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### Form 990-PF Department of the Treasury

# **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 Name of foundation A Employer identification number PAUL BECHTNER FOUNDATION 36-3973429 C/O PAUL WEAVER Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 847-446-5739 660 PINE STREET City or town, state, and ZIP code C If exemption application is pending, check here 60093 WINNETKA, IL Initial return Initial return of a former public charity G Check all that apply 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 H Check type of organization X Section 501(c)(3) exempt private foundation 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: X Cash Accrual F If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 7, 108, 380. (Part I, column (d) must be on cash basis.) **\$** Analysis of Revenue and Expenses Part I (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) ) charitable purposes (cash basis only) expenses per books ıncome 200,000. N/A Contributions, gifts, grants, etc., received Check I if the foundation is not required to attach Sch B Interest on savings and temporary cash investments 173,455 STATEMENT 173,455. 4 Dividends and interest from securities 5a Gross rents D Net rental income or (loss) <48,207.> 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 831,738. 0 7 Capital gain net income (from Part IV, line 2) 'ශු 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 1,4911,491. STATEMENT 11 Other income 174,946. 326,739. Total. Add lines 1 through 11 Ō. 0. 0 Compensation of officers, directors, trustees, etc. Other employee salaries and wages 15 Pension plans, employee benefits SCANNED NOV 2 1 201 16a Legal fees 5,085. 5,085. b Accounting fees STMT 13,315. 13,315. 0. STMT 4 c Other professional fees 17 Interest 43. 43. STMT 5 12,314. 12,314. 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications STMT 6 315. 315 0. 23 Other expenses 24 Total operating and administrative 31,072. 31,072. expenses. Add lines 13 through 23 393,700. 393,700. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 424,772. 393,700. 31,072. Add lines 24 and 25 27 Subtract line 26 from line 12 <98,033. 2 Excess of revenue over expenses and disbursements 143,874 b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions

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Form 990-PF (2011)	C/0	PAUL	WEAVER
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36-3973429

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Ralance Sheets Attached schedules and amounts in the description	Beginning of year	End of year		
Pe	EL	Balance Sneets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value	
1	1	Cash - non-interest-bearing				
- [	2	Savings and temporary cash investments	893,080.	107,903.	107,903.	
j	3	Accounts receivable ►				
- [		Less allowance for doubtful accounts ▶				
- 1	4	Pledges receivable				
		Less allowance for doubtful accounts ▶				
ı	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 ▶		}		
2	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
₹ .	10a	Investments - U.S. and state government obligations				
-		Investments - corporate stock STMT 8	5,046,351.	5,721,125.	6,998,986.	
		Investments - corporate bonds		• • •	- · · · · · · · · · · · · · · · · · · ·	
.	11	Investments - land, buildings, and equipment basis			<del>/</del>	
	• •	Less accumulated depreciation		1		
-  .	12	Investments - mortgage loans				
- 1	13	Investments - other				
- 1	14	Land, buildings, and equipment basis			<del>, , , , , , , , , , , , , , , , , , , </del>	
-	•	Less accumulated depreciation				
].	15	Other assets (describe ► MISC RECEIVABLE )	1,000.	1,491.	1,491.	
		other about (about a transfer and a transfer		-,		
.	16	Total assets (to be completed by all filers)	5,940,431.	5,830,519.	7,108,380.	
$\neg$	<del></del> 17	Accounts payable and accrued expenses				
- 1	18	Grants payable				
- 1	19	Deferred revenue				
ë	20	Loans from officers, directors, trustees, and other disqualified persons				
<u> </u>	21	Mortgages and other notes payable				
וַ בַּי	22	Other liabilities (describe )				
ľ		Cities madmitted (decorate p				
]	23	Total liabilities (add lines 17 through 22)	0.	0.		
_		Foundations that follow SFAS 117, check here				
		and complete lines 24 through 26 and lines 30 and 31.				
es	24	Unrestricted				
ē 1	25	Temporarily restricted				
gal:	26	Permanently restricted				
힏		Foundations that do not follow SFAS 117, check here				
ᆵ		and complete lines 27 through 31.				
ō	27	Capital stock, trust principal, or current funds	0.	0.		
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.		
Ass	29	Retained earnings, accumulated income, endowment, or other funds	5,940,431.	5,830,519.		
₩ I	30	Total net assets or fund balances	5,940,431.	5,830,519.		
<b>z</b>	50	Total not assets or land balances		0,000,020		
	31	Total liabilities and net assets/fund balances	5,940,431.	5,830,519.		
				<u> </u>		
<u> </u>	ırı	Analysis of Changes in Net Assets or Fund B				
		I net assets or fund balances at beginning of year - Part II, column (a), line	30		F 040 401	
		st agree with end-of-year figure reported on prior year's return)		1	5,940,431. <98,033.	
2 E	nte	r amount from Part I, line 27a		2	<98,033 <b>.</b>	
3 (	)the	r increases not included in line 2 (itemize)		3	0.	
4 <i>F</i>	\dd	lines 1, 2, and 3		4	5,842,398.	
		reases not included in line 2 (itemize)	SEE STA		11,879.	
<u>6 1</u>	ota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	5,830,519.	
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Part IV Capital Gains a	and Losses for Tax on In	vestment	Income						······································
(a) List and describe the kind(s) of property sold (e.g., real e 2-story brick warehouse, or common stock, 200 shs MLC				(b) How acquired (P - Purchase D - Donation		(c) Date (mo , d	acquired ay, yr )	(d) Date sold (mo , day, yr )	
1a									
b SEE ATTACHED	STATEMENTS			ļ					
<u>C</u>		-		-					
<u>d</u>				<del> </del>	-				
_ e	(f) Depreciation allowed	(n) Cos	t or other basis	1			(b) C	aın or (loss	<u> </u>
(e) Gross sales price	(or allowable)		xpense of sale					aiii or (iuss s (f) minus	
a								· · · · · · · · · · · · · · · · · · ·	
b									
C									
d									
e 831,738.			879,94	5.					<48,207.
Complete only for assets showing	g gain in column (h) and owned by t		•					ol (h) gain not less tha	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (I)				Losses	(from col	(h))
<u>a</u>				$\dashv$					
<u>b</u>	· · · · · · · · · · · · · · · · · · ·								
d d			<del></del>	-+					
e							· <del>····</del>		<48,207.
	∫ If gain, also enter	in Part Lline 7	7	7					
2 Capital gain net income or (net cap				•	2			<del></del>	<48,207.
3 Net short-term capital gain or (los		d (6)		۱۱					
If gain, also enter in Part I, line 8, of If (loss), enter -0- in Part I, line 8	column (c)			<b>}</b>	3			N/A	
Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	Inv	estm	ent Inc	ome		
(For optional use by domestic private	foundations subject to the section 4	1940(a) tax on	net investment in	ncome	:)				
	·								
If section 4940(d)(2) applies, leave th	ns part blank								
Was the foundation liable for the sect	ion 4942 tax on the distributable am	ount of any ye	ar in the base per	rıod?					Yes X No
If "Yes," the foundation does not quali					,				
1 Enter the appropriate amount in e	each column for each year, see instru	octions before	making any entire				<del></del>		(d)
Base period years Calendar year (or tax year beginnir	(b) Adjusted qualifying dist	tributions	Net value of no	(c) onchar		use assets	.		bùtión ratio vided by col. (c))
2010	·9 ··· /	2,250.		6	, 93	5,739		(00. (0) 0.	.049346
2009		0,000.				5,128			.043921
2008	36	2,779.		5	,76	2,548	3.		.062955
2007		0,599.				2,808			.052541
2006	28	8,521.		5_	<u>,69</u>	9,663	3 •	<del>,</del>	.050621
									250204
2 Total of line 1, column (d)							2	ļ	.259384
3 Average distribution ratio for the 5	•	on line 2 by 5,	or by the number	r of yea	ars				.051877
the foundation has been in exister	ice if less than 5 years						3		.031077
4 Enter the net value of noncharitab	le-use assets for 2011 from Part X, I	line 5					4		7,887,811.
E Martin In Iran A har Iran O							_		409,196.
5 Multiply line 4 by line 3							5		409,190.
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)						6		1,439.
7 Add tines 5 and 6							7	:	410,635.
8 Enter qualifying distributions from	n Part XII line 4						8		393,700.
If line 8 is equal to or greater than	i Fart XII, line 4 I line 7, check the box in Part VI, line	1b, and comp	lete that part usir	ng a 1°	% tax	rate	_ 0	1	223,1004
See the Part VI instructions	<u></u>								

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)

year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(1)(3) or 4942(1)(5) for calendar

of each state as required by General Instruction G? If "No," attach explanation

X

8b

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2011)

had not been removed from jeopardy before the first day of the tax year beginning in 2011?

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

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X

3b

4a

Yes X No

N/A

during the year?

PAUL BECHTNER FOUNDATION				
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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	nued)	
5a During the year did the foundation pay or incur any amount to	<del></del>			
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	es X No	
(2) Influence the outcome of any specific public election (see section 4955), of	er to carry on, directly or indire	ectly,		
any voter registration drive?	. ,	Ye	es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y <sub>E</sub>	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	or educational purposes, or f			
the prevention of cruelty to children or animals?			es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	ter the exceptions described i	<del></del>		
section 53 4945 or in a current notice regarding disaster assistance (see instru		rogalationa	N/A 5	ь
Organizations relying on a current notice regarding disaster assistance check h	•		<b>▶</b>	-
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ned		
expenditure responsibility for the grant?		- /	es 🗆 No	
If "Yes," attach the statement required by Regulations section 53.494		.,		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •			
a personal benefit contract?	pay premiums on	v.	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	arconal banafit contract?	١٠ لــــا	6	b X
If "Yes" to 6b. file Form 8870.	ersonal beliefit contract?		···	<u> </u>
7a At any time during the tax year, was the foundation a party to a prohibited tax s	halter transaction?		es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu		16	N/A 7	
Information About Officers Directors Trust		nagara Highli		<u>u  </u>
Part VIII Paid Employees, and Contractors	ees, i ouildation Ma	mayers, riigini	y	
List all officers, directors, trustees, foundation managers and their	compensation.			
	(L) Title and success	(a) Companyation	7.8.	
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	hours per week devoted	(If not paid,	employee benefit plans and deferred	account, other
(a) Name and address	hours per week devoted to position		(CI) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
(a) Name and address	hours per week devoted	(If not paid,	employee benefit plans and deferred	account, other
	hours per week devoted	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other allowances
	hours per week devoted	(If not paid,	employee benefit plans and deferred	account, other
	hours per week devoted	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other allowances
	hours per week devoted	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other allowances
	hours per week devoted	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other allowances
	hours per week devoted	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other allowances
	hours per week devoted	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other allowances
	hours per week devoted	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other allowances
	hours per week devoted	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other allowances
	hours per week devoted	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other allowances
	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other allowances
SEE STATEMENT 9  Compensation of five highest-paid employees (other than those inc	hours per week devoted to position  luded on line 1). If none,	enter "NONE."	employee benefit plans and deferred compensation  O •	account, other allowances  O .
SEE STATEMENT 9	to position  luded on line 1). If none,  (b) Title, and average hours per week	(If not paid, enter -0-)	employee benefit plans and deferred compensation  O  (d) Contributions to employee benefit plans and deferred	account, other allowances  O .  (e) Expense account, other
SEE STATEMENT 9  Compensation of five highest-paid employees (other than those inc.  (a) Name and address of each employee paid more than \$50,000	hours per week devoted to position  luded on line 1). If none,	enter "NONE."	employee benefit plans and deferred compensation  O •	account, other allowances  O .
SEE STATEMENT 9  Compensation of five highest-paid employees (other than those inc	to position  luded on line 1). If none,  (b) Title, and average hours per week	enter "NONE."	employee benefit plans and deferred compensation  O  (d) Contributions to employee benefit plans and deferred	account, other allowances  O .  (e) Expense account, other
SEE STATEMENT 9  Compensation of five highest-paid employees (other than those inc.  (a) Name and address of each employee paid more than \$50,000	to position  luded on line 1). If none,  (b) Title, and average hours per week	enter "NONE."	employee benefit plans and deferred compensation  O  (d) Contributions to employee benefit plans and deferred	account, other allowances  O .  (e) Expense account, other
SEE STATEMENT 9  Compensation of five highest-paid employees (other than those inc.  (a) Name and address of each employee paid more than \$50,000	to position  luded on line 1). If none,  (b) Title, and average hours per week	enter "NONE."	employee benefit plans and deferred compensation  O  (d) Contributions to employee benefit plans and deferred	account, other allowances  O .  (e) Expense account, other
SEE STATEMENT 9  Compensation of five highest-paid employees (other than those inc.  (a) Name and address of each employee paid more than \$50,000	to position  luded on line 1). If none,  (b) Title, and average hours per week	enter "NONE."	employee benefit plans and deferred compensation  O  (d) Contributions to employee benefit plans and deferred	account, other allowances  O .  (e) Expense account, other
SEE STATEMENT 9  Compensation of five highest-paid employees (other than those inc.  (a) Name and address of each employee paid more than \$50,000	to position  luded on line 1). If none,  (b) Title, and average hours per week	enter "NONE."	employee benefit plans and deferred compensation  O  (d) Contributions to employee benefit plans and deferred	account, other allowances  O .  (e) Expense account, other
SEE STATEMENT 9  Compensation of five highest-paid employees (other than those inc.  (a) Name and address of each employee paid more than \$50,000	to position  luded on line 1). If none,  (b) Title, and average hours per week	enter "NONE."	employee benefit plans and deferred compensation  O  (d) Contributions to employee benefit plans and deferred	account, other allowances  O .  (e) Expense account, other
SEE STATEMENT 9  Compensation of five highest-paid employees (other than those inc.  (a) Name and address of each employee paid more than \$50,000	to position  luded on line 1). If none,  (b) Title, and average hours per week	enter "NONE."	employee benefit plans and deferred compensation  O  (d) Contributions to employee benefit plans and deferred	account, other allowances  O .  (e) Expense account, other
SEE STATEMENT 9  Compensation of five highest-paid employees (other than those inc.  (a) Name and address of each employee paid more than \$50,000	to position  luded on line 1). If none,  (b) Title, and average hours per week	enter "NONE."	employee benefit plans and deferred compensation  O  (d) Contributions to employee benefit plans and deferred	account, other allowances  O .  (e) Expense account, other

0

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

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3 Five highest-paid independent contractors for professional services. If none, enter "NO	NE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	<b>•</b>	C
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in	formation such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produced,		Expenses
ı N/A		
2		
3		
A		467
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1	and 2	Amount
1 N/A		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	<b>D</b>	0
The state of the s		m 990-PF (2011)

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	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	7,413,570. 594,360.
	Average of monthly cash balances	1b	594,360.
	Fair market value of all other assets	10	
d	Total (add lines 1a, b, and c)	1d	8,007,930.
	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	8,007,930.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	120,119.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	7,887,811.
6	Minimum investment return. Enter 5% of line 5	6	394,391.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here  and do not complete this part )	nd certain	
1	Minimum investment return from Part X, line 6	1	394,391.
2a	Tax on investment income for 2011 from Part VI, line 5 2,877.		
b	Income tax for 2011 (This does not include the tax from Part VI )		
C	Add lines 2a and 2b	20	2,877.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,877. 391,514.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	391,514.
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	391,514.
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	393,700. 0.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	393,700.
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	393,700.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies fo	or the section

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4940(e) reduction of tax in those years

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Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
1 Distributable amount for 2011 from Part XI,	Corpus	Years prior to 2010	2010	2011
line 7				391,514.
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				
b From 2007 1, 104.				
c From 2008 77,594.				
d From 2009				
e From 2010	70 600			
f Total of lines 3a through e	78,698.			
4 Qualifying distributions for 2011 from Part XII, line 4 > \$ 393,700.				
			0.	
a Applied to 2010, but not more than line 2a	····		· · · · · · · · · · · · · · · · · · ·	<del></del>
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				391,514.
e Remaining amount distributed out of corpus	2,186.			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a) )  6 Enter the net total of each column as				
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	80,884.			······
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	0.		·····	
9 Excess distributions carryover to 2012.	80,884.			
Subtract lines 7 and 8 from line 6a	00,004.			
10 Analysis of line 9	i i			
a Excess from 2007 1, 104. b Excess from 2008 77, 594.				
E Excess from 2009				
d Excess from 2010				
e Excess from 2011 2, 186.				
C LACGS HOTH ZUTT				

Part XIV Private Operating F	oundations (see in	structions and Part V	II-A, question 9)	N/A	, , , , , , , , , , , , , , , , , , , ,
1 a If the foundation has received a ruling of	r determination letter tha	t it is a private operating			
foundation, and the ruling is effective fo			▶		
b Check box to indicate whether the found	dation is a private operati	ng foundation described	in section	4942(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) 2010	(c) 2009	(d) 2008	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities		<u></u>			
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public				ļ l	
and 5 or more exempt organizations as provided in	į				
section 4942(j)(3)(B)(iii)		<del> </del>			
(3) Largest amount of support from					
an exempt organization			<del> </del>		
(4) Gross investment income		ata this asst only	if the foundation	had \$5 000 av ma	vo in occato
Part XV Supplementary Info			it the foundation	nad \$5,000 or mo	ore in assets
<del></del>		ructions.)		<del></del>	
1 Information Regarding Foundation	•	. Ab 00/ - 6 Ab - A-4-1	talki dia an unani indi bi dha	facedation before the class	a of any toy
a List any managers of the foundation wh year (but only if they have contributed r			itributions received by the	toundation before the clos	se of any tax
EVERETT P WEAVER					
b List any managers of the foundation who other entity) of which the foundation ha			ı (or an equally large portio	on of the ownership of a pa	artnership or
NONE		·			
2 Information Regarding Contribut					
Check here 🕨 🗶 if the foundation of					
the foundation makes gifts, grants, etc	(see instructions) to indi	viduals or organizations	under other conditions, co	omplete items 2a, b, c, and	d
a The name, address, and telephone num	ber of the person to who	m applications should b	e addressed		
b The form in which applications should l	be submitted and informa	ation and materials they	should include		
c Any submission deadlines				<del></del>	· · · · · · · · · · · · · · · · · · ·
d Any restrictions or limitations on suited	e cuch as hu assertathi	al areas shoutable field	e kinds of institutions as	other factors	
d Any restrictions or limitations on award	s, such as by geographic	or areas, chantable nelo	อ, หมหนอ บา มารถเนนเบเเร, Of (	טנווסו ומטנטוס	

Form 990-PF (2011) C/O PAUL WEAVER

Part XV Supplementary Information (continued)

36-3973429

3 Grants and Contributions Paid During the		Payment		<del> </del>
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
VARIOUS PUBLIC CHARITIES - SEE SCHEDULE ATTACHED		PUBLIC CHARITY	GENERAL PURPOSE	393,700.
				333,700.
				· · · ·
Total	<u> </u>		<b>▶</b> 3a	393,700.
b Approved for future payment			- Ou	333,700.
NONE				
·				
Total			► 3b	0.

(e)

Related or exempt

Excluded by section 512, 513, or 514

(d)

(c) Exclu-

Form 990-PF (2011)

Enter gross amounts unless otherwise indicated

Part XVI-A **Analysis of Income-Producing Activities** 

a	code	Amount	code	Amount	function income
a					
b	ł l				
	1				<del>~</del>
	1 1		<del>                                     </del>		<del></del>
· · · · · · · · · · · · · · · · · · ·			<del>                                     </del>		
e	— <del>                                    </del>	<del></del>	<del>  -</del> -		
·	<del> </del> -				· · · · · · · · · · · · · · · · · · ·
			<del> </del>		17.00
2 Membership dues and assessments 3 Interest on savings and temporary cash			-		·
investments		<del></del>	14	172 455	
4 Dividends and interest from securities		<del></del>	1.4	173,455.	······································
5 Net rental income or (loss) from real estate		<del></del>	-		
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal			1		
property			_		
7 Other investment income			14	1,491.	
8 Gain or (loss) from sales of assets other					
than inventory			18	<48,207.>	· · · · · · · · · · · · · · · · · · ·
9 Net income or (loss) from special events					
IO Gross profit or (loss) from sales of inventory					
11 Other revenue		<del></del>			
a					
b	4				
C					
d					
е					
12 Subtotal Add columns (b), (d), and (e)		0.		126,739.	0.
13 Total. Add line 12, columns (b), (d), and (e)		<del> </del>	<del> </del>	13	
(See worksheet in line 13 instructions to verify calculation	ine \			···	
Part XVI-B Relationship of Activit	ies to the Accon	nplishment of Ex	(empt	Purposes	
TIOIGGOIDING OF MOUNT					
		column (e) of Part XVI-A	contribut	ed importantly to the accomp	olishment of
Line No. Explain below how each activity for which the foundation's exempt purposes (other	h income is reported in (		contribut	ed importantly to the accomp	plishment of
Line No. Explain below how each activity for which the foundation's exempt purposes (other	h income is reported in (		contribut	ed importantly to the accomp	olishment of
Line No. Explain below how each activity for which	h income is reported in (		contribut	ed importantly to the accomp	olishment of
Line No. Explain below how each activity for which the foundation's exempt purposes (other	h income is reported in (		contribut	ed importantly to the accomp	olishment of
Line No. Explain below how each activity for which the foundation's exempt purposes (other	h income is reported in (		contribut	ed importantly to the accomp	olishment of
Line No. Explain below how each activity for which the foundation's exempt purposes (other	h income is reported in (		contribut	ed importantly to the accomp	olishment of
Line No. Explain below how each activity for which the foundation's exempt purposes (other	h income is reported in (		contribut	ed importantly to the accomp	olishment of
Line No. Explain below how each activity for which the foundation's exempt purposes (other	h income is reported in (		contribut	ed importantly to the accomp	olishment of
Line No. Explain below how each activity for which the foundation's exempt purposes (other	h income is reported in (		contribut	ed importantly to the accomp	olishment of
Line No. Explain below how each activity for which the foundation's exempt purposes (other	h income is reported in (		contribut	ed importantly to the accomp	olishment of
Line No. Explain below how each activity for which the foundation's exempt purposes (other	h income is reported in (		contribut	ed importantly to the accomp	olishment of
Line No. Explain below how each activity for which the foundation's exempt purposes (other	h income is reported in (		contribut	ed importantly to the accomp	olishment of
Line No. Explain below how each activity for which the foundation's exempt purposes (other	h income is reported in (		contribut	ed importantly to the accomp	olishment of
Line No. Explain below how each activity for which the foundation's exempt purposes (other	h income is reported in (		contribut	ed importantly to the accomp	olishment of
Line No. Explain below how each activity for which the foundation's exempt purposes (other	h income is reported in (		contribut	ed importantly to the accomp	olishment of
Line No. Explain below how each activity for which the foundation's exempt purposes (other	h income is reported in (		contribut	ed importantly to the accomp	olishment of
Line No. Explain below how each activity for which the foundation's exempt purposes (other	h income is reported in (		contribut	ed importantly to the accomp	olishment of
Line No. Explain below how each activity for which the foundation's exempt purposes (other	h income is reported in (		contribut	ed importantly to the accomp	olishment of
Line No. Explain below how each activity for which the foundation's exempt purposes (other	h income is reported in (		contribut	ed importantly to the accomp	olishment of
Line No. Explain below how each activity for which the foundation's exempt purposes (other	h income is reported in (		contribut	ed importantly to the accomp	olishment of
Line No. Explain below how each activity for which the foundation's exempt purposes (other	h income is reported in (		contribut	ed importantly to the accomp	olishment of
Line No. Explain below how each activity for which the foundation's exempt purposes (other	h income is reported in (		contribut	ed importantly to the accomp	Form <b>990-PF</b> (2011)

Unrelated business income

(b)

(a)

	330 11 12		TIOL WEITTE	711	<del> </del>			<u> </u>	ray	0 10
Pa	rt XVII			sfers To	and Transactions	and Relations	hips With No	ncharitable		
		Exempt Organ	izations							
ł	Did the or	ganization directly or indi	rectly engage in any	of the followi	ng with any other organizat	tion described in secti	on 501(c) of		Yes	No
	the Code (	other than section 501(c)	)(3) organizations) o	or in section 5	27, relating to political orga	anizations?			1	
a	Transfers	from the reporting founda	ation to a noncharita	able exempt or	rganization of				1	
	(1) Cash							1a(1)		<u>X</u>
	(2) Other	assets						1a(2)		X
b	Other tran	sactions							1	
	(1) Sales	of assets to a noncharital	ble exempt organiza	ition				1b(1)		<u>X</u> _
	(2) Purch	ases of assets from a no	ncharitable exempt	organization				1b(2)		X
	(3) Renta	l of facilities, equipment,	or other assets					1b(3)		X
	(4) Reimi	oursement arrangements						1b(4)		X
	(5) Loans	or loan guarantees						1b(5)		Χ_
	(6) Perfo	rmance of services or me	mbership or fundra	ısıng solicitati	ons			1b(6)		X
C	Sharing of	facilities, equipment, ma	iling lists, other asso	ets, or paid en	nployees			10		X
d	If the answ	ver to any of the above is	"Yes," complete the	following sch	edule Column (b) should a	always show the fair n	narket value of the q	goods, other ass	ets,	
	or service:	s given by the reporting fo	oundation. If the fou	indation receiv	ved less than fair market va	lue in any transaction	or sharing arrange	ment, show in		
	column (d	) the value of the goods,	other assets, or sen	vices received						
I) Li	пе по	(b) Amount involved	(c) Name o	f noncharitabl	e exempt organization	(d) Description	of transfers, transaction	ons, and sharing arr	angemen	its
				N/A						
					• • •					
			= -							
				·····						
				<del></del>					•	
	-									
							-			
2a	Is the four	idation directly or indirect	tly affiliated with, or	related to, one	e or more tax-exempt organ	nizations described				
_		501(c) of the Code (other	•		• •			Yes	X	No
b		emplete the following sch	•	N-11						
		(a) Name of org			(b) Type of organization		(c) Description of re	elationship		
		N/A								
					ing accompanying schedules an an taxpayer) is based on all info			May the IHS of		
Si	gn 👗	eller, it is true, correct, and cor	$\sim 11$		an taxpayer) is based on all lillo	<b>.</b> .	_	return with the shown below		
He	re 📉	11 are	- Weave	$\sim$	x 11 13/1	2 X Pres	ident	X Yes		No
	Sigr	ature of officer or trustee	<del></del>	•	Date	Title			_	_
		Print/Type preparer's na	ame	Preparer's	signature	Date	Checkif	PTIN		
				Λ. //	02-	ا ي ي ي ل	self- employed			
Pa	id	JEFFREY KR		I Jeffer	1 th m	11/12/12	,	P00032		
	eparer	Firm's name ► GIM	BEL ABRAN	<b>1\$  ∦</b> (s]	I <b>)</b> IGÉŘ		Firm's EIN ► 3	6-36631	84	
Us	e Only			711	<del></del>	1055				
		Firm's address > 10	S. RIVER	RSTOTE T	PLAZA SUITE	1275	1			

CHICAGO, IL 60606-3710

(312)782-1010

Phone no

#### 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.

OMB No 1545-0047

2011

**Employer identification number** 

PAUL BECHTNER FOUNDATION C/O PAUL WEAVER 36-3973429 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 X 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 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)

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)

Name of organization PAUL BECHTNER FOUNDATION C/O PAUL WEAVER

Employer identification number

36-3973429

Part I	Contributors	(see instructions)	Use duplicate copies	of Part I	If additional space is needed
--------	--------------	--------------------	----------------------	-----------	-------------------------------

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	EVERETT WEAVER  680 GREEN BAY ROAD, APT. 204  WINNETKA, IL 60093		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
		<b>\$</b>	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

PAUL BECHTNER FOUNDATION

C/O PAUL WEAVER

Employer identification number

36-3973429

Part II	Noncash Property (see instructions) Use duplicate copies of Pa	art 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
<del></del>		\$	
(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
		\$	

PAUL BECHTNER FOUNDATION

$\mathbb{C}$	/o	PAUL	WEAVER

36-3973429

Employer identification number

Part III	Exclusively religious, charitable, etc., indivivers Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc Use duplicate copies of Part III if additional	e following line entry For organization, contributions of <b>\$1,000 or less</b> for	(7), (8), or (10) organizations that total more than \$1,000 for the ons completing Part III, enter or the year (Enter this information once)				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I							
:							
_		(e) Transfer of gif	1				
	Turnifornia nome address an	-					
-	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				
(a) No. from							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
_							
		(e) Transfer of gif	t				
	Transferee's name, address, an	d 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				
i .							
	(e) Transfer of gift						
	Transferee's name, address, and 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 gi	ft				
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee				

<u>Charity Name</u>		<u>Amount</u>
Big Brothers Big Sisiters	\$	1,000
HPHS Band		1,000
SD Museum of Art		10,000
SD History Center		10,000
Claremont McKenna College		5,000
Timken Museum of Art		5,000
Balboa Conservation Ctr		5,000
ARCS Foundation		5,000
U of SD Law School		5,000
Winnetka Community House		50,000
Preservation Chicago		1,500
Lookingglass Theater		3,500
U. of Chicago Lab School		40,000
Charlottesville Free Clinic		20,000
Piedmont Casa		12,000
Building Goodness		5,000
Hospice of Piedmont		4,000
Stream Watch		4,000
Family Service of Winnetka		15,000
North Shore Country Day		20,000
North Shore Sr Ctr		15,000
Kellogg School of Mgmt.		10,000
Citibusiness Card		1,200
USS Cod Submarine Memorial		5,000
Center of Deafness		500
Dublin School		5,000
The Barnard Fund		10,000
Colorado Public Radio		10,000
Congregation Bonai Shalom		9,000
Vasculitis Foundation		1,000
Polestar Education		5,000
Solar Cookers International		10,000
Nevada County Land Trust		10,000
Jane Goodall Institute		10,000
One Acre Fund		10,000
Cafh Order		5,000
Paul Bechtner Educational Fdtn		25,000
School Sisters of St Francis		5,000
Epilepsy		10,000
Northwestern	<del></del>	15,000
Total	<u> </u>	393,700

(a) List and describe the band(s) of prosenty sold ag, neal estable, 2-tony near wavebases, or crammen tode, 200 ath MLC to 14 HOUSEHÖLD FIN BOND 5.25% P0.701/0301/18/11 P0.7010/10/11 P0.7010/10/10/11 P0.7010/10/10/11 P0.7010/10/10/10/10/10/10/10/10/10/10/10/10/	Part IV Capital Gains and Lo	sses for Tax on Investment Income				
AMERICAN NATIONAL GROUP-CASH IN LIEU			r - Pulchase	110,		
Comparison						
CTTTGROUP INC			N LIEU			
19.7 SHARES CITICROUP INC						
291 SHARES CELIDEX THERAPPUTICS INC						
29   SHARES CELLDEX THERAPEUTICS INC   P   08/21/06/06/29/11     227 SHARES FANNIE MAE 8.25\$   P   12/18/07/06/29/07     2250 SHARES FANNIE MAE 8.25\$   P   12/19/07/06/29/07     2250 SHARES FANNIE MAE 8.25\$   P   12/19/07/06/29/07     200 SHARES FANNIE MAE 8.25\$   P   12/19/07/06/29/07     200 SHARES BAKER HUGHES INC   P   VARIOUS   12/09/11     800 SHARES BAKER HUGHES INC   P   11/09/1004/27/11     800 SHARES SEATON CORPORATION   P   11/09/1004/01/11     800 SHARES INCESTOL IDD   P   11/09/1004/01/11     1700 SHARES INVESTOL IDD   P   11/09/1004/01/11     1700 SHARES INVESTOL IDD   P   11/09/1004/01/11     800 SHARES INVESTOL IDD   P   11/09/1004/01/11     1800 SHARES INVESTOL IDD   P   11/09/1004/01/11     1900 SHARES SHARES HUGHES INVESTOL IDD   P   11/09/1004/01/11     1900 SHARES SHARE HUGHES INC   P   11/09/1004/01/11     1900 SHARES SHARE HU						
1			C TNC			
400 SHARES FANNIE MAE 8.25%   P   12/18/0706/29/07   12250 SHARES FANNIE MAE 8.25%   P   12/19/0706/29/11   200 SHARES LEHMAN BROTHERS HLDGS INC   P   VARIOUS   12/09/11   1800 SHARES BAKER HUGHES INC   P   17/09/1003/07/11   1800 SHARES ES CORPORATION   P   11/09/1003/07/11   1800 SHARES SECORPORATION   P   11/09/1003/07/11   1800 SHARES INCES CORPORATION   P   11/09/1003/07/11   1800 SHARES INCESTOL UTD   P   11/09/1003/30/11   19/07/1003/07/			5 INC			
2250 SHARES FANNIE MAE 8 .25\$						
200 SHARES LEHMAN BROTHERS HLOGS INC						
BOO SHARES BAKER HUGHES INC   P   11/09/1004/27/11   m 2400 SHARES CBS CORPORATION   P   11/09/1003/30/11   P						
M 2400 SHARES CBS CORPORATION   P   11/09/1003/30/11   N 800 SHARES ENTON CORPORATION   P   11/09/1003/30/11   P   11/09/1003/30/1003/30/11   P   11/09/1003/30/100						
n 800 SHARES ENTON CORPORATION         P 11/09/1004/01/10 or 11/09/1003/30/11           c 1700 SHARES INVESTCO LTD         P 11/09/1003/30/11           (e) Gross sales price (for salowable)         (f) Copt or other basis plus expense of sale (or allowable)         (h) Gain or (loss) (e) plus (f) mmus (g)           a 10,000.         0.         0.           b 2.         2.         0.           c 942.         9,432.         <8,490.>           d 4.         4.         807.           1 995.         11,669.         \$10,674.>           9 1,038.         4,961.         <3,923.>           1 487.         10,070.         <9,223.>           1 4,762.         56,597.         <51,835.>           4 4.         4.         4.           1 63,190.         40,368.         22,822.           m 62,510.         39,681.         22,829.           n 44,830.         37,276.         7,554.           2 43,595.         (j) Adjusted basis as of 12/31/69         (k) Excess of col. (i) over col. (j), days         (l) Losses (from col. (lh))           3 6         4.         4.         4.           4 9.         4.         4.         4.           6 1/2 1/2 1/69         (l) Adjusted basis as of 12/31/69         (l) Adjusted		2400 SHARES CBS CORPORATION				
(e) Gross sales price         (f) Depreciation allowed (or allowable)         (g) Gast or other basis (e) plus (f) minus (g)           a         10,000.         10,000.         0.           b         2.         2.         0.           c         942.         9,432.         <8,490.>           d         4.         807.         807.           t         995.         11,669.         <10,674.>           g         1,038.         4,961.         <3,923.>           h         480.         5,717.         <52,237.>           h         480.         5,717.         <52,237.						
Topic   Topi	<sub>0</sub> 1700 SHARES IN	VESTCO LTD		P	11/09/10	03/30/11
Description   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Complete only for assets showing gain in column (h) and	(e) Gross sales price					
c         942.         9,432.         <8,490.>           d         4.         4.         807.           1         995.         11,669.         <10,674.>           g         1,038.         4,961.         <3,923.>           h         480.         5,717.         <5,237.>           1         847.         10,070.         <9,223.>           4         4.         4.           1         63,190.         40,368.         22,822.           m         62,510.         39,681.         22,829.           n         44,830.         37,276.         7,554.           a         43,595.         36,672.           Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69         (I) Losses (from col. (h).           (I) FM V as of 12/31/69         (I) Adjusted basis as of 12/31/69         (I) Excess of col. (h) gain over col. (k).           b         0.         0.           c         8,490.>           d         4.           e         807.           f         4.           e         807.           f         <						0.
d					····	0.
BO7   1			9,432.			<8,490.>
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Name			40,368.			22,822.
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   (i)) FM V as of 12/31/69   (ii) Adjusted basis as of 12/31/69   (iii) FM V as of 12/31/69   (iii) Adjusted basis as of 12/31/69   (iii) FM V as of 12/31/69   (iii) Adjusted basis as of 12/31/69   (iii) FM V as of 12/31/69   (iii) Adjusted basis as of 12/31/69   (iii) FM V as of 12/31/69   (iii) Adjusted basis as of 12/31/69   (iii) FM V as of 12/31/69   (iii) Adjusted basis as of 12/31/69   (iii) FM V as of						
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   (i) FM V as of 12/31/69   (i) Adjusted basis as of 12/31/69   (ii) Excess of col (i) over col (j), if any   (ii) Excess of col (h) gain over col (k), but not less than "-0-")   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Gains (excess of col (h) gain over col (k), but not less than "-0-")   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Gains (excess of col (h) gain over col (k), but not less than "-0-")   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Gains (excess of col (h) gain over col (k), but not less than "-0-")   Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69   Gains (excess of col (h) gain over col (k), but not less than "-0-")   Complete only for asset showing excess of col (h) gain over col (k), but not less than "-0-")   Complete only for asset showing excess of col (h) gain over col (k), but not less than "-0-")   Complete only for asset showing excess of col (h) gain over col (k), but not less than "-0-")   Complete only for asset showing excess of col (h) gain over col (k), but not less than "-0-")   Complete only for asset showing excess of col (h) gain over col (k), but not less than "-0-")   Complete only for asset showing excess of col (h) gain over col (k), but not less than "-0-")   Complete only for asset showing excess of col (h) gain over col (k), but not less than "-0-")   Complete only for asset showing excess of col (h) gain over col (k), but not less than "-0-")   Complete only for asset showing excess of col (h) gain over col (k), but not less than "-0-")   Complete only for asset showing excess of col (h) gain over col (k), but not less than "-0-")   Complete only for asset showing excess of col (h) gain of less than "-0-")   Complete only for asset showing excess of col (h) gain of less than "-0-")						
(i) FM V as of 12/31/69  (ii) FM V as of 12/31/69  (ii) FM V as of 12/31/69  (iii) FM V as of 12/31/69  (iii) FM V as of 12/31/69  (iv) FM V as of 1						3,672.
(i) F M V as of 12/31/69 as of 12/31/69 over col (i), if any but not less than "-0-")  a	Complete only for assets showing	<del> </del>				col (k)
D	(i) F M V as of 12/31/69	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				
C   S   S   S   S   S   S   S   S   S					<del></del>	
d						
Second   S						4.
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   If gain, also enter in Part I, line 7   If gain, also enter in Part I, line 8, column (c)   If gain, also enter in Part I, line 8   If gain, also enter i	ν					807.
Standard	f					
Note the property of the pro	g					<3,923.>
Section 1 (1) (1) (1) (1) (2) (1) (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	h					
k  I  22,822.  m  22,829.  n  7,554.  Capital gain net income or (net capital loss)  { If gain, also enter in Part I, line 7   2   3   3,672.  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)  }				<del></del>		
22,822.  m 22,829.  n 7,554.  Capital gain net income or (net capital loss)  { If gain, also enter in Part I, line 7   1   (loss), enter "-0-" in Part I, line 7   2    Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)   1   (gain, also enter in Part I, line 8, column (c)   2   (loss)   (los						
m 22,829. 7,554. 0 3,672.  Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7   1   1   1   1   1   1   1   1   1	<u>k</u>					
7,554.  2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 }   3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	1					
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 } 2  3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)						
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 } 2  3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)						
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)		I If gain, also ente	r in Part I, line 7			3,012.
If gain, also enter in Part I, line 8, column (c)	· -		`	2		
	If gain, also enter in Part I, line 8,	, column (c)	}	3		

N/A

2 Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (mo , day, yr ) (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold 2-story brick warehouse, or common stock, 200 shs MLC Co (mo, day, yr) 01/31/1103/31/11 800 SHARES QUALCOMM INC P b 1600 SHARES TEXAS INSTRUMENTS INC  $\overline{P}$ 06/28/1004/07/11 c 1100 SHARES WALGREEN COMPANY P 01/12/11|04/19/11 d 1000 SHARES EXPEDITORS INTL WASH Р 03/17/1003/31/11 e 500 SHARES CATERPILLAR INC P 11/09/1008/09/11 P VARIOUS 3800 SHARES CANADIAN OIL SANDS **VARIOUS** g 2500 P SHARES COMPUTER SCIENCES CORPORATION VARIOUS 08/09/11 12/09/11 1000 SHARES ITT CORPORATION P VARIOUS 1300 P 06/28/1008/09/11 SHARES KLA TENCOR CORP  $_{\perp} 2000$ SHARES EXLIS INC P VARIOUS 12/23/11 k 2000 SHARES XYLEM INC P VARIOUS 11/15/11 700 SHARES ROPER INDUSTRIES, 02/10/1003/29/11 INC m CAPITAL GAINS DIVIDENDS п 0 (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 43,710. 43,184. 526. a 56,150. 38,839. 17,311. b 46,465. 45,382. 1,083. C 50,040. 12,418.37,622. d <1,796.> 42,989. 44,785. е 85,965. 114,745. <28,780.> f 77,614. 112,761. <35,147.> g 18,822. 19,840. 1,018. h 46,789. 42,376. 4,413. 18,230. 22,847. <4,617.> 48,309 < 8,312.>56,621. 59,735. 36,265. 23,470. П 1,896. 1,896. m n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col (h)) Gains (excess of col (h) gain over col (k), (j) Adjusted basis (k) Excess of col (i) (i) FMV as of 12/31/69 but not less than "-0-") over col (j), if any as of 12/31/69 526. а 17,311. b 1,083. C 12,418. d <1,796.>е <28,780.> f <35,147.> 9 1,018. h 4,413. <4,617.> <8,312.> 23,470. 1,896. m n 0 { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } <48,207.> 2 Capital gain net income or (net capital loss) 2 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

FORM 990-PF DIVIDENDS	S AND	INTER	EST	FROM	SECU	RITIES	STATEMENT	1
SOURCE		GROSS	AMC	UNT		ITAL GAINS IVIDENDS	COLUMN (A	A)
AMERITRADE #303969	-		_	810.		1,128.	145,6	
AMERITRADE #753947 ENERGY TRANSFER PARTNERS LP			21,	297. 48.		420. 0.	20,8	377. 48.
KINDER MORGAN ENERGY PARTNERS								
L.P. ONEOK PARTNERS, L.P.				105.		0. 0.	-	.105 .2
OTHER				13.		0.		13.
SCHWAB				427.		0.		127.
THIRD AVENUE FUNDS			-	307.		250.		)57.
VANGUARD	_		1,	342.		98.	1,4	244.
TOTAL TO FM 990-PF, PART I, LI	N 4		175,	351.		1,896.	173,4	155.
FORM 990-PF	O':	THER II					STATEMENT	
			(	(A)		(B)	(C)	
DESCRIPTION		]		ENUE BOOKS		NET INVEST- MENT INCOME		
 AMERITRADE #753947		<u></u>		1,4	191.	1,491	•	•
TOTAL TO FORM 990-PF, PART I,	LINE	11		1,4	191.	1,491	•	
FORM 990-PF	7.00	COUNTI	NIC I	7000			STATEMENT	3
	AC	COUNTI	NG I	EES			STATEMENT	<u> </u>
DESCRIPTION	EXPE	A) NSES BOOKS		(B) INVI NT INC		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES		5,085.		5 ,	,085.			0.
TO FORM 990-PF, PG 1, LN 16B		5,085.		5	,085.			0.
=				-				

FORM 990-PF	THER PROFES	SIONAL FEES	5	STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE	
MANAGEMENT FEES	13,315.	13,315.			0.
TO FORM 990-PF, PG 1, LN 16C	13,315.	13,315.			0.
FORM 990-PF	TAX	ES	8	STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE	
FEDERAL TAXES PAID FOREIGN TAXES	11,455. 859.				0.
TO FORM 990-PF, PG 1, LN 18	12,314.	12,314.			0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE	
FILING FEES	315.	315.			0.
TO FORM 990-PF, PG 1, LN 23	315.	315.		=	0.
FORM 990-PF OTHER DECREASE	ES IN NET AS	SETS OR FUND I	BALANCES S	STATEMENT	7
DESCRIPTION				AMOUNT	
NONDEDUCTIBLE EXPENSES FROM EDISALLOWED PASSIVE PTP LOSSES		PARTNERSHIPS		11,78	93.
TOTAL TO FORM 990-PF, PART II	II, LINE 5		_	11,87	<del></del> 79.

FORM 990-PF	CORPORATE STOCK		STAT	EMENT 8
DESCRIPTION		BOOK VALUE		MARKET ALUE
AMERITRADE #3969		4,126,28		,478,504.
THIRD AVE MUTUAL FUNDS SCHWAB		333,43	0.	243,458.
AMERITRADE #3947 VANGUARD		960,06 301,34	5.	976,359. 300,665.
TOTAL TO FORM 990-PF, PART II, I	LINE 10B	5,721,12	<del>_</del>	,998,986.
	IST OF OFFICERS, D ND FOUNDATION MANA		STAT	EMENT 9
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
PAUL WEAVER 660 PINE STREET WINNETKA, IL 60093	DIRECTOR/PRES/	TREAS	0.	0.
EVERETT P WEAVER 680 GREEN BAY ROAD, APT. 204 WINNETKA, IL 60093	DIRECTOR 0.00	0.	0.	0.
RITA C WEAVER 680 GREEN BAY ROAD, APT. 204 WINNETKA, IL 60093	DIRECTOR 0.00	0.	0.	0.
ANNEMARIE WEAVER 257 E DELAWARE, APT 9C CHICAGO, IL 60614	DIRECTOR 0.00	0.	0.	0.
ROBERT P WEAVER 323 BELLEVUE DRIVE BOULDER, CO 80302	DIRECTOR 0.00	0.	0.	0.
WILLAM T WEAVER 1114 LITTLE HIGH STREET CHARLOTTESVILLE, VA 22902	DIRECTOR 0.00	0.	0.	0.
HELEN W KINNAIRD 3215 TENNYSON STREET SAN DIEGO, CA 92106	DIRECTOR 0.00	0.	0.	0.

PAUL BECHTNER FOUNDATION C/O PA	UL WEAVER		36	-3973429
MARTHA J WEAVER 13315 BUTTERMILK BEND NORTH SAN JUAN, CA 95960	DIRECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	0.	0.	0.

# Form **8868** (Rev January 2012)

Internal Revenue Service

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

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

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

File a separate application for each return.

OMB No 1545-1709

X

Form 8868 (Rev 1-2012)

• 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 Chanties & Nonprofits 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 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 Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or print PAUL BECHTNER FOUNDATION C/O PAUL WEAVER 36-3973429 File by the Number, street, and room or suite no. If a P.O box, see instructions Social security number (SSN) filing your 660 PINE STREET return See City, town or post office, state, and ZIP code For a foreign address, see instructions. instructions WINNETKA, IL 60093 0 4 Enter the Return code for the return that this application is for (file a separate application for each return) **Application** Return Application Return Code Is For Is For Code Form 990 01 Form 990-T (corporation) 07 Form 990-BL Form 1041-A 02 80 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 PAUL WEAVER The books are in the care of ▶ 660 PINE STREET - WINNETA, IL 60093 Telephone No. ► 847-446-5739 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. 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: ► X calendar year 2011 or \_\_\_ tax year beginning and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any 4,440. nonrefundable credits. See instructions. If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 4,440. estimated tax payments made include any prior year overpayment allowed as a credit 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 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

	68 (Rev 1-2012)					Page
•	are filing for an Additional (Not Automatic) 3-Month Ex					$\triangleright (X)$
	ily complete Part II if you have already been granted an a are filing for an Automatic 3-Month Extension, comple		•	ed Form 8	3868	
Part II				al (no c	opies nee	ded)
<u> </u>				<u>-</u>		see instructions
Type or	Name of exempt organization or other filer, see instru	ictions				n number (EIN) o
print	PAUL BECHTNER FOUNDATION			, ,		, ,
File by the	C/O PAUL WEAVER			X 36-3973429		
due date for filing your return See	Number, street, and room or suite no. If a P.O. box, s 660 PINE STREET	see instruc	tions	Social security number (SSN)		
instructions	City, town or post office, state, and ZIP code. For a f WINNETKA, IL 60093					
				•		
Enter the	Return code for the return that this application is for (fil	e a separa	te application for each return)			0 4
Applicat	ion	Return	Application			Return
ls For		Code	ls For			Code
Form 990	)	01				
Form 990	D-BL	02	Form 1041-A			08
Form 990	D-EZ	01	Form 4720			09
Form 990-PF 04 Form 5227				10		
Form 990	orm 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069				11	
	O-T (trust other than above)	06	Form 8870			12
STOP! D	o not complete Part II if you were not already granted	d an auton	natic 3-month extension on a prev	ously file	d Form 886	8.
	PAUL WEAVER	m 5.71	THE COOLS			
	ooks are in the care of $\triangleright$ 660 PINE STREE	<u>T – W.</u>				
•	hone No. ► 847-446-5739	45 - 11-	FAX No. ▶			<b>~</b> [
	organization does not have an office or place of busines is for a Group Return, enter the organization's four digit			thin in fa		
box 📂	. If it is for part of the group, check this box	_				
			BER 15, 2012.	an memo	ers the exte	ision is ior.
	r calendar year $2011$ , or other tax year beginning		, and ending	ז		
	he tax year entered in line 5 is for less than 12 months, or			Final r	eturn	
	Change in accounting period					
7 St	ate in detail why you need the extension					
D	UE TO THE DIVERSITY OF FINAN	CIAL '	TRANSACTIONS, ADDI	TIONA	L TIME	IS
N	EEDED TO FILE THE RETURN. I	T IS	EXPECTED THAT ALL	INFOR	MATION	WILL BE
A	SSEMBLED BY THE DATE REQUEST	ED IN	THIS EXTENSION.			
8a If t	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any	ļ		
	nrefundable credits. See instructions			8a	\$	4,440
	his application is for Form 990-PF, 990-T, 4720, or 6069					
	x payments made Include any prior year overpayment a	llowed as a	a credit and any amount paid	<u> </u>		4 440
	reviously with Form 8868	·		8ь	\$	4,440
	lance due. Subtract line 8b from line 8a. Include your p	•	th this form, if required, by using	_		0
	TPS (Electronic Federal Tax Payment System) See insti	uctions		8c	<b>  \$</b>	U

Title 🗪

Form 8868 (Rev 1-2012)

Date 🟲

Signature 🕨