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

2011

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

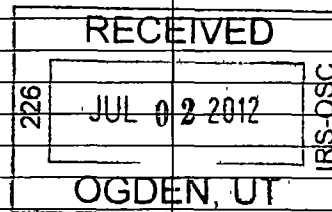
For calendar year 2011 or tax year beginning

, and ending

Name of foundation GRANT HOSPITAL OF CHICAGO D/B/A GRANT HEALTHCARE FOUNDATION		A Employer identification number 36-2167090
Number and street (or P O box number if mail is not delivered to street address) 500 NORTH WESTERN AVENUE	Room/suite 204	B Telephone number 847-735-1590
City or town, state, and ZIP code LAKE FOREST, IL 60045		C If exemption application is pending, check here ☐
G Check all that apply: ☐ Initial return ☐ Final return ☐ Address change ☐ Initial return of a former public charity ☐ Amended return ☐ Name change		D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐
H Check type of organization: ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ☐
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 16,025,558.	J Accounting method: ☐ Cash ☒ Accrual ☐ Other (specify) _____ (Part I, column (d) must be on cash basis.)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received				N/A	
2 Check ☒ if the foundation is not required to attach Sch B					
3 Interest on savings and temporary cash investments		130.	130.		STATEMENT 1
4 Dividends and interest from securities		417,088.	417,088.		STATEMENT 2
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10		233,008.			
b Gross sales price for all assets on line 6a 10,936,308.					
7 Capital gain net income (from Part IV, line 2)			233,008.		
8 Net short-term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income		<38,116.>	<38,116.>		STATEMENT 3
12 Total. Add lines 1 through 11		612,110.	612,110.		
13 Compensation of officers, directors, trustees, etc		0.	0.		0.
14 Other employee salaries and wages		7,035.	0.		0.
15 Pension plans, employee benefits					
16a Legal fees STMT 4		11,373.	0.		0.
b Accounting fees STMT 5		15,850.	0.		0.
c Other professional fees STMT 6		74,162.	74,162.		0.
17 Interest		22,506.	0.		0.
18 Taxes STMT 7		16,950.	2,623.		0.
19 Depreciation and depletion		168.	0.		
20 Occupancy		16,399.	0.		0.
21 Travel, conferences, and meetings		867.	0.		0.
22 Printing and publications					
23 Other expenses STMT 8		136,694.	0.		0.
24 Total operating and administrative expenses. Add lines 13 through 23		302,004.	76,785.		0.
25 Contributions, gifts, grants paid		1,275,063.			1,275,063.
26 Total expenses and disbursements. Add lines 24 and 25		1,577,067.	76,785.		1,275,063.
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements		<964,957.>			
b Net investment income (if negative, enter -0-)			535,325.		
c Adjusted net income (if negative, enter -0-)				N/A	

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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	
				(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash - non-interest-bearing		155,733.	262,295.	262,295.
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons				
	7	Other notes and loans receivable ▶				
		Less: allowance for doubtful accounts ▶				
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10a	Investments - U.S. and state government obligations				
	b	Investments - corporate stock STMT 10	5,344,695.	5,490,361.	5,490,361.	
	c	Investments - corporate bonds				
11	Investments - land, buildings, and equipment: basis ▶					
	Less: accumulated depreciation ▶					
12	Investments - mortgage loans					
13	Investments - other STMT 11	12,357,048.	9,783,715.	9,783,715.		
14	Land, buildings, and equipment: basis ▶ 9,643.					
	Less: accumulated depreciation ▶ 9,521.	290.	122.	122.		
15	Other assets (describe ▶ STATEMENT 12)	468,024.	489,065.	489,065.		
16	Total assets (to be completed by all filers)	18,325,790.	16,025,558.	16,025,558.		
Liabilities	17	Accounts payable and accrued expenses	502,389.	526,929.		
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons				
	21	Mortgages and other notes payable				
	22	Other liabilities (describe ▶)				
	23	Total liabilities (add lines 17 through 22)	502,389.	526,929.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ ☒ and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted	17,716,205.	15,391,433.		
	25	Temporarily restricted	107,196.	107,196.		
	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	17,823,401.	15,498,629.		
	31	Total liabilities and net assets/fund balances	18,325,790.	16,025,558.		

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	17,823,401.
2	Enter amount from Part I, line 27a	2	<964,957.>
3	Other increases not included in line 2 (itemize) ▶	3	0.
4	Add lines 1, 2, and 3	4	16,858,444.
5	Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 9	5	1,359,815.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	15,498,629.

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Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a				
b	SEE ATTACHED STATEMENT			
c				
d				
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e	10,936,308.	10,703,300.	233,008.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			233,008.

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	233,008.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		3	N/A

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2010	1,192,069.	17,849,638.	.066784
2009	1,189,877.	16,900,860.	.070403
2008	1,500,401.	22,792,902.	.065828
2007	2,224,321.	29,639,680.	.075045
2006	1,784,819.	29,486,492.	.060530

2 Total of line 1, column (d)	2	.338590
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	.067718
4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5	4	16,918,039.
5 Multiply line 4 by line 3	5	1,145,656.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	5,353.
7 Add lines 5 and 6	7	1,151,009.
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.	8	1,275,063.

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b		1	5,353.
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	0.
3 Add lines 1 and 2		3	5,353.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	5,353.
6 Credits/Payments:			
a 2011 estimated tax payments and 2010 overpayment credited to 2011	6a 7,822.		
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c 1,500.		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	9,322.	
8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8	2.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	3,967.	
11 Enter the amount of line 10 to be: Credited to 2012 estimated tax ☒ 3,967. Refunded ☐	11	0.	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
1c Did the foundation file Form 1120-POL for this year?		X
d 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.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ☒ \$ 0.		
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.		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? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • 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?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ☒ IL		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	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 calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

N/A

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Part 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		X
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? Website address ► <u>WWW.GRANTHEALTHCARE.ORG</u>	13	X	
14	The books are in care of ► <u>JOAN ELDRIDGE RIDELL</u> Telephone no. ► <u>847-735-1590</u> Located at ► <u>500 N. WESTERN AVE., SUITE 204, LAKE FOREST, IL</u> ZIP+4 ► <u>60045</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year	15	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, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ►	16	Yes	No
				X

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.

		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? ☐ Yes ☒ No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ 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)? ☐ Yes ☒ 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 ☒ 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)? Organizations relying on a current notice regarding disaster assistance check here ☐ N/A	1b	
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? ☐ Yes ☒ No	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)):		
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 ☒ No If "Yes," list the years ►		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) ☐ Yes ☒ No	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. ☐ Yes ☒ No		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ 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 approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011.) ☐ Yes ☒ No	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b	X

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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:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

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

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 expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

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 a personal benefit contract?

☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

X

If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation.

(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 account, other allowances
SEE STATEMENT 13		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

0

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	16,487,910.
b	Average of monthly cash balances	1b	209,014.
c	Fair market value of all other assets	1c	478,750.
d	Total (add lines 1a, b, and c)	1d	17,175,674.
e	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	17,175,674.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	257,635.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	16,918,039.
6	Minimum investment return. Enter 5% of line 5	6	845,902.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	845,902.
2a	Tax on investment income for 2011 from Part VI, line 5	2a	5,353.
b	Income tax for 2011. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	5,353.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	840,549.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	840,549.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	840,549.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	1,275,063.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	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	1,275,063.
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	5,353.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,269,710.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7				840,549.
2 Undistributed income, if any, as of the end of 2011:				
a Enter amount for 2010 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2011:				
a From 2006	357,056.			
b From 2007	805,413.			
c From 2008	367,794.			
d From 2009	350,264.			
e From 2010	315,449.			
f Total of lines 3a through e	2,195,976.			
4 Qualifying distributions for 2011 from Part XII, line 4: ▶ \$	1,275,063.			
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2011 distributable amount				840,549.
e Remaining amount distributed out of corpus	434,514.			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,630,490.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2010. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2006 not applied on line 5 or line 7	357,056.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	2,273,434.			
10 Analysis of line 9:				
a Excess from 2007	805,413.			
b Excess from 2008	367,794.			
c Excess from 2009	350,264.			
d Excess from 2010	315,449.			
e Excess from 2011	434,514.			

N/A

- b**
- Check box to indicate whether the foundation is a private operating foundation described in section
- ☐
- 4942(j)(3) or
- ☐
- 4942(j)(5)

- | Tax year | Prior 3 years | | | | |
|----------|---------------|----------|----------|--|-----------|
| (a) 2011 | (b) 2010 | (c) 2009 | (d) 2008 | | (e) Total |
| | | | | | |

- (4) Gross investment income

2011.03060 GRANT HOSPITAL OF CHICAGO D 050709 1

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

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	Amount
a Paid during the year				
SEE ATTACHED	NONE	PUBLIC CHARITIES		1,275,063.
Total			3a	1,275,063.
b Approved for future payment				
NONE				
Total			3b	0.

Enter gross amounts unless otherwise indicated.

(See worksheet in line 13 instructions to verify calculations.)

Line No. ▼	Explain below how 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).

[illegible]

Part XVII

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

- | | | | | |
|----------|--|--------------|------------|-----------|
| 1 | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | Yes | No |
| a | Transfers from the reporting foundation to a noncharitable exempt organization of: | | | |
| | (1) Cash | 1a(1) | | X |
| | (2) Other assets | 1a(2) | | X |
| b | Other transactions: | | | |
| | (1) Sales of assets to a noncharitable exempt organization | 1b(1) | | X |
| | (2) Purchases of assets from a noncharitable exempt organization | 1b(2) | | X |
| | (3) Rental of facilities, equipment, or other assets | 1b(3) | | X |
| | (4) Reimbursement arrangements | 1b(4) | | X |
| | (5) Loans or loan guarantees | 1b(5) | | X |
| | (6) Performance of services or membership or fundraising solicitations | 1b(6) | | X |
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees | 1c | | X |
| d | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. | | | |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.				May the IRS discuss this return with the preparer shown below (see instr. 1)? ☒ Yes ☐ No		
	 Signature of officer or trustee		6/26/2012 Date		Chairman Title		
Paid Preparer Use Only	Print/Type preparer's name		Preparer's signature		Date	Check ☐ if self-employed	PTIN
	DENNIS P. O'BRIEN				6/23/12		P00008832
	Firm's name ▶ PASQUESI SHEPPARD LLC					Firm's EIN ▶ 36-4049282	
	Firm's address ▶ 585 BANK LANE LAKE FOREST, IL 60045					Phone no. 847 234-5000	

Form **990-PF** (2011)

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	5456 SHS DODGE & COX	P		
b	26958 SHS LEUTHOLD GLOBAL	P		
c	3043 SHS HARBOR FUND INT'L	P		
d	CHICAGO TRUST - SEE ATTACHED	P		
e	CHICAGO TRUST - SEE ATTACHED	P		
f	CHICAGO TRUST - SEE ATTACHED	P		
g	CHICAGO TRUST - SEE ATTACHED	P		
h	CHICAGO TRUST - SEE ATTACHED	P		
i	CHICAGO TRUST - SEE ATTACHED	P		
j	DRIEHAUS ACTIVE INCOME FUND	P		
k	DRIEHAUS SMALL CAP FUND	P		
l	ECKHARDT FUTURES LP	P		
m	CAPITAL GAINS DIVIDENDS			
n				
o				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 167,864.		233,854.	<65,990.>
b 262,819.		399,521.	<136,702.>
c 167,864.		194,246.	<26,382.>
d 4,868,831.		4,964,368.	<95,537.>
e 2,679,961.		2,293,182.	386,779.
f 108,601.		114,177.	<5,576.>
g 1,951,469.		1,848,195.	103,274.
h 107,853.		97,560.	10,293.
i 572,334.		427,440.	144,894.
j 298.			298.
k 25,828.			25,828.
l		130,757.	<130,757.>
m 22,586.			22,586.
n			
o			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			<65,990.>
b			<136,702.>
c			<26,382.>
d			<95,537.>
e			386,779.
f			<5,576.>
g			103,274.
h			10,293.
i			144,894.
j			298.
k			25,828.
l			<130,757.>
m			22,586.
n			
o			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }	2	233,008.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8	3	N/A

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	AMOUNT
LAKE FOREST BANK & TRUST	130.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	130.

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
CHICAGO TRUST - FMA	107,538.	20,258.	87,280.
CHICAGO TRUST - MITCHELL	21,641.	0.	21,641.
CHICAGO TRUST - MUTUAL FUNDS	136,254.	2,328.	133,926.
DRIEHAUS ACTIVE INCOME FUND	34,369.	0.	34,369.
DRIEHAUS SMALL CAP RECOVERY LP	2,883.	0.	2,883.
ECKHARDT FUTURES LP	695.	0.	695.
LAZARD LTD	61.	0.	61.
TD AMERITRADE	136,233.	0.	136,233.
TOTAL TO FM 990-PF, PART I, LN 4	439,674.	22,586.	417,088.

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
INVESTMENT ORDINARY INCOME	<38,116.>	<38,116.>	
TOTAL TO FORM 990-PF, PART I, LINE 11	<38,116.>	<38,116.>	

FORM 990-PF	LEGAL FEES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PROFESSIONAL FEES	11,373.	0.		0.	
TO FM 990-PF, PG 1, LN 16A	11,373.	0.		0.	

FORM 990-PF	ACCOUNTING FEES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	15,850.	0.		0.	
TO FORM 990-PF, PG 1, LN 16B	15,850.	0.		0.	

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INVESTMENT MANAGEMENT FEES	74,162.	74,162.		0.	
TO FORM 990-PF, PG 1, LN 16C	74,162.	74,162.		0.	

FORM 990-PF	TAXES			STATEMENT	7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PAYROLL TAXES	8,927.	0.		0.	
FEDERAL EXCISE TAX	5,400.	0.		0.	
FOREIGN TAXES	2,623.	2,623.		0.	
TO FORM 990-PF, PG 1, LN 18	16,950.	2,623.		0.	

FORM 990-PF	OTHER EXPENSES			STATEMENT	8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
OFFICE EXPENSE	136,694.	0.			0.
TO FORM 990-PF, PG 1, LN 23	136,694.	0.			0.

FORM 990-PF	OTHER DECREASES IN NET ASSETS OR FUND BALANCES	STATEMENT	9
DESCRIPTION		AMOUNT	
UNREALIZED GAIN(LOSSES) ON INVESTMENTS		1,359,815.	
TOTAL TO FORM 990-PF, PART III, LINE 5		1,359,815.	

FORM 990-PF	CORPORATE STOCK	STATEMENT	10
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE	
CORPORATE STOCK	5,490,361.	5,490,361.	
TOTAL TO FORM 990-PF, PART II, LINE 10B	5,490,361.	5,490,361.	

FORM 990-PF	OTHER INVESTMENTS	STATEMENT	11
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
MUTUAL FUNDS	FMV	8,059,374.	8,059,374.
PARTNERSHIPS	COST	1,724,341.	1,724,341.
TOTAL TO FORM 990-PF, PART II, LINE 13		9,783,715.	9,783,715.

FORM 990-PF	OTHER ASSETS		STATEMENT 12
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
CASH SURRENDER VALUE - INSURANCE	468,024.	489,065.	489,065.
TO FORM 990-PF, PART II, LINE 15	468,024.	489,065.	489,065.

FORM 990-PF	PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS	STATEMENT 13
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NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JOSEPH S. CARR 500 NORTH WESTERN AVENUE LAKE FOREST, IL 60045	DIRECTOR 1.00	0.	0.	0.
GEORGE M. COVINGTON 500 NORTH WESTERN AVENUE LAKE FOREST, IL 60045	CHAIRMAN 1.00	0.	0.	0.
ROBERT L. FRIEDLANDER 500 NORTH WESTERN AVENUE LAKE FOREST, IL 60045	SECRETARY-TREASURER 1.00	0.	0.	0.
LAWRENCE D. GLASS 500 NORTH WESTERN AVENUE LAKE FOREST, IL 60045	DIRECTOR 1.00	0.	0.	0.
RICHARD M. NORTON 500 NORTH WESTERN AVENUE LAKE FOREST, IL 60045	DIRECTOR 1.00	0.	0.	0.
RICHARD M. ROSS JR. 500 NORTH WESTERN AVENUE LAKE FOREST, IL 60045	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		0.	0.	0.

GRANT HEALTHCARE FOUNDATION

Grants Awarded in December 2011

Access Community Health Network	\$25,000
1501 S. California Avenue	
Chicago, Illinois 60608	
Support for care of uninsured patients at clinic in Englewood neighborhood of Chicago	
American Indian Health Service of Chicago	20,000
4081 North Broadway	
Chicago, Illinois 60613	
Support of primary care clinic for Native Americans	
The ARK	10,000
6450 North California Avenue	
Chicago, Illinois 60645	
Support of primary care clinic in West Rogers Park Serving primarily Jewish patients	
Canine Therapy Corps, Inc.	15,000
1700 West Irving Park Road, #311	
Chicago, Illinois 60613	
General operating support for animal-assisted therapy organization	
Cathedral Counseling Center	6,000
50 East Washington St., Suite 301	
Chicago, Illinois 60602	
Support of expanded access to mental health services	
Center on Halsted	20,000
3656 North Halsted	
Chicago, Illinois 60613	
Support of mental health services for gay, lesbian, bisexual and transgendered clients	
Centro de Salud Esperanza	25,000
2001 South California Avenue, Suite 100	
Chicago, Illinois 60608	
Support of women's health program	
Chicago Lighthouse for the Blind and Visually Impaired	15,000
1850 West Roosevelt Road	
Chicago, Illinois 60608	
Support of research by Dr. Gerald Fishman re macular degeneration	
Children's Memorial Hospital	53,063
2100 Children's Plaza	
Chicago, Illinois 60614	
First year of two-year grant in support of Fellowship in Palliative Medicine	

Children's Research Triangle	25,000
180 North Michigan Avenue, Suite 700	
Chicago, Illinois 60601	
Support of assessment and treatment of children impacted by fetal alcohol syndrome	
Christopher House	30,000
2507 North Greenview Avenue	
Chicago, Illinois 60614	
Support of counseling and parent education programs	
The CORE Foundation	20,000
2020 West Harrison Street	
Chicago, Illinois 60612	
Support of prevention program re HIV/AIDS	
Erie Family Health Center	25,000
1701 West Superior Street	
Chicago, Illinois 60622	
Support of oral health program at primary care clinics in Humboldt Park and Albany Park	
Family Health Partnership Clinic	12,500
13707 W. Jackson	
Woodstock, Illinois 60098	
Support of pharmaceutical assistance program at clinic in Woodstock, Illinois	
Heartland Alliance	25,000
208 S. LaSalle St., Suite 1818	
Chicago, Illinois 60604	
Support of Marjorie Kovler Center for victims of torture	
Horizon Hospice and Palliative Care, Inc.	30,000
833 West Chicago Avenue	
Chicago, Illinois 60622	
Support of palliative care program	
Hospice and Palliative Care of Northeastern Illinois	15,000
410 South Hager Road	
Barrington, Illinois 60010	
Support of pediatric palliative care	
Howard Area Community Center	15,000
7648 North Paulina	
Chicago, Illinois 60626	
Support of Eleanor Wester Dental Clinic in Rogers Park	
I-PLUS of Lake County	10,000
3001 Green Bay Road, Building 9, #130	
North Chicago, Illinois 60064	
Support of representative payee program for homeless residents of Lake County, particularly veterans	
Illinois College of Optometry	25,000
3241 South Michigan Avenue	
Chicago, Illinois 60616	
Support of optometry care at primary care clinics and Chicago Public Schools in Chicago	

IMAN Health Clinic	15,000
2744 West 63 rd Street	
Chicago, Illinois 60629	
General operating support for clinic in Marquette Park neighborhood of Chicago	
Lake Geneva Fresh Air Association, Inc.	28,000
361 N. Lake Shore Drive, P.O. Box 10	
Williams Bay, Wisconsin 53191	
Support of clinic at Holiday Home Camp serving children from inner-city Chicago	
Lake View Academy	8,000
716 West Addison Street	
Chicago, Illinois 60613	
Medical assistance fund for students at alternative high school on Chicago's north side	
La Rabida Children's Hospital	25,000
East 65 th Street at Lake Michigan	
Chicago, Illinois 60649	
Support of case management program for chronically ill children	
Lincoln Park Zoo	32,000
2001 North Clark Street	
Chicago, Illinois 60614	
Support of Wildlife Disease Ecology internship	
Luster Learning Institute	50,000
1126 Hillcrest Avenue	
Highland Park, Illinois 60035	
Support of Calm Classroom program in Chicago Public Schools	
Midwest Access Project	10,000
2000 West Armitage Avenue, Floor 2	
Chicago, Illinois 60647	
Support of physician training in reproductive care, including abortion	
Old Irving Park Community Clinic	40,000
5425 West Addison	
Chicago, Illinois 60641	
Support of primary care clinic on Chicago's northwest side	
PCC Wellness Center	40,000
14 West Lake Street	
Oak Park, Illinois 60302	
General operating support for primary care clinic in Austin	
Pacific Garden Mission	30,000
1458 South Canal Street	
Chicago, Illinois 60607	
Support of primary care clinic at homeless shelter on Chicago's near west side	

Pioneer Center for Human Services	25,000
4001 Dayton Street	
McHenry, Illinois 60050	
Support of prescription program for mentally ill patients in McHenry County, Illinois	
Planned Parenthood of Illinois	85,000
18 South Michigan Avenue, 6 th Floor	
Chicago, Illinois 60602	
General operating support of Chicago area activities of women's reproductive health organization	
Respond NOW	25,000
P.O. Box 215	
Chicago Heights, Illinois 60412	
Support of prescription drug program in Chicago Heights	
Rush University Medical Center	28,500
1700 West Van Buren, Suite 250	
Chicago, Illinois 60612	
Support of adolescent pregnancy prevention program	
St. Bernard Hospital & Healthcare Center	25,000
326 West 64 th Street	
Chicago, Illinois 60621	
Support of dental clinic on Chicago's south side	
St. Joseph Hospital	30,000
2900 North Lake Shore Drive	
Chicago, Illinois 60657	
Support of care of uninsured patients at Labouré Clinic	
Sinai Health System	102,000
1500 North California Avenue	
Chicago, Illinois 60608-1797	
Support of mental health services for the medically indigent	
SisterHouse	15,000
851 North Leamington Avenue	
Chicago, Illinois 60651	
General operating support for residential treatment center for women in recovery from substance abuse	
Suburban Primary Health Care Council	25,000
2225 Enterprise Drive, Suite 2504	
Westchester, Illinois 60154	
Support of Access to Care program in suburban Cook County	
University of Chicago	70,000
5801 South Ellis Avenue	
Chicago, Illinois 60637	
One-year grant in support of research by Drs. Robert Daum and Susan Boyle-Vavra investigating new antibiotics to treat antibiotic-resistant staph infections (MRSA)	
University of Chicago	100,000
5801 South Ellis Avenue	
Chicago, Illinois 60637	
First year of two-year award in support of Dr. Daniel Johnson's Project ECHO to improve Access to specialty care in Chicago south side primary care clinics	

University of Illinois at Chicago	15,000
835 South Wolcott	
Chicago, Illinois 60612-7344	
Support of research project led by Dr. Howard Lipton re viral connection to Multiple sclerosis	
Zacharias Sexual Abuse Center	30,000
4275 Old Grand Avenue	
Gurnee, Illinois 60031	
Support of sexual assault victim advocacy program in Lake County, Illinois	
TOTAL GRANTS AWARDED IN 2011	<u>\$1,275,063</u>

Depreciation and Amortization 990PF
 (Including Information on Listed Property)

OMB No 1545-0172

2011

Attachment
 Sequence No 179

▶ See separate instructions.

▶ Attach to your tax return.

Name(s) shown on return

Business or activity to which this form relates

Identifying number

GRANT HOSPITAL OF CHICAGO
D/B/A GRANT HEALTHCARE FOUNDATION

FORM 990-PF PAGE 1

36-2167090

Part I Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000.
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation	3	2,000,000.
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0- If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2010 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2012. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2011	17	168.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B - Assets Placed in Service During 2011 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property	/		27.5 yrs.	MM	S/L	
	/		27.5 yrs	MM	S/L	
i Nonresidential real property	/		39 yrs.	MM	S/L	
	/			MM	S/L	

Section C - Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year	/		40 yrs.	MM	S/L	

Part IV Summary (See instructions)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instr	22	168.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

GRANT HOSPITAL OF CHICAGO

D/B/A GRANT HEALTHCARE FOUNDATION

36-2167090 Page 2

Form 4562 (2011)

Part V Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.**Section A - Depreciation and Other Information** (Caution: See the instructions for limits for passenger automobiles.)**24a** Do you have evidence to support the business/investment use claimed? ☐ Yes ☐ No **24b** If "Yes," is the evidence written? ☐ Yes ☐ No

(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/ Convention	(h) Depreciation deduction	(i) Elected section 179 cost
--	-------------------------------------	--	-------------------------------	--	---------------------------	------------------------------	----------------------------------	---------------------------------------

25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use.**25****26** Property used more than 50% in a qualified business use.

		%						
		%						
		%						

27 Property used 50% or less in a qualified business use:

		%			S/L -		
		%			S/L -		
		%			S/L -		

28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1**28****29** Add amounts in column (i), line 26. Enter here and on line 7, page 1**29****Section B - Information on Use of Vehicles**

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person

If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle	(b) Vehicle	(c) Vehicle	(d) Vehicle	(e) Vehicle	(f) Vehicle
30 Total business/investment miles driven during the year (do not include commuting miles)						
31 Total commuting miles driven during the year						
32 Total other personal (noncommuting) miles driven						
33 Total miles driven during the year. Add lines 30 through 32						
34 Was the vehicle available for personal use during off-duty hours?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
35 Was the vehicle used primarily by a more than 5% owner or related person?						
36 Is another vehicle available for personal use?						

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use?		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.**Part VI Amortization**

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
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42 Amortization of costs that begins during your 2011 tax year:

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43 Amortization of costs that began before your 2011 tax year**43****44** Total. Add amounts in column (f). See the instructions for where to report**44**

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions. GRANT HOSPITAL OF CHICAGO D/B/A GRANT HEALTHCARE FOUNDATION	Employer identification number (EIN) or ☒ 36-2167090
	Number, street, and room or suite no. If a P.O. box, see instructions. 500 NORTH WESTERN AVENUE, NO. 204	Social security number (SSN) ☐
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LAKE FOREST, IL 60045	

Enter the Return code for the return that this application is for (file a separate application for each return)

04

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

JOAN ELDRIDGE RIDELL

- The books are in the care of ► **500 N. WESTERN AVE., SUITE 204 - LAKE FOREST, IL 60045**
Telephone No. ► **847-735-1590** FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2012**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
► ☒ calendar year **2011** or
► ☐ tax year beginning , and ending

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	9,322.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit	3b	\$	7,822.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	1,500.

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.

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

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