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

OMB No 1545-0052

2011Department of the Treasury
Internal Revenue Service

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

For calendar year 2011, or tax year beginning**, 2011, and ending**

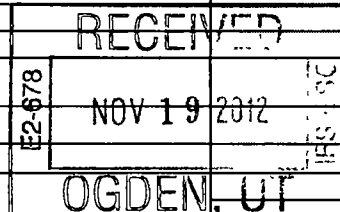
Name of foundation NEW VISIONS FOUNDATION		A Employer identification number 36-4291720
Number and street (or P O box number if mail is not delivered to street address) 485 HALF DAY ROAD		B Telephone number (see the instructions) (847) 883-9700
City or town BUFFALO GROVE	State ZIP code IL 60089	C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial Return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, column (c), line 16) \$ 1,944,043.	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> 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 <input type="checkbox"/>

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) (see instructions))

	(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 (att sch)	816,326.			
2 Ck <input type="checkbox"/> if the foundn is not req to att Sch B				
3 Interest on savings and temporary cash investments	48.	48.		
4 Dividends and interest from securities	12,394.	23,292.		
5a Gross rents				
b Net rental income or (loss)		L-6a Stmt		
6a Net gain/(loss) from sale of assets not on line 10	13,834.			
b Gross sales price for all assets on line 6a	150,180.			
7 Capital gain net income (from Part IV, line 2)		19,290.		
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/(loss) (att sch)				
11 Other income (attach schedule) See Line 11 Stmt	7,727.	-3,450.		
12 Total. Add lines 1 through 11	850,329.	39,180.		
13 Compensation of officers, directors, trustees, etc				
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees (attach schedule) L-16a Stmt	482.			482.
b Accounting fees (attach sch)				
c Other prof fees (attach sch) L-16c Stmt	47,032.			47,032.
17 Interest				
18 Taxes (attach schedule)(see instrs) See Line 18 Stmt	1,200.	1,170.		
19 Depreciation (attach sch) and depletion L-19 Stmt	356.			
20 Occupancy				
21 Travel, conferences, and meetings	2,329.			2,329.
22 Printing and publications				
23 Other expenses (attach schedule) See Line 23 Stmt	5,101.	7,659.		5,101.
24 Total operating and administrative expenses. Add lines 13 through 23	56,500.	8,829.		54,944.
25 Contributions, gifts, grants paid	426,838.			426,838.
26 Total expenses and disbursements. Add lines 24 and 25	483,338.	8,829.		481,782.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	366,991.			
b Net investment income (if negative, enter -0-)		30,351.		
c Adjusted net income (if negative, enter -0-)				

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ADMINISTRATIVE EXPENSES



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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
ASSETS	1	Cash – non-interest-bearing					
	2	Savings and temporary cash investments	420,692.	783,269.	783,269.		
	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 (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach sch)					
		Less: allowance for doubtful accounts	24,338.	0.	0.		
	8	Inventories for sale or use					
	9	Prepaid expenses and deferred charges					
	10a	Investments – U.S. and state government obligations (attach schedule)	0.				
	b	Investments – corporate stock (attach schedule) L-10b Stmt	868,880.	888,144.	860,572.		
	c	Investments – corporate bonds (attach schedule) L-10c Stmt	279,116.	288,754.	300,006.		
	LIABILITIES	11	Investments – land, buildings, and equipment basis				
		Less: accumulated depreciation (attach schedule)					
12		Investments – mortgage loans					
13		Investments – other (attach schedule)					
14		Land, buildings, and equipment basis	3,109.				
		Less: accumulated depreciation (attach schedule)	2,913.	553.	196.	196.	
15		Other assets (describe)					
16		Total assets (to be completed by all filers – see the instructions. Also, see page 1, item I)	1,593,579.	1,960,363.	1,944,043.		
17		Accounts payable and accrued expenses					
18		Grants payable					
FUND ASSETS	19	Deferred revenue					
	20	Loans from officers, directors, trustees, & other disqualified persons					
	21	Mortgages and other notes payable (attach schedule)					
	22	Other liabilities (describe)					
	23	Total liabilities (add lines 17 through 22)					
	24	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.					
	25	Unrestricted					
	26	Temporarily restricted					
	27	Permanently restricted					
	28	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.					
BALANCES	27	Capital stock, trust principal, or current funds					
	28	Paid-in or capital surplus, or land, building, and equipment fund					
	29	Retained earnings, accumulated income, endowment, or other funds	1,593,579.	1,960,363.			
	30	Total net assets or fund balances (see instructions)	1,593,579.	1,960,363.			
	31	Total liabilities and net assets/fund balances (see instructions)	1,593,579.	1,960,363.			

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	1,593,579.
2	Enter amount from Part I, line 27a	2	366,991.
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3	4	1,960,570.
5	Decreases not included in line 2 (itemize) ADJUSTMENT	5	207.
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	1,960,363.

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 shares MLC Company)	(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a FROM K-1 MF SRI INDEX FUND LLC	P	Various	Various
b NORTHERN TRUST ACCT #7850 - SEE ATTACHED STATEMENT	P	Various	Various
c NORTHERN TRUST ACCT #7385 - SEE ATTACHED STATEMENT	P	Various	Various
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 7,799.		0.	7,799.
b 98,495.		91,967.	6,528.
c 49,465.		44,502.	4,963.
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	
a 7,799.	0.	0.	7,799.
b 0.	0.	0.	6,528.
c 0.	0.	0.	4,963.
d 0.	0.		
e			

2 Capital gain net income or (net capital loss).	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div>	2	19,290.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6).	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 </div>	3	

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 the 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 (column (b) divided by column (c))
2010	349,681.	1,291,208.	0.270817
2009	383,983.	1,093,010.	0.351308
2008	413,468.	1,302,516.	0.317438
2007	179,374.	1,338,549.	0.134006
2006	97,591.	1,305,856.	0.074733

2 Total of line 1, column (d)	2	1.148302
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	0.229660
4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5	4	1,421,315.
5 Multiply line 4 by line 3	5	326,419.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	304.
7 Add lines 5 and 6	7	326,723.
8 Enter qualifying distributions from Part XII, line 4	8	481,782.

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.

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

1 a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary – see instrs)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	304.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (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	304.
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	304.
6 Credits/Payments:			
a 2011 estimated tax pmts and 2010 overpayment credited to 2011	6 a	1,538.	
b Exempt foreign organizations – tax withheld at source	6 b		
c Tax paid with application for extension of time to file (Form 8868)	6 c		
d Backup withholding erroneously withheld	6 d		
7 Total credits and payments. Add lines 6a through 6d	7	1,538.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	1,234.	
11 Enter the amount of line 10 to be Credited to 2012 estimated tax <input type="checkbox"/> 1,234. Refunded <input type="checkbox"/>	11		

Part VII-A Statements Regarding Activities

	Yes	No
1 a 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
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? <i>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.</i>		X
c 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 \$ _____ (2) On foundation managers \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If 'Yes,' attach a detailed description of the activities</i>		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If 'Yes,' attach a conformed copy of the changes</i>		X
4 a 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? <i>If 'Yes,' attach the statement required by General Instruction T.</i>		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? <i>If 'Yes,' complete Part II, column (c), and Part XV</i>	X	
8 a Enter the states to which the foundation reports or with which it is registered (see instructions) <u>IL - Illinois</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) of each state as required by General Instruction G? <i>If 'No,' attach explanation</i>	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)? <i>If 'Yes,' complete Part XIV</i>		X
10 Did any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a schedule listing their names and addresses.</i>		X

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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>N/A</u>	13	X	
14	The books are in care of <u>ERIC F. ACHEPOHL</u> Telephone no <u>(847) 883-9700</u> Located at <u>485 HALF DAY ROAD</u> <u>BUFFALO GROVE IL</u> ZIP + 4 <u>60089-8806</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year <u>15</u>			
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 <u></u>	16		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
1 a 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 <input type="checkbox"/>	1 b	X
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?	1 c	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes,' list the years <u>20__</u> , <u>20__</u> , <u>20__</u> , <u>20__</u> .		
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)	2 b	X
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here <u>20__</u> , <u>20__</u> , <u>20__</u> , <u>20__</u> .		
3 a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)	3 b	
4 a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	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?	4 b	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)? (see instructions)

☐ 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)?

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?☐ 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?

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

6b

X

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?**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 (see instructions).

(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
R. MILLER 485 HALF DAY ROAD BUFFALO GROVE IL 60089	DIRECTOR-PRESIDENT 1.00	0.	0.	0.
J. KRISTEL BURLINGTON VT 05401	DIRECTOR-VP 1.00	0.	0.	0.
E. ACHEPOHL 485 HALF DAY ROAD BUFFALO GROVE IL 60089	DIRECTOR-TREASURER 1.00	0.	0.	0.
E. VERSTEN 485 HALF DAY ROAD BUFFALO GROVE IL 60089	SECRETARY 1.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1— see instructions). 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				
0				
0				
0				
0				

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

None

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		None

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc

	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

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

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Form 990-PF (2011)

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	1,237,141.
b Average of monthly cash balances	1b	205,818.
c Fair market value of all other assets (see instructions)	1c	
d Total (add lines 1a, b, and c)	1d	1,442,959.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	1,442,959.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	21,644.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,421,315.
6 Minimum investment return. Enter 5% of line 5	6	71,066.

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	71,066.
2a Tax on investment income for 2011 from Part VI, line 5	2a	304.
b Income tax for 2011. (This does not include the tax from Part VI.)	2b	
c Add lines 2a and 2b	2c	304.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	70,762.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	70,762.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	70,762.

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	481,782.
b Program-related investments — total from Part IX-B	1b	
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	481,782.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	304.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	481,478.

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.

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				70,762.
2 Undistributed income, if any, as of the end of 2011:				
a Enter amount for 2010 only			0.	
b Total for prior years. 20__, 20__, 20__				
3 Excess distributions carryover, if any, to 2011:				
a From 2006	33,303.			
b From 2007	113,151.			
c From 2008	348,934.			
d From 2009	330,388.			
e From 2010	286,449.			
f Total of lines 3a through e	1,112,225.			
4 Qualifying distributions for 2011 from Part XII, line 4: \$ 481,782.				
a Applied to 2010, but not more than line 2a				
b Applied to undistributed income of prior years (Election required – see instructions)				
c Treated as distributions out of corpus (Election required – see instructions)				
d Applied to 2011 distributable amount				70,762.
e Remaining amount distributed out of corpus	411,020.			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount 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	1,523,245.			
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				
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 instructions			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) (see instructions)				
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	33,303.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	1,489,942.			
10 Analysis of line 9:				
a Excess from 2007	113,151.			
b Excess from 2008	348,934.			
c Excess from 2009	330,388.			
d Excess from 2010	286,449.			
e Excess from 2011	411,020.			

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

Recipient	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
Name and address (home or business)				
<i>a Paid during the year</i> SEE ATTACHED				426,838.
Total			▶ 3a	426,838.
<i>b Approved for future payment</i>				
Total			▶ 3b	

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2011

Name of the organization

NEW VISIONS FOUNDATION

Employer identification number

36-4291720

Organization type (check one):

Filers of:

Form 990 or 990-EZ

Section:

- ☐ 501(c)(____) (enter number) organization
☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
☐ 527 political organization

Form 990-PF

- ☒ 501(c)(3) exempt private foundation
☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor (Complete Parts I and II)

Special Rules

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ► \$ _____

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)

BAA 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

Employer identification number

NEW VISIONS FOUNDATION

36-4291720

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

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	HLM & JM 2006 CHARITABLE LEAD TRUST 485 HALF DAY ROAD, SUITE 200 BUFFALO GROVE IL 60089	\$ 365,322.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
2	R. MILLER 485 HALF DAY ROAD, SUITE 200 BUFFALO GROVE IL 60089	\$ 300,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
3	HLM CHARITABLE LEAD TRUST III 485 HALF DAY ROAD, SUITE 200 BUFFALO GROVE IL 60089	\$ 151,004.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Form 990-PF
Part I, Line 6a

Net Gain or Loss From Sale of Assets

2011

Name NEW VISIONS FOUNDATION	Employer Identification Number 36-4291720
---------------------------------------	---

Asset Information:

Description of Property	MFO DOMINI SOCIAL INVT TR BD FD INV SHS		
Date Acquired	<u>Various</u>	How Acquired	<u>Purchased</u>
Date Sold	<u>03/30/11</u>	Name of Buyer	
Sales Price	<u>45,000.</u>	Cost or other basis (do not reduce by depreciation)	<u>44,379.</u>
Sales Expense		Valuation Method	<u>Fair Market Value</u>
Total Gain (Loss)	<u>621.</u>	Accumulation Depreciation	
Description of Property	SEE ATTACHED - NT ACCT# 7850		
Date Acquired	<u>Various</u>	How Acquired	<u>Purchased</u>
Date Sold	<u>Various</u>	Name of Buyer	
Sales Price	<u>23,517.</u>	Cost or other basis (do not reduce by depreciation)	<u>23,827.</u>
Sales Expense		Valuation Method	<u>Fair Market Value</u>
Total Gain (Loss)	<u>-310.</u>	Accumulation Depreciation	
Description of Property	SEE ATTACHED - NT ACCT# 7850		
Date Acquired	<u>Various</u>	How Acquired	<u>Purchased</u>
Date Sold	<u>Various</u>	Name of Buyer	
Sales Price	<u>74,967.</u>	Cost or other basis (do not reduce by depreciation)	<u>68,140.</u>
Sales Expense		Valuation Method	<u>Fair Market Value</u>
Total Gain (Loss)	<u>6,827.</u>	Accumulation Depreciation	
Description of Property	UNITEDHEALTH GROUP INC - CAPITAL GAIN DISTRIBUTION		
Date Acquired	<u>Various</u>	How Acquired	<u>Purchased</u>
Date Sold	<u>Various</u>	Name of Buyer	
Sales Price	<u>11.</u>	Cost or other basis (do not reduce by depreciation)	
Sales Expense		Valuation Method	<u>Fair Market Value</u>
Total Gain (Loss)	<u>11.</u>	Accumulation Depreciation	
Description of Property	MFO DOMINI SOCIAL INVT TR BD FD INV SHS - CAPITAL GAIN DISTRIBUTION		
Date Acquired	<u>Various</u>	How Acquired	<u>Purchased</u>
Date Sold	<u>Various</u>	Name of Buyer	
Sales Price	<u>4,465.</u>	Cost or other basis (do not reduce by depreciation)	
Sales Expense		Valuation Method	<u>Fair Market Value</u>
Total Gain (Loss)	<u>4,465.</u>	Accumulation Depreciation	
Description of Property	MFO DOMINI SOCIAL INVT TR BD FD INV SHS - CAPITAL GAIN DISTRIBUTION		
Date Acquired	<u>Various</u>	How Acquired	<u>Purchased</u>
Date Sold	<u>Various</u>	Name of Buyer	
Sales Price	<u>2,220.</u>	Cost or other basis (do not reduce by depreciation)	<u>0.</u>
Sales Expense		Valuation Method	<u>Fair Market Value</u>
Total Gain (Loss)	<u>2,220.</u>	Accumulation Depreciation	
Description of Property			
Date Acquired		How Acquired	
Date Sold		Name of Buyer	
Sales Price		Cost or other basis (do not reduce by depreciation)	
Sales Expense		Valuation Method	
Total Gain (Loss)		Accumulation Depreciation	
Description of Property			
Date Acquired		How Acquired	
Date Sold		Name of Buyer	
Sales Price		Cost or other basis (do not reduce by depreciation)	
Sales Expense		Valuation Method	
Total Gain (Loss)		Accumulation Depreciation	

New Visions Foundation
2011

EIN -36-4291720

Payee Name	Payee Address	Project Title	Foundation Status	Amount
AERO / School of Living	417 Roslyn Rd Roslyn Hts , NY 11577	Overall Support	Public	\$25,000 00
American Friends Service Committee	1501 Cherry Street Philadelphia, PA 19102	Overall Support	Public	\$10,000 00
Angelic Organics Learning Center	1547 Rockton Road Caledonia, IL 61011	Overall Support	Public	\$10,000 00
Auburn Theological Seminary	3041 Broadway New York, NY 10027	Overall Support	Public	\$10,000 00
Center for Neighborhood Technology	2125 West North Ave Chicago, IL 60647	Overall Support	Public	\$2,500 00
Center for Partnership Studies	25700 Shafter Way Carmel, CA 93923	Overall Support	Public	\$12,500 00
Central Vermont Community Action Council Inc	195 US RT 302 - Berlin Barre, VT 05641-0000	Overall Support	Public	\$1,000 00
Children of the Earth	26 Baycrest Drive South Burlington, VT 05403	Overall Support	Public	\$35,000 00
Crossroads Fund	3411 W Diversey, #20 Chicago, IL 60647	Overall Support	Public	\$5,000 00
Global Greengrants Fund Inc	2840 Wilderness Place Suite A Boulder, CO 80301	Overall Support	Public	\$5,000 00
Global Justice Ecology Project	P O Box 412, 10600 Route 116 Hinesburg, VT 05461	Overall Support	Public	\$5,000 00
Global Peace Initiative of Women	301 East 57th Street New York, NY 10022	Overall Support	Public	\$3,500 00
Green America	1612 K Street NW, Suite 600 Washington, DC 20006	Overall Support	Public	\$10,000 00
IDEA	98 Hillside Place #3 Tarrytown, NY 10591	Overall Support	Public	\$50,000 00
IDEA	98 Hillside Place #3 Tarrytown, NY 10591	Overall Support	Public	\$45,000 00
Institute For Humane Education	P O Box 260 Surry, ME 04684	Overall Support	Public	\$2,500 00
Madre	121 West 27th Street Room 301 New york, NY 10001	Overall Support	Public	\$5,000 00
National Peace Academy	P O Box 306 Shelburne, VT 05482	Overall Support	Public	\$2,000 00
PassageWorks Institute	3050 Broadway, Suite 203 Boulder, CO 80304	Overall Support	Public	\$10,000 00
Peace Development Fund	PO Box 40250 San Francisco, CA 94140-0250	Overall Support	Public	\$30,000 00
Positive Futures Network	284 Madrona Way, NE #116 Bainbridge Island, WA 98110	Overall Support	Public	\$10,000 00
Post Carbon Institute	613 Fourth Street Suite 208 Santa Rosa, CA 95404	Overall Support	Public	\$7,500 00
Rethinking Schools	1001 E Keefe Ave Milwaukee, WI 53212	Overall Support	Public	\$12,000 00
Social & Environmental Entrepreneurs See Inc	22231 Mulholland Hwy Ste 209 Calabasas, CA 91302-5151	Overall Support	Public	\$7,500 00
Southeastern Vermont Community Action Inc	91 Buck Dr Westminster, VT 05158-9618	Overall Support	Public	\$500 00
Spirit in Action	274 North Street Belchertown, MA 01007	Overall Support	Public	\$25,000 00
Summa Institute	4336 SW Pendleton Street Portland, OR 97221	Overall Support	Public	\$24,338 00
Sustainable Harvest International	779 North Bend Road Surry, ME 04684	Overall Support	Public	\$1,000 00
Sustainable Harvest International	779 North Bend Road Surry, ME 04684	Overall Support	Public	\$2,000 00
Transition US	PO Box 917 Sebastopol, CA 95473	Overall Support	Public	\$5,000 00
U S Fund for UNICEF	333 East 38th Street	Overall Support	Public	\$1,000 00

Pavee Name	Pavee Address	Project Title	Foundation Status	Amount
Union of Concerned Scientists	New York, NY 10016-2772 Two Brattle Square Cambridge, MA 02138-3780	Overall Support	Public	\$2,500 00
United for a Fair Economy	29 Winter Street, 2nd Floor Boston, MA 02108	Overall Support	Public	\$25,000 00
Vermont Community Foundation	P O Box 30 Middlebury, VT 05753	Overall Support	Public	\$1,000 00
Vermont Community Foundation	P O Box 30 Middlebury, VT 05753	Overall Support	Public	\$2,000 00
Vermont Community Foundation	P O Box 30 Middlebury, VT 05753	Overall Support	Public	\$1,000 00
Vermont Community Foundation	P O Box 30 Middlebury, VT 05753	Overall Support	Public	\$1,000 00
Vermont Community Foundation	P O Box 30 Middlebury, VT 05753	Overall Support	Public	\$500 00
Vermont Community Foundation	P O Box 30 Middlebury, VT 05753	Overall Support	Public	\$500 00
Vermont Youth Conservation Corps	1949 East Main Street Richmond, VT 05477	Overall Support	Public	\$5,000 00
Veterans Education Project	P O Box 416 Amherst, MA 01004	Overall Support	Public	\$5,000 00
VSA Vermont	The Woolen Mill 20 Canal Street, Suite 7 Winooski, VT 05404	Overall Support	Public	\$3,500 00
Yes! Youth For Environmental Sanity	400 Bronco Road Soquel, CA 95073	Overall Support	Public	\$5,000 00
Grand Totals (43 items)				\$426,838.00

Form 990-PF, Page 1, Part I, Line 11

Line 11 Stmt

Other income:	Rev/Exp Book	Net Inv Inc	Adj Net Inc
FROM K-1 - MF SRI INDEX FUND LLC		-3,720.	
FROM NORTHERN TRUST ACCT #7385		270.	
OTHER INCOME	7,727.		
Total	7,727.	-3,450.	

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

Line 18 Stmt

Taxes	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
FROM K-1 - MF SRI INDEX FUND LLC		947.		
FROM NORTHERN TRUST ACCT #7850		151.		
FROM NORTHERN TRUST ACCT #7384		72.		
4TH Q ES PAYMENT	1,200.			
Total	1,200.	1,170.		

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

Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
POSTAGE, MAILING SERV	504.			504.
DUES & MEMBERSHIPS	148.			148.
PROFESSIONAL DEVELOPMENT	1,625.			1,625.
BLACKBERRIES & CONFERENCE CALLS	286.			286.
MISCELLANEOUS	91.			91.
IGAM FEES	197.			197.
INSURANCE EXPENSES	2,250.			2,250.
FROM K-1 - MF SRI INDEX FUND LLC		7,102.		
FROM NORTHERN TRUST ACCT #7850		321.		
FROM NORTHERN TRUST ACCT #7385		236.		
Total	5,101.	7,659.		5,101.

Form 990-PF, Page 1, Part I

Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
QUARLES & BRADY, LLP	LEGAL FEES	482.			482.
Total		482.			482.

Form 990-PF, Page 1, Part I

Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
NORTHERN TRUST	SERVICE FEES	549.			549.
THE BENIDA GROUP LLC	MANAGEMENT SERVICES	45,283.			45,283.
REV. JOHN VAUGHN	CONTRACT SERVICES	1,200.			1,200.
Total		47,032.			47,032.

Form 990-PF, Line 19

Allocated Depreciation

Description	Date Acquire	Cost or Basis	Prior Yr. Depr	Mthd	Life	Current Depr	Net Invest Income	Adjusted Net Income
GIFTS SOFTWARE	04/17/07	1489	1232	200DB	5.00	171		
COMPUTER	04/17/07	179	148	200DB	5.00	21		
DESKTOP	05/08/07	104	86	200DB	5.00	12		
BLACKBERRY	05/08/07	62	51	200DB	5.00	7		
COPIER	05/30/07	859	711	200DB	5.00	99		
GUIDESTAR	07/27/07	100	83	200DB	5.00	11		
PRINTER	07/27/07	67	56	200DB	5.00	7		
DESKTOP	12/06/07	73	60	200DB	5.00	9		
ERGO ICEY BOARD	02/01/08	4	1	200DB	5.00	0		
COLOR PRINTER	02/01/08	23	8	200DB	5.00	1		
NOTEBOOK	11/04/09	106	27	200DB	5.00	10		
LAPTOP MOUSE	12/11/09	5	2	200DB	5.00	0		
PRINTER	05/24/10	39	4	200DB	5.00	6		

Total

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

L-10b Stmt

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
MF SRI INDEX FUND LLC	512,838.	423,618.
NEUBERGER BERMAN	316,841.	378,896.
MFB NORTHERN GLOBAL SUSTAINABILITY INDEX FUND	58,465.	58,058.
Total	888,144.	860,572.

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

L-10c Stmt

Line 10c - Investments - Corporate Bonds:	End of Year	
	Book Value	Fair Market Value
CALVERT SOCIAL INVT FNDTN CALVERT CMNTY	45,000.	45,383.

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

Continued

Line 10c - Investments - Corporate Bonds:	End of Year	
	Book Value	Fair Market Value
MFO DOMINI SOCIAL INVT	243,754.	254,623.
Total	<u>288,754.</u>	<u>300,006.</u>

Form **4562**Department of the Treasury
Internal Revenue Service (99)**Depreciation and Amortization**
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No 1545-0172

2011Attachment
Sequence No **179**

Name(s) shown on return

NEW VISIONS FOUNDATION

Identifying number

36-4291720

Business or activity to which this form relates

Form 990-PF page 1

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	
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	
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 (see instrs)	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) (See instructions)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	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	356.
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 <input type="checkbox"/>		

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	
i Nonresidential real property			27.5 yrs	MM	S/L	
			39 yrs	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 instructions	22	356.
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	

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 (see instructions)							25						
26 Property used more than 50% in a qualified business use:													
27 Property used 50% or less in a qualified business use:													
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 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
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?												
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 (see instructions).

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
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? (See instructions)		
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
42 Amortization of costs that begins during your 2011 tax year (see instructions)					
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

Department of the Treasury
Internal Revenue Service▶ **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 ☒ **X**
- 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*.

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 ☐ **X***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.***Enter filer's identifying number, see instructions**

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions		Employer identification number (EIN) or
	NEW VISIONS FOUNDATION		<input checked="" type="checkbox"/> 36-4291720
	Number, street, and room or suite number. If a P.O. box, see instructions.		Social security number (SSN)
	485 HALF DAY ROAD, #200		<input type="checkbox"/>
City, town or post office, state, and ZIP code. For a foreign address, see instructions.		IL 60089	
BUFFALO GROVE			

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 (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ▶
- ERIC F. ACHEPOHL

Telephone No. ▶ (847) 883-9700 FAX No. ▶ (847) 883-9808

- If the organization does not have an office or place of business in the United States, check this box ☐ **X**
- 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 ☐ **X**. 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 Aug 15, 20 12, to file the exempt organization return for the organization named above.

The extension is for the organization's return for:

- ▶ ☒ calendar year 20 11 or
- ▶ ☐ tax year beginning _____, 20 _____, and ending _____, 20 _____

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	\$ 1,538.
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	\$ 1,538.
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	\$ 0.

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.

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the extended due date for filing the return. See instructions.	Name of exempt organization or other filer, see instructions.		Enter filer's identifying number, see instructions	
	NEW VISIONS FOUNDATION		Employer identification number (EIN) or <input checked="" type="checkbox"/> 36-4291720	
	Number, street, and room or suite number. If a P.O. box, see instructions.		Social security number (SSN)	
	485 HALF DAY ROAD, #200		<input type="checkbox"/>	
City, town or post office, state, and ZIP code. For a foreign address, see instructions.				
BUFFALO GROVE IL 60089				

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-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in care of **ERIC F. ACHEPOHL**
Telephone No. **(847) 883-9700** FAX No. **(847) 883-9808**
- 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.

4 I request an additional 3-month extension of time until **Nov 15**, 20 **12**.

5 For calendar year **2011**, or other tax year beginning _____, 20____, and ending _____, 20____.

6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return

☐ Change in accounting period

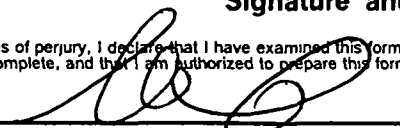
7 State in detail why you need the extension ...

INFORMATION NECESSARY TO COMPLETE THE RETURN HAS NOT BEEN MADE AVAILABLE.

8a 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.	8a	\$	1,538.
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 and any amount paid previously with Form 8868.	8b	\$	1,538.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature  Title **CPA** Date **08/06/12**
BAA FIFZ0502 07/29/11 Form 8868 (Rev 1-2012)