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Form 990-PF

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

OMB No 1545-0052 2011 Department of the Treasury 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 JUL 1. 2011 and ending JUN 30, 2012 Name of foundation A Employer identification number HARRY F. CHADDICK AND ELAINE 36-3320988 CHADDICK FOUNDATION, INC. Room/suite Number and street (or P O box number if mail is not delivered to street address) B Telephone number 1731 N. MARCEY STREET 515 312-346-2141 City or town, state, and ZIP code C If exemption application is pending, check here CHICAGO, IL 60614 Initial return G Check all that apply. Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: | X | Cash Accrual 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 9,804,744. (Part I, column (d) must be on cash basis) ▶\$ Part I. Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (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)) expenses per books income income (cash basis only) N/A Contributions, gifts, grants, etc., received Check X if the foundation is not required to attach Sch. B 2 Interest on savings and temporary cash investments 150,148 150,148. STATEMENT 3 106,047 106,047 STATEMENT 4 Dividends and interest from securities 23,573 23,573. STATEMENT 5a Gross rents STATEMENT -12,426.Net rental income or (loss) .693 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a ₹4. 4° , 4,267,145. 137,693 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 8 18. 4 Spile 12 FEB 1 4 7013 Gross sales less returns 10a and allowances b Less Cost of goods sold OGDEN c Gross profit or (loss) 11 Other income 417,461. 417,461 12 Total Add lines 1 through 11 297,000. 89,100. 207,900. 13 Compensation of officers, directors, trustees, etc 16,800. 7,200. 24,000 14 Other employee salaries and wages 7,318. 10,455. 15 Pension plans, employee benefits 3,137. -5 1,871. 500. 0. STMT 16a Legal fees 5,754. 0. STMT 6 31,843. **b** Accounting fees 68,936. STMT 7 68,936 0. c Other professional fees 17 Interest 10,585. 24,089. 18 Taxes STMT 8 41,440. 10,762. 8,999. 19 Depreciation and depletion 20,457. 6,137. 14,320. 20 Occupancy 1,490. 0. 1,490. 21 Travel, conferences, and meetings 22 Printing and publications 23,785 20,717 3,066. STMT 9 23 Other expenses Operating 24 Total operating and administrative 221,065 274,983. 532,039 expenses Add lines 13 through 23 548,911 548,911. 25 Contributions, gifts, grants paid

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823,89<u>4</u>.

S. M. M. M. C.

a Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-)

26 Total expenses and disbursements

Add lines 24 and 25 27 Subtract line 26 from line 12. 221,065

196,396

N/A

1,080,950.

-663,489

CHADDICK FOUNDATION, Form 990-PF (2011) Beginning of year Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only End of year Part II. (a) Book Value (b) Book Value (c) Fair Market Value 1 Cash - non-interest-bearing 326,148. 326,148. 618,104 2 Savings and temporary cash investments 3 Accounts receivable ▶ Less: allowance for doubtful accounts 4 Pledges receivable ► Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations 5,099,790. 6,365,835. STMT 11 5,021,000. b Investments - corporate stock STMT 12 3,440,362 2,600,2<u>88</u>. c Investments - corporate bonds 439,749. 11 Investments - land, buildings, and equipment basis 430,601 430,601. 9,148 Less accumulated depreciation STMT 10▶ 12 Investments - mortgage loans 29,038 STMT 13 13 Investments - other <u>17,392.</u> 18 6 14 Land, buildings, and equipment: basis 4,570. 4,570 Less accumulated depreciation STMT 14▶ 12,822. 6,184 1,150, STATEMENT 15) 9,650. 1,150. 15 Other assets (describe ▶ 9,124,338. 8,462,547 16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe ► SECURITY DEPOSIT 0. 1,698 0. 1.698 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31 **Net Assets or Fund Balances** 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted ▼ X Foundations that do not follow SFAS 117, check here and complete lines 27 through 31 6,980,959 6,980,959 27 Capital stock, trust principal, or current funds 0 28 Paid-in or capital surplus, or land, bldg., and equipment fund 0. 2,143,379. 1,479,890. 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances 9,124,338. 8,460,849 9,124,338. 8,462,547 31 Total liabilities and net assets/fund balances Analysis of Changes in Net Assets or Fund Balances Part:III 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 9,124,338. (must agree with end-of-year figure reported on prior year's return) 1 -663,489. 2 Enter amount from Part I, line 27a 2 3 Other increases not included in line 2 (itemize) 3 8,460,849. 4 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 8,460,849. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

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Form 990-PF (2011) CHAD	DICK FOUNDATION						3	<u>6-3320</u>	988	Page 3
<u> </u>	nd Losses for Tax on In		t Income	[/h) E	Jour of	aurad		. 1		
(a) List and descrit 2-story brick ware	pe the kind(s) of property sold (e.g. chouse; or common stock, 200 shs	., real estate, s. MLC Co.)		D D	- Purc - Dona	nase i	(c) Date (mo , d	acquired ay, yr.)	(d) Dat (mo , d	
1a		_				-				
b SEE ATTACHED	STATEMENT									
С	······································									
_d										
e		T		<u>L</u>					· · · ·	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss) s (f) minus (g	j)	
a						_				
b										
C .										
e 4,267,145.			/ 100 /E	2					127	,693.
Complete only for assets showing	nain in column (h) and owned by		4,129,45	04.		//\	Cause (C	ol (h) gain r		,093.
(i) F.M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) E>	cess of col (i)				(k), but r	not less than (from col. (h	-0-) or	
	as 01 12/3 1/09	UVEI	Coi. (j), ii any							
a										 -
<u>b</u>	_			\dashv						
c d										
e			<u> </u>						137	,693.
	C 16	Dart I baa	7	7						,000.
2 Capital gain net income or (net capi	$\{ \text{If gain, also enter} \ \{ \text{If (loss), enter -0-} \} $	in Part I, line - in Part I, line	7)	2				137	<u>,693.</u>
3 Net short-term capital gain or (loss		id (6)		٦						
If gain, also enter in Part I, line 8, co	olumn (c).			 	•			N/A		
If (loss), enter -0- in Part I, line 8 Part V Qualification Un	der Section 4940(e) for	Reduced	l Tax on Net	Inv	estn	ent Inc	me	N/A		
(For optional use by domestic private f								-		
(i of optional use by domestic private i	oundations subject to the section -	1340(a) tax on	THE HIVESTINGHT III	icomic	·• <i>)</i>					
If section 4940(d)(2) applies, leave this	s part blank.									
Was the foundation liable for the section	on 4942 tax on the distributable am	ount of any vi	ear in the base per	riod?					Yes	X No
If "Yes," the foundation does not qualify	under section 4940(e) Do not co	mplete this pa	rt.							
1 Enter the appropriate amount in ea				es.						
(a) Base period years	(b)			(c)				Distribi	(d) Ition ratio	
Calendar year (or tax year beginning	ın) Adjusted qualifying dis	tributions	Net value of no	nchar	ıtable-	use assets		(col (b) divi	ded by col.	(c))
2010		0,148.				1,076				<u>88566</u>
2009		3,087.				3,364				<u>74961</u>
2008	•	9,927.				0,804				<u>57043</u>
2007		6,123.				7,549				<u>72697</u>
2006	1,06	<u>5,388.</u>		14	<u>,30</u>	3,332	•		.0	<u>74485</u>
									_	68850
2 Total of line 1, column (d)							2		3	<u>67752</u>
3 Average distribution ratio for the 5-		on line 2 by 5,	or by the number	of yea	ars				0	72550
the foundation has been in existence	e it less than 5 years						3		. 0	<u>73550</u>
4 Enter the net value of noncharitable	-use assets for 2011 from Part X,	line 5					4	10	,174	,854.
5 Multiply line 4 by line 3							5		748	,361.
6 Enter 1% of net investment income	(1% of Part I, line 27b)						6		1	<u>,964.</u>
									77.5	205
7 Add lines 5 and 6							7		750	,325.
8 Enter qualifying distributions from I	Part XII, line 4						8		823	,894.
If line 8 is equal to or greater than li		1b, and comp	olete that part usin	g a 19	% tax r	ate.				
See the Part VI instructions.										

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	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	T	- see ii	ıstru	Ctior	15)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	•3			; ،	}
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)	`				٠
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1			1,9	<u>64.</u>
	of Part I, line 27b	' ;' `	**		,	á
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	.*.	>>			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	 			<u>0.</u>
3	Add lines 1 and 2	3	-		1,9	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4_	 			<u>0.</u>
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5			1,9	<u>64.</u>
6	Credits/Payments:					
а	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 4,760.	*				
b	Exempt foreign organizations - tax withheld at source 6b					
C	Tax paid with application for extension of time to file (Form 8868) 6c 6, 000.					
d	Backup withholding erroneously withheld 6d 6d]			*	
7	Total credits and payments Add lines 6a through 6d	7		1	<u>0,7</u>	<u>60.</u>
8	Enter any penalty for underpayment of estimated tax. Check here X 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	<u> </u>			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			8,7	<u>96.</u>
11	Enter the amount of line 10 to be Credited to 2012 estimated tax 8,796. Refunded	11				0.
Pa	art VII-As Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın			Yes	No
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ed or		,		
	distributed by the foundation in connection with the activities			٠, ٣		
C	Did the foundation file Form 1120-POL for this year?			1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. \blacktriangleright \$ 0 . (2) On foundation managers. \blacktriangleright \$			` ,		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	-	i	, , , ,	الحُهُم يهرَدُ	34.
	managers. ► \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		ì	2		Х
	If "Yes," attach a detailed description of the activities			\$4.		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or		* ,	, , ,	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	1/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	·	X
_	If "Yes," attach the statement required by General Instruction T			, , , ;		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					, 4
•	By language in the governing instrument, or				,	25.
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state 	e law				
	remain in the governing instrument?			6	*	х
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	
·	If "Yes," complete Part II, col (c), and Part XV		i		, 3	* (c
Rء	Enter the states to which the foundation reports or with which it is registered (see instructions)		İ	^ _ *	" د	- **** · · · ·
Ud	IL			,	*	
,	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			36. , 5', ,		*
L	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cal	endar		, "	-	7
3	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	5	x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X
10	Did dirty persons become eabetament contributors during the tax your in Tes, attach a schedule listing their harres and addresses			لتن		

HARRY F. CHADDICK AND ELAINE 36-3320988 Form 990-PF (2011) CHADDICK FOUNDATION, INC. Page 5 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 X section 512(b)(13)? If "Yes," attach schedule (see instructions) 11 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? Х 12 If "Yes." attach statement (see instructions) 13 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A 14 The books are in care of ▶ FRED M. BRODY Telephone no. > 312 - 346 - 2141Located at ▶ 19 S. LASALLE STREET, CHICAGO, IL ZIP+4 ▶60603 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here N/A and enter the amount of tax-exempt interest received or accrued during the year 15 No Yes At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, 16 X 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 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required Yes No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year did the foundation (either directly or indirectly): Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No for the benefit or use of a disqualified person)? Ž. (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 Yes X No termination of government service, if terminating within 90 days.) 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)? N/A 1b Sep. Organizations relying on a current notice regarding disaster assistance check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected Х before the first day of the tax year beginning in 2011? 1c 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(1)(3) or 4942(1)(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 Yes X No before 2011? ,** If "Yes," list the years ▶ b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach N/A 2b statement - see instructions.) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes X No during the year? b If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose 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, N/A 3h Form 4720, to determine if the foundation had excess business holdings in 2011)

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4a

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

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

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

Port (3) D Control CHADDICK FOUNDATION, INC		N = === -1	<u> 30-33209</u>	00	Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4/20 May Be F	required (contin	rued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	า 4945(e)) ?	Y6	es X No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire				
any voter registration drive?			es 🗶 No 📙		
(3) Provide a grant to an individual for travel, study, or other similar purposes'	?	Ye	es X No	ľ	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	es X No	٠ ك	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo	or		,	
the prevention of cruelty to children or animals?		Y6	es 🗶 No	`	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	der the exceptions described in	n Regulations			
section 53 4945 or in a current notice regarding disaster assistance (see instru		_	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	ere				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	rom the tax because it maintai	ned			
expenditure responsibility for the grant?		/A 🔲 Ye	es 🔲 No		
If "Yes," attach the statement required by Regulations section 53 4945					-
6a Did the foundation, during the year, receive any funds, directly or indirectly, to j	• •				
a personal benefit contract?	, -, ,	Ye	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6 b	Х
If "Yes" to 6b, file Form 8870			~		
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	□ Y	es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu			. —	7b	
Information About Officers Diseases Tours		nagers. Highly			L
Part VIII Paid Employees, and Contractors	oos, i oanaation ma		,		
1 List all officers, directors, trustees, foundation managers and their	compensation.	-			
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Exp account	ense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account	, other nces
MARI HATZENBUEHLER CRAVEN	PRESIDENT/DIR		- compandation		
2623 N. LAKEWOOD AVENUE					
CHICAGO, IL 60614	35.00	160,000.	0.		0.
· · · · · · · · · · · · · · · · · · ·	VICE PRES/DIR				
35 MAYFLOWER DRIVE	TOD TREB, DIR	1			
ASHEVILLE, NC 28804	30.00	132,000.	0.		0.
	TREASURER/DIR				
1731 N. MARCEY STREET, SUITE 200					
CHICAGO, IL 60614	20.00	5,000.	0.		0.
eniched, in oodit	20.00	3,000.	0.		<u> </u>
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."			
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Exp	enșe
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	(e) Exp account allowa	, other
NONE	acvoted to position	<u>-</u>	compensation	anowa	11000
HOME					
"					
		<u>-</u>			
					

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

MARKI F. CHADDICK AND EDAINE			
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Part VIII Information About Officers, Directors, Trustees, Found	ation Managers, Highly		
Faid Employees, and Contractors (continued)			
3 Five highest-paid independent contractors for professional services. If none, ent	er "NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Com	pensation
NONE			
		-	
		-	
Table laumbar of others recovered over \$50,000 for professional partitions		>	(
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities			
			_
List the foundation's four largest direct charitable activities during the tax year. Include relevant state number of organizations and other beneficiaries served, conferences convened, research papers pro		Expense	S
	00000, 00.		
1N/A			
			-
2			
3			
4			
Part IX-B Summary of Program-Related Investments		I	
Describe the two largest program-related investments made by the foundation during the tax year o	n lines 1 and 0	l Amount	
1 N/A	in lines 1 and 2.	Amount	
N/A	III IIIIES 1 ANU Z.	Ainouit	
I N/A	in lines i and 2.	Amount	

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All other program-related investments. See instructions

Total. Add lines 1 through 3

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Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Part X Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 9,665,563. a Average monthly fair market value of securities 1a 384,858. 1h Average of monthly cash balances 279,380. c Fair market value of all other assets 1c 1d 10,329,801. Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 10.329.801. 3 Subtract line 2 from line 1d 154,947. 4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions) 10,174,854. 5 Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 Minimum investment return Enter 5% of line 5 508,743. 6 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain Part XI foreign organizations check here
and do not complete this part) 508,743. Minimum investment return from Part X, line 6 1.964 Tax on investment income for 2011 from Part VI, line 5 22 Income tax for 2011 (This does not include the tax from Part VI.) 2b b 1.964. 2c Add lines 2a and 2b 506,779. Distributable amount before adjustments Subtract line 2c from line 1 3 4 0. Recoveries of amounts treated as qualifying distributions 779. 506 5 Add lines 3 and 4 6 0. Deduction from distributable amount (see instructions) 506,779. 7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes. 823,894. 1a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 0. 1b Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 2 Mes. Amounts set aside for specific charitable projects that satisfy the 3 3a Suitability test (prior IRS approval required) 3ь Cash distribution test (attach the required schedule) 823,894. 4 Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment 1,964.

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

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821,930.

5

6

income, Enter 1% of Part I, line 27b

Adjusted qualifying distributions Subtract line 5 from line 4

4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2010	2010	2011
1 Distributable amount for 2011 from Part XI, line 7				506,779.
2 Undistributed income, if any, as of the end of 2011				434807
a Enter amount for 2010 only			0.	
b Total for prior years.	AND THE STATE OF T			g*************************************
,,		0.		83,87. · · · · · · · · · · · · · · · · · · ·
3 Excess distributions carryover, if any, to 2011	200 April 100 100 100 100 100 100 100 100 100 10			
a From 2006 361,521				
b From 2007 324,298				
c From 2008 91,295				
d From 2009 271,317				
e From 2010 427,552				
f Total of lines 3a through e	1,475,983.			
4 Qualifying distributions for 2011 from				
Part XII, line 4: ► \$ 823,894	•			
a Applied to 2010, but not more than line 2a	4.344	a francisco de la constante de	0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.	A STORY	
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.		#### W.	FOC BEO
d Applied to 2011 distributable amount	And a second	\$\langle \langle \lang		506,779.
e Remaining amount distributed out of corpus	317,115.			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount	0.			
must be shown in column (a)) 6 Enter the net total of each column as				
indicated below	1 702 000			
a Corpus Add lines 3f 4c, and 4e Subtract line 5	1,793,098.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.	2.002/2011 1/2/2013 1/2/2012 1/2/2012 1/2/2012 1/2/2012 1/2/2012 1/2/2012 1/2/2010 1/2/2010 1/2/2010 1/2/2010 1	
c Enter the amount of prior years' undistributed income for which a notice of				Karlet M.
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	XXXXX :	1 6 2 2 4 3 9		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011 Subtract		142 1143	A STRAIGHT STRAIGHT	
lines 4d and 5 from line 1. This amount must				
be distributed in 2012	**************************************			0.
7 Amounts treated as distributions out of		· · · · · · · · · · · · · · · · · · ·	Profession of the Control of the Con	
corpus to satisfy requirements imposed by			PARTY GOLDNY	
section 170(b)(1)(F) or 4942(g)(3)	0.	77 (10/2)		
8 Excess distributions carryover from 2006				
not applied on line 5 or line 7	361,521.			
9 Excess distributions carryover to 2012		Maria Maria Cara Cara Cara Cara Cara Cara Cara		
Subtract lines 7 and 8 from line 6a	1,431,577.			
10 Analysis of line 9				
a Excess from 2007 324, 298				
b Excess from 2008 91, 295				
c Excess from 2009 271,317				
d Excess from 2010 427, 552				,
e Excess from 2011 317, 115	· King			
				Form 990-PF (2011)

36-3320988 Form 990-PF (2011) CHADDICK FOUNDATION. Page 10 Part XIV: Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(1)(5) Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (a) 2011 (b) 2010 (c) 2009 (d) 2008(e) Total income from Part I or the minimum investment return from Part X for each year listed **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 e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c 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 and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV | Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2)) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here \(\sum X \) if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number of the person to whom applications should be addressed: b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

3 Grants and Contributions Paid During the Y		Payment T		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	Of Substatillal Contributor	Toopen		
AB TECH FOUNDATION	NONE	PUBLIC	EDUCATIONAL	
340 VICTORIA ROAD ASHEVILLE, NC 28801				1,000
AGUNUAL DE DANGONDE ENGANAGAN GOLLEGE	NONE	PUBLIC	EDUCATIONAL	
ASHEVILLE BUNCOMBE TECNICAL COLLEGE 340 VICTORIA ROAD ASHEVILLE, NC 28801	NONE	FUBLIC	EDUCATIONAL	2,000
AMERICAN CANCER SOCIETY 225 NORTH MICHIGAN AVENUE	NONE	PUBLIC	HEALTHCARE	
CHICAGO, IL 60601				250
ARTHRITIS FOUNDATION	NONE	PUBLIC	HEALTHCARE	
P.O. BOX 7669 ATLANTA, GA 30357				2,000
ASHEVILLE SYMPHONY ORCHESTRA P.O. BOX 2852 ASHEVILLE NC 28802	NONE	PUBLIC	EDUCATIONAL	12,750
Total SEE CO.	NTINUATION SHEE	ET(S)	▶ 3a	548,911
b Approved for future payment				
NONE				
Total			▶ 3b	0

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

Enter gross amounts unless otherwise indicated.	Unrelated	business income		d by section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					
b			<u> </u>		
C					
d					
e	-				
f	-				
g Fees and contracts from government agencies					
2 Membership dues and assessments			 		
3 Interest on savings and temporary cash			14	150 140	
investments 4 Dividends and interest from securities			14	150,148.	
5 Net rental income or (loss) from real estate:	\$ 15	" 1	14	106,047.	
a Debt-financed property			dia"	- · · · · · · · · · · · · · · · · · · ·	
b Not debt-financed property	531390	-12,426.			
6 Net rental income or (loss) from personal	331330	12/120			
property					
7 Other investment income	-				
8 Gain or (loss) from sales of assets other					
than inventory			18	137,693.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:			T		
a		<u> </u>			
b			ļ. <u></u>		
c			ļļ.	.—	
d			-		
e	F > 50 5035 57	10 406	 -	202 202	
12 Subtotal. Add columns (b), (d), and (e)		-12,426.		393,888.	<u> </u>
13 Total Add line 12, columns (b), (d), and (e)				13	301,404.
(See worksheet in line 13 instructions to verify calculations.)	11 A			D	
Relationship of Activities t	o the Accon	npiisnment of Ex	cempt	Purposes	
Line No Explain below how each activity for which inco			contribu	ted importantly to the accomp	lishment of
the foundation's exempt purposes (other than	by providing fund	s for such purposes).			
	 				
					
					
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100801					

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CHADDICK	FOUNDATION,	INC
	I COMPANIACIA,	

Part XVII	Information Regarding Transfer Exempt Organizations	s To and Transactions ar	nd Relationships With Non	charitable
1 Did the o	rganization directly or indirectly engage in any of the	following with any other organization	described in section 501(c) of	Yes No
	(other than section 501(c)(3) organizations) or in se		• •	\$ 3 × ~
	from the reporting foundation to a noncharitable ex			
(1) Cash		toriganization of		1a(1) X
(2) Othe				1a(2) X
b Other train				*
	s of assets to a noncharitable exempt organization			1b(1) X
	hases of assets from a noncharitable exempt organi	zation		1b(2) X
	al of facilities, equipment, or other assets			1b(3) X
	abursement arrangements			1b(4) X
(5) Loar	s or loan guarantees			1b(5) X
	ormance of services or membership or fundraising s	colicitations		1b(6) X
	of facilities, equipment, mailing lists, other assets, or			1c X
d If the ans	wer to any of the above is "Yes," complete the follow	ring schedule Column (b) should alwa	ays show the fair market value of the go	ods, other assets,
or service	es given by the reporting foundation. If the foundation	n received less than fair market value	in any transaction or sharing arrangem	ent, show in
	d) the value of the goods, other assets, or services r		7	
(a) Line no		haritable exempt organization	(d) Description of transfers, transactions	s, and sharing arrangements
		N/A		
				
				· <u></u>
			-	
			<u> </u>	
lo the four	adding disactly or indirectly affiliated with as related	d to one or more toy everent exception	ations described	
	ndation directly or indirectly affiliated with, or related i 501(c) of the Code (other than section 501(c)(3)) of	· · ·	dions described	Yes X No
	omplete the following schedule	THI SOURCE V		
	(a) Name of organization	(b) Type of organization	(c) Description of rela	tionship
	N/A			
	_			
			 	
and h	r penalties of perjury, I declare that I have examined this return eliefait is true, correct and complete. Declaration of preparer			May the IRS discuss this return with the preparer
Sign Here	$M \circ A \circ A$	17213	De Decidont	shown below (see instr)?
🚩	nature of officer or trustee	Date	Title	X Yes No
	T			PTIN
	, many po proparation and many		self- employed	
Paid	FRED M. BRODY	dul	2/9/12	P01045120
Preparer	Firm's name ► MORRISON & MORI	RISON/LTD.		-3143186
Use Only				<u> </u>
	Firm's address ▶ 19 SOUTH LASA:	LLE ÚST., SUITE 11	.00	
	CHICAGO, IL 6	0603	Phone no. 31	2-346-2141
				Form 990-PF (2011)

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2 SOUTH PACK SQUARE ASHEVILLE NC 28801 27. BEARS CARE 1000 FOOTBALL DRIVE LAKE FOREST, IL 60045 BIG SHOULDERS FUND 309 W. WASHINGTON CHICAGO, IL 60606 12. BLACK MOUNTAIN MUSEUM NONE PUBLIC BLACK MOUNTAIN MUSEUM NONE PUBLIC EDUCATIONAL 12. BLACK MOUNTAIN MUSEUM NONE PUBLIC EDUCATIONAL 12. BLACK MOUNTAIN MUSEUM NONE PUBLIC CIVIC STORMAND STREET CHICAGO, IL 60607 2. BUNCOMBE COUNTY COUNCIL ON AGING NONE PUBLIC BUNCOMBE COUNTY COUNCIL ON AGING NONE PUBLIC BUNCOMBE COUNTY COUNCIL ON AGING ASHEVILLE, NC 28803 5. PUTORING CHICAGO NONE PUBLIC EDUCATIONAL 3. CARING FOR CHILDREN, INC SO REDDICK ROAD ASHEVILLE, NC 28805 CARTHOLIC CHARITIES NONE PUBLIC RELIGIOUS 4. 5. CATHOLIC CHARITIES NONE PUBLIC RELIGIOUS 5.	Hamile and address (North of Basilloss)	or substantial contributor	recipient		
2 SOUTH PACK SQUARE SINEVILLE, NC 28801 27. BEARS CARE 1000 FOOTBALL DRIVE LAKE FOREST, IL 60045 BIG SHOULDERS FUND 309 W. WASHINGTON CHICAGO, IL 60606 12. BLACK MOUNTAIN MUSSUM NONE PUBLIC BLACK MOUNTAIN MUSSUM NONE PUBLIC CIVIC EDUCATIONAL 12. BLACK MOUNTAIN MUSSUM NONE PUBLIC CIVIC 21VIC CIVIC ACAING OF CHICAGO NONE PUBLIC CIVIC 12. BUNCOMBE COUNTY COUNCIL ON AGING ASHEVILLE, NC 28803 5. FOUTORING CHICAGO NONE PUBLIC ABALTHCARE 14. SHEVILLE, NC 28803 5. FOUTORING CHICAGO NONE PUBLIC ABALTHCARE CARING FOR CHILDREN, INC NONE PUBLIC ABALTHCARE ASHEVILLE, NC 28805 SARING FOR CHILDREN, INC NONE PUBLIC ABALTHCARE SOURCATIONAL 3. CARING FOR CHILDREN, INC NONE PUBLIC RELIGIOUS ABALTHCARE STANDALL CHARITIES NONE PUBLIC RELIGIOUS 5.					
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22. SHICAGO, IL 60607 2. SHICAGO, IL 60607 3. SHICAGO, IL 60604 5. SHICA					
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ASHEVILLE, NC 28805 CATHOLIC CHARITIES NONE PUBLIC RELIGIOUS 4940 W. FLOURNOY STREET CHICAGO, IL 60644 5					3,000
SO REDDICK ROAD ASHEVILLE, NC 28805 CATHOLIC CHARITIES NONE PUBLIC RELIGIOUS CHICAGO, IL 60644 5					
ASHEVILLE, NC 28805 CATHOLIC CHARITIES NONE PUBLIC RELIGIOUS 1940 W. FLOURNOY STREET CHICAGO, IL 60644 5	CARING FOR CHILDREN, INC	NONE	PUBLIC	HEALTHCARE	
CATHOLIC CHARITIES NONE PUBLIC RELIGIOUS 4940 W. FLOURNOY STREET CHICAGO IL 60644 5,	•				
1940 W. FLOURNOY STREET CHICAGO IL 60644 5	ASHEVILLE, NC 28805				500
1940 W. FLOURNOY STREET CHICAGO IL 60644 5					
CHICAGO IL 60644 5,		NONE	PUBLIC	RELIGIOUS	
					5,000
CHANGE 4 CHILDREN, INC NONE PUBLIC EDUCATIONAL	CHANGE 4 CHILDREN, INC	NONE	PUBLIC	EDUCATIONAL	
6409 S ASLHAND AVENUE	5409 S ASLHAND AVENUE				
	•			<u> </u>	3,000. 530,911,

Part XV Supplementary Information 3 Grants and Contributions Paid During the			· · · · · · · · · · · · · · · · · · ·	
3 Grants and Contributions Paid During the Recipient	If recipient is an individual,	T .		
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
CHICAGO LIGHTHOUSE FOR THE BLIND	NONE	PUBLIC	HEALTHCARE	
1850 WEST ROOSEVELT		:		1,500
CHICAGO, IL 60608				1,500
CHICAGO SYMPHONY ORCHESTRA	NONE	PUBLIC	civic	
220 S. MICHIGAN AVENUE	NONE	COBBIC		
CHICAGO, IL 60604	_			15,000
CHILDREN'S HOME AND AID	NONE	PUBLIC	HEALTHCARE	
125 S. WACKER DRIVE				5,000
CHICAGO, IL 60606				3,000
		DUDI T.0	EDVICATIONAL	
CHILDREN'S PLACE ASSOCIATION 1436 W. RANDOLPH	NONE	PUBLIC	EDUCATIONAL	
CHICAGO, IL 60607				2,000
DELTA GAMMA FOUNDATION	NONE	PUBLIC	civic	
3250 RIVERSIDE DRIVE				
COLUMBUS OH 43221				20
DEPAUL UNIVERSITY 1 E. JACKSON BLVD	NONE	PUBLIC	EDUCATIONAL	
CHICAGO, IL 60604				128,000
FAMILY RESCUE	NONE	PUBLIC	HEALTHCARE	
9204 S. COMMERCIAL AVENUE, STE 407				2,000
CHICAGO, IL 60617		-		2,000
		DUDI TO	DEL TOTOUS	
FRANCISCAN OUTREACH ASSOCIATION 1645 WEST LEMOYNE STREET	NONE	PUBLIC	RELIGIOUS	
CHICAGO, IL 60622		ļ		3,000
GIORDANO JAZZ DANCE CHICAGO	NONE	PUBLIC	civic	
614 DAVIS STREET				_2,000
EVANSTON, IL 60201				2,000
	NONE	DIDITO	EDUCATIONAL	
GIRLS ON THE RUN 120 COTTAGE PLACE	NONE	PUBLIC	EDUCATIONAL	
CHARLOTTE NC 28207				5,000

3 Grants and Contributions Paid During the						
Recipient If recipient is an individual, show any relationship to Foundation Purpose of grant or						
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount		
GREEN OPPORTUNITIES	NONE	PUBLIC	HEALTHCARE			
PO BOX 7235 ASHEVILLE, NC 28802				10,00		
H.O.M.E HOUSING OPPORTUNITIES AND MAINTENANCE FOR THE ELDERLY 1419 W. CARROLL AVENUE	NONE	PUBLIC	HEALTHCARE			
CHICAGO, IL 60607				2,00		
HARMONY HOPE AND HEALING P.O. BOX 557834	NONE	PUBLIC	HEALTHCARE			
CHICAGO, IL 60655				2,50		
HARRIS THEATER 205 E. RANDOLPH DRIVE CHICAGO, IL 60601	NONE	PUBLIC	civic	5.00		
enieso, il vooi				3,00		
HEALTHY SCHOOLS CAMPAIGN 175 N. FRANKLIN, STE 300 CHICAGO, IL 60606	NONE	PUBLIC	HEALTHCARE	3,00		
HEAR FOUNDATION 141 W. JACKSON STREET CHICAGO, IL 60604	NONE	PUBLIC	HEALTHCARE	5,00		
HEPHZIBAH CHILDREN'S ASSOCIATION 946 NORTH BOULEVARD	NONE	PUBLIC	EDUCATIONAL			
OAK PARK, IL 60301				2,00		
HIGH SIGHT 315 WEST WALTON CHICAGO, IL 60610	NONE	PUBLIC	HEALTHCARE	5,00		
HORIZONS FOR YOUTH 703 WEST MONROE	NONE	PUBLIC	EDUCATIONAL			
CHICAGO, IL 60661				5,00		
HOWARD AREA COMMUNITY CENTER 7648 NORTH PAULINA STREET CHICAGO IL 60626	NONE	PUBLIC	EDUCATIONAL	5,00		

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution any foundation manager status of Name and address (home or business) recipient or substantial contributor HEALTHCARE HUMANITARIAN SERVICE PROJECT NONE PUBLIC 465 RANDY ROAD 1,500. CAROL STREAM, IL 60188 ILLINOIS CLUB FOR CATHOLIC WOMEN NONE PUBLIC RELIGIOUS 820 N MICHIGAN AVENUE 4,800. CHICAGO, IL 60611 ILLINOIS EDUCATION FOUNDATION NONE PUBLIC EDUCATIONAL 226 WEST JACKSON BOULEVARD 5,000. CHICAGO, IL 60606 INDEPENDENT SMALL ANIMAL MEAT NONE PUBLIC HEALTHCARE PROCESSORS WESTERN NORTH CAROLINA 2871 NC 197 4.000. BAKERSVILLE, NC 28705 PUBLIC EDUCATIONAL JOSEPHINUM ACADEMY NONE 1501 N. OAKLEY BLVD. 2,500. CHICAGO, IL 60622 NONE PUBLIC HEALTHCARE JDRF 26 BROADWAY, 14TH FLOOR 100. NEW YORK, NY 10004 civic JUVENILE PROTECTIVE ASSOCIATION NONE PUBLIC 1707 NORTH HALSTED 2,500. CHICAGO, IL 60614 LEAP LEARNING SYSTEMS NONE PUBLIC EDUCATIONAL 8 SOUTH MICHIGAN 40,000. CHICAGO, IL 60603 LINCOLN PARK ZOO NONE PUBLIC EDUCATIONAL 2001 NORTH CLARK STREET 1,000. CHICAGO, IL 60614 EDUCATIONAL LITERATURE FOR ALL OF US NONE PUBLIC 2010 DEWEY AVENUE 5,250. EVANSTON IL 60201 Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor LOYOLA UNIVERSITY - CHICAGO SCHOOL OF NONE PUBLIC EDUCATIONAL LAW 25 EAST PEARSON STREET CHICAGO, IL 60611 1,000. MEMORYCARE NONE PUBLIC HEALTHCARE 100 FAR HORIZONS LANE ASHEVILLE NC 28803 10,000. MERIT SCHOOL OF MUSIC NONE PUBLIC SCHOOL 38 SOUTH PEORIA STREET3 CHICAGO, IL 60607 6,000. MEYER CENTER FOR SPECIAL CHILDREN NONE PUBLIC EDUCATIONAL 1132 RUTHERFORD ROAD GREENVILLE SC 29609 100. MIDWESTERN PALLIATIVE & HOSPICE CARE NONE PUBLIC HEALTHCARE CENTER 22050 CLAIRE COURT GLENVIEW, IL 60025 2,000. MISERICORDIA NONE PUBLIC HEALTHCARE 6300 N. RIDGE AVENUE CHICAGO, IL 60660 70. MOUNTAIN HOUSING OPPORTUNTIES NONE PUBLIC HEALTHCARE 64 CLINGMAN AVENUE ASHEVILLE, NC 28801 10,000. NORTHSIDE HOUSING AND SUPPORTIVE NONE PUBLIC HEALTHCARE SERVICES 3340 N CLARK STREET, STE 203 CHICAGO, IL 60657 1,000. OPEN DOOR MINISTRIES NONE PUBLIC EDUCATIONAL PO BOX 18018 DENVER CO 80218 2,725. PACIFIC GARDEN MISSION NONE PUBLIC CIVIC 1458 SOUTH CANAL STREET CHICAGO, IL 60607 3 000. Total from continuation sheets

3 Grants and Contributions Paid During	the Year (Continuation)			
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Mattie and address (notice of pushiess)	or substantial contributor	recipient		
PISGAH LEGAL SERVICES	NONE	PUBLIC	civic	
2.0. BOX 2276 ASHEVILLE, NC 28802				10,250
STILLY THEE, NO ZOUZ				10,250
RAINBOWS	NONE	PUBLIC	HEALTHCARE	
1360 HAMILTON PARKWAY				
ITASCA, IL 60143				500
RIVERLINK	NONE	PUBLIC	EDUCATIONAL	
P.O. BOX 15488 ASHEVILLE NC 28813				35,000
101111 NO 20013				33,000
SACRED HEART SCHOOLS	NONE	PUBLIC	SCHOOL	
5250 N. SHERIDAN ROAD				
CHICAGO, IL 60660				1,000
SAFER FOUNDATION	NONE	PUBLIC	CIVIC	
571 WEST JACKSON				
CHICAGO, IL 60661				2,500
		DVD1 T.0		
SPARK 251 RHODE ISLAND	NONE	PUBLIC	EDUCATIONAL	
SAN FRANCISCO, CA 94103				3,000
SPECIAL OLYMPICS	NONE	PUBLIC	civic	
133 19TH STREET NW				5 000
VASHINGTON, DC 20036		 		5,000
ST LEONARD'S MINISTRIES	NONE	PUBLIC	RELIGIOUS	
48 NORTH HOYNE AVENUE	NONE	OBBIC	KEBIGIOOD	
CHICAGO, IL 60612				3,500
ST. EUGENES CATHOLIC CHURCH	NONE	PUBLIC	RELIGIOUS	
7958 WEST FOSTER AVENUE				11 000
CHICAGO, IL 60656				11,000
TONAMING COLLEGE PRED	NONE	PUBLIC	SCHOOL	
ET. IGNATIUS COLLEGE PREP 1076 WEST ROOSEVELT ROAD	NONE	FORDIC	Belloof	
CHICAGO, IL 60608				51,500
Total from continuation sheets				

D	Year (Continuation)			
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Tanto and address (nome of basiness)	or substantial contributor	recipient		
ST. JOSAPHAT PARISH	NONE	PUBLIC	RELIGIOUS	
311 N. SOUTHPORT				
CHICAGO, IL 60614	-			1,91
ST. VINCENT DE PAUL SOCIETY	NONE	PUBLIC	RELIGIOUS	
58 PROGRESS PARKWAY				
ET. LOUIS, MO 63043				5,00
TEEN LIVING PROGRAM	NONE	PUBLIC	civic	
62 W. HUBBARD ST.				
CHICAGO, IL 60610	_			5,00
remple beth hatephik	NONE	PUBLIC	RELIGIOUS	
43 NORTH LIBERTY STREET				
ASHEVILLE, NC 28801				1,00
			0.777.0	
THE ARK	NONE	PUBLIC	CIVIC	
6450 N. CALIFORNIA CHICAGO, IL 60645				2,50
onicado, in outs				2,50
THE BRIDGE SCHOOL	NONE	PUBLIC	EDUCATIONAL	
545 EUCALYPTUS AVENUE				
HILLSBOROUGH, CA 94010		_		8
THE NIGHT MINISTRY	NONE	PUBLIC	HEALTHCARE	
4711 N RAVENSWOOD AVE				1,50
CHICAGO, IL 60640				1,50
	YOUR .	DUDY TO	EDVICAMIONAL	
THE PEACE CENTER	NONE	PUBLIC	EDUCATIONAL	
300 SOUTH MAIN ST GREENVILLE SC 29210				10
SKEENVILLE, 3C 27210		-	,,,	10
PHPECHOLDC	NONE	PUBLIC	HEATLHCARE	
THRESHOLDS 4101 N RAVENSWOOD AVENUE	HOHE	0000		
CHICAGO IL 60613		_		1,50
NIVERSITY OF WISCONSIN	NONE	PUBLIC	EDUCATIONAL	
716 LANGDON STREET				
MADISON WI 53706		<u> </u>		2,50

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor Purpose of contributor	2,000
WCOS RADIO 316 GREYSTONE BLVD COLUMBIA, SC 29210 WESTERN CAROLINA AIDS PROJECT 140 SOUTH CHURCH STREET	2,000
WCOS RADIO 316 GREYSTONE BLVD COLUMBIA, SC 29210 WESTERN CAROLINA AIDS PROJECT 140 SOUTH CHURCH STREET	
316 GREYSTONE BLVD COLUMBIA, SC 29210 WESTERN CAROLINA AIDS PROJECT NONE PUBLIC HEALTHCARE 140 SOUTH CHURCH STREET	
RESTERN CAROLINA AIDS PROJECT NONE PUBLIC HEALTHCARE	
WESTERN CAROLINA AIDS PROJECT NONE PUBLIC HEALTHCARE	
WESTERN CAROLINA AIDS PROJECT NONE PUBLIC HEALTHCARE	
140 SOUTH CHURCH STREET	
140 SOUTH CHURCH STREET	
	35
WESTERN NORTH CAROLINA RESCUE MISSION NONE PUBLIC HEALTHCARE	
P.O. BOX 909	
ASHVILLE, NC 28802	7,900
WNCW RADIO NONE PUBLIC CIVIC	
P.O. BOX 804	
SPINDALE, NC 28160	50

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.) 1a BANK OF AMERICA ACCT#72-01-101-6485267 (SEE ATTAC P VARIOUS VARIOUS b BANK OF AMERICA ACCT#72-01-101-6485267 (SEE ATTAC P VARIOUS VARIOUS c WILLIAM BLAIR ACCT#145-17746-1-4-401 (SEE ATTACHE P VARIOUS VARIOUS d WILLIAM BLAIR ACCT#145-17746-1-4-401 (SEE ATTACHE Ρ VARIOUS VARIOUS e 30 SH AMERICAN EAGLE GOLD Ρ 10/08/0807/22/11 f CAPITAL GAINS DIVIDENDS g h 1 k 1 m n 0 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale 202,053. 200,699. 1,354. а 1,739,642. 1,702,551. 37,091. b <u>-93,165.</u> 870,473. <u>963,638.</u> C 1,402,365. 1,233,526. 168,839. d 48,230. 29,038. 19,192. е 4,382. 4,382. g h 1 k 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. (1) (i) F.M V as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any 1,354. a 37,091. b -93,165. С 168,839. d 19,192. f 4,382. g h k m n 0 { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 } 2 Capital gain net income or (net capital loss) 2 137,693. 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

N/A

2011 DEPRECIATION AND AMORTIZATION REPORT

9.	FORM 990-PF PAGE 1				F		990-PF		,					
	Description	Date Acquired	Method	Life	00c>	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	FURNITURE AND FIXTURES	01/01/95		000.	HY16	2,375.				2,375.	2,375.	, , , , , , , , , , , , , , , , , , ,	0	2,375.
12	COMPUTER	90/60/10	SL 🦟	5.00	16	1,344.	~#*X E*			1,344.	# H.€		• •	4
13	FURNITURE AND FIXTURES	07/10/06	SI	00.7	16	7,876.				.978,7	5,625.	* * **,	1,125.	° 0'52' 9
24	OFFICE WIRING	11/01/06	SI.	39.00 MM16	, MM16	3,389.	\$~ @	*	``` * *,	3,389.	, 40'6°.	*.'	, 87	493.
35	COMPUTER	08/10/07	SL	5.00	16	1,014.				1,014.	795.	:	203.	. 866
	46 FURNITURE AND FIXTURES	03/08/08 SL	SL	7.00	16	1,394.	· ¼ ¾,	, *	,	1,394.	663.		199	862
	* TOTAL 990-PF PG 1 DEPR	· · · · · · · · · · · · · · · · · · ·	3 w v		%	17,392.	**		****	17,392.	11,208.	â	1,614.	12,822.
	est.		}** \	,	splym s	~	Ç'x	· **	,	So Commenter	Agrico S	,		
		·		* * * * * * * * * * * * * * * * * * * *		^		,	2 200 2 200		, , , ,		5	ŧ
					*		, 44	3				,	2	
		<u>-</u>		>	,								·	
	**		* /	· .		3.0	3, "	***	1					

24

(D) - Asset disposed

* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

FORM 990-PF INTEREST ON SAVINGS	AND TEMPORARY CA	ASH INVESTMENTS	STATEMENT	1
SOURCE			AMOUNT	
BANK OF AMERICA ACCT#72-01-101-64			108,6	48.
BANK OF AMERICA ACCT#72-01-101-64 AMORTIZATION/ACCRETION WILLIAM BLAIR ACCT#452-17746 WILLIAM BLAIR ACCT#452-17746 - AC			1,78 44,1	
PURCHASED	CROED INTEREST		-4,39	95.
TOTAL TO FORM 990-PF, PART I, LIN	IE 3, COLUMN A		150,1	48.
FORM 990-PF DIVIDENDS AN	D INTEREST FROM	SECURITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A AMOUNT)
BANK OF AMERICA ACCT#72-01-101-6485267 WELLS FARGO SECURITIES	78,578.	0.	78,5	78.
ACCT#2038-2832 WILLIAM BLAIR ACCT#452-17746	22 4. 31,627.	0. 4,382.	27,24 27,24	24. 4 5.
TOTAL TO FM 990-PF, PART I, LN 4	110,429.	4,382.	106,0	47.
FORM 990-PF RE	NTAL INCOME		STATEMENT	3
KIND AND LOCATION OF PROPERTY		ACTIVITY NUMBER	GROSS RENTAL INC	O M E
RESIDENTIAL - 5440 N CAMPBELL, CH	IICAGO	1	23,5	73.
TOTAL TO FORM 990-PF, PART I, LIN	ie 5a		23,5	73.

FORM 990-PF	RENTAL EXP	ENSES		STATEMENT	4
DESCRIPTION		CTIVITY NUMBER	AMOUNT	TOTAL	
DEPRECIATION ACCOUNTING BANK FEES CLEANING & MAINTENANCE FILING FEES INSURANCE MANAGEMENT FEE MATERIALS MISCELLANEOUS PAINTING REPAIRS SEWER/WATER TRASH REMOVAL UTILITIES			9,148. 5,754. 15. 1,289. 250. 1,240. 4,000. 1,642. 209. 1,458. 4,213. 866. 924. 4,491.		
LEGAL FEES ~	SUBTOTAL -	1	500.	35,9	99.
TOTAL RENTAL EXPENSES			_	35,9	99.
NET RENTAL INCOME TO FORM 99	90-PF, PART I	, LINE 5B	=	-12,4	26.
FORM 990-PF	LEGAL	FEES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME		
LEGAL FEES LEGAL FEES	1,371.	0. 500.			0.
					

FORM 990-PF	ACCOUNTI	NG FEES	S1	PATEMENT (
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLI PURPOSES
ACCOUNTING FEES ACCOUNTING	26,089. 5,754.			0
TO FORM 990-PF, PG 1, LN 16B	31,843.	5,754.		0
FORM 990-PF C	THER PROFES	SIONAL FEES	S	PATEMENT '
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLI PURPOSES
MANAGEMENT FEES INVESTMENT FEES	30,857. 38,079.			0
TO FORM 990-PF, PG 1, LN 16C	68,936.	68,936.		0
FORM 990-PF	TAX	ES	S	PATEMENT :
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABL PURPOSES
FILING FEES PAYROLL TAXES FOREIGN TAXES FEDERAL TAXES	25. 34,377. 272. 6,766.	10,313. 272.		25 24,064 0 0
TO FORM 990-PF, PG 1, LN 18	41,440.	10,585.		24,089

FORM 990-PF	OTHER E	EXPENSES		STATEMENT 9
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TELEPHONE EXPENSE	1,018.	0.		1,018.
POSTAGE	471.			471.
PARKING FEES	1,419.			1,419.
BANK FEES	120.			0.
OFFICE SUPPLIES	160.	0.		158.
BANK FEES	15.	15.		0.
CLEANING & MAINTENANCE	1,289.	1,289.		0.
FILING FEES	250.	250.		0.
INSURANCE	1,240.	1,240.		0.
MANAGEMENT FEE	4,000.	4,000.		0.
MATERIALS	1,642.	1,642.		0.
MISCELLANEOUS	209.	209.		0.
PAINTING	1,458.	1,458.		0.
REPAIRS	4,213.	4,213.		0.
SEWER/WATER	866.			0.
TRASH REMOVAL	924.			0.
UTILITIES	4,491.	4,491.		0.
TO FORM 990-PF, PG 1, LN 23	23,785.	20,717.		3,066.
FORM 990-PF DEPRECIATION	ON OF ASSETS	HELD FOR INVE	STMENT	STATEMENT 10
DESCRIPTION		ACCUMULATED DEPRECIATION	BOOK VALUE	FAIR MARKET VALUE
DILL DING	20E E02	8,989.	20 <i>C</i> E1 4	386,514.
BUILDING LAND	395,503. 43,945.	8,989.	386,514. 43,945.	
WASHING MACHINE	301.	159.	142.	43,945. 142.
ro 990-pf, part II, Ln 11	439,749.	9,148.	430,601.	430,601
=				

FORM 990-PF	CORPORATE STOCK		STATEMENT 11
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
BANK OF AMERICA ACCT#72-01-101-ATTACHED) WILLIAM BLAIR & COMPANY ACCT#45	·	2,392,247.	3,086,630.
(SEE ATTACHED)		2,707,543.	3,279,205.
TOTAL TO FORM 990-PF, PART II,	LINE 10B	5,099,790.	6,365,835.
FORM 990-PF	CORPORATE BONDS		STATEMENT 12
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
BANK OF AMERICA ACCT#72-01-101-ATTACHED) WILLIAM BLAIR & COMPANY ACCT#45	·	1,486,461.	1,546,434.
(SEE ATTACHED)		1,113,827.	1,130,006.
TOTAL TO FORM 990-PF, PART II,	LINE 10C	2,600,288.	2,676,440.
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 13
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
WELLS FARGO SECURITIES ACCT#2038-2832 (SEE ATTACHED)	COST	0.	0.
TOTAL TO FORM 990-PF, PART II,	LINE 13	0.	0.

FORM 990-PF DEPRECIATION OF ASS	ETS NOT HELD FOR	INVESTMENT	STATEMENT 14
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
FURNITURE AND FIXTURES COMPUTER	2,375. 1,344.	2,375. 1,344.	0.
FURNITURE AND FIXTURES OFFICE WIRING COMPUTER	7,876. 3,389. 1,014.	6,750. 493. 998.	1,126. 2,896. 16.
FURNITURE AND FIXTURES	1,394.	862.	532.
TOTAL TO FM 990-PF, PART II, LN 1	4 17,392.	12,822.	4,570.
FORM 990-PF	OTHER ASSETS		STATEMENT 15
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
DEPOSIT OTHER INVESTMENTS	1,150. 8,500.	1,150.	1,150.
TO FORM 990-PF, PART II, LINE 15	9,650.	1,150.	1,150.

Depreciation and Amortization RENT (Including Information on Listed Property)

OMB No 1545-0172

Sequence No 179

Department of the Treasury Internal Revenue Service (99) Name(s) shown on return

➤ See separate instructions.

➤ Attach to your tax return.

Business or activity to which this form relates Identifying number

1

HARRY F. CHADDICK AND					- 5 44		
CHADDICK FOUNDATION, I					CHICAGO		36-3320988
Part I Election To Expense Certain Proper	ty Under Section 1	79 Note, If you have any lis	ted pr	operty, co	omplete Part	V before y	
1 Maximum amount (see instructions)						1	500,000.
2 Total cost of section 179 property place	ed in service (see	instructions)				2	
3 Threshold cost of section 179 property	before reduction	ın lımıtatıon				3	2,000,000.
4 Reduction in limitation. Subtract line 3 f	rom 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	instruct	ions		5	<u> </u>
6 (a) Description of pro	perty	(b) Cost (busin	ess use	only)	(c) Elected	d cost	
						 -	. *,
							1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
7 Listed property Enter the amount from	line 29		١	7			4.44.7 3/200.7
8 Total elected cost of section 179 proper	rty 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 20	010 Form 4562				10	
11 Business income limitation. Enter the sn	naller of business	s income (not less than zer	o) or li	ne 5		11	
12 Section 179 expense deduction Add lin	nes 9 and 10, but	do not enter more than lir	ie 11			12	
13 Carryover of disallowed deduction to 20			▶	13			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
Note: Do not use Part II or Part III below for	listed property li	nstead, use Part V					
Part II Special Depreciation Allowar	nce and Other D	epreciation (Do not include	de liste	ed proper	ty)		
14 Special depreciation allowance for quali	fied property (oth	ner than listed property) pla	aced in	n service	during		
the tax year						14	151.
15 Property subject to section 168(f)(1) elec-	ction					15	
16 Other depreciation (including ACRS)						16	
Part III MACRS Depreciation (Do not	t include listed pr	operty) (See instructions))				
		Section A				····	
17 MACRS deductions for assets placed in	ı service in tax ye	ars beginning before 2011				17	
18 If you are electing to group any assets placed in servi	ice during the tax year	into one or more general asset acco	ounts, ch	eck here	▶		A CALL COME AND A
Section B - Assets	Placed in Servic	e During 2011 Tax Year l	Jsing	the Gene	ral Deprecia	ation Syst	tem
(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) F	Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property							
b 5-year property		150.	5	YRS.	MQ	200DE	8.
c 7-year property							
d 10-year property							
e 15-year property	10 Mar 1 3 3 3 5						
f 20 year property] \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\						
g 25 year property			25	5 yrs		S/L	
	11/11	395,503.	27	5 yrs	MM	S/L	8,989.
h Residential rental property	1		27	5 yrs	MM	S/L	
	1			9 yrs	MM	S/L	
i Nonresidential real property	/				MM	S/L	
Section C - Assets PI	aced in Service	During 2011 Tax Year Us	ing th	e Alterna	ative Depre	iation Sy	stem
20a Class life	- \ AZ T.					S/L	
b 12-year			1:	2 yrs		S/L	
c 40-year	/			0 yrs	MM	S/L	
Part IV Summary (See instructions)	<u></u>					•	·
21 Listed property Enter amount from line	28					21	
22 Total. Add amounts from line 12, lines 1		es 19 and 20 in column (a)	, and I	ine 21			
Enter here and on the appropriate lines						22	9,148.
23 For assets shown above and placed in s	=]	230 111011			
nortion of the book attributeble to cost	•	our one your, onto the	Į				*,

HARRY F. CHADDICK AND ELAINE CHADDICK FOUNDATION. 36-3320988 Page 2 Form 4562 (2011) Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or Part V. 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? No 24b If "Yes," is the evidence written? Yes Yes (c) (b) (e) (f) (g) (d) Elected Date Business/ Basis for depreciation Recovery Method/ Depreciation Type of property Cost or placed in section 179 investment (business/investment deduction Convention (list vehicles first) period other basis use percentage service cost 25 Special depreciation allowance for qualified listed property placed in service during the tax year and 25 used more than 50% in a qualified business use 26 Property used more than 50% in a qualified business use % % % 27 Property used 50% or less in a qualified business use S/L % S/L -% S/L % 28 Add amounts in column (h), lines 25 through 27 Enter here and on line 21, page 1 28 29 29 Add amounts in column (i), line 26 Enter here and on line 7, page 1 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 (f) (b) (d) (e) (a) (c) Vehicle Vehicle Vehicle Vehicle Vehicle Vehicle 30 Total business/investment miles driven during the year (do not include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles 33 Total miles driven during the year Add lines 30 through 32 Yes Yes Yes Yes No Yes 34 Was the vehicle available for personal use Yes No No No No No 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 37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your Yes No 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use?

Part VI Amortization					
(a) Description of costs	(b) Date a mortization begins	(C) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
Amortization of costs that begins dur	ing your 2011 tax year				
3 Amortization of costs that began before	ore your 2011 tax year			43	
3 Amortization of costs that began bere					

Form 4562 (2011)

Form **8868**

(Rev January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545 1709

• If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box							
• If you	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of	this form)			
Do not	complete Part II unless you have already been granted	an automa	atic 3 month extension on a previous	sly filed Fo	orm 8868		
Electro	nic filing (e-file). You can electronically file Form 8868 if	you need a	a 3-month automatic extension of tir	ne to file (6 months for a cor	poration	
require	d to file Form 990-T), or an additional (not automatic) 3 mo	nth extens	sion of time. You can electronically f	ile Form 8	8868 to request an	extension	
of time	to file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for	Transfers	Associated With C	ertain	
Person	al Benefit Contracts, which must be sent to the IRS in pag	er format	(see instructions) For more details	on the ele	ctronic filing of this	form,	
visit wv	w irs gov/efile and click on e-file for Charities & Nonprofits	S.					
Part	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies ne	eded).			
A corpo	pration required to file Form 990 T and requesting an autor	matic 6-mo	onth extension check this box and	complete			
Part I o	nly				•	▶ □	
All othe	r corporations (including 1120-C filers), partnerships, REM	IICs, and t	rusts must use Form 7004 to reques	st an exte	nsion of time		
to file ir	come tax returns						
Туре о	e or Name of exempt organization or other filer, see instructions Employer identification number					nber (EIN) or	
print	WARRY D. GWARRIOW AND DIATIVE						
					X 36-3320988		
File by the	the Number street and some proute as If a D.O. how are restrictions				cial security number (SSN)		
filing your	1731 N. MARCEY STREET NO. 515				, , ,	,	
return Se instruction	266						
	CHICAGO, IL 60614						
	, 0201.00 / 22 00012				. ,,,		
Enter th	e Return code for the return that this application is for (file	e a separa	te application for each return)			0 4	
			,				
Application		Return	Application			Return	
Is For		Code	Is:For			Code	
Form 990		01	Form 990-T (corporation)			07	
Form 990-BL		02	Form 1041-A			08	
Form 990-EZ		01	Form 4720				
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)			Form 8870			12	
- 0	FRED M. BRODY	06					
• The	books are in the care of > 19 S. LASALLE S	יתתחדב	r. CHICAGO. II	60603			
	phone No ► 312-346-2141	, , , , , , , , , , , , , , , , , , , 	FAX No ▶ 312-346-21		-		
• If the organization does not have an office or place of business in the United States, check this box							
	s is for a Group Return, enter the organization's four digit			f this is fo	or the whole aroun	check this	
box 🕨		1					
1 I request an automatic 3 month (6 months for a corporation required to file Form 990-T) extension of time until FEBRUARY 15, 2013 to file the exempt organization return for the organization named above. The extension							
	is for the organization's return for						
▶							
	Control of the second s						
o if	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						
2 "							
L	Change in accounting period						
20 16	this application is for Form 000 RL 000 RE 000 T 4720	or 6060 or	ntor the tentative tay loss any		<u> </u>		
						6,000.	
_					\$	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
	If this application is for Form 990 PF, 990-T, 4720, or 6069, enter any refundable credits and					6,000.	
_	estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$					5,000.	
	alance due. Subtract line 3b from line 3a Include your pa	•		3c	 \$	^	
	by using EFTPS (Electronic Federal Tax Payment System) See instructions					0.	
	. If you are going to make an electronic fund withdrawal v			orm 8879-			
LHA	For Privacy Act and Paperwork Reduction Act Notice,	see Instru	uctions.		Form 8868 (F	lev 1 2012)	