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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047

A	For the	e 2012 calendar year, or tax year beginning and	ending								
В	Check if applicabl	C Name of organization		D Employer identific	eation number						
	Addre	Highland Park Community Foundation									
L	Name chang	Doing Business As		36-31	319818						
	Initial retum Termir ated		Room/suite	E Telephone number 847-4	433–4100						
	Amen	City, town, or post office, state, and ZIP code	G Gross receipts \$								
	Application	Highland Park, IL 60035									
	pendir	F Name and address of principal officer:Don Stewart		for affiliates?	Yes X No						
400 Lake Cook Rd, #120, Deerfield, IL 60015 H(b) Are all affiliates included? Yes											
I Tax-exempt status: X 501(c)(3) 501(c) ()											
	J Website: ► WWW.hpcommunityfoundation.com H(c) Group exemption number ►										
KI	orm of	organization X Corporation	L Year		State of legal domicile $\overline{{f I}}{f L}$						
	art I	Summary									
-	1	Briefly describe the organization's mission or most significant activities Gran	ts to	charitable							
Activities & Governance		organizations									
rua	2	Check this box If the organization discontinued its operations or dispos	sed of more	than 25% of its net as	sets.						
o Ve		Number of voting members of the governing body (Part VI, line 1a)		3	20						
<u>ح</u>	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	20						
es	5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)		5	0						
ž	6	Total number of volunteers (estimate if necessary)		6	20						
, cti	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.						
-	b	Net unrelated business taxable income from Form 990-T, line 34		7b	0.						
<u>න</u> න		RECEIVED		Prior Year	Current Year						
ລ ວ	8	Contributions and grants (Part VIII, line 1h)	<u> </u>	175,608.	166,608.						
Revenue	9	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 6d, 8c, 9c, 10c, and 11e)		0.	0.						
e Z	10	Investment income (Part VIII, column (A), line 3 4, and 7d) 8 2013		106,036.	85,822.						
ລ ງ ຕ ັ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u> </u>	0.	<u> </u>						
າ . —–	12	Total revenue - add lines 8 through 11 (must equal Part VII) column (A) line 12)	281,644.	252,430.							
)]	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		117,000.	133,400.						
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.							
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.						
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	_	0.	0.						
X		Total fundraising expenses (Part IX, column (D), line 25)	0.	20.460							
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<u> </u>	30,469.	32,544.						
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<u> </u>	147,469.	165,944.						
<u>_ 0</u>	19	Revenue less expenses. Subtract line 18 from line 12		134,175.	86,486.						
ts or			Ве	ginning of Current Year	End of Year						
Sse	20	Total assets (Part X, line 16)	<u> </u>	2,594,772.	2,898,053.						
Net Assets or Fund Balances	21	Total liabilities (Part X, line 26)	<u> </u>	0.	2 000 053						
		Net assets or fund balances Subtract line 21 from line 20		2,594,772.	2,898,053.						
	art II	Signature Block		 							
		ities of perjury, I declare that I have examined this return, including accompanying schedule			/ knowledge and belief, it is						
true	, correc	t, and complete Declaration of preparer (other than officer) is based on all information of wh	nich preparei	nas any knowledge							
۵.		Signature of officer		Date	<u> </u>						
Sìg			Date								
Hei	re	Don Stewart, Treasurer Type or print name and title									
_				Date Check	PTIN						
Da!		Print/Type preparer's name Anton Hendler Preparer's signature	JUN	1 2 0 2013 la	-						
Pair				self-employe	# <u>P01077823</u> 36-2260623						
	parer Only	Firm's name Lipschultz, Levin & Gray, L.L.C Firm's address 425 Huehl Road Bldg.7	•	Firm's EIN							
025	UIII	Northbrook, IL 60062		Dhana na Q	47_272_5300						
		RS discuss this return with the preparer shown above? (see instructions) 0-12 LHA For Paperwork Reduction Act Notice, see the separate instruction	·		X Yes No Form 990 (2012)						
2321	101 12-1	⊕iz = Ein− i or i apoimoin ricuaciion Act Notice, See the Separate inStructio	UI 13.		FUMI 330 (2012)						

4b	(Code) (Expenses \$) (Revenue	;\$)
40	(Code) (Expenses \$ including grants of \$) (Revenue	,
4c	(Code) (Expenses \$ including grants of \$) (Revenue	;\$)
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	_2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			.,
	public office? If "Yes," complete Schedule C, Part I	3		<u>X</u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		ľ	٠,
_	during the tax year? If "Yes," complete Schedule C, Part II	4		<u>X</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			v
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to		v	
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Х	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		х
0	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for	•		
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X	-,,-		
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10° If "Yes," complete Schedule D,]
	Part VI	11a		Х
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25° If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		17	
_	Schedule D, Parts XI and XII	12a	X	<u> </u>
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	40.		v
10	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		X
13 14a	Did the organization maintain an office, employees, or agents outside of the United States?	13		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		<u> </u>
-	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000		Ì	
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	145		
_	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16]	Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20ь	<u> </u>	
		Form	990	(2012)

Pa	rt IV Checklist of Required Schedules (continued)			r
	•		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the		3.7	
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			 v
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			l v
04.	Schedule J	23		X
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		X
b	Schedule K. If "No", go to line 25	24a		
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24b		
·	any tax-exempt bonds?	04-		,
А	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		<u> </u>
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	240		
250	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	234		
_	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified	-		<u> </u>
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			,,,,,,
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
¢	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			.,
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	_33_		_X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	0.4	'	v
35a	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35a		Λ
U	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		
55	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			- <u></u>
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<u> </u>		

Form 990 (2012)

Note. All Form 990 filers are required to complete Schedule O

a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	1 01	Check if Schedule O contains a response to any question in this Part V			
1s. Enter the number of Forms WSC (an incided in line 1s. Enter 0 ft not applicable 1st				Yes	No
Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (pumbing) winnings to pizze winness? 2 Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 8 If all least one is reported on line 2, and the organization file all recurred federal employment tax returns? 9 Note. If the sum of lines 1s and 2 is greater than 250, you may be required to e-file (see instructions) 9 Did the organization have uniteded business gross income of \$1.000 or more dumpt the year? 9 At any time during the celendary year, did the organization have an interest in, or a singulature or other authority over, a financial account in a foreign country? 9 See instructions for filing requirements for Form To F 90/22.1, Report of Foreign Bank and Financial accounts. 9 Was the organization a party to a protheted tax shelter transaction at year with model in the tax year? 9 If "Yes," to line 5a or 5b, did the organization file if twee or so party to a prohibited tax shelter transaction? 9 If "Yes," to line 5a or 5b, did the organization file Form 8888-77 9 If "Yes," to line 5a or 5b, did the organization file Form 8888-77 9 If "Yes," to line 5a or 5b, did the organization file Form 8889-77 9 If "Yes," to line 5a or 5b, did the organization file Form 889 and the organization of the organization file Form 889 and the organization of the organization and party to prohibited the organization solid any contributions that may receive deductible ac charitable contributions and party for goods and services provided to the payor? 9 If "Yes," did the organization melded with every solicitation an expense statement that such contributions or grifts were not tax deductible? 10 If the organization sell, exchange, or otherwise dispose of tangels personal property for which it was required to the form 822? 10 If the organization sell, exchange, or otherwise dispose of tan	1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
Gamebing) winnings to prize winners? Enter the number of employees reported on Form W3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return It least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b If I least one is reported on line 2a, did the organization file all required federal employment tax returns? 2b If I least one is reported on line 2a, did the organization file all required federal employment tax returns? 2c If I least one is reported on line 2a, did the organization file all required federal employment tax returns? 2c If I least one is reported on line 2a, did the organization file all required federal employment tax returns? 2d 2d 2d 2d 2d 2d 2d 2d 2d 2	ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
2e Eter the number of employees reported on Form W.3. Transmittal of Wages and Tax Statements, filled for the calendar year ending with or within the year covered by this return b If all least one is reported on line 2a, did the organization file all frequired federal amployment tax returns? Note. If the sum of lines to and 2a is greater than 250, you may be required to e-file (see instructions) 3b. Did the organization have unrealized business gross income of \$1,000 or more dump the year? 3a. X 3b. If Yes, *Inside the form 990-T for the year? If *No.* provide an explanation in Schedule O 3b. If Yes, *Inside the foreign country, such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial accounts. 5b. If Yes, *Inside the foreign country (such as a bank account, securities account, or other financial accounts. 5c. Was the organization on any to a prohibit at such electrons of filing requirements for Form TD F 9022.1, Report of Foreign Bank and Financial Accounts. 5c. Was the organization have in the foreign country. 5c. Was the organization have an wall gloss receive that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitately contributions under section 170(c). 5c. If Yes, *In line so and *In a contribution of a contribution of any time duting the superior or organization shall may receive deductible as charitately contributions and partly for goods and services provided to the payor? 5c. If Yes, *Indicate the number of Forms 8822 tiled during the year 5c. If Yes, *Indicate the number of Forms 8822 tiled during the year 5c. If the organization necessed an orithythe dorsor of the value of the goods or services provided? 5c. If the organization necessed an contribution of qualified intellectual property, did the organization file Form 8899 as required? 5c. If the organization makes a distribution of qualified intellectual proper	С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
the for the calendar year enclarg with or within the year covered by this return Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3 but the organization have unreliated business gross income of \$1,000 or more during the year? 3 but the organization have unreliated business gross income of \$1,000 or more during the year? 3 but if Yea, has it filed a Form 990-17 or this year? If Yea, "provide an explanation in Schedule 0 4 at Army time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accountly and the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (when a bank account, or other financial account)? 4 but Yea, "enter the name of the foreign country." 5 but with the organization a party to a prohibited tox shelter transaction at any time during the tax year? 5 but any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 but Yea," to the sa or 55, did the organization that it was or is a party to a prohibited tax shelter transaction? 5 but Yea," to the sa or 55, did the organization that it was or is a party to a prohibited tax shelter transaction? 5 but Yea," the did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicity and the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicity and the subject of the form \$200,000, and did the organization solicity and the subject of the form \$200,000, and did the organization solicity and the subject of the form \$200,000, and did the organization solicity and the subject of the form \$200,000, and did the organization solicity and the subject of the subject o		(gambling) winnings to prize winners?	1c	Х	
b If a least one is reported on line 2a, aid the organization file oil required federal employment tax returns? Note. If the sum of lines 1s and 2a is greater than 250, you may be required to e-file (see instructions) 3 Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 A any time during the calendary year, did the organization have an interest in, or a significant or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4 A tany time during the calendary year, did the organization have an interest in, or a significant or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 5 b 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
Note. If the sum of lines 1s and 2s is greater than 250, you may be required to e-file (see instructions) 3		filed for the calendar year ending with or within the year covered by this return 2a 0			
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year? b if Yes, *has if filed a Form 990-T for this year? if *No,* provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? b if Yes,* enter the name of the foreign country; ▶ See instructions for filing requirements for Form TD F 90/22.1, Report of Foreign Bank and Financial Accounts. 8b Was the organization aptry to a prohibited tax sheller transaction at any time during the tax year? 5a Was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a Des the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6b If Yes,* did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7b Organizations that may receive deductible contributions under section 170(c). a bill the organization state way receive deductible contributions under section 170(c). b If Yes,* did the organization only the donor of the value of the goods or services provided? C Did the organization state way receive deductible as the part of the goods or services provided? To life Form 8282? If Yes,* did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7c If the organization received a contribution of qualified intellectual property, did the organization file Form 8999 as required? 9c If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C? 9c Sponsoring or	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
b If "Yes, has it flied a Form 990-T for this year? If "No," provide an explanation in Schedule O 4 At any time during the calendar year, dot the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, or element financial account)? 4 B (*Yes, enter the name of the foreign country; ▶ 5 See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. 5 Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6 Did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions? 6 Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as charable, octivations? 6 Did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Did the organization selle, exchange, or otherwise dispose of tangible personal property for which it was required to the Form 8282? 7 Did the organization selle, exchange, or otherwise dispose of tangible personal property for which it was required? 7 Did the organization received a contribution of qualified during the year. 8 Did the organization received a contribution of cars, boats, anylanes, or other vehicles, did the organizations. 9 Did the organization make any taxable distributions under section 4965? 9 Did the organization make		Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
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f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? g if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h if the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7h if the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organizations Did the supporting organizations Did the supporting organizations maintaining donor advised funds. a Did the organization make any taxable distributions under section 4966? 9 Did the organization make a distribution to a donor, donor advisor, or related person? 9 Section 501(c)(7) organizations. Enter: a Intitation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 110					
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14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b		organization is licensed to issue qualified health plans			
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	С	Enter the amount of reserves on hand	<u> </u>		
			14a		<u> </u>
	b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		<u> </u>	L

Form 990 (2012) Highland Park Community Foundation 36-3819818 Page Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response

	to line 6a, 60, 6r 10b below, describe the circumstances, processes, or changes in Schedule O. See Instructions.								
	Check if Schedule O contains a response to any question in this Part VI			X					
Sec	tion A. Governing Body and Management		,, 1						
_	20	r	Yes	No					
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 20			i					
	If there are material differences in voting rights among members of the governing body, or if the governing			ı					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0 Enter the number of voting members included in line 1a, above, who are independent 1b 20								
_				ı					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			Х					
_	officer, director, trustee, or key employee?	2							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			Х					
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X					
4									
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X					
6	Did the organization have members or stockholders?	6							
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	7.		Х					
L	more members of the governing body? Are any appropriate designation of the graphization recentled to (or subject to approved by) members, attackholders, or	7a							
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7b		Х					
0	persons other than the governing body?	-/-		- 1					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following. The governing body?	8a	X	ļ					
_	Each committee with authority to act on behalf of the governing body?	8b	X						
9 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	00	21						
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)	-							
000	tion b. I oncies (this dection b requests information about policies not required by the internal nevertice code)		Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	10a	.03	X					
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,								
-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10ь		1					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х						
b									
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a		Х					
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b							
С									
	in Schedule O how this was done	12c							
13	Did the organization have a written whistleblower policy?	13		X					
14	Did the organization have a written document retention and destruction policy?	14		X					
15	Did the process for determining compensation of the following persons include a review and approval by independent	777							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
а	The organization's CEO, Executive Director, or top management official	15a		X					
ь	Other officers or key employees of the organization	15b		X					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			1					
	taxable entity during the year?	16a		_ X_					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation								
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's								
	exempt status with respect to such arrangements?	16b							
Sec	tion C. Disclosure								
17	List the states with which a copy of this Form 990 is required to be filed $ ightharpoonup$	_							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)	avaılat	le						
	for public inspection. Indicate how you made these available. Check all that apply.								
	Own website Another's website X Upon request Other (explain in Schedule O)								
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, an	d finar	ncial						
	statements available to the public during the tax year.								
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	tion.	·						
	Carol Caris - 847-831-4558								
A	610 Laurel Avenue, Highland Park, IL 60035								
23200 12-10-	6 12	Forn	990	(2012)					

Form 990 (2012) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response to any question in this Part VII

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

X Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

- ◆ List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	, unle	ss pe	rson	ıs bol	h an	compensation	compensation	amount of
	week	-	cer an	dad	irecto	or/trus	tee)	from	from related	other
	(list any	acto						the	organizations	compensation
	hours for	o d	88			ated		organization	(W-2/1099-MISC)	from the
	related	nstee	trust		88	pens		(W-2/1099-MISC)		organization
	organizations below	를	Dona		yold.	15 g				and related organizations
	line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) Andrew M. Livingston	0.00	┢═	=		<u>*</u>	1 8	ш.			
Chairman		Х		Х				0.	0.	0.
(2) Walter Nathan	0.00									
Vice-Chairman		Х		Х				0.	0.	0.
(3) Don Stewart	0.00									
Treasurer		Х		Х				0.	0.	0.
(4) Charles Dobrusin	0.00									
Secretary		Х		Х				0.	0.	0.
(5) Jack Blane	0.00									
Director		Х						0.	0.	0.
(6) Betsy Brint	0.00									
Director		Х						0.	0.	0.
(7) Jill Doherty	0.00									
Director		X						0.	0.	0.
(8) David Fairman	0.00									
Director		X						0.	0.	0.
(9) Peter Flanzer	0.00									
Director		X						0.	0.	0.
(10) Bruce Goodman	0.00									
Director		Х						0.	0.	0.
(11) Steven Hirsh	0.00						<u> </u>			
Director		X						0.	0.	0.
(12) Carol Anspach Kohn	0.00									
Director		X						0.	0.	0.
(13) Frank Lieber	0.00									
Director		X						0.	0.	0.
(14) Nancy Mills	0.00									_
Director		X						0.	0.	0.
(15) Laurie Levin	0.00									
Director		Х						0.	0.	0.
(16) Cynthia Witten	0.00									
Director		Х						0.	0.	0.
(17) David Reich	0.00									
Director		X						0.	0.	0.
232007 12-10-12										Form 990 (2012)

232007 12-10-12

232008 12-10-12

	, V	Check if Schedule O cont		to any question	in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
nts nts	1	a Federated campaigns	. 1a					
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues	. 1ь					
ts,		c Fundraising events .	1c					
ia gi		d Related organizations	1d					
S.E		e Government grants (contribut	ions) 1e					
ë ë		f All other contributions, gifts, gran	ts, and					
듗풎		similar amounts not included abo	ve 1f	166,608.				
a de		g Noncash contributions included in lines	1a-1f \$					
<u>8 0</u>	<u> </u>	h Total. Add lines 1a-1f		>	166,608.			
]			Business Code				
<u>.8</u>	2	a	-					
e e		b						
n S	1	с						
Program Service Revenue		d			<u> </u>			
Š,	'	e					•	
ш		f All other program service reve	nue					
		g Total. Add lines 2a-2f						
	3		dividends, intere	est, and	60.064			
		other similar amounts)			69,964.	69,964.		
	4		k-exempt bond p	proceeds P				
	5	Royalties		▶				
		- 0	(i) Real	(ii) Personal				
	6 6		· · · · · · · · · · · · · · · · · · ·					
	1	b Less. rental expenses			`			
	l	c Rental income or (loss)d Net rental income or (loss)						
	1	a Gross amount from sales of	(i) Securities					
	′ ˈ		245,502.	(ii) Other				
		b Less: cost or other basis	213,302.					
	`		229,644.					
	١,	c Gain or (loss)	15,858.			•		
	l	d Net gain or (loss)	· · · · · · · · · · · · · · · · · · ·	D	15,858.	15,858.		
Ð	8 :	a Gross income from fundraising	g events (not				·····	
		including \$	of					
ě		contributions reported on line	1c). See			1		
Other Revenu	1	Part IV, line 18	a					
Ě	ļ	b Less: direct expenses	ь					**
		c Net income or (loss) from fund	raising events	•		ĺ		
	9 ;	a Gross income from gaming ac	tivities. See					
		Part IV, line 19	а					
	ı	b Less: direct expenses	b					
		c Net income or (loss) from gam	-					
	10 a	a Gross sales of inventory, less	returns					
		and allowances	а					
	ı	b Less: cost of goods sold	b					
		c Net income or (loss) from sales	s of inventory					
		Miscellaneous Revenue	e	Business Code				
	11 a	a	 ·				· · · · · · · · · · · · · · · · · · ·	
	ı	b		 ,				
	•	С						
	1	d All other revenue		L			<u> </u>	
		e Total. Add lines 11a-11d		▶	252 222			
23200	12	Total revenue. See instructions	•	<u> </u>	252,430.	85,822.	0.	0.
23200 12-10-	12							Form 990 (2012)

Secti	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).										
	Check if Schedule O contains a respon			· · · ·							
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses						
1	Grants and other assistance to governments and										
	organizations in the United States See Part IV, line 21	133,400.	133,400.								
2	Grants and other assistance to individuals in										
	the United States. See Part IV, line 22				· ·						
3	Grants and other assistance to governments,										
	organizations, and individuals outside the										
	United States. See Part IV, lines 15 and 16				· · · · · · · · · · · · · · · · · · ·						
4	Benefits paid to or for members										
5	Compensation of current officers, directors,										
	trustees, and key employees .										
6	Compensation not included above, to disqualified										
	persons (as defined under section 4958(f)(1)) and										
	persons described in section 4958(c)(3)(B)										
7	Other salaries and wages				····						
8	Pension plan accruals and contributions (include										
_	section 401(k) and 403(b) employer contributions)										
9	Other employee benefits										
10	Payroll taxes										
11	Fees for services (non-employees)										
a	Management										
b	Legal										
C A	Accounting										
ď	Lobbying Professional fundraising services See Part IV, line 17		-								
f	Investment management fees										
g											
9	column (A) amount, list line 11g expenses on Sch O)										
12	Advertising and promotion										
13	Office expenses				 						
14	Information technology										
15	Royalties										
16	Occupancy										
17	Travel		-								
18	Payments of travel or entertainment expenses	-									
	for any federal, state, or local public officials										
19	Conferences, conventions, and meetings			<u> </u>							
20	Interest										
21	Payments to affiliates	<u></u>									
22	Depreciation, depletion, and amortization										
23	Insurance .										
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)										
а	Outside services	14,688.		14,688.							
b	Miscellaneous	10,363.		10,363.							
C	Professional services	4,440.		4,440.							
d	Stationery and printing	2,274.		2,274.	-						
е	All other expenses	779.		779.							
25	Total functional expenses Add lines 1 through 24e	165,944.	133,400.	32,544.	0.						
26	Joint costs. Complete this line only if the organization										
	reported in column (B) joint costs from a combined										
	educational campaign and fundraising solicitation										
	Check here if following SOP 98-2 (ASC 958-720)		<u>.</u>		<u> </u>						

	•	Check if Schedule O contains a response to any	question in this Part X			
	т—			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	-	49,718.	1	58,771.
	2	Savings and temporary cash investments	ļ		2	
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net	<u> </u>		4	
	5	Loans and other receivables from current and fo	rmer officers, directors,			
		trustees, key employees, and highest compensa				
		Part II of Schedule L	<u>-</u>	······································	5	
	6	Loans and other receivables from other disqualif				
		section 4958(f)(1)), persons described in section				
	i	employers and sponsoring organizations of secti				
S		employees' beneficiary organizations (see instr).	Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net	_		7	
As	8	Inventories for sale or use	- 1		8	
	9	Prepaid expenses and deferred charges			9	·
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	10a			
	1	Less: accumulated depreciation	10b		10c	
	11	Investments - publicly traded securities	2,544,809.	11	2,839,037.	
	12	Investments - other securities. See Part IV, line 1		12		
	13	Investments - program-related See Part IV, line 1		13		
	14	Intangible assets	0.45	14		
	15	Other assets. See Part IV, line 11		245.	15	245.
	16	Total assets. Add lines 1 through 15 (must equa	I line 34)	2,594,772.	16	2,898,053.
	17	Accounts payable and accrued expenses		17	-	
	18	Grants payable		18		
	19 20	Deferred revenue		19		
,	21	Tax-exempt bond liabilities		20		
Ĕ	22	Escrow or custodial account liability. Complete P Loans and other payables to current and former			21	
Liabilities		key employees, highest compensated employees	1			
<u>:</u>		Complete Part II of Schedule L	s, and disqualified persons.		-	
	23	Secured mortgages and notes payable to unrelate	and third nortice		22	
	24	Unsecured notes and loans payable to unrelated			23	
	25	Other liabilities (including federal income tax, pay	-		24	
		parties, and other liabilities not included on lines			ŀ	
		Schedule D	17 24). Complete Fait X Of		25	
	26	Total liabilities. Add lines 17 through 25	-	0.	26	0.
		Organizations that follow SFAS 117 (ASC 958).	, check here			· · · · · · · · · · · · · · · · · · ·
S		complete lines 27 through 29, and lines 33 and				
nce	27	Unrestricted net assets		2,450,532.	27	2,736,883.
Net Assets or Fund Balances	28	Temporarily restricted net assets		41,257.	28	47,690.
ב ק	29	Permanently restricted net assets	[102,983.	29	113,480.
Fü		Organizations that do not follow SFAS 117 (AS	C 958), check here	· · · · · · · · · · · · · · · · · · ·		
ō		and complete lines 30 through 34.	,,			
ets	30	Capital stock or trust principal, or current funds		ĺ	30	
ss	31	Paid in or capital surplus, or land, building, or equ	ipment fund		31	
et	32	Retained earnings, endowment, accumulated inc			32	
z	33	Total net assets or fund balances	į.	2,594,772.	33	2,898,053.
	34	Total liabilities and net assets/fund balances	2,594,772.	34	2,898,053.	
				7		Form 990 (2012)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Act and OMB Circular A-133?

Х

3a

3ь

SCHEDULE A

Department of the Treasury Internal Revenue Service

Part I

3

(Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

d ____ Type III - Non-functionally integrated

11g(i)

11g(ii)

11g(iii)

Name of the organization

Highland Park Community Foundation 36-3819818 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h

c Type III - Functionally integrated

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below,

(i) Name of supported organization	(described on lines 1-9 above or IRC section			organization sted in your document?	(v) Did you notify the organization in cot (i) of your support?		(vi) Is the organization in col (i) organized in the US?		(vii) Amount of monetar support	
		(see instructions))	Yes	No	Yes	No	Yes	No		
						ļ	ļ			
				 	_		-	1		
			 	 			 	 		
				<u> </u>				<u> </u>		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

b Type II

the governing body of the supported organization?

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

(ii) A family member of a person described in (i) above?

supporting organization, check this box

Schedule A (Form 990 or 990-EZ) 2012

232021

Schedule A (Form 990 or 990-EZ) 2012 Highland Park Community Foundation 36-38198 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

<u>Se</u> c	Section A. Public Support									
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
	Gifts, grants, contributions, and				• •					
	membership fees received. (Do not									
	Include any "unusual grants.")	397,959.	166,012.	149,948.	175,608.	166,608.	1056135.			
2	Tax revenues levied for the organ-									
	ization's benefit and either paid to									
	or expended on its behalf									
3	The value of services or facilities									
	furnished by a governmental unit to									
	the organization without charge									
4	Total. Add lines 1 through 3	397,959.	166,012.	149,948.	175,608.	166,608.	1056135.			
5	The portion of total contributions									
	by each person (other than a									
	governmental unit or publicly									
	supported organization) included									
	on line 1 that exceeds 2% of the									
	amount shown on line 11,									
	column (f)									
6	Public support. Subtract line 5 from line 4			11111	,,		1056135.			
	ction B. Total Support			_		· · · · · · · · · · · · · · · · · · ·				
Cale	ndar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total			
7	Amounts from line 4	397,959.	166,012.	149,948.	175,608.	166,608.	1056135.			
8	Gross income from interest,									
	dividends, payments received on									
	securities loans, rents, royalties									
	and income from similar sources	86,341.	92,379.	62,729.	<97,971.	>302,617.	446,095.			
9	Net income from unrelated business	·								
	activities, whether or not the									
	business is regularly carried on									
10	Other income. Do not include gain									
	or loss from the sale of capital									
	assets (Explain in Part IV.)									
11	Total support. Add lines 7 through 10						1502230.			
12	Gross receipts from related activities,	etc. (see instruction	ons)			12				
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)				
	organization, check this box and stop	here		-			. ▶			
Sec	ction C. Computation of Publ	ic Support Pe	rcentage							
14	Public support percentage for 2012 (line 6, column (f) di	wided by line 11, o	olumn (f))		14	70.30 %			
15	Public support percentage from 2011	Schedule A, Part	II, line 14			15	86.46 %			
16a	33 1/3% support test - 2012. If the	organization did no	t check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo				
	stop here. The organization qualifies	as a publicly supp	orted organization	L			ightharpoons X			
b	33 1/3% support test - 2011. If the	organization did no	t check a box on l	ine 13 or 16a, and	l line 15 is 33 1/3%	or more, check th	nis box			
	and stop here. The organization qual	lifies as a publicly s	supported organiz	ation .			. ▶□			
17a	10% -facts-and-circumstances tes	t - 2012. If the org	anization did not d	check a box on line	e 13, 16a, or 16b, a	and line 14 is 10%	or more,			
	and if the organization meets the "fac	ts-and-circumstan	ces" test, check tl	nis box and stop h	ere. Explain in Pa	rt IV how the organ	nization			
	meets the "facts-and-circumstances"	test. The organiza	tion qualifies as a	publicly supported	d organization					
b	10% -facts-and-circumstances tes	t - 2011. If the org	anization did not d	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or			
	more, and if the organization meets the	he "facts-and-circu	mstances" test, cl	heck this box and	stop here. Explair	in Part IV how the	•			
	organization meets the "facts-and-circ	cumstances" test.	The organization of	qualifies as a publi	cly supported orga	anization	▶ □			
18	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17t	b, check this box a	ind see instruction	s >			
					Sche	dule A (Form 990	or 990-EZ) 2012			

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support	,,,					
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and				1	1	,,
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,	-					
	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that		· ·				_
•	are not an unrelated trade or bus-						
	iness under section 513						
		-					
4	Tax revenues levied for the organ-	İ					
	ization's benefit and either paid to	I				}	
	or expended on its behalf						
5	The value of services or facilities	I					
	furnished by a governmental unit to	I					
	the organization without charge	<u> </u>				ļ	
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and				İ		
	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
_8	Public support (Subtract line 7c from line 6)						
	tion B. Total Support			•			
Cale	ndar year (or fiscal year beginning ın) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources		1				
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
_	Add lines 10a and 10b				 		
	Net income from unrelated business				 		
	activities not included in line 10b,						
	whether or not the business is						
12	regularly carried on Other income. Do not include gain				 	 	
•-	or loss from the sale of capital						
40	assets (Explain in Part IV.)						
	Total support (Add lines 9, 10c, 11, and 12)		<u> </u>		<u></u>	<u> </u>	
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth t	ax year as a section	on 501(c)(3) organiz	zation,
<u> </u>	check this box and stop here	- 0	·				
	tion C. Computation of Publ					 	
	Public support percentage for 2012 (I			olumn (f))		15	<u>%</u>
	Public support percentage from 2011					16	%
	tion D. Computation of Inves						
17	Investment income percentage for 20	12 (line 10c, colur	nn (f) divided by lin	e 13, column (f))		17	<u>%</u>
	Investment income percentage from 2			•		18	<u>%</u>
19a	33 1/3% support tests - 2012. If the	organization did n	ot check the box	on line 14, and line	e 15 is more than	33 1/3%, and line 1	17 is not
	more than 33 1/3%, check this box a						. ▶□
b	33 1/3% support tests - 2011. If the						and
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						>
							

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

2012
Open to Public Inspection

Name of the organization

Highland Park Community Foundation

Employer identification number

	Highland Park Comm		36-3819818
Pa	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds or <i>I</i>	Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	4	
2	Aggregate contributions to (during year)	12,031.	
3	Aggregate grants from (during year)	9,700.	
4	Aggregate value at end of year	161,170.	
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised ful	nds
	are the organization's property, subject to the organization's		X Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be used	only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose confe	erring
	impermissible private benefit?		X Yes No
Pa	t II Conservation Easements. Complete if the or	ganization answered "Yes" to Form 990, Part IV	
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (e.g., recreation or	education) Preservation of an historica	ally important land area
	Protection of natural habitat	Preservation of a certified h	nistoric structure
	Preservation of open space		•
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a c	conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the orga	inization during the tax
	year ▶		
4	Number of states where property subject to conservation ea	sement is located >	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	, and enforcing conservation easements during	the year ▶
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during the y	ear > \$
8	Does each conservation easement reported on line 2(d) about	ve satisfy the requirements of section 170(h)(4)((B)(ı)
	and section 170(h)(4)(B)(ii)?		L Yes No
9	In Part XIII, describe how the organization reports conservat		
	include, if applicable, the text of the footnote to the organization	tion's financial statements that describes the o	rganization's accounting for
	conservation easements.		
Pa	Organizations Maintaining Collections of		Similar Assets.
	Complete if the organization answered "Yes" to Form		
та	If the organization elected, as permitted under SFAS 116 (AS		
	historical treasures, or other similar assets held for public ex		f public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descr		
b	If the organization elected, as permitted under SFAS 116 (AS		
	treasures, or other similar assets held for public exhibition, e	ducation, or research in furtherance of public se	ervice, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		► \$ ► \$
_	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		, provide
	the following amounts required to be reported under SFAS 1	116 (ASC 958) relating to these items:	. .
a	Revenues included in Form 990, Part VIII, line 1	•	► \$ ► \$
ь	Assets included in Form 990, Part X		\$

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Schedule D (Form 990) 2012

		<u>d Park Com</u>				<u> 36–38</u>			<u>ige 2</u>
Par	t III Organizations Maintaining C								
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that are a	signific	ant use of its	collection	items	3
	(check all that apply):								
а	Public exhibition	d	Loan or exc	hange programs					
b	Scholarly research	е	Other						
c	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	n how they further th	ne organization's exc	empt p	urpose in Par	t XIII.		
5	During the year, did the organization solicit of	r receive donations of	of art, historical trea	sures, or other simila	ar asse	s			_
	to be sold to raise funds rather than to be ma						Yes		No
Par	Escrow and Custodial Arran reported an amount on Form 990, Pa	gements. Complet rt X, line 21.	ete if the organizatio	n answered "Yes" to	Form	990, Part IV,	line 9, or		
1a	Is the organization an agent, trustee, custod	an or other intermed	liary for contribution	s or other assets no	t includ	led			
	on Form 990, Part X?		·		_		Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing table:						
	•	•	-				Amount		
С	Beginning balance				1	С			
d	Additions during the year				1	d			
е	Distributions during the year				1	e			
f									
2a	-						Yes		No
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII]
Par	t V Endowment Funds. Complete	f the organization an	swered "Yes" to Fo	rm 990, Part IV, line	10				
		(a) Current year	(b) Prior year	(c) Two years back	(d) Th	ree years back	(e) Four	ye <u>ars</u>	back
1a	Beginning of year balance	2,594,772.	2,664,604.	2,447,744.		2,147,760.	2	713,	112.
b	Contributions	166,608.	175,608.	149,948.		166,012.		140,	193.
С	Net investment earnings, gains, and losses	302,617.	<97,971.	228,166.		269,952.		373,	088.
d	Grants or scholarships	133,400.	114,350.	122,000.		117,600.		316,	533.
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses 32,544. 33,119. 39,254. 18,380.						15,	924.	
9	g End of year balance 2,898,053. 2,594,772. 2,664,604. 2,447,744.					2,	147,	760.	
2									
а	a Board designated or quasi-endowment ► 94.50 %								
b	b Permanent endowment ► 3.90 %								
C	Temporarily restricted endowment ▶	1.60 %							
	The percentages in lines 2a, 2b, and 2c should equal 100%.								
За	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	nd administered for	the org	anization	-		
	by:							Yes	No
	(i) unrelated organizations						3a(i)		<u>X</u>
	(ii) related organizations		-				3a(ii)		_ <u>X</u> _
ь	If "Yes" to 3a(II), are the related organizations	•					3ь		
4	Describe in Part XIII the intended uses of the								
Par		nent. See Form 990	, Part X, line 10.	 -					
	Description of property	(a) Cost or o basis (investing	, , ,		Accumi eprecia		(d) Bool	value	€
1a	Land .								
b	Buildings								
c	Leasehold improvements								
d	Equipment								
e	Other								
Total	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, column (B), line 1	0(c).)		•			0.

Schedule D (Form 990) 2012

232053 12-10-12

Scher	lule D (Form 990) 2012 Highland Park Community Fo	unda	tion	36-3	8819818 Page 4
Par					OISOIO Fage 4
1	Total revenue, gains, and other support per audited financial statements			1	469,225.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		•		
	Net unrealized gains on investments	2a	216,795.		
b	Donated services and use of facilities	2b		1	
С	Recoveries of prior year grants	2c		1	
d	Other (Describe in Part XIII.)	2d		1	
	Add lines 2a through 2d		' 	2e	216,795.
3	Subtract line 2e from line 1			3	252,430.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		•		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b		1	
c	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	252,430.
Par	XII Reconciliation of Expenses per Audited Financial Statem	ents V	Vith Expenses per	Retur	
1	Total expenses and losses per audited financial statements			1	165,944.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b		1	
c	Other losses	2c		1	
d	Other (Describe in Part XIII.)	2d]	
е	Add lines 2a through 2d			2e	0.
3	Subtract line 2e from line 1			3	165,944.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b]	
C	Add lines 4a and 4b			4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	165,944.
Par	XIII Supplemental Information				
Comp	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part	II, lines	1a and 4; Part IV, lines 1	b and 2	b; Part V, line 4, Part
	2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to			tion.	
Par	t V, line 4: Grants to Charitable Organiz	<u>atio</u>	ns		
— Par	t X, Line 2: The Foundation's federal exc	ise	tax returns	have	e not
_					

Part X, Line 2: The Foundation's federal excise tax returns have not been examined by the tax authorities for the last three years, which remain as the years that are generally still subject to examination.

Management realizes that there may be differences of opinion relating to interpretations taken by taxing authorities and that certain tax

jurisdictions may require filings which have not been made. However,

Schedule D (Form 990) 2012

Schedule D (Form 990) 2012 Highland Park Community Foundation [Part XIII Supplemental Information (continued)	36-3819818 Page 5
there have not been any material claims made by any taxing	authorities
that have not been appropriately defended or provided for	in the financial
statements, nor is management aware of any specific uncert	ain tax
positions that currently exist.	
	

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ▶ Attach to Form 990. Highland Park Community Foundation Name of the organization Department of the Treasury Internal Revenue Service SCHEDULEI (Form 990)

OMB No 1545-0047	2012	Open to Public
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Employer identification number 36-3819818Inspection

Part 1 General Information on Grants and Assistance	nd Assistance							
1 Does the organization maintain records to substantiate the amount of	to substantiate the	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or ass	the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection	\ \	
criteria used to award the grants or assistance? 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	stance? ocedures for mon!	toring the use of grant i	funds in the United	d States.			A Tes No	0
ΨI	Governments and	d Organizations in the	United States. C	omplete if the orga	nization answered "Y	es" to Form 990, Part IV	/, line 21, for any	1
recipient that received more than \$5,000 Part II can be duplicat	\$5,000 Part II can	be duplicated if addition	ted if additional space is needed	pa				- 1
1 (a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, EMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	1
Family Services of South Lake County - 777 Central Avenue - Hichland Park IL 60035	36-2167063	501(c)(3)	20 500.	0				
Park Comman Pare Cente - Highlar	36-2187792	501(c)(3)	15,000.	0				I 1
Con Child Care (Laurel Avenue	36-2708769	501(c)(3)	11,000.	.0				
Park High #113) - 1 ghland Pa	36-6004892		10,500.	0				
Ly Network Laurel Avenue Land Park, IL 6003	36-2884042		10,000.	0.				
Zacharias Sexual Abuse Center 4275 Old Grand Avenue	36-3314076	501(2)(3)	000	0				
	1 2		listed in the line 1 table					1

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

232101 12-18-12

Schedule I (Form 990) (2012)

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Page 1

nc	izations in the United States (Schedule I (Form 990), Part II.)
Highland Park Community Foundation	ther Assistance to Governments and Organizations in
Highland Park	of Grants and Other Assistance
Schedule I (Form 990)	Part II Continuation of

Fait ii Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule (Form 99U), Part II.)	Assistance to Go	vernments and Organ	nizations in the U	nited States (Sche	dule I (Form 990), Par	t II.)	
(a) Name and address of organization or government	(p) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Big Brothers/Big Sisters of Lake County - 560 W Lake Street - Chicago, IL 60661	36-2681212	501(c)(3)	.000,8	0			
Catholic Charities, HP Senior Services - 116 N Lincoln Ave - Round Lake, IL 60073	53-0196620	501(c)(3)	6,000.	°			
College Bound Opportunities 2033 N Milwaukee Ave, Suite 546 Riverwoods, IL 60015	20-4811544	501(c)(3)	.000,8	ó			
Friendship Circle 2095 Landwehr Road Northbrook, IL 60062	20-4884060	501(c)(3)	5,400.	°°			
Others			31,000.	0.			
							Schedule I (Form 990)

Page 2 (f) Description of non-cash assistance 36-3819818 Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (d) Amount of non-cash assistance Highland Park Community Foundation (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Schedule I (Form 990) (2012) Part III

Schedule I (Form 990) (2012)

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2012
Open to Public Inspection

Name of the organization Employer identification number Highland Park Community Foundation 36-3819818 Form 990, Part VI, Section B, line 11: Reviewed by President and Treasurer and discussed with preparing accountant Form 990, Part VI, Section C, Line 19: Available upon request

Form **8868**

(Rev. January 2013)

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 a	re filing for an Automatic 3-Month Extension, comple	te only Pa	rt I and check this box		_	$\triangleright X$
If you a	re filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of	this form).		
Do not co	omplete Part II unless you have already been granted	an automa	itic 3-month extension on a previous	sty filed Fo	m 8868.	
Electroni	c filing (e-file). You can electronically file Form 8868 if	ou need a	a 3-month automatic extension of tin	ne to file (6	months for	a corporation
required t	o file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically fi	ile Form 88	68 to reque	st an extension
	file any of the forms listed in Part I or Part II with the ex-					
	Benefit Contracts, which must be sent to the IRS in pag	•	*			
	irs gov/efile and click on e-file for Charities & Nonprofits		(
Part I	Automatic 3-Month Extension of Time		submit original (no copies ne	eded).		
	tion required to file Form 990-T and requesting an autor					
Part I only						▶ □
All other c	corporations (including 1120-C filers), partnerships, REM ome tax returns	IICs, and t	rusts must use Form 7004 to reques	st an exten	sion of time	· •
Type or	Name of exempt organization or other filer, see instru	ctions.		Employer	ıdentıficatıo	n number (EIN) or
print	 Highland Park Community Fo	undati	ion		36-38	19818
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, s			Social se	curity number	
filing your return See Instructions P.O. Box 398 City, town or post office, state, and ZIP code For a foreign address, see instructions. Highland Park, IL 60035						
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 1
A 1: 4:			I A!: Ai			
Application	on	Return	Application			Return
Is For		Code	Is For			Code
	or Form 990-EZ	01	Form 990-T (corporation)			07
Form 990		02	Form 1041-A			08
	0 (individual)	03	Form 4720			09
Form 990		04	Form 5227			10
	-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
Form 990	-T (trust other than above)	06	Form 8870			12
	Carol Caris	2110	Highland Dagle II	6002	_	
	books are in the care of \blacktriangleright 610 Laurel Average No. \blacktriangleright 847–831–4558	ilue –		0003	<u> </u>	
-			FAX No •			. □
	organization does not have an office or place of busines					
_	s for a Group Return, enter the organization's four digit	-				
	. If it is for part of the group, check this box				ers the exte	nsion is for.
1 Tree	quest an automatic 3-month (6 months for a corporation	•	•		-	
		ot organiza	tion return for the organization name	ed above.	The extension	on
	or the organization's return for:					
	x calendar year 2012 or					
	tax year beginning	, an	id ending		- ·	
2 If th	ne tax year entered in line 1 is for less than 12 months, on the control of the c	check reas	on. Initial return	Final retur	n	
	als application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any	2-	¢	0.
	irefundable credits. See instructions. his application is for Form 990-PF, 990-T, 4720, or 6069,	ontor on:	refundable gradite and	3a		
	• •	•		25	•	0.
	mated tax payments made. Include any prior year overp			3b		
	ance due. Subtract line 3b from line 3a. Include your pa				•	0.
	using EFTPS (Electronic Federal Tax Payment System).			3c	S source	
	If you are going to make an electronic fund withdrawal or Privacy Act and Paperwork Reduction Act Notice,			<u> </u>		3868 (Rev 1.2013)
	o, i illust mot una i apelwoin neullellon met Nelles.	J 111311	uvv		1 01111 0	~~~ (11CV 17CV)

223841 01-21-13 Form 8868 (Rev. January 2013) Application for Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

OMB No. 1545-1709

Form 8868 (Rev. 1-2013)

Internal Revenue Service $\triangleright X$ 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 Automatic 3-Month Extension of Time. Only submit original (no copies needed) A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Type or Name of exempt organization or other filer, see instructions Employer identification number (EIN) or print Highland Park Community Foundation 36-3819818 File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) filing your P.O. Box 398 return See instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions Highland Park, IL60035 Enter the Return code for the return that this application is for (file a separate application for each return).... Application Return Application Return Is For Code Is For Code orm 990 or Form 990-EZ 01 Form 990-T (corporation) MAY 1 3 2013 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 09 Form 5227 Form 990-PF 10 04 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 12 Carol Caris The books are in the care of ▶ 610 Laurel Avenue - Highland Park, IL 60035 Telephone No. ► 847-831-4558 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until August 15, 2013 , to file the exempt organization return for the organization named above. The extension is for the organization's return for ► X calendar year 2012 or tax year beginning , and ending If the tax year entered in line 1 is for less than 12 months, check reason. Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions За 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 3ь Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,

223841 01-21-13

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.

by using EFTPS (Electronic Federal Tax Payment System) See instructions.

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