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

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

2012

Open to public inspection

For calendar year 2012 or tax year beginning

, and ending

Name of foundation GRACE ELIZABETH GRONER SCHOLARSHIP FOUNDATION		A Employer identification number 26-6687616
Number and street (or P O box number if mail is not delivered to street address) 585 BANK LANE	Room/suite 3000	B Telephone number 847-234-5000
City or town, state, and ZIP code LAKE FOREST, IL 60045		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, col. (c), line 16) \$ 7,085,285.	J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	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))		(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		57,465.		N/A	
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B					
3 Interest on savings and temporary cash investments		302.	302.		STATEMENT 1
4 Dividends and interest from securities		205,523.	205,523.		STATEMENT 2
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10		76,755.			
b Gross sales price for all assets on line 6a	1,685,724.				
7 Capital gain net income (from Part IV, line 2)			76,755.		
8 Net short-term capital gain					
9 Income modifications					
10a Gross sales less returns and allowances					
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income		2,455.	0.		STATEMENT 3
12 Total. Add lines 1 through 11		342,500.	282,580.		
13 Compensation of officers, directors, trustees, etc		0.	0.		0.
14 Other employee salaries and wages		35,557.	0.		35,557.
15 Pension plans, employee benefits					
16a Legal fees					
b Accounting fees					
c Other professional fees	STMT 4	64,407.	49,869.		14,538.
17 Interest					
18 Taxes	OGDEN, UT STMT 5	8,235.	1,515.		2,720.
19 Depreciation and depletion		17,181.	0.		
20 Occupancy					
21 Travel, conferences, and meetings		30,635.	0.		30,635.
22 Printing and publications					
23 Other expenses	STMT 6	30,535.	0.		30,535.
24 Total operating and administrative expenses. Add lines 13 through 23		186,550.	51,384.		113,985.
25 Contributions, gifts, grants paid		220,595.			220,595.
26 Total expenses and disbursements. Add lines 24 and 25		407,145.	51,384.		334,580.
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements		<64,645.>			
b Net investment income (if negative, enter -0-)			231,196.		
c Adjusted net income (if negative, enter -0-)				N/A	

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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only			
		Beginning of year	End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
Assets	1 Cash - non-interest-bearing	500.	23,356.	23,356.	
	2 Savings and temporary cash investments	906,760.	557,868.	557,868.	
	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 ▶	3,980.			
	Less: allowance for doubtful accounts ▶	0.	3,980.	3,980.	
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges				
	10a Investments - U.S. and state government obligations				
	b Investments - corporate stock				
	c Investments - corporate bonds				
Assets	11 Investments - land, buildings, and equipment basis ▶				
	Less accumulated depreciation ▶				
	12 Investments - mortgage loans				
	13 Investments - other	STMT 7	5,484,847.	5,757,958.	
	14 Land, buildings, and equipment: basis ▶	360,601.		6,160,526.	
	Less accumulated depreciation ▶	22,528.	338,073.	338,073.	
	15 Other assets (describe ▶)	STATEMENT 8	0.	1,482.	
	16 Total assets (to be completed by all filers)	6,747,362.	6,682,717.	7,085,285.	
	Liabilities	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 ▶)					
23 Total liabilities (add lines 17 through 22)		0.	0.		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/>				
	and complete lines 24 through 26 and lines 30 and 31				
	24 Unrestricted				
	25 Temporarily restricted				
	26 Permanently restricted				
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/>				
	and complete lines 27 through 31.				
	27 Capital stock, trust principal, or current funds	0.	0.		
	28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.		
	29 Retained earnings, accumulated income, endowment, or other funds	6,747,362.	6,682,717.		
30 Total net assets or fund balances	6,747,362.	6,682,717.			
31 Total liabilities and net assets/fund balances	6,747,362.	6,682,717.			

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	6,747,362.
2 Enter amount from Part I, line 27a	2	<64,645.>
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	6,682,717.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	6,682,717.

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Part IV Capital Gains and Losses for Tax on Investment Income

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

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e 1,685,724.		1,608,969.	76,755.

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

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			76,755.

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	76,755.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8	3	N/A

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

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

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

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

☐ Yes ☒ No

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

1 Enter the appropriate amount in each column for each year; see 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 (col. (b) divided by col. (c))
2011	253,455.	6,417,763.	.039493
2010	323,776.	5,273,707.	.061394
2009	1,000.	18,007.	.055534
2008	0.	0.	.000000
2007			

2 Total of line 1, column (d)	2	.156421
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	.039105
4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5	4	6,548,800.
5 Multiply line 4 by line 3	5	256,091.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	2,312.
7 Add lines 5 and 6	7	258,403.
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.	8	334,580.

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

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)		1	2,312.
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		2	0.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		3	2,312.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0.
3 Add lines 1 and 2		5	2,312.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			
6 Credits/Payments:			
a 2012 estimated tax payments and 2011 overpayment credited to 2012	6a	4,019.	
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c	1,000.	
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	5,019.	
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	2,707.	
11 Enter the amount of line 10 to be: Credited to 2013 estimated tax <input checked="" type="checkbox"/> 2,707. Refunded <input checked="" type="checkbox"/> 0.	11	0.	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
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. <input checked="" type="checkbox"/> \$ 0. (2) On foundation managers. <input checked="" type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input checked="" type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.	X	
8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input checked="" type="checkbox"/> IL		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

N/A

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Part VII-A Statements Regarding Activities (continued)

11. At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12. Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13. Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	X	
14. The books are in care of ► L. ROBERT PASQUESI Telephone no. ► 847-234-5000 Located at ► 585 BANK LANE, LAKE FOREST, IL ZIP+4 ► 60045			
15. Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year	15	N/A	
16. At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ►	16	Yes	No
			X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a. During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<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 type="checkbox"/> Yes <input checked="" 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"/>	1b	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 2012?	1c	X
2. Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a. At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? If "Yes," list the years ► , , ,	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
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.)	N/A	2b
c. If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► , , ,		
3a. 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 2012 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 2012)	N/A	3b
4a. Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b. Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b	X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to:

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

☐ Yes ☒ No

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

☐ Yes ☒ No

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

☒ Yes ☐ No

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

☐ Yes ☒ No

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

☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b

X

Organizations relying on a current notice regarding disaster assistance check here

☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

6b

X

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

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

☐ Yes ☒ No

7b

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

N/A

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

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

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
L. ROBERT PASQUESI	TRUSTEE			
585 BANK LANE				
LAKE FOREST, IL 60045	1.00	0.	0.	0.
WILLIAM C. MARLATT	TRUSTEE			
207 E. WESTMINSTER STE. 1				
LAKE FOREST, IL 60045	30.00	0.	0.	0.

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

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

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

0

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Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

[illegible]

Total number of others receiving over \$50,000 for professional services

0

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 FUND STUDENT INTERNSHIP AT THE PRINCE'S REGENERATION TRUST, A UK CHARITABLE ORGANIZATION DEDICATED TO THE RESTORATION OF HISTORICAL BUILDINGS	38,598.
2 FUND INTERNSHIPS FOR 3 STUDENTS AT COLONIAL WILLIAMSBURG IN THE AREAS OF LIVESTOCK BREEDING, EDUCATIONAL OUTREACH, AND ARCHITECTURAL RESEARCH	30,431.
3 FUND EDUCATIONAL PROGRAMS AND INTERNSHIPS IN ARCHAEOLOGY & MUSEUM PROGRAMS FOR 6 STUDENTS AT JAMES MADISON'S MONTPELIER	23,861.
4 FUND EDUCATIONAL PROGRAM AND SERVICE PROJECTS FOR FOUR STUDENTS AT UNIVERSITY OF VIRGINIA FIELD SCHOOL IN JAMAICA	21,263.

Part IX-B	Summary of Program-Related Investments
------------------	---

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

Amount

1	N/A	
2		
3	All other program-related investments. See instructions.	
Total. Add lines 1 through 3		0.

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	5,982,869.
b	Average of monthly cash balances	1b	665,659.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	6,648,528.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	6,648,528.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	99,728.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	6,548,800.
6	Minimum investment return. Enter 5% of line 5	6	327,440.

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	327,440.
2a	Tax on investment income for 2012 from Part VI, line 5	2a	2,312.
b	Income tax for 2012. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	2,312.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	325,128.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	325,128.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	325,128.

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	334,580.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	334,580.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	2,312.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	332,268.

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.

Form 990-PF (2012)

**GRACE ELIZABETH GRONER SCHOLARSHIP
FOUNDATION**

Form 990-PF (2012)

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI, line 7				325,128.
2 Undistributed income, if any, as of the end of 2012:				
a Enter amount for 2011 only			1,244.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2012:				
a From 2007				
b From 2008				
c From 2009				
d From 2010				
e From 2011				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2012 from Part XII, line 4: ▶ \$ 334,580.				
a Applied to 2011, but not more than line 2a			1,244.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2012 distributable amount				325,128.
e Remaining amount distributed out of corpus	8,208.			
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	8,208.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2011. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013.				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a	8,208.			
10 Analysis of line 9:				
a Excess from 2008				
b Excess from 2009				
c Excess from 2010				
d Excess from 2011				
e Excess from 2012	8,208.			

GRACE ELIZABETH GRONER SCHOLARSHIP

Form 990-PF (2012)

FOUNDATION

26-6687616 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 2012, 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(j)(5)

2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

Tax year

Prior 3 years

(a) 2012

(b) 2011

(c) 2010

(d) 2009

(e) Total

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

3 Complete 3a, b, or c for the alternative test relied upon:

a "Assets" alternative test - enter:

(1) Value of all assets

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed

c "Support" alternative test - enter:

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2) Support from general public 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.)**1 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.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ 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 or e-mail of the person to whom applications should be addressed:

DANIELA RESENDIZ, DIRECTOR, 847-735-6162
555 N. SHERIDAN ROAD, LAKE FOREST, IL 60045

b The form in which applications should be submitted and information and materials they should include:

APPLICANTS SHOULD CONTACT THE FOUNDATION FOR APPLICATION FORMS

c Any submission deadlines:

NONE

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

GRANTS ARE RESTRICTED TO CURRENT STUDENTS AND RECENT GRADUATES OF LAKE FOREST COLLEGE

GRACE ELIZABETH GRONER SCHOLARSHIP

Form 990-PF (2012)

FOUNDATION

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
THE COLONIAL WILLIAMSBURG FOUNDATION PO BOX 1776 WILLIAMSBURG, VA 23187		501(C)(3)	OPERATING GRANT	10,000.
THE MONTPELIER FOUNDATION PO BOX 911 ORANGE, VA 22960		501(C)(3)	2012 ARCHAEOLOGY PROGRAM GRANT	650.
EMILY HAMPDEN-SMITH 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		EDUCATIONAL SERVICE PROJECT - AZAFADY CONSERVATION PROGRAM	1,680.
LETICIA LAZCANO 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		EDUCATIONAL SERVICE PROJECT - BORDER STUDIES	1,100.
AGNIESKA DADEJ 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		INTERNSHIP - GORTON COMMUNITY CENTER	750.
Total	SEE CONTINUATION SHEET(S)			220,595.
b Approved for future payment				
NONE				
Total				0.

Form 990-PF (2012)

223811
12-05-12

2012.04020 GRACE ELIZABETH GRONER SCHO 040728_1

**GRACE ELIZABETH GRONER SCHOLARSHIP
FOUNDATION**

Form 990-PF (2012)

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

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

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		N/A	

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

b If "Yes," complete the following schedule.

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

<p>Sign Here</p>	<p>Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.</p>			<p>May the IRS discuss this return with the preparer shown below (see instr.)?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	
	<p> 9/25/13</p>				
	<p>Signature of officer or trustee Date</p>				
	<p>Title</p> <p align="right">TRUSTEE</p>				
<p>Paid Preparer Use Only</p>	<p>Print/Type preparer's name</p> <p>TIMOTHY B. KLEIN</p>	<p>Preparer's signature</p> <p></p>	<p>Date</p> <p>9/20/13</p>	<p>Check <input type="checkbox"/> if self-employed</p>	<p>PTIN</p> <p>P00008827</p>
	<p>Firm's name PASQUESI SHEPPARD LLC</p>			<p>Firm's EIN 36-4049282</p>	
	<p>Firm's address 585 BANK LANE LAKE FOREST, IL 60045</p>			<p>Phone no. 847 234-5000</p>	

Form 990-PF (2012)

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

2012

Name of the organization

GRACE ELIZABETH GRONER SCHOLARSHIP
FOUNDATION

Employer identification number

26-6687616

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☐

501(c)() (enter number) organization

☐

4947(a)(1) nonexempt charitable trust not treated as a private foundation

☐

527 political organization

Form 990-PF

☒

501(c)(3) exempt private foundation

☐

4947(a)(1) nonexempt charitable trust treated as a private foundation

☐

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**☒

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

Special Rules☐

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.☐For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

GRACE ELIZABETH GRONER SCHOLARSHIP
FOUNDATION

Employer identification number

26-6687616

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	GRACE GRONER TRUST C/O WILLIAM C. MARLATT 207 E. WESTMINSTER STE. 1 LAKE FOREST, IL 60045	\$ 55,144.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
2	JOHN LILLY 12400 RAVENWOOD ROAD NORTH PLYMOUTH, MI 55441	\$ 2,321.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" 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)
		\$	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)

Employer identification number

26-6687616

[illegible]

Name of organization

Employer identification number

GRACE ELIZABETH GRONER SCHOLARSHIP
FOUNDATION

26-6687616

Part III

Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once) ▶ \$

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

Depreciation Expense

Federal

01/01/2012 - 12/31/2012

System No.	S	Description	Date In Service	Method / Conv.	Life	Cost / Other Basis	Bus./ Inv. %	Sec. 179/ Bonus	Salvage/ Basis Adj.	Bag. Accum. Depreciation	Current Depreciation	Total Depreciation
990, Pg 10 #1 - Form 990, Page 10												
1		House - 144 Wa	11/30/2011	MSL / MM	27.5000	293,233.00	100.0000		0.00	1,332.88	10,663.02	11,995.90
2		Land - 144 Wasl	11/30/2011	No Calc / N/A	0.0000	41,250.00	100.0000		0.00	0.00	0.00	0.00
3		Computer	8/4/2011	M / HY	5.0000	2,097.76	100.0000		0.00	419.55	671.28	1,090.83
4		Printer	6/24/2011	M / HY	5.0000	649.99	100.0000		0.00	130.00	208.00	338.00
5		Tile	7/8/2011	MSL / HY	15.0000	4,900.00	100.0000		0.00	163.33	326.67	490.00
6		Carpeting	8/4/2011	MSL / HY	15.0000	2,360.00	100.0000		0.00	78.67	157.33	236.00
7		Office furniture	7/15/2011	M / HY	5.0000	16,109.98	100.0000		0.00	3,222.00	5,155.19	8,377.19
Subtotal: 990, Pg 10 #1 - Form 990, Page 10						360,600.73			0.00	5,346.43	17,181.49	22,527.92
Less dispositions and exchanges:												
Net for: 990, Pg 10 #1 - Form 990, Page 10						360,600.73			0.00	5,346.43	17,181.49	22,527.92
Subtotal:												
Less dispositions and exchanges:						0.00			0.00	0.00	0.00	0.00
Grand Totals:						360,600.73			0.00	5,346.43	17,181.49	22,527.92

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold, e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a	NORTHERN TRUST - SEE ATTACHED SCHEDULE	P	VARIOUS	VARIOUS
b	NORTHERN TRUST - SEE ATTACHED SCHEDULE	P	VARIOUS	VARIOUS
c	NORTHERN TRUST - SEE ATTACHED SCHEDULE	P	VARIOUS	VARIOUS
d	MORGAN STANLEY - SEE ATTACHED SCHEDULE	P	VARIOUS	VARIOUS
e	MORGAN STANLEY - SEE ATTACHED SCHEDULE	P	VARIOUS	VARIOUS
f	MORGAN STANLEY - LOSS ON OPTIONS TRADING	P	VARIOUS	VARIOUS
g	CAPITAL GAINS DIVIDENDS			
h				
i				
j				
k				
l				
m				
n				
o				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 15,808.		15,563.	245.
b 630,035.		614,740.	15,295.
c 7,212.		5,454.	1,758.
d 306,275.		320,400.	<14,125.>
e 713,055.		629,426.	83,629.
f 13,339.		23,386.	<23,386.>
g			13,339.
h			
i			
j			
k			
l			
m			
n			
o			

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

(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), but not less than "-0-")
a			245.
b			15,295.
c			1,758.
d			<14,125.>
e			83,629.
f			<23,386.>
g			13,339.
h			
i			
j			
k			
l			
m			
n			
o			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter "-0-" in Part I, line 7 }	2	76,755.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter "-0-" in Part I, line 8 }	3	N/A

2012 Tax Information Statement

Account Number: 23-62786
 Recipient's Tax ID Number: XX-XXX7616
 Recipient's Name and Address:
 GRACE ELIZABETH GRONER FOUNDATION
 C/O MR. L. ROBERT PASQUESI
 585 N. BANK LN.
 LAKE FOREST, IL 60045

THE NORTHERN TRUST COMPANY
 P.O. BOX 803878
 CHICAGO, IL 60680

☐ Corrected ☐ 2nd TIN notice

2012 Proceeds from Broker and Barter Exchange Transactions

Sales are listed at Gross Proceeds less commissions and option premiums.

Cusip	Description	Date of Sale or Exchange	Quantity Sold	Stocks, Bonds, etc	Cost or Other Basis	Wash Sale Loss Disallowed	Net Gain or Loss	Federal Income Tax Withheld
Short Term Sales								
665162756	MFB NORTHN SHORT INTERMEDIATE US GOVT			NSIUX				
1529.9500	11/08/2012 Various			15,758.49	15,513.75	0.00	244.74	0.00
665162756	MFB NORTHN SHORT INTERMEDIATE US GOVT			NSIUX				
4.8200	11/08/2012 11/08/2012			49.65	49.58	0.00	0.07	0.00
Total Short Term Sales								
				15,808.14	15,563.33	0.00	244.81	0.00
Long Term 15% Sales								
464287176	MFC ISHARES TR BARCLAYS TIPS BD FD PROTECTED SECS FD			TIP				
200.0000	04/17/2012 07/16/2010			23,831.46	21,218.00	0.00	2,613.46	0.00
665162533	MFB NORTHERN FUNDS BD INDEX FD			NOBOX				
4117.1100	04/17/2012 07/16/2010			45,000.00	44,094.21	0.00	905.79	0.00
665162756	MFB NORTHN SHORT INTERMEDIATE US GOVT			NSIUX				
3937.0100	04/17/2012 07/16/2010			40,000.00	41,614.21	0.00	-1,614.21	0.00
665162772	MFB NORTHERN FDS STK INDEX FD			NOSIX				
2318.8400	04/17/2012 03/08/2011			40,000.00	38,075.39	0.00	1,924.61	0.00
464287176	MFC ISHARES TR BARCLAYS TIPS BD FD PROTECTED SECS FD			TIP				
515.0000	09/06/2012 Various			62,099.94	54,558.10	0.00	7,541.84	0.00
665162756	MFB NORTHN SHORT INTERMEDIATE US GOVT			NSIUX				
19474.2000	10/17/2012 Various			200,000.00	205,011.08	0.00	-5,011.08	0.00

This is important tax information and is being furnished to you.



2012 Tax Information Statement

Account Number: 23-62786
 Recipient's Tax ID Number: XX-XXX7616
☐ Corrected ☐ 2nd TIN notice

Recipient's Name and Address:
 GRACE ELIZABETH GRONER FOUNDATION
 C/O MR. L. ROBERT PASQUESI
 585 N. BANK LN.
 LAKE FOREST, IL 60045

THE NORTHERN TRUST COMPANY
 P.O. BOX 803878
 CHICAGO, IL 60680

Sales are listed at Gross Proceeds less commissions and option premiums.

Cusip	Description	Date of Sale or Exchange	Date of Acquisition	Stock or Other Symbol	Stocks, Bonds, etc.	Cost or Other Basis	Wash Sale Loss Disallowed	Net Gain or Loss	Federal Income Tax Withheld	State Tax Withheld
002824100	ABBOTT LABORATORIES			ABT						
1000.0000		11/05/2012	01/19/2010		64,720.54	56,200.00	0.00	8,520.54	0.00	0.00
665162699	MFB NORTHN HI YIELD FXD INC FD			NHFX						
5354.7500		11/08/2012	05/04/2010		40,000.00	38,500.66	0.00	1,499.34	0.00	0.00
665162756	MFB NORTHN SHORT INTERMEDIATE US GOVT			NSIUX						
11105.1400		11/08/2012	Various		114,382.93	115,467.88	0.00	-1,084.95	0.00	0.00
Total Long Term 15% Sales					630,034.87	614,739.53	0.00	15,295.34	0.00	0.00
Long Term 28% Sales										
78463V107	MFC SPDR GOLD TR GOLD SHS			GLD						
45 0000		04/17/2012	06/07/2010		7,211.98	5,454.00	0.00	1,757.98	0.00	0.00
Total Long Term 28% Sales					7,211.98	5,454.00	0.00	1,757.98	0.00	0.00

Morgan Stanley

Corporate Tax Statement Tax Year 2012

Morgan Stanley Smith Barney Holdings LLC
 Harborside Financial Center
 Plaza 2 2nd Floor
 Jersey City, NJ 07311
 Identification Number: 26-4310632
 Taxpayer ID Number: 26-6687616
 Account Number: 440 018990 019
Customer Service: 866-324-6088

GRACE E GRONER SCHOL. FOUNDATION
 ATTENTION: L ROBERT PASQUESI
 585 BANK LANE
 LAKE FOREST IL 60045-5307

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc.

Short Term - Covered Securities (Consider Box 6b (Basis Reported to IRS) as being checked for this section These transactions should be reported on Form 8949 Part I with box A checked)

DESCRIPTION (Box 8)	QUANTITY (Box 1e)	DATE ACQUIRED (Box 1b)	DATE OF SALE (Box 1a)	SALES PRICE (Box 2a)	ADJUSTED COST OR OTHER BASIS (Box 3)	WASH SALE LOSS DISALLOWED (Box 5)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
CHESAPEAKE ENERGY CORP	2,000.000	06/28/11	05/10/12	\$34,206.83	\$56,851.20	\$0.00	(\$22,644.37)	\$0.00
DOW CHEMICAL CO		CUSIP: 260543103	Symbol (Box 1d): DOW					
GENERAL ELECTRIC CO	900.000	09/07/11	01/20/12	\$26,603.48	\$24,282.90	\$0.00	\$2,320.58	\$0.00
		CUSIP: 369604103	Symbol (Box 1d): GE					
HATTERAS FINL CORP COM	500.000	09/30/11	09/19/12	\$10,639.76	\$7,712.90	\$0.00	\$2,926.86	\$0.00
		CUSIP: 41902R103	Symbol (Box 1d): HTS					
MICRON TECH INC	1,700.000	05/26/11	03/19/12	\$48,789.11	\$49,085.12	\$0.00	(\$296.01)	\$0.00
		CUSIP: 595112103	Symbol (Box 1d): MU					
NYSE EURONEXT	2,000.000	01/27/11	01/20/12	\$15,399.70	\$21,184.60	\$0.00	(\$5,784.90)	\$0.00
		CUSIP: 629491101	Symbol (Box 1d): NYX					
TARGET CORPORATION	3,000.000	03/26/12	12/21/12	\$82,636.13	\$88,416.21	\$0.00	(\$5,780.08)	\$0.00
		CUSIP: 87612E106	Symbol (Box 1d): TGT					
	1,200.000	01/05/12	07/20/12	\$69,718.43	\$58,293.36	\$0.00	\$11,425.07	\$0.00
	300.000	01/05/12	08/10/12	\$18,281.58	\$14,573.34	\$0.00	\$3,708.24	\$0.00
Security Subtotal	1,500.000			\$88,000.01	\$72,866.70	\$0.00	\$15,133.31	\$0.00
Total Short Term Covered Securities				\$306,275.02	\$320,399.63	\$0.00	(\$14,124.61)	\$0.00

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IMPORTANT TAX INFORMATION -- PLEASE RETAIN FOR YOUR RECORDS

Morgan Stanley

Corporate Tax Statement Tax Year 2012

GRACE E GRONER SCHOL. FOUNDATION
ATTENTION: L ROBERT PASQUESI
585 BANK LANE
LAKE FOREST IL 60045-5307

Morgan Stanley Smith Barney Holdings LLC
HARBORSIDE FINANCIAL CENTER
PLAZA 2 2ND FLOOR
JERSEY CITY, NJ 07311

Identification Number: 26-4310632

Taxpayer ID Number: 26-6687616
Account Number: 440 018990 019

Customer Service: 866-324-6088

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) **OMB NO. 1545-0715**

Gross Proceeds less commissions and option premiums on stocks, bonds, etc.

Long Term - Covered Securities (Consider Box 6b (Basis Reported to IRS) as being checked for this section. These transactions should be reported on Form 8949 Part II with box A checked)

DESCRIPTION (Box 8)	QUANTITY (Box 1e)	DATE ACQUIRED (Box 1b)	DATE OF SALE (Box 1a)	SALES PRICE (Box 2a)	ADJUSTED COST OR OTHER BASIS (Box 3)	WASH SALE DISALLOWED (Box 5)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
AT&T INC								
		CUSIP: 00206R102		Symbol (Box 1d): T				
	500 000	01/31/11	06/15/12	\$16,264.63	\$13,737.00	\$0.00	\$2,527.63	\$0.00
	1,500 000	01/31/11	09/21/12	\$56,188.73	\$41,211.00	\$0.00	\$14,977.73	\$0.00
	1,000 000	01/31/11	10/04/12	\$36,839.17	\$27,474.00	\$0.00	\$9,365.17	\$0.00
Security Subtotal	3,000 000			\$109,292.53	\$82,422.00	\$0.00	\$26,870.53	\$0.00
GENERAL ELECTRIC CO								
		CUSIP: 369604103		Symbol (Box 1d): GE				
	1,500 000	02/07/11	08/17/12	\$31,829.27	\$31,335.00	\$0.00	\$494.27	\$0.00
	1,000 000	02/07/11	09/19/12	\$21,279.51	\$20,890.00	\$0.00	\$389.51	\$0.00
Security Subtotal	2,500 000			\$53,108.78	\$52,225.00	\$0.00	\$883.78	\$0.00
HERCULES OFFSHORE CORP								
		CUSIP: 427093109		Symbol (Box 1d): HERO				
	800 000	04/01/11	09/21/12	\$3,319.91	\$5,500.48	\$0.00	(\$2,180.57)	\$0.00
	2,200 000	04/01/11	12/21/12	\$11,769.73	\$15,126.32	\$0.00	(\$3,356.59)	\$0.00
Security Subtotal	3,000 000			\$15,089.64	\$20,626.80	\$0.00	(\$5,537.16)	\$0.00
HOSPITALITY PPTYS TR COM SBI								
		CUSIP: 44106M102		Symbol (Box 1d): HPT				
	2,500 000	02/25/11	03/16/12	\$63,190.28	\$58,283.75	\$0.00	\$4,906.53	\$0.00
MASCO CORP								
		CUSIP: 574599106		Symbol (Box 1d): MAS				
	500 000	02/01/11	10/19/12	\$7,199.83	\$6,914.85	\$0.00	\$284.98	\$0.00
	1,200 000	02/01/11	12/21/12	\$19,151.56	\$16,595.64	\$0.00	\$2,555.92	\$0.00
	1,300 000	02/01/11	12/21/12	\$21,384.51	\$17,978.61	\$0.00	\$3,405.90	\$0.00
Security Subtotal	3,000 000			\$47,735.90	\$41,489.10	\$0.00	\$6,246.80	\$0.00
NEW YORK COMMUNITY BANCORP INC								
		CUSIP: 649445103		Symbol (Box 1d): NYCB				
	300 000	04/19/11	10/19/12	\$3,944.91	\$4,908.00	\$0.00	(\$963.09)	\$0.00

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IMPORTANT TAX INFORMATION -- PLEASE RETAIN FOR YOUR RECORDS

Morgan Stanley

Corporate Tax Statement Tax Year 2012

Morgan Stanley Smith Barney Holdings LLC
Harborside Financial Center
Plaza 2 2nd Floor
Jersey City, NJ 07311

GRACE E GRONER SCHOL. FOUNDATION
ATTENTION: L ROBERT PASQUES!
585 BANK LANE
LAKE FOREST IL 60045-5307

Identification Number: 26-4310632

Taxpayer ID Number: 26-6687616
Account Number: 440 018990 019

Customer Service: 866-324-6088

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc.

Long Term - Covered Securities (Consider Box 6b (Basis Reported to IRS) as being checked for this section These transactions should be reported on Form 8949 Part II with box A checked) (Continued)

DESCRIPTION (Box 8)	QUANTITY (Box 1e)	DATE ACQUIRED (Box 1b)	DATE OF SALE (Box 1a)	SALES PRICE (Box 2a)	ADJUSTED COST OR OTHER BASIS (Box 3)	WASH SALE LOSS DISALLOWED (Box 5)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
SOUTHERN COPPER CORP		CUSIP: 84265V105	Symbol (Box 1d): SCCO					
	0.400	02/24/11	02/28/12	\$13.20	\$16.63	\$0.00	(\$3.43)	\$0.00
	400.000	02/24/11	11/05/12	\$15.139.65	\$16,641.27	\$0.00	(\$1,501.62)	\$0.00
Security Subtotal	400.400			\$15,152.85	\$16,657.90	\$0.00	(\$1,505.05)	\$0.00
Total Long Term Covered Securities				\$307,514.89	\$276,612.55	\$0.00	\$30,902.34	\$0.00

Long Term - Noncovered Securities # (Consider Box 6a (Noncovered Security) as being checked for this section These transactions should be reported on Form 8949 Part II with box B checked)

DESCRIPTION (Box 8)	QUANTITY (Box 1e)	DATE ACQUIRED (Box 1b)	DATE OF SALE (Box 1a)	SALES PRICE (Box 2a)	ADJUSTED COST OR OTHER BASIS (Box 3)	WASH SALE LOSS DISALLOWED (Box 5)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
ABBOTT LABORATORIES		CUSIP: 002824100	Symbol (Box 1d): ABT					
	2,500.000	04/19/10	02/17/12	\$140,622.46	\$140,500.00	\$0.00	\$122.46	\$0.00
	1,000.000	04/19/10	07/10/12	\$63,728.57	\$56,200.00	\$0.00	\$7,528.57	\$0.00
Security Subtotal	3,500.000			\$204,351.03	\$196,700.00	\$0.00	\$7,651.03	\$0.00
BOEING CO		CUSIP: 097023105	Symbol (Box 1d): BA					
	50.000	08/21/92	08/03/12	\$3,649.41	\$1,002.06	\$0.00	\$2,647.35	\$0.00
CONOCOPHILLIPS		CUSIP: 20825C104	Symbol (Box 1d): COP					
	800.000	05/07/10	08/17/12	\$44,662.99	\$34,232.59	\$0.00	\$10,430.40	\$0.00
CONS EDISON INC (HLDG CO)		CUSIP: 209115104	Symbol (Box 1d): ED					
	50.000	04/16/07	08/03/12	\$3,215.92	\$2,320.50	\$0.00	\$895.42	\$0.00

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IMPORTANT TAX INFORMATION -- PLEASE RETAIN FOR YOUR RECORDS

Corporate Tax Statement Tax Year 2012

Morgan Stanley Smith Barney Holdings LLC
Harborside Financial Center
Plaza 2 2nd Floor

GRACE E GRONER SCHOL. FOUNDATION
ATTENTION: L ROBERT PASQUESI
585 BANK LANE
LAKE FOREST IL 60045-5307

Jersey City, NJ 07311
Identification Number: 26-4310632

Taxpayer ID Number: 26-6687616
Account Number: 440 018990 019

Customer Service: 866-324-6088

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) OMB NO. 1545-0715

Gross Proceeds less commissions and option premiums on stocks, bonds, etc.

Long Term - Noncovered Securities # (Consider Box 6a (Noncovered Security) as being checked for this section. These transactions should be reported on Form 8949 Part II with box B checked.)
(Continued)

DESCRIPTION (Box 8)	QUANTITY (Box 1e)	DATE ACQUIRED (Box 1b)	DATE OF SALE (Box 1a)	SALES PRICE (Box 2a)	ADJUSTED COST OR OTHER BASIS (Box 3)	WASH SALE LOSS DISALLOWED (Box 5)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
INTEL CORP	1,000,000	10/08/10	02/02/12	\$25,719.50	\$19,479.80	\$0.00	\$6,239.70	\$0.00
NEW YORK COMMUNITY BANCORP INC	2,000,000	08/27/10	10/19/12	\$26,299.42	\$31,369.40	\$0.00	(\$5,069.98)	\$0.00
PHILLIPS 66 COM	400,000	05/07/10	05/23/12	\$12,419.04	\$10,173.41	\$0.00	\$2,245.63	\$0.00
PRUDENTIAL FINANCIAL INC	50,000	06/06/11	08/03/12	\$2,604.94	\$3,014.50	\$0.00	(\$409.56)	\$0.00

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Morgan Stanley

Corporate Tax Statement Tax Year 2012

Morgan Stanley Smith Barney Holdings LLC
Harborside Financial Center
Plaza 2 2nd Floor
Jersey City, NJ 07311
Identification Number: 26-4310632

GRACE E GRONER SCHOL. FOUNDATION
ATTENTION: L ROBERT PASQUESI
585 BANK LANE
LAKE FOREST IL 60045-5307

Taxpayer ID Number: 26-6687616
Account Number: 440 018990 019

Customer Service: 866-324-6088

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1099-B PROCEEDS FROM BROKER AND BARTER EXCHANGE TRANSACTIONS (continued) **OMB NO. 1545-0715**

Gross Proceeds less commissions and option premiums on stocks, bonds, etc.

Long Term - Noncovered Securities # (Consider Box 6a (Noncovered Security) as being checked for this section. These transactions should be reported on Form 8949 Part II with box B checked.)
(Continued)

DESCRIPTION (Box 8)	QUANTITY (Box 1e)	DATE ACQUIRED (Box 1b)	DATE OF SALE (Box 1a)	SALES PRICE (Box 2a)	ADJUSTED COST OR OTHER BASIS (Box 3)	WASH SALE DISALLOWED (Box 5)	GAIN/(LOSS) AMOUNT	FEDERAL INCOME TAX WITHHELD (Box 4)
VERIZON COMMUNICATIONS	2,000.000	04/30/10	07/05/12	\$82,618.14	\$54,520.92	\$0.00	\$28,097.22	\$0.00
Total Long Term Noncovered Securities				\$405,540.39	\$352,813.18	\$0.00	\$52,727.21	\$0.00
Total Long Term Covered and Noncovered Securities				\$713,055.28	\$629,425.73	\$0.00	\$83,629.55	\$0.00
Total Short and Long Term, Covered and Noncovered Securities				\$1,019,330.30	\$949,825.36	\$0.00	\$69,504.94	\$0.00
Form 1099-B Total Reportable Amounts								
Total Sales Price (Box 2)				\$1,019,330.30				
Total Cost or Other Basis (Box 3)					\$597,012.18			
Total Wash Sale Loss Disallowed (Box 5)					\$0.00			
Total Fed Tax Withheld (Box 4)								\$0.00

Noncovered securities are not subject to the IRS cost basis reporting regulations, therefore their date of acquisition, cost basis, short or long term designation and any disallowed loss resulting from a wash sale will not be reported to the IRS.

**GRACE ELIZABETH GRONER SCHOLARSHIP
FOUNDATION**

26-6687616

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)				
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)				
CAMILA QUINTEROS 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		INTERNSHIP - GORTON COMMUNITY CENTER	750.
JULIA FRENCH 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		INTERNSHIP - GORTON COMMUNITY CENTER	1,500.
MIKAYLA WARNER 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		INTERNSHIP - GORTON COMMUNITY CENTER	750.
SARAH LENDY 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		INTERNSHIP - MISERICORDIA	1,520.
VERONICA CASTRO 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		INTERNSHIP - MISERICORDIA	1,520.
JERROLD ROSEMA 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		FELLOWSHIP - PINE KNOT	465.
KIMBERLY DIAH 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		INTERNSHIP - VISTA MEDICAL CENTER	500.
PRATIBHA SHRESTHA 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		INTERNSHIP - VISTA MEDICAL CENTER	550.
ANICA LIN 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		EDUCATIONAL PROGRAM - ANDERSON RANCH	526.
CLEO HEHN 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		EDUCATIONAL PROGRAM - ANDERSON RANCH	526.
Total from continuation sheets				206,415.

**GRACE ELIZABETH GRONER SCHOLARSHIP
FOUNDATION**

26-6687616

Part XV Supplementary Information

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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
TATINA GALLI 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		EDUCATIONAL PROGRAM - APICIUS INTERNATIONAL SCHOOL OF HOSPITALITY: CULINARY ARTS	10,157.
ALEXUS URBANIK 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		INTERNSHIP - COLONIAL WILLIAMSBURG: RARE BREEDS PROGRAM	11,449.
SAMANTHA NIESE 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		INTERNSHIP - COLONIAL WILLIAMSBURG: EDUCATIONAL OUTREACH	8,559.
CAMILA QUINTEROS 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		INTERNSHIP - COLONIAL WILLIAMSBURG: ARCHITECTURAL RESEARCH	10,424.
DANIELLE LEONARDO 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		INTERNSHIP - COMMITTEE REPRESENTING OUR YOUNG ADULTS (CROYA)	1,765.
KOSOVA KREKA 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		SERVICE PROJECT - DAVIS PROJECTS FOR PEACE	1,468.
KATLIN SANDVIK 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		SERVICE PROJECT - DAVIS PROJECTS FOR PEACE	1,576.
ANICA LIN 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		SERVICE PROJECT - DAVIS PROJECTS FOR PEACE	1,200.
NIKITA KOTTECHA 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		SERVICE PROJECT - DAVIS PROJECTS FOR PEACE	531.
JIMENA RESENDIZ 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		EDUCATIONAL PROGRAM AND INTERNSHIP - JAMES MADISON'S MONTPELIER: ARCHAEOLOGY STUDIES	5,878.
Total from continuation sheets				

**GRACE ELIZABETH GRONER SCHOLARSHIP
FOUNDATION**

26-6687616

Part XV Supplementary Information

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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
AIDAN PRICE 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		EDUCATIONAL PROGRAM AND INTERNSHIP - JAMES MADISON'S MONTPELIER: ARCHAEOLOGY STUDIES	4,346.
AMY GONZALEZ 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		EDUCATIONAL PROGRAM - JAMES MADISON'S MONTPELIER: ARCHAEOLOGY STUDIES	4,220.
AGNES DADEJ 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		EDUCATIONAL PROGRAM - JAMES MADISON'S MONTPELIER: ARCHAEOLOGY STUDIES	4,170.
SAMUEL MERCIER 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		EDUCATIONAL PROGRAM AND INTERNSHIP - JAMES MADISON'S MONTPELIER: ARCHAEOLOGY STUDIES	4,342.
SAMANTHA NIESE 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		INTERNSHIP - JAMES MADISON'S MONTPELIER: MUSEUM PROGRAM	600.
ABIGAIL BROWNELL 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		EDUCATIONAL PROGRAM AND SERVICE PROJECTS - MONTEVERDE INSTITUTE	6,419.
RYAN DRAKE 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		EDUCATIONAL PROGRAM AND SERVICE PROJECTS - MONTEVERDE INSTITUTE	6,419.
ASHLEY GORA 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		EDUCATIONAL PROGRAM AND SERVICE PROJECTS - MONTEVERDE INSTITUTE	6,419.
ANHAR MOHAMED 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		SUMMER RESEARCH - ROSALIND FRANKLIN UNIVERSITY	3,500.
LANI LEONG 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		SUMMER RESEARCH - LOYOLA UNIVERSITY	3,500.
Total from continuation sheets				

**GRACE ELIZABETH GRONER SCHOLARSHIP
FOUNDATION**

26-6687616

Part XV Supplementary Information

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 or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
VICTORIA EGEDUS 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		SUMMER RESEARCH - NORTHWESTERN UNIVERSITY	3,500.
JERROLD ROSEMA 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		EDUCATIONAL PROGRAM AND SERVICE PROJECT - UNIVERSITY OF VIRGINIA FIELD SCHOOL JAMAICA	5,281.
KOSOVA KREKA 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		EDUCATIONAL PROGRAM AND SERVICE PROJECT - UNIVERSITY OF VIRGINIA FIELD SCHOOL JAMAICA	6,455.
CAMILA QUINTEROS 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		EDUCATIONAL PROGRAM AND SERVICE PROJECT - UNIVERSITY OF VIRGINIA FIELD SCHOOL JAMAICA	4,751.
JAMES DUNNIGAN 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		EDUCATIONAL PROGRAM AND SERVICE PROJECT - UNIVERSITY OF VIRGINIA FIELD SCHOOL JAMAICA	4,776.
CANDICE KOSANKE 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		INTERNSHIP - GORTON COMMUNITY CENTER	500.
HANNA MORRISON 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		INTERNSHIP - MISERICORDIA	1,013.
JORDAN VARGA 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		INTERNSHIP - MISERICORDIA	1,013.
JIMENA RESENDIZ 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		INTERNSHIP - MONTPELIER	305.
CAMILA QUINTEROS 555 N. SHERIDAN ROAD LAKE FOREST, IL 60045	NONE		INTERNSHIP - PRINCE'S REGENERATION TRUST	38,598.
Total from continuation sheets				

26-6687616

3 Grants and Contributions Paid During the Year (Continuation)

Total from continuation sheets

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

SOURCE	AMOUNT
MORGAN STANLEY SMITH BARNEY	300.
NORTHERN TRUST COMPANY	2.
TOTAL TO FORM 990-PF, PART I, LINE 3, COLUMN A	302.

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
MORGAN STANLEY SMITH BARNEY	103,924.	37.	103,887.
NORTHERN TRUST COMPANY	114,894.	13,302.	101,592.
NORTHERN TRUST COMPANY - US INTEREST	41.	0.	41.
OTHER	3.	0.	3.
TOTAL TO FM 990-PF, PART I, LN 4	218,862.	13,339.	205,523.

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
RETURN OF CAPITAL	2,455.	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	2,455.	0.	

FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PROFESSIONAL FEES	14,538.	0.		14,538.
INVESTMENT FEES	49,869.	49,869.		0.
TO FORM 990-PF, PG 1, LN 16C	64,407.	49,869.		14,538.

FORM 990-PF	TAXES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FOREIGN TAXES	1,515.	1,515.		0.	
FEDERAL TAXES	4,000.	0.		0.	
PAYROLL TAXES	2,720.	0.		2,720.	
TO FORM 990-PF, PG 1, LN 18	8,235.	1,515.		2,720.	

FORM 990-PF	OTHER EXPENSES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
OFFICE EXPENSES	9,754.	0.		9,754.	
COTTAGE EXPENSES	16,572.	0.		16,572.	
PROMOTION	2,138.	0.		2,138.	
MISCELLANEOUS	2,071.	0.		2,071.	
TO FORM 990-PF, PG 1, LN 23	30,535.	0.		30,535.	

FORM 990-PF	OTHER INVESTMENTS		STATEMENT	7
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
NORTHERN TRUST INVESTMENT ACCOUNT	COST	3,291,776.	3,688,901.	
MORGAN STANLEY INVESTMENT ACCOUNT	COST	2,466,182.	2,471,625.	
TOTAL TO FORM 990-PF, PART II, LINE 13		5,757,958.	6,160,526.	

Application for Extension of Time To file an Exempt Organization Return

OMB No. 1545-1709

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

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

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

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

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

Part I only ☐

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

Type or print	Name of exempt organization or other filer, see instructions GRACE ELIZABETH GRONER SCHOLARSHIP FOUNDATION	Employer identification number (EIN) or 26-6687616
File by the due date for filing your return See instructions	Number, street, and room or suite no. If a P.O. box, see instructions. 585 BANK LANE, NO. 3000	Social security number (SSN)
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. LAKE FOREST, IL 60045	

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

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

L. ROBERT PASQUESI

- The books are in the care of ▶ **585 BANK LANE - LAKE FOREST, IL 60045**
Telephone No. ▶ **847-234-5000** FAX No. ▶ **847-234-1110**

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

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **AUGUST 15, 2013**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ ☒ calendar year **2012** or
▶ ☐ tax year beginning _____, and ending _____

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

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	5,019.
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	\$	4,019.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.	3c	\$	1,000.

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

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

Form 8868 (Rev. 1-2013)

Ease-file

FORM 990-PF

OTHER ASSETS

STATEMENT 8

DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
DEPOSIT	0.	1,244.	1,244.
ACCRUED INVESTMENT INCOME RECEIVABLE	0.	238.	238.
TO FORM 990-PF, PART II, LINE 15	0.	1,482.	1,482.

• 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).

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
	GRACE ELIZABETH GRONER SCHOLARSHIP FOUNDATION	26-6687616
	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)
	585 BANK LANE, NO. 3000	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	LAKE FOREST, IL 60045	

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

0 4

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01		
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

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

L. ROBERT PASQUESI

• The books are in the care of **585 BANK LANE - LAKE FOREST, IL 60045**

Telephone No. **847-234-5000**

FAX No. **847-234-1110**

• 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 **NOVEMBER 15, 2013.**

5 For calendar year **2012**, or other tax year beginning ☐, and ending ☐.

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

ADDITIONAL TIME IS NECESSARY TO PREPARE A COMPLETE AND ACCURATE TAX RETURN.

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	\$	5,019.
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	\$	5,019.
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 **TRUSTEE**

Date ☐

Form 8868 (Rev. 1-2013)