and Relations		ncharitable		ige is
		Exempt Organ	izations			<u></u> _				
					ng with any other organizat		tion 501(c) of		Yes	No
		•			27, relating to political orga	anizations?				
		from the reporting founda	ation to a noncharita	able exempt or	ganization of:			4-/4)		v
•	) Cash							1a(1)		X
-	-	r assets						1a(2)		X
		isactions:	bla accept acceptance					45/41		v
•	•	s of assets to a noncharital	· -					1b(1)		X
•	•	hases of assets from a nor	•	organization				1b(2) 1b(3)		X
(3) Rental of facilities, equipment, or other assets										X
•	•	bursement arrangements						1b(4)	-	X
-	-	s or loan guarantees	mbarahin ar fundra	ining policitatio				1b(5)		X
-	-	ormance of services or me						1b(6)	_	X
	•	of facilities, equipment, mai	•		ipioyees edule. Column (b) should a	nhwave chow the fair i	market value of the c		L	- 41
		•	· · · · ·	-	red less than fair market va				, ,	
		i) the value of the goods, (				nut in any transaction	ir or snaring arrange	mont, snow m		
(a) Line	`	(b) Amount involved			e exempt organization	(d) Description	n of transfers, transaction	ns, and sharing ar	rangeme	nts
,		(-,	(0)	N/A		(2,2121)				
				11/11						
•	_	<u> </u>								
						_				
	_									
								···		
2a Is	the four	ndation directly or indirect	ly affiliated with, or	related to, one	or more tax-exempt organ	nizations described				_
ın	section	501(c) of the Code (other	than section 501(c	)(3)) or in sect	tion 527 <b>?</b>			Yes	X	No
b If	Yes," co	omplete the following sche	edule.							
		(a) Name of org	anization		(b) Type of organization		(c) Description of re	lationship		
		N/A								
		-								<u> </u>
	T				<u></u>	<u> </u>				
٠.					ng accompanying schedules an n taxpayer) is based on all infor			May the IRS or return with th		
Sign		/ mule ma	Moren	, ,	Julucha	<b>.</b>		shown below	(see inst	
Here		( ) NOVANILE!	1 y y need		1/1/19/10	EXECUTIVE	JE LIRECTO	<u>K</u> LX Yes	L	J No∣
-	Sign	nature of officer or trustee	<u>U</u>	Dronora-la -	Date	Title	Check I if I	PTIN		
		Print/Type preparer's na	ine	Preparer's s	ignature	Date	Check if self- employed	E LUN		
Do: 4		**************************************	7.7.0W3	12.	1000	1//2/1	Jen- employeu	D00446	440	
Paid	arar	ANNE C. RU		VANA TO CONTRACT	THE THE	W/14/14	Firm's EIN ► 3	P00446		
Prep Use		Firm's name ► RUZ	ICKA & AS	SOCIAT	ES, LTD4		Firm's EIN > 3	0-31824	プロ	
J36 '	<b>∵⊪y</b>	Firm's address > 2.3	3 GEOFIE	יזים דוו∩ם	APD #105		-		<u>.</u>	

Form **990-PF** (2011)

Phone no. (847)446-6400

NORTHBROOK, IL 60062

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

Department of the Treasury Internal Revenue Service

Name of the organization

### **Schedule of Contributors**

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

THE EXPERIMENTAL STATION

OMB No 1545-0047

2011

**Employer identification number** 

32-0017985 C/O DANIEL A PETERMAN Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 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 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, total 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 total 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 ▶ \$

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

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 Part I, 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).

Name of organization

Employer identification number

THE EXPERIMENTAL STATION C/O DANIEL A PETERMAN

32-0017985

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

raiti	Continuators (see instructions). Ose duplicate copies of Part I if additional	a space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	AETNA FOUNDATION  AVAILABLE UPON REQUEST  CHICAGO, IL	\$30,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	IL DEPT OF AG  AVAILABLE UPON REQUEST  CHICAGO, IL	\$10,000.	Person X Payroll Complete Part II if there is a noncash contribution )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	CHICAGO COMMUNITY TRUST  AVAILABLE UPON REQUEST  CHICAGO, IL	\$112,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	CIRCLE OF SERVICE FOUNDATION  AVAILABLE UPON REQUEST  CHICAGO, IL	\$5,865.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>5</u>	CITY OF CHICAGO  AVAILABLE UPON REQUEST  CHICAGO, IL	\$ <u>61,859.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	POLK BROTHERS  AVAILABLE UPON REQUEST  CHICAGO, IL	\$ <u>15,000.</u>	Person X Payroll

Name of organization
THE EXPERIMENTAL STATION
C/O DANIEL A PETERMAN

Employer identification number

32-0017985

Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed.

	Contributors (see instructions) Ose duplicate copies or rait in additions	a opace is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	SEATTLE'S BEST  AVAILABLE UPON REQUEST  CHICAGO, IL	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	RICHARD DRIEHAUS FOUNDATION  AVAILABLE UPON REQUEST  CHICAGO, IL	\$32,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	SPRINGBOARD FDN  AVAILABLE UPON REQUEST  CHICAGO, IL	\$15,000.	Person X Payroll
(a) <b>N</b> o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	USDA  AVAILABLE UPON REQUEST  CHICAGO, IL	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	LISC  AVAILABLE UPON REQUEST  CHICAGO, IL	\$ <u>10,000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	WHOLESOME WAFE FOUNDATION  AVAILABLE UPON REQUEST  CHICAGO, IL	\$ <u>15,000.</u>	Person X Payroll  Noncash  (Complete Part II if there is a noncash contribution)

Name of organization

THE EXPERIMENTAL STATION

C/O DANIEL A PETERMAN

Employer identification number

32-0017985

Part I	Contributors (see instructions) Use duplicate copies of Part I if a	dditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	MCGRAW FOUNDATION  AVAILABLE UPON REQUEST  CHICAGO, IL	\$\$.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14	HARPER COUNCIL  AVAILABLE UPON REQUEST  CHICAGO, IL	s10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total 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) Total 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) Total 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) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

THE EXPERIMENTAL STATION C/O DANIEL A PETERMAN

32-0017985

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	000 000 57 000 P51 (0014)

vame of orga			Employer Identification number
	PERIMENTAL STATION		_ 32-0017985
Part III	NIEL A PETERMAN  Exclusively religious, charitable, etc., indi year. Complete columns (a) through (e) and t the total of exclusively religious, charitable, et Use duplicate copies of Part III if addition	he following line entry. For organizations co c., contributions of <b>\$1,000 or less</b> for the ye	8), or (10) organizations that total more than \$1,000 for the
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
-	Transferee 3 name, address, a		Telescionary of Cultion of the Guillette
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
-	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
		(e) Transfer of gift	

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

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Asset	Description	Date Acquired Me	Method	Lıfe	No	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	ОТНЕК											
24	24COMPUTER	070111SL		3.00 1	16	924.			924.	-		154.
	JOU-FF FG I					924.		0	924.	0	0	154.
	BUILDINGS LEASEHOLD											
<u> </u>	IMPROVEMENTS	100105SL		15.00	017	7,500.	·-		7,500.	2,563.		500.
4	4IMPROVEMENTS	110106SL		15.001	17	7,884.			7,884.	2,367.		526.
9	GREEN ROOF	0905060		15.001	17	5,000.	<u> </u>		5,000.	1,332.		333.
21	DOOR & TRIM	031211SL		15.001	91	420.	_		420.			14.
	UILDINGS					20,804.		0	20,804.	6,262.	0	1,373.
	-i					21,728.		0	21,728.	6,262.	0	1,527.
	MACHINERY & EQUIPMENT											,
ñ	30VEN	060105SL		7.00	17	6,388.		·-	6,388.	5,135.		913.
Ω	SOVEN	071006SL		7.00	17	687.			687.	422.		98.
œ ·	8OVEN * 990-59 50 1 HOHAT	070107SL		7.00	17	2,208.			2,208.	1,103.		315.
	ACHINERY & EQ 990-PF PG 1					9,283.		0	9,283.	6,660.	0	1,326.
	· 원					9,283.	_	0	9,283.	6,660.	0	1,326.
T	1EQUIPMENT	04151081		5.00 1	17	2,650.			2,650.	266.		530.

128102 05-01-11

(D) - Asset disposed

2011 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

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·	T :	•		•	<del>-</del> :	•	<u> </u>	•	•		•	•		<u>-</u> -		·		-
Current Year Deduction	147	0	09	323	50	159	309	1,578	1,578	٠	318	325	32	32	707	707		
Current Sec 179					_	<u>-</u>		0	0					-	0	0		
Accumulated Depreciation	515.	63.	150.	807.	125.	205.		2,131.	2,131.		1,114.	813.	48.		1,975.	1,975.		
Basis For Depreciation	1,030.	63.	300.	1,615.	250.	793.	3,090.	9,791.	9,791.		1,592.	1,625.	162.	339.	3,718.	3,718.		_
Reduction In Basis								0	0						0	0		_
Bus % Excl																-		-
Unadjusted Cost Or Basis	1,030.	63.	300.	1,615.	250.	793.	3,090.	9,791.	9,791.		1,592.	1,625.	162.	339.	3,718.	3,718.		_
Line No	17	16	16	16	16	16	16				17	16	16	16				_
Life	7.00	1.00	5.00	5.00	5.00	5.00	5.00		·		5.00	5.00	5.00	5.00				
Method	SL	SL	SL	SL	SL	SL	SL				SL		SL	SL				
Date Acquired	070107SL	070108SL	070108SL	070108SL	070108SL	070109SL	093011SL				070107SL	070108SL	070109SL	063011SL				_
Description	FURNITURE & 9FIXTURES	12MARKET STOVE	13TABLES	14MARKET CANOPIES	15CHAIRS	18CANOPY & RACKS	, CHAINS	E KG F	+ ) 4		10BBW TOOLS	16BBW TOOLS	19BBW TOOLS	23BBW TOOLS	ACHINERY & EQ	י שי	EQUIPMENT	
Asset No	<del>- 8</del>	12	13	14	15	18	22,	<u></u>	<u></u>	<u> </u>	10	161	191	231	<u></u> *		<del></del>	_

(D) - Asset disposed

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

2011 DEPRECIATION AND AMORTIZATION REPORT FORM 990-PF PAGE 1

990-PF

Current Year Deduction	0.	124.	456.	580.	580.	5,718.	
Current Sec 179				0	0	0	
. Accumulated Depreciation	762.	617.	844.	3,871.	3,871.	20,899.	•
Basis For Depreciation	762.	741.	1,368.	4,519.	4,519.	49,039.	
Reduction In Basis				0.	0	0	
Bus % Excl						-	
Unadjusted Cost Or Basis	762.	741.	1,368.	4,519.	4,519.	49,039.	
No No	17	16	16				
Life	3.00	3.00	3.00		·		
Method	l						
Date Acquired	070107SL	070108SL	071009SL				
Description	11COMPUTER	17COMPUTER	20COMPUTER	ACHINERY & EQ	- * CD	990-PF PG 1 DEPR	
Asset No	11	17	20	•			

(D) - Asset disposed

\* ITC, Section 179, Salvage, Bonus, Commercial Revitalization Deduction

FORM 990-PF	RENTAL	INCOME		STATEMENT 1
KIND AND LOCATION OF PROP	ERTY		ACTIVITY NUMBER	GROSS RENTAL INCOME
LEASE RENTALS EVENT RENTALS			1 2	17,663. 14,941.
TOTAL TO FORM 990-PF, PAR	r I, LINE 5A			32,604.
FORM 990-PF	RENTAL E	XPENSES		STATEMENT 2
DESCRIPTION		ACTIVITY NUMBER	AMOUNT	TOTAL
INSURANCE OCCUPANCY DEPRECIATION OTHER INSURANCE OCCUPANCY DEPRECIATION CLEANING, MAINTENANCE AND	- SUBTOTAL - REPAIRS AND	1	2,662. 30,659. 2,456. 131. 887. 10,082. 819.	35,908.
OTHER	- SUBTOTAL -	2	1,622.	13,410.
				· · · · · · · · · · · · · · · · · · ·
TOTAL RENTAL EXPENSES				49,318.

FORM 990-PF	INCOME AND COST OF GOODS SOI INCLUDED ON PART I, LINE 10		ATEMENT 3
INCOME			
2. RETURNS AND ALLO	WANCES	123,293	123,293
	LD (LINE 15)	157,930	-34,637
7. GROSS INCOME (AD)	D LINES 5 AND 6)		-34,637
9. MERCHANDISE PURCE 10. COST OF LABOR 11. MATERIALS AND SUI 12. OTHER COSTS	PPLIES	3,598 36,409 67,441 7,127 48,726	163,301
14. INVENTORY AT END 15. COST OF GOODS SO	OF YEAR LD (LINE 13 LESS LINE 14)	5,371	157,930

FORM 990-PF COS	T OF GOODS	SOLD - OTHER	COSTS	STATEMENT 4
DESCRIPTION				AMOUNT
PAYROLL TAXES			-	5,372.
OCCUPANCY				15,763.
INSURANCE OUTSIDE SERVICES				3,5 <b>4</b> 3. 10,300.
OTHER				13,748.
TOTAL OTHER COSTS			- -	48,726.
FORM 990-PF	OTHER	INCOME		STATEMENT 5
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
FARMER'S MARKET FEES	-	7,496	5. 0	. 7,496.
OTHER FEES		8,178		8,178.
OTHER GROSS INCOME FROM SPECIAL		5,015	0	5,015.
FUNDRAISING EVENTS		15,530	0.	. 15,530.
TOTAL TO FORM 990-PF, PART	I, LINE 11	36,219	0.	36,219.
FORM 990-PF	A CCOUNT	ATNO EDDO		COMPANIA C
FORM 990-PF	ACCOUN	ring fees		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOK	(B) NET INVEST S MENT INCOM		(D) CHARITABLE PURPOSES
ACCOUNTING & AUDIT	7,26		<del></del>	7,265.
TO FORM 990-PF, PG 1, LN 161	B 7,26	·	0.	7,265.

FORM 990-PF (	OTHER PROFES	SIONAL FEES	S7	PATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OTHER	41,027.	0.	0.	39,819.
TO FORM 990-PF, PG 1, LN 16C =	41,027.	0.	0.	39,819.
FORM 990-PF	TAX	ES	Si	'ATEMENT 8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PAYROLL TAXES LICENSES AND FEES	11,282. 76.	0.	0.	11,282. 76.
TO FORM 990-PF, PG 1, LN 18 =	11,358.	0.	0.	11,358.
FORM 990-PF	OTHER E	XPENSES	Sī	'ATEMENT 9
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ADVERTISING AND PROMOTION POSTAGE AND SUPPLIES INSURANCE BANK CHARGES REIMBURSEMENTS OTHER EQUIPMENT RENTAL INSURANCE INSURANCE	2,770. 4,323. 3,606. 4,713. 23,213. 8,031. 1,080. 2,662. 887.	0. 0. 0. 0. 0. 0. 2,662. 887.	0. 0. 0. 0. 0. 0. 2,662. 887.	2,770. 4,323. 3,606. 4,713. 23,213. 8,031. 1,080. 0.
TO FORM 990-PF, PG 1, LN 23	51,285.	3,549.	3,549.	47,736.

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
EQUIPMENT	2,650.	796.	1,854.
LEASEHOLD IMPROVEMENTS	7,500.	3,063.	4,437.
OVEN	6,388.	6,048.	340.
LEASEHOLD IMPROVEMENTS	7,884.	2,893.	4,991.
OVEN	687.	520.	167.
GREEN ROOF	5,000.	1,665.	3,335.
COMPUTER EQUIPMENT	1,648.	1,648.	0.
OVEN	2,208.	1,418.	790.
FURNITURE & FIXTURES	1,030.	662.	368.
BBW TOOLS	1,592.	1,432.	160.
COMPUTER	762.	762.	0.
MARKET STOVE	63.	63.	0.
TABLES	300.	210.	90.
MARKET CANOPIES	1,615.	1,130.	485.
CHAIRS	250.	175.	75.
BBW TOOLS	1,625.	1,138.	487.
COMPUTER	741.	741.	0.
CANOPY & RACKS	793.	364.	429.
BBW TOOLS	162.	80.	82.
COMPUTER	1,368.	1,300.	68.
DOOR & TRIM	420.	14.	406.
TABLES, CHAIRS & OTHER	3,090.	309.	2,781.
BBW TOOLS	339.	32.	307.
COMPUTER	924.	154.	770.
TOTAL TO FM 990-PF, PART II, LN 14	49,039.	26,617.	22,422.

FORM 990-PF DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 10

	ART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS			STATEMENT 11		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB			
CONNIE SPREEN, PHD	EXECUTIVE DIR	ECTOR 30,921.	0.	0.		
DAN PETERMAN	DIRECTOR 1.00	0.	0.	0.		
LINDA GLASS	DIRECTOR 1.00	0.	0.	0.		
MARTY FRIEDMAN	PRESIDENT 4.00	0.	- O.	0.		
FLORA LAZAR	DIRECTOR 1.00	0.	0.	0.		
FAHEEM MAJEED	DIRECTOR 1.00	0.	0.	0.		
KATE MILLER	SECRETARY 4.00	0.	0.	0.		
TOTALS INCLUDED ON 990-PF,	PAGE 6, PART VIII	30,921.	0.	0.		

Form 8868 (Rev. 1-2012)					Page 2
If you are filing for an Additional (Not Automatic) 3-Month Ext	tension, d	complete only Part II and check the	s box		▶ X
Note. Only complete Part II if you have already been granted an a				8868.	
• If you are filing for an Automatic 3-Month Extension, complet					
Part II Additional (Not Automatic) 3-Month Ex	xtensio	n of Time. Only file the origi	nal (no c	opies need	ded)
		Enter filer's	identifyi	ng number, s	ee instructions
Type or Name of exempt organization or other filer, see instruc	ctions		Employe	r identification	number (EIN) or
print THE EXPERIMENTAL STATION					
File by the C/O DANIEL A PETERMAN			LXI_	32-001	
ling your		Social se	curity numbe	r (SSN)	
return See 6100 S BLACKSTONE					
City, town or post office, state, and ZIP code. For a fo	reign add	lress, see instructions.			
CHICAGO, IL 60637		·		_	
Enter the Return code for the return that this application is for (file	a separa	te application for each return)			0 4
		I			Datasas
Application	Return	Application			Return
Is For	Code	Is For			Code
Form 990	01 02	Form 1041-A			08
Form 990-BL	02	Form 4720			09
Form 990-EZ Form 990-PF	04	Form 5227			10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870	· · · · · · · · · · · · · · · · · · ·		12
STOP! Do not complete Part II if you were not already granted			viously file	ad Form 8868	
DAN PETERMAN	un daton	THE CONTROL OF THE PROPERTY OF	industry in	<del>54 : 51 : 11 : 555</del>	<u> </u>
• The books are in the care of <b>►</b> 6100 S BLACKSTO	NE -	CHICAGO, IL 60637	•		
Telephone No ▶ 773-241-5458		FAX No ▶			
If the organization does not have an office or place of business	ın the Ur				
<ul> <li>If this is for a Group Return, enter the organization's four digit 0</li> </ul>			If this is fo	r the whole gr	oup, check this
		ich a list with the names and EINs o			
4 I request an additional 3-month extension of time until					
5 For calendar year 2011, or other tax year beginning		, and endir	ng		
6 If the tax year entered in line 5 is for less than 12 months, ch	neck reas	on: Initial return	Final i	eturn	
Change in accounting period					
7 State in detail why you need the extensionSEE STA	TEME	NT 12			
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, o	or 6069, e	nter the tentative tax, less any			_
nonrefundable credits. See instructions.		····	8a	\$	0.
<b>b</b> If this application is for Form 990-PF, 990-T, 4720, or 6069, 6	enter any	refundable credits and estimated			
tax payments made Include any prior year overpayment allo	owed as a	credit and any amount paid			_
previously with Form 8868			8b	\$	0.
c Balance due. Subtract line 8b from line 8a Include your pay		h this form, if required, by using			•
EFTPS (Electronic Federal Tax Payment System) See instru		Albanania II Bara	8c_	\$	0.
<u> </u>		st be completed for Part II	-		
Under penalties of perjury, I declare that I have examined this form, including the strue, correct, and complete, and that I am authorized to prepare this for	ng accomp rm.	anying schedules and statements, and t	o the best c	i my knowledge	e and belief,
Signature Title C		TENT	Date		

Form **8868** (Rev. 1-2012)

12

FORM 8688 EXPLANATION FOR EXTENSION STATEMENT

EXPLANATION

THE AUDIT OF THE FINANCIAL RECORDS HAS NOT BEEN COMPLETED. OUR CLIENT WISHES TO COMPLETE THE AUDIT SO THAT A PROPER RETURN CAN BE FILED. ADDITIONAL TIME IS NEEDED TO COMPLETE THE AUDIT AND FILE A PROPER RETURN

### Form 8868

(Rev. January 2012)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

<b>A</b> 15			. I and about this boy			<b>▶</b> X
	are filing for an Automatic 3-Month Extension, compl					
	are filing for an Additional (Not Automatic) 3-Month E					
	complete Part II unless you have already been granted					_
	nic filing (e-file). You can electronically file Form 8868 if					
	to file Form 990-T), or an additional (not automatic) 3-me					
	o file any of the forms listed in Part I or Part II with the ex					
Personal	Benefit Contracts, which must be sent to the IRS in pa	per format	(see instructions). For more details of	on the el	ectronic filing of tl	nis form,
visit www	v.irs gov/efile and click on e-file for Charities & Nonprofit	s.			<u></u>	
Part I	Automatic 3-Month Extension of Tim	e. Only:	submit original (no copies ne	eded).		
A corpora	ation required to file Form 990-T and requesting an auto				е	
Part I onl						.▶ □
	corporations (including 1120-C filers), partnerships, RENome tax retums.	AICs, and t	rusts must use Form 7004 to reques	t an exte	ension of time	
Type or	Name of exempt organization or other filer, see instru	actions.		Employ	er identification n	umber (EIN) or
print	THE EXPERIMENTAL STATION		1			
•	C/O DANIEL A PETERMAN			X	32-0017	985
File by the due date for	Number, street, and room or suite no. If a P.O. box, s	see instruc	tions.	Socials	secunty number (S	
filing your	6100 S BLACKSTONE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			(-	,
return See instructions	City, town or post office, state, and ZIP code. For a fe	oreign add	ress see instructions			
	CHICAGO, IL 60637	oreign add				
<del></del> -	CHICAGO, IL 00037					
Enter the i	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
Application	on .	Return	Application			Return
s For		Code	Is For			Code
orm 990	- · · · · · · · · · · · · · · · · · · ·	01	Form 990-T (corporation)			07
orm 990-	RI	02	Form 1041-A		· · · · · · · · · · · · · · · · · · ·	08
Form 990-		01	Form 4720			09
orm 990-l		04	Form 5227			10
		05	Form 6069			11
	(sec. 401(a) or 408(a) trust)	<del></del>			<del></del>	12
-OIIII 990-	(trust other than above)	06	Form 8870		·	12
	DAN PETERMAN	<b></b>	GUTGAGO TI 60627			
	oks are in the care of $\triangleright$ 6100 S BLACKSTO	ONE -	and the second s			<del></del>
	ne No. ► <u>773-241-5458</u>		FAX No. >			_
	ganization does not have an office or place of business					
If this is	for a Group Return, enter the organization's, four digit (	Group Exe	mption Number (GEN) If	this is fo	or the whole group	o, check this
ox 🕨 🛴	. If it is for part of the group, check this box 🕨 🔝	-and attac	ch a list with the names and ElNs of	all memi	bers the extension	n is for.
1 I requ	iest an automatic 3-month (6 months for ຂົ່າ corporation	feij bii ie C	o file Form 990-T) extension of time :	until		
	UGUST 15, 2012 to file the exempt	organizat	ion return for the organization name	d above.	. The extension	
is for	the organization's return for: MAY 1 4 2012					
►Œ	calendar year 2011 or					
▶□	tax year beginning	, and	l ending		•	
	SCHILLER PARK, ILI					
lf the	tax year entered in line 1 is for less than 12 months, ch	ieck reaso	n: Initial return F	inal retu	m	
	Change in accounting period					
	onaligo in dooddining ponod					
a If this	application is for Form 990-BL, 990-PF, 990-T, 4720, o	r 6069 en	ter the tentative tax loss any			
		1 0008, 811	te, the terrialise tax, less any	20	s	0.
	fundable credits. See instructions		-fundable grades and	3a		
	application is for Form 990-PF, 990-T, 4720, or 6069, e	-				^
	ted tax payments made. Include any prior year overpa			3b	\$	0.
	ce due. Subtract line 3b from line 3a. Include your pay				] .	_
by usir	ng EFTPS (Electronic Federal Tax Payment System). S	ee instruc	tions.	3c_	\$	0.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2012)

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Page	. 0

FOITH 6000 (NEV 1-2012)					raye z
<ul> <li>If you are filing for an Additional (Not Automatic) 3-M</li> </ul>	onth Extension,	complete only Part II and ch	neck this box .	•	$\triangleright x$
Note. Only complete Part II if you have already been gran	ited an automatic	: 3-month extension on a prev	viously filed Forn	n 8868	
<ul> <li>If you are filing for an Automatic 3-Month Extension,</li> </ul>	complete only P	art I (on page 1)			
Part II Additional (Not Automatic) 3-Mo	onth Extension	on of Time. Only file the	original (no	copies ne	eded).
		Ente	r filer's identify	ing number,	see instructions
Type or Name of exempt organization or other filer, se	e instructions		Employ	er identificati	on number (EIN) or
print THE EXPERIMENTAL STATION	J				
File by the C/O DANIEL A PETERMAN				32-00	)17985
due date for Number, street, and room or suite no. If a P.O.	. box, see instruc	ctions.	Socials	secunty numb	per (SSN)
filing your return See 6100 S BLACKSTONE					
City, town or post office, state, and ZIP code	For a foreign add	dress, see instructions.			
CHICAGO, IL 60637					
		WIE	_		
Enter the Return code for the return that this application is	s for (file a separa	te application for each reach	War		. 0 4
		OCX C	in p		
Application	Return	Application	LEEVE.		Return
Is For	Code	Is For	TO SO SIN	<b>%</b>	Code
Form 990	01	1. 1 1. 1. 1. 1. 1. 1. 1. AU	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	SSA	
Form 990-BL	02	Form 1041-A	1 5 20 L	ANT VIO	08
Form 990-EZ	01	Form 4720	2012	9758.0E	09
Form 990-PF	04	Fórm 5227	11.	6	10
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
Form 990-T (trust other than above)	06	Form 8870	3		12
STOP! Do not complete Part II if you were not already g	ranted an autor	natic 3-month extension on	a previously fil	ed Form 886	<del></del> 38.
DAN PETERMA				<del>-</del>	
<ul> <li>The books are in the care of ► 6100 S BLAC</li> </ul>		CHICAGO, IL 60	0637		
Telephone No ► 773-241-5458		FAX No. ▶			
If the organization does not have an office or place of b	 usiness in the Ur		-		
If this is for a Group Return, enter the organization's four				or the whole (	group, check this
box If it is for part of the group, check this box		ch a list with the names and			
4 I request an additional 3-month extension of time unit					
5 For calendar year 2011, or other tax year beginn			d ending		
6 If the tax year entered in line 5 is for less than 12 mo				return	
Change in accounting period					
7 State in detail why you need the extension SEE	STATEME	VT 4			
	<u></u>			<del></del>	
		·	+5		
<del> </del>					
8a If this application is for Form 990-BL, 990-PF, 990-T,	4720 or 6069 e	nter the tentative tax, less an	V	T	
nonrefundable credits. See instructions.	1,20,0,0000,0	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	8a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or	6060 enter any	refundable credits and estim		+	
tax payments made. Include any prior year overpaym			4.00	1	
previously with Form 8868	ient anowed as a	create and any amount paid	8b	s	0.
	our pourpont with	h this form if required by us		+3	
c Balance due. Subtract line 8b from line 8a Include y		i this form, it required, by asi	1 lg 8c	s	0.
EFTPS (Electronic Federal Tax Payment System) See		t be completed for Pa		<u> </u>	
<del>_</del>				of my knowled	na and halinf
Inder penalties of perjury, I declare that I have examined this form, is true, correct, and complete, and that I am authorized to prepare	this form.	anying soneonies and sidement	o, and to the Dest	a my knowied(	Je altu velici,
		ኒ ተ	Date	8	رداليا
ignature > // // Chagaille Tub	CPA-AC	10TAT	Dati		27/12 2000 (Pay 1 2010)
0				LOW 8	3868 (Rev 1-2012)