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## Form **990-PF**

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

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

OMB No 1545-0052 Open to public Inspection

|                                       |             | nt of the Treasury                | Nasa 3   | The foundation me                              | ireat         | ed as a F                       | rivate            | Founda        | ition               | rtina roaiuro | manta                                 | 2012   | _             |
|---------------------------------------|-------------|-----------------------------------|--|--|---------------|---------------------------------|-------------------|---------------|---------------------|---------------|---------------------------------------|--|---------------|
| _                                     |             | ndar vear 2012                    | or tax year begi                               | The foundation ma                              | Y 1,          | 2012                            | OI UIIS I         | and e         |                     |               | 0, 2013                               | Open to public Inspe                             | action        |
|                                       |             | f foundation                      | oi tax year begi                               | 14TZ   | <u> </u>      | 2012                            | <del></del>       | , and c       | ionig               |               | r identification                      | <del></del>                                      |               |
| _                                     | <b></b>     | OD DANT                           |  | TM3010 0                                       | OIDID:        | N T () Y                        |                   |               |                     | 26            | 2002025                               | 7  |               |
|                                       |             |                                   |  | ITABLE F                                       |               |                                 |                   |               | Room/suite          | B Telephon    | 3882837                               |  |               |
|                                       |             |                                   | AVENUE   |  | 561 addi 655) |                                 |                   |               | TIOOTI SUITE        | -             | - <b>484-8</b> 9                      | 999  |               |
|                                       |             | town, state, and                  |  |  |               |                                 |                   |               |                     | i             |                                       | pending, check here                              |               |
| _ (                                   | LE          | N ELLYN                           | , IL 6   | 0137   |               |                                 |                   |               |                     |               |                                       | <b>,</b>   |               |
| G                                     | Checl       | k all that apply:                 | Initia   | ıl return                                      |               | Initial returi                  | n of a for        | rmer public o | harity              | D 1 Foreig    | n organization                        | s, check here                                    |               |
|                                       |             |                                   |  | return   | <u> </u>      | Amended re                      |                   |               |                     | 2. Foreign    | organizations m                       | eeting the 85% test, omputation                  | $\overline{}$ |
|                                       | `hoo!       | ly hand of overen                 |  | ess change                                     |               | Name chan                       | <u> </u>          |               | <del></del>         | check h       | nere and attach co                    | omputation                                       | ·Ш            |
| "-                                    | _           | k type of organiz                 | alion<br>) nonexempt ch                        | Section 501(c)(3)                              |               | rivate rounda<br>ixable private |                   | tion          |                     |               |                                       | atus was terminated )(A), check here             |               |
| I F                                   |             |                                   | assets at end of                               |  |               |                                 |                   | Accr          | ual                 |               | , .,                                  | 60-month termination                             |               |
|                                       |             | Part II, col (c),                 | line 16)                                       |  | Other (spe    | ecify)                          |                   |               |                     |               |                                       | )(B), check here                                 | .└            |
|                                       | \$          | <b>_</b>                          |  | 59 . (Part I, co                               | olumn (d)     | must be on                      | cash b            | asıs.)        | _                   |               |                                       |  |               |
| P                                     | art         | Analysis of R<br>(The total of am | levenue and Expounts in columns (b             | enses<br>), (c), and (d) may not<br>olumn (a)) | (a            | ) Revenue an<br>enses per bo    | id                | (b) Net in    |                     |               | justed net                            | (d) Disbursements for charitable purpos          | ses           |
|                                       |             |                                   |  |  | ext           | renses per ut                   | JUKS              | inco          | mile                |               | come                                  | (cash basis only)                                |               |
|                                       | 1 2         |                                   | gifts, grants, etc                             | required to attach Sch B                       |               |                                 |                   |               |                     | N,            | /A                                    |  |               |
|                                       | 3           |                                   | gs and temporary                               | required to attack Schi b                      |               | <del></del>                     | 11.               | <del></del>   | 11.                 | <u> </u>      |                                       |  |               |
|                                       | 4           |                                   | s<br>Interest from se                          | curities                                       |               | 20,6                            |                   | 2             | 0,659.              |               |                                       | <del>                                     </del> |               |
| 2013                                  | 58          | Gross rents                       |  |  |               | •                               |                   |               |                     |               |                                       |  |               |
| <b>2</b>                              | t           | Net rental income                 | e or (loss)                                    |  |               |                                 |                   |               |                     |               |                                       |  |               |
| ලෙ ද                                  | 68          | Net gain or (loss)                | from sale of assets                            |  |               | 44,5                            | 63.               |               |                     |               |                                       |  |               |
| SEP 2<br>Revenue                      | _t          | assets on title oa                |  | 140,044.                                       | -             |                                 |                   |               | 1 563               |               |                                       |  |               |
| SE SE                                 | 8           | Net short-term                    | ncome (from Part IV                            | /, line 2)                                     | -             |                                 | -+                | 4             | 4,563.              |               |                                       |  |               |
|                                       | 9           | Income modifi                     | . •  |  |               |                                 | $\overline{}$     |               |                     |               |                                       |  |               |
|                                       | 108         | Gross sales less                  |  |  | $\rightarrow$ |                                 |                   |               |                     |               |                                       |  |               |
| Z                                     |             | Less Cost of go                   |  | EIVEU  |               |                                 |                   |               |                     |               | · · · · · · · · · · · · · · · · · · · |  |               |
| SCANNED                               | 0           | Gross profit of                   | التحتاا  |  | <b>Ø</b>      |                                 | $\longrightarrow$ |               |                     |               |                                       |  |               |
| Ŵ                                     | 11          |                                   |  | 0 & 5013                                       |               | 65,2                            | 22                |               | 5,233.              |               |                                       |  |               |
|                                       | 12          |                                   | setthrough 11                                  | tristand at 157                                |               | 05,4                            | 0.                | 0             | <u>3,∡33.</u><br>0. |               | <del>-</del>                          |  | 0.            |
|                                       | 14          | Other employe                     | officers directors                             | ages   |               |                                 | <del>  </del>     |               |                     | <u> </u>      |                                       |  |               |
|                                       | 15          |                                   | , employee bene                                |  |               |                                 |                   |               |                     |               |                                       |  |               |
| Ses                                   | 168         | a Legal fees                      |  |  |               |                                 |                   |               |                     |               |                                       |  |               |
| Der.                                  | .  t        | Accounting fee                    |  | STMT 1   |               | 1,6                             | 25.               |               | <u>1,625.</u>       |               |                                       |  | 0.            |
| Ω<br>e                                | 1.0         | Other professi                    | onal fees                                      |  |               |                                 |                   |               |                     | -             |                                       |  |               |
| Operating and Administrative Expenses | 17          | Interest<br>Taxes                 |  | STMT 2   |               | 2                               | 42.               |               | 0.                  |               | _                                     |  | 0.            |
| T S                                   | 19          | Depreciation a                    | nd depletion                                   | DIMI 2   |               |                                 | 42.               |               |                     |               |                                       |  |               |
| E                                     | 20          | Occupancy                         |  |  |               |                                 |                   |               |                     |               | •                                     |  |               |
| Ad                                    | 21          | Travel, confere                   | ences, and meeti                               | ngs  |               | _                               |                   |               |                     |               |                                       |  |               |
| and                                   | 22          | Printing and p                    |  |  |               | -                               |                   |               |                     |               |                                       |  |               |
| j.                                    | 23          | Other expense                     |  | STMT 3   |               |                                 | 15.               |               | 15.                 |               |                                       | <del> </del>                                     | 0.            |
| er a                                  | 24          | -                                 | i <b>g and administ</b> i<br>d lines 13 throug |  |               | 1,8                             | 82                |               | 1,640.              | }             |                                       |  | 0.            |
| ő                                     | 25          | •                                 | gifts, grants pai                              |  |               | 37,1                            |                   |               | <u> </u>            |               |                                       | 37,1   |               |
|                                       | 1           |                                   | s and disburser                                |  |               |                                 |                   |               |                     |               |                                       |  |               |
|                                       |             | Add lines 24 a                    | nd 25  |  |               | 39,0                            | 51.               |               | 1,640.              |               |                                       | 37,1   | <u>69.</u>    |
|                                       | 27          | Subtract line 2                   | 6 from line 12:                                |  | Ē             |                                 |                   |               |                     |               |                                       |  |               |
|                                       | 1           |                                   | e over expenses ar                             |  |               | 26,1                            | 82.               |               | 2 502               | -             |                                       | <del> </del>                                     |               |
|                                       | 1           |                                   | nt income (if nega<br>ncome (if negative       |  |               |                                 |                   |               | <u>3,593.</u>       | NT NT         | /A                                    | <u> </u>   |               |
| 223                                   | 501<br>5-12 |                                   |  | tion Act Notice, se                            | e instruct    | ions                            | <u></u>           |               |                     |               |                                       | Form <b>990-PF</b> (                             | (2012)        |

| For                         | m 99          | 0-PF (2012) REESE FAMILY CHARITABLE  |                    |                | 3882837 Page 2            |
|-----------------------------|---------------|--|--------------------|----------------|---------------------------|
| P                           | art           | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year  | End of         | <del></del>               |
| =                           |               | Column Should be for the Orytea amounts only   | (a) Book Value     | (b) Book Value | (c) Fair Market Value     |
|                             | 1             | Cash - non-interest-bearing  | 10 550             | - 40 750       | 40 850                    |
|                             | 1             | Savings and temporary cash investments   | 19,753.            | 40,750.        | 40,750.                   |
|                             | 3             | Accounts receivable  | :                  |                |                           |
|                             |               | Less: allowance for doubtful accounts  |                    | <del></del>    |                           |
|                             | 4             | Pledges receivable ►  Less: allowance for doubtful accounts ►  |                    |                |                           |
|                             | 5             | Grants receivable  | -                  |                | <del></del>               |
|                             | 6             | Receivables due from officers, directors, trustees, and other  |                    |                |                           |
|                             | 0             | disqualified persons   |                    |                |                           |
|                             | 7             | Other notes and loans receivable   |                    | 1              |                           |
|                             | ′             | Less: allowance for doubtful accounts  |                    |                |                           |
| Ø                           | 8             | Inventories for sale or use  |                    |                |                           |
| Assets                      | 9             | Prepaid expenses and deferred charges  |                    |                |                           |
| As                          | _             | Investments - U.S. and state government obligations  |                    |                |                           |
|                             |               | Investments - corporate stock STMT 4   | 574,255.           | 568,997.       | 824,349.                  |
|                             |               | Investments - corporate bonds  |                    |                |                           |
|                             |               | Investments - land, buildings, and equipment basis   |                    |                |                           |
|                             |               | Less accumulated depreciation  |                    |                |                           |
|                             | 12            | Investments - mortgage loans   |                    |                |                           |
|                             | 13            | Investments - other STMT 5   | 0.                 | 10,445.        | 10,660.                   |
|                             | 14            | Land, buildings, and equipment: basis ▶  |                    |                |                           |
|                             |               | Less accumulated depreciation  |                    |                |                           |
|                             | 15            | Other assets (describe ►)  |                    |                |                           |
|                             |               |  |                    |                |                           |
|                             | $\overline{}$ | Total assets (to be completed by all filers)   | 594,008.           | 620,192.       | <u>875,759.</u>           |
|                             | 17            | Accounts payable and accrued expenses  |                    |                |                           |
|                             | 18            | Grants payable   |                    |                |                           |
| ies                         | 19            | Deferred revenue   |                    |                |                           |
| Liabilities                 | 20            | Loans from officers, directors, trustees, and other disqualified persons                                       |                    |                |                           |
| Ē                           | 21            | Mortgages and other notes payable  |                    |                |                           |
|                             | 22            | Other liabilities (describe )  |                    |                |                           |
|                             | 22            | Total liabilities (add lines 17 through 22)  | 0.                 | 0.             |                           |
| _                           | 23            | Foundations that follow SFAS 117, check here   | 0.                 |                |                           |
|                             |               | and complete lines 24 through 26 and lines 30 and 31.  |                    |                |                           |
| es                          | 24            | Unrestricted   |                    |                |                           |
| and                         | 25            | Temporarily restricted   |                    |                |                           |
| Bal                         | 26            | Permanently restricted   |                    |                |                           |
| Net Assets or Fund Balances |               | Foundations that do not follow SFAS 117, check here  |                    |                |                           |
| Ę                           |               | and complete lines 27 through 31   |                    |                |                           |
| S O                         | 27            | Capital stock, trust principal, or current funds   | 0.                 | 0.             |                           |
| sse                         | 28            | Paid-in or capital surplus, or land, bldg., and equipment fund   | 594,008.           | 620,192.       |                           |
| ţ                           | 29            | Retained earnings, accumulated income, endowment, or other funds   | 0.                 | 0.             |                           |
| Š                           | 30            | Total net assets or fund balances  | 594,008.           | 620,192.       |                           |
|                             |               |  | F04 000            | 620 102        |                           |
| _                           | 31            | Total liabilities and net assets/fund balances   | 594,008.           | 620,192.       |                           |
| F                           | art           | III Analysis of Changes in Net Assets or Fund B  | alances            |                |                           |
| 1                           | Tota          | net assets or fund balances at beginning of year - Part II, column (a), line                                   | 30                 | 1 1            |                           |
| •                           |               | st agree with end-of-year figure reported on prior year's return)  |                    | 1              | 594,008.                  |
| 2                           |               | r amount from Part I, line 27a   |                    | 2              | 26,182.                   |
|                             |               | r increases not included in line 2 (itemize)   ROUNDING  |                    | 3              | 2.                        |
| 4                           |               | lines 1, 2, and 3  |                    | 4              | 620,192.                  |
| 5                           | Decr          | eases not included in line 2 (itemize)   |                    | 5              | 0.                        |
| <u>6</u>                    | Tota          | net assets or fund balances at end of year (line 4 minus line 5) - Part II, co                                 | olumn (b), line 30 | 6              | 620,192.                  |
|                             |               |  |                    |                | Form <b>990-PF</b> (2012) |

| Part IV   Capital Gains  | and Lo                      | sses for Tax on In                                       | vestment                              | Income                             |               |                            |            |                          |                            | ,                                  |
|--|-----------------------------|--|---------------------------------------|------------------------------------|---------------|----------------------------|------------|--------------------------|----------------------------|------------------------------------|
| (a) List and dea<br>2-story brick  | scribe the ki<br>warehouse; | nd(s) of property sold (e.g.<br>or common stock, 200 shs | , real estate,<br>. MLC Co.)          |                                    | I . b         | low ac<br>- Purc<br>- Dona | nase i     | (c) Date a<br>(mo., da   | cquired<br>y, yr.)         | (d) Date sold<br>(mo., day, yr.)   |
| 1a 3,000 SHS JPM   |                             |  |                                       |                                    |               |                            |            | VARIO                    | บร                         | 03/20/13                           |
| b CALL JPMORGAN  | MAR                         | 46 EXP 03/16   | /13                                   |                                    |               |                            |            | VARIO                    | OUS                        | 12/24/12                           |
| <u>c</u>   |                             |  |                                       |                                    |               |                            |            |                          |                            |                                    |
| <u>d</u>   |                             |  |                                       |                                    |               |                            |            |                          |                            |                                    |
| <u>e</u>   | 1                           |  | · · · · · · · · · · · · · · · · · · · |                                    |               |                            |            |                          |                            |                                    |
| (e) Gross sales price  |                             | Depreciation allowed (or allowable)                      |                                       | t or other basis<br>xpense of sale |               |                            |            | (h) Ga<br>(e) plus       | in or (loss<br>(f) minus   | (g)                                |
| a 137,133  | •                           |  |                                       | 95,48                              | <u> 11.</u>   |                            |            |                          |                            | 41,652.                            |
| b 2,911  | •                           |  |                                       |                                    |               |                            |            |                          |                            | 2,911.                             |
| <u>c</u>   |                             |  | -                                     |                                    |               |                            |            |                          |                            |                                    |
| <u>d</u>   | _                           |  |                                       |                                    |               | _                          |            |                          |                            |                                    |
| Complete only for assets show  | TING GOID ID                | oolumn (h) and owned by t                                | he foundation                         | on 12/21/60                        |               |                            |            | 0 (0-                    | .1 (h)                     |                                    |
| Complete only for assets show  |                             | <del>- ' '</del>   | _                                     | cess of col. (1)                   |               |                            | col.       | Gains (Co<br>(k), but no | or (n) gain<br>ot less tha | minus<br>n -0-) <b>or</b>          |
| (i) F.M.V. as of 12/31/69  | 1 '                         | (j) Adjusted basis<br>as of 12/31/69                     |                                       | col. (j), if any                   |               |                            |            | Losses (                 | from col. (                | (h))                               |
|  |                             |  |                                       | · · · · · ·                        |               |                            |            |                          |                            | <i>A</i> 1 652                     |
| a<br>b   |                             |  |                                       |                                    |               |                            |            |                          |                            | 41,652.<br>2,911.                  |
| C  | +                           |  |                                       |                                    |               | _                          |            |                          |                            | 2,711.                             |
| <u>d</u>   |                             | -  |                                       |                                    |               |                            |            |                          |                            |                                    |
| e  |                             | -  |                                       |                                    |               |                            |            |                          |                            |                                    |
|  | •                           | ∫ If gain, also enter                                    | ın Part I. line                       | 7                                  | 7             |                            |            |                          |                            |                                    |
| 2 Capital gain net income or (net  | capital loss                |  |                                       |                                    | <b> </b>      | 2                          |            |                          |                            | 44,563.                            |
| 3 Net short-term capital gain or (   | loss) as defi               |  |                                       |                                    |               |                            |            |                          |                            |                                    |
| If gain, also enter in Part I, line  |                             |  | u (0).                                |                                    | J             |                            |            |                          |                            |                                    |
| If (loss), enter -0- in Part I, line   | 8                           | ,  |                                       |                                    |               | 3                          |            |                          | N/A                        | <u> </u>                           |
| <del></del>  |                             | Section 4940(e) for                                      |                                       |                                    |               |                            | nent Inc   | ome                      |                            |                                    |
| (For optional use by domestic priv   | ate foundati                | ons subject to the section 4                             | 940(a) tax on                         | net investment ir                  | ncome         | e.)                        |            |                          |                            |                                    |
| If section 4940(d)(2) applies, leave   | e this part bl              | ank.   |                                       |                                    |               |                            |            |                          |                            |                                    |
|  |                             |  | _                                     |                                    |               |                            |            |                          |                            |                                    |
| Was the foundation liable for the s  |                             |  |                                       | •                                  | riody         |                            |            |                          |                            | Yes X No                           |
| If "Yes," the foundation does not qualified the appropriate amount of the second secon |                             |  |                                       |                                    | ntries        |                            |            |                          |                            |                                    |
| (a)  | in each colu                |  | isti dottoris pe                      | iore making any c                  |               |                            |            | 1                        |                            | (d)<br>oution ratio                |
| Base periód years<br>Calendar year (or tax year begin  | יטוטט וטי                   | (b) Adjusted qualifying dist                             | ributions                             | Net value of no                    | (c)<br>onchai |                            | use assets | 1 1                      |                            | oùtión ratio<br>vided by col. (c)) |
| 2011   | ining in/                   |  | 8,009.                                |                                    |               | 72                         | 5,333      |                          | coi. (b) ui                | .052402                            |
| 2010   |                             |  | 6,600.                                |                                    |               |                            | 4,178      |                          |                            | .048530                            |
| 2009   |                             |  | 7,093.                                |                                    |               |                            | 0,376      |                          |                            | .050100                            |
| 2008   |                             |  | 5,869.                                |                                    |               |                            | 2,708      |                          |                            | .054954                            |
| 2007   |                             |  | 5,403.                                |                                    |               |                            | 5,613      |                          |                            | .055667                            |
|  |                             |  |                                       |                                    |               |                            | •          |                          |                            |                                    |
| 2 Total of line 1, column (d)  |                             |  |                                       |                                    |               |                            |            | 2                        |                            | .261653                            |
| 3 Average distribution ratio for th  | ne 5-year ba                | se period - divide the total c                           | on line 2 by 5,                       | or by the number                   | r of ye       | ars                        |            |                          |                            |                                    |
| the foundation has been in exis  | stence if less              | than 5 years   |                                       |                                    |               |                            |            | 3                        |                            | .052331                            |
|  |                             |  |                                       |                                    |               |                            |            |                          |                            |                                    |
| 4 Enter the net value of nonchari  | table-use as                | sets for 2012 from Part X, I                             | ine 5                                 |                                    |               |                            |            | 4                        |                            | 754,699.                           |
|  |                             |  |                                       |                                    |               |                            |            |                          |                            |                                    |
| 5 Multiply line 4 by line 3  |                             |  |                                       |                                    |               |                            |            | 5                        | _                          | 39,494.                            |
|  |                             |  |                                       |                                    |               |                            |            |                          |                            |                                    |
| 6 Enter 1% of net investment inc   | ome (1% of                  | Part I, line 27b)  |                                       |                                    |               |                            |            | 6                        |                            | 636.                               |
|  |                             |  |                                       |                                    |               |                            |            |                          |                            |                                    |
| 7 Add lines 5 and 6  |                             |  |                                       |                                    |               |                            |            | 7                        | <del></del>                | 40,130.                            |
| 8 Enter qualifying distributions fr  | om Part VII                 | line 4   |                                       |                                    |               |                            |            | 8                        |                            | 37,169.                            |
| If line 8 is equal to or greater th  |                             |  | 1h and some                           | late that part war                 | 10 0 f        | 0/. tax:                   | rata       |                          |                            | 3,,103.                            |
| See the Part VI instructions.  | iaii iiiie 7, Ci            | IGUA UIG DUX III FAIT VI, IIIIE                          | ib, and Comp                          | nete mat haft nell                 | ıyal          | /o ldX                     | ait.       |                          |                            |                                    |

|           | art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4   | 36-3  | 8828    | 37             | <u> </u>     | Page 4     |
|-----------|---|-------|---------|----------------|--------------|------------|
|           |   | 948 - | see ins | truc           | TIOI         | ns)        |
| 18        | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.   |       |         |                |              |            |
|           | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)   |       |         | _              | _            |            |
| b         | Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%  | 1     |         | 1              | <u>, 2</u>   | 72.        |
|           | of Part I, line 27b   |       |         |                |              |            |
|           | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).  |       |         |                |              |            |
|           | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)   | 2     |         |                |              | <u>0.</u>  |
| 3         | Add lines 1 and 2   | 3     | _       | 1              | <u>. , 2</u> | <u>72.</u> |
| 4         | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)   | 4     |         |                |              | 0.         |
| 5         | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-   | 5     |         | 1              | <u>, 2</u>   | <u>72.</u> |
| 6         | Credits/Payments:   |       |         |                |              |            |
|           | 2012 estimated tax payments and 2011 overpayment credited to 2012 6a  |       |         |                |              |            |
|           | Exempt foreign organizations - tax withheld at source   |       |         |                |              |            |
|           | Tax paid with application for extension of time to file (Form 8868)  6c   |       |         |                |              |            |
|           | Backup withholding erroneously withheld 6d  |       |         |                |              |            |
|           | Total credits and payments. Add lines 6a through 6d   | 7     |         |                |              | 0.         |
|           | Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached   | . 8   |         |                |              | 5.         |
|           | Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed  | 9     | ·       | 1              | <u>, 2</u>   | <u>77.</u> |
|           | Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  | 10    |         |                |              |            |
|           | Enter the amount of line 10 to be: Credited to 2013 estimated tax   | 11    |         |                |              |            |
|           | art VII-A Statements Regarding Activities   |       |         |                |              |            |
| 1a        | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene   | ın    |         | ,              | es/          | No         |
|           | any political campaign?   |       | 1       | a              |              | _X_        |
| b         | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?  |       | 1       | b              |              | X          |
|           | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published   | d or  |         |                |              |            |
|           | distributed by the foundation in connection with the activities.  |       | 1       |                |              |            |
|           | Did the foundation file Form 1120-POL for this year?  |       | 1       | c              |              | <u>X</u>   |
| d         | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  |       |         | ŀ              |              |            |
|           | (1) On the foundation. ► \$ (2) On foundation managers. ► \$ \$   |       |         |                |              |            |
| е         | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation   |       |         |                |              |            |
|           | managers. ▶ \$0 .   |       |         |                |              |            |
| 2         | Has the foundation engaged in any activities that have not previously been reported to the IRS?   |       | 2       | <u> </u>       |              | <u>_X</u>  |
|           | If "Yes," attach a detailed description of the activities.  |       |         |                | - 1          |            |
| 3         | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, o  | r     |         |                | 1            |            |
| _         | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  |       |         | 3              |              | <u> </u>   |
|           | Did the foundation have unrelated business gross income of \$1,000 or more during the year?   |       | 4       |                |              | <u> </u>   |
|           | If "Yes," has it filed a tax return on Form 990-T for this year?  | N/    |         | <del>-</del> + |              |            |
| 5         | Was there a liquidation, termination, dissolution, or substantial contraction during the year?  |       | 5       | <u> </u>       |              | X          |
| _         | If "Yes," attach the statement required by General Instruction T  |       |         | - 1            |              |            |
| 6         | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:   |       |         |                |              |            |
|           | By language in the governing instrument, or  Posterior level to a black for the state of th |       |         |                |              |            |
|           | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state  | law   | i .     |                |              |            |
| _         | remain in the governing instrument?   |       | 6       |                | <u>X</u>     |            |
| 1         | Did the foundation have at least \$5,000 in assets at any time during the year?   |       | 7       | +              | X            |            |
| _         | If "Yes," complete Part II, col. (c), and Part XV   |       |         |                |              |            |
| 8a        | Enter the states to which the foundation reports or with which it is registered (see instructions)  |       |         |                |              |            |
| 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   |       | 8       | Ь              | х            |            |
| 9         | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for caler  | ndar  |         |                |              |            |
|           | year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV  |       | 9       | , [            |              | X          |
| <u>10</u> | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses  |       | 10      | -              | $\neg$       | X          |
|           |   |       | Form 9  |                | PF (         |            |

|    |  | <u> 388283</u> | 7        | Page 5        |
|----|--|----------------|----------|---------------|
|    | rt 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             | 1        | LX            |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privilege | s?             |          |               |
|    | If "Yes," attach statement (see instructions)  | 12             | 2        | X             |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?                      | 13             | X        |               |
|    | Website address ►N/A   |                |          |               |
| 14 | The books are in care of ▶ <u>C. MICHAEL REESE</u> Telephone no. ▶ 63  | 0-484-         | 8999     | <u> </u>      |
|    | Located at ► 435 LOWELL AVENUE, GLEN ELLYN, IL ZIP+4   | • <u>6013</u>  | 7        |               |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here                                      |                | •        | <b>▶</b>      |
|    | and enter the amount of tax-exempt interest received or accrued during the year  |                | 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,             |                | Yes      | No            |
|    | securities, or other financial account in a foreign country?   | 16             | 3        | X             |
|    | See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign               |                |          |               |
|    | country  |                |          |               |
| Pa | rt 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.  | L              | 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?   | ☐ No           |          |               |
|    | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)  | _              |          |               |
|    | a disqualified person?   |                |          |               |
|    | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?   |                |          |               |
|    | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?   | . JNo          |          |               |
|    | (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)?  | J 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.)   | J No           |          |               |
| b  | If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations            |                |          |               |
|    |  | [/A   11       | )        |               |
|    | Organizations relying on a current notice regarding disaster assistance check here   | · 🗀 📗          |          |               |
| C  | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected          |                | }        |               |
|    | before the first day of the tax year beginning in 2012?  | 10             | ;        | 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)):  |                | į        |               |
| а  | 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     | a              |          |               |
|    | before 2012?   | _ ON _         |          | 1             |
|    | If "Yes," list the years \( \bigs_{  |                |          |               |
| 0  |  |                |          |               |
|    | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach     | (/3 0          |          |               |
| _  |  | /A 2t          | <u>'</u> | <del> </del>  |
|    | If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.                  |                | :        |               |
| 20 | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time                                |                |          |               |
| 38 | during the year?   | 7 No.          |          |               |
| L  | tes (1) any purchase by the foundation or disqualified persons after   | ן או ר         |          |               |
| C  | 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,       |                |          |               |
|    |  | /A 3b          | , [      |               |
| An | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                          | 48             | _t       | X             |
|    | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that   | 1 70           | `\       | † <del></del> |
|    | had not been removed from jeopardy before the first day of the tax year beginning in 2012?   | 41             | ,        | X             |
|    | tree tree  |                |          |               |

Form **990-PF** (2012)

| orm 990-PF (2012) REESE FAMILY CHARITABLE  |                                       |                  | <u> 36-38828</u>   | 337           | Page <b>6</b>                     |
|--|---------------------------------------|------------------|--|---------------|-----------------------------------|
| Part VII-B Statements Regarding Activities for Which I   | Form 4720 May Be I                    | Required (contin | ued)   | <del></del> - |                                   |
| 5a During the year did the foundation pay or incur any amount to:  |                                       | ,                |  | 1             |                                   |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section  | n 4945(e))?                           | Ye               | es X No  |               |                                   |
| (2) Influence the outcome of any specific public election (see section 4955); of   | or to carry on, directly or indir     |                  |  |               |                                   |
| any voter registration drive?  |                                       |                  | es X No  |               |                                   |
| (3) Provide a grant to an individual for travel, study, or other similar purposes  |                                       | Ye               | es LX No   |               |                                   |
| (4) Provide a grant to an organization other than a charitable, etc., organization   | n described in section                |                  |  |               |                                   |
| 509(a)(1), (2), or (3), or section 4940(d)(2)?   |                                       |                  | es X No  |               |                                   |
| (5) Provide for any purpose other than religious, charitable, scientific, literary,  | , or educational purposes, or         |                  |  |               |                                   |
| the prevention of cruelty to children or animals?  |                                       |                  | es X No  |               |                                   |
| <b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify un  |                                       | ın Regulations   |  |               |                                   |
| section 53.4945 or in a current notice regarding disaster assistance (see instru   |                                       |                  | N/A  | 5b            |                                   |
| Organizations relying on a current notice regarding disaster assistance check h  |                                       |                  |  |               |                                   |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f  |                                       |                  |  |               |                                   |
| expenditure responsibility for the grant?  |                                       | I/A 📖 Ye         | es L No  |               |                                   |
| If "Yes," attach the statement required by Regulations section 53.494  |                                       |                  |  |               |                                   |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to  | pay premiums on                       |                  |  |               |                                   |
| a personal benefit contract?   |                                       | L Ye             | es X No  |               |                                   |
| <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p   | personal benefit contract?            |                  | -  | 6b            | X                                 |
| If "Yes" to 6b, file Form 8870   |                                       |                  |  |               |                                   |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s   |                                       | Y€               | es X No  |               |                                   |
| b If "Yes," did the foundation receive any proceeds or have any net income attributed by the foundation receive any proceeds or have any net income attributed by the foundation receive any proceeds or have any net income attributed by the foundation receive any proceeds or have any net income attributed by the foundation receive any proceeds or have any net income attributed by the foundation receive any proceeds or have any net income attributed by the foundation receive any proceeds or have any net income attributed by the foundation receive any proceeds or have any net income attributed by the foundation receive any proceeds or have any net income attributed by the foundation receive any proceeds or have any net income attributed by the foundation receive any proceeds or have any net income attributed by the foundation receive any proceeds or have any net income attributed by the foundation receive any proceeds or have any net income attributed by the foundation receives att |                                       |                  | N/A  | 7b            |                                   |
| Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors   | ees, Foundation Ma                    | anagers, Higni   | y  |               |                                   |
| List all officers, directors, trustees, foundation managers and their  | compensation                          |                  |  |               |                                   |
| Elot dii office o, directoro, d'actees, foundation managero and their  | (b) Title, and average                | (c) Compensation | (d) Contributions to   | (9)           | Expense                           |
| (a) Name and address   | hours per week devoted                | (If not paid.    | (d) Contributions to<br>employee benefit plans<br>and deferred | acco          | Expense<br>ount, other            |
| O MICUARI DERCE  | to position                           | `enter'-0-)      | compensation   | all           | owances                           |
| C. MICHAEL REESE<br>435 LOWELL AVENUE  | TRUSTEE                               |                  |  |               |                                   |
| GLEN ELLYN, IL 60137   | 0.00                                  | 0.               | 0.   | -             | Λ                                 |
| JUEN EDDIN, ID 00157   | 0.00                                  |                  | U .  | <u> </u>      | 0.                                |
|  | _                                     |                  |  |               |                                   |
|  | -                                     |                  |  |               |                                   |
| · · · · · · · · · · · · · · · · · · ·  |                                       |                  |  | +             |                                   |
|  | -                                     |                  |  |               |                                   |
|  | _                                     |                  |  |               |                                   |
|  |                                       |                  |  | <del> </del>  |                                   |
|  |                                       |                  |  |               |                                   |
|  |                                       |                  |  |               |                                   |
| 2 Compensation of five highest-paid employees (other than those inc  | cluded on line 1). If none.           | enter "NONE."    | 1  | 1             |                                   |
|  | (b) Title, and average hours per week |                  | (d) Contributions to<br>employee benefit plans<br>and deferred | (e)           | Expense                           |
| (a) Name and address of each employee paid more than \$50,000  | hours per week devoted to position    | (c) Compensation | and deferred<br>compensation                                   | acco          | Expense<br>ount, other<br>owances |
| NONE   | devoted to position                   |                  | compensation   | un            |                                   |
| NONE   | 1                                     |                  |  |               |                                   |
|  |                                       |                  |  | <del> </del>  |                                   |
|  | 1                                     |                  |  |               |                                   |
| <del></del>  |                                       |                  |  |               |                                   |
|  | 1                                     |                  |  |               |                                   |
|  | <del></del>                           |                  | <del> </del>   | +             |                                   |
|  | 1                                     |                  |  |               |                                   |
|  |                                       |                  |  | 1             |                                   |
|  | 1                                     |                  |  |               |                                   |
| Total number of other employees paid over \$50,000   | · · · · · · · · · · · · · · · · · · · | <del></del>      |  | . 1           | 0                                 |
| week indicate or outer original and pare at a policie  |                                       |                  |  |               |                                   |

| Form 990-PF (2012) REESE FAMILY CHARITABLE FOUNDATION   | 36-3            | 882837   | Page 7       |
|---|-----------------|----------|--------------|
| Part VIII Information About Officers, Directors, Trustees, Foundation Manager Paid Employees, and Contractors (continued)   | s, Highly       |          |              |
| 3 Five highest-paid independent contractors for professional services. If none, enter "NONE."   |                 |          |              |
| (a) Name and address of each person paid more than \$50,000 (b)   | Type of service | (c) Comp | ensation     |
| NONE  |                 |          |              |
|   | •               |          |              |
|   |                 |          | ·            |
|   |                 |          |              |
|   |                 |          |              |
|   |                 |          |              |
| Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities   | <del></del>     | <u> </u> | 0            |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. | h as the        | Expenses |              |
| 1 N/A   |                 |          |              |
| 1   |                 |          |              |
|   |                 |          |              |
| 2   |                 |          |              |
|   |                 |          |              |
|   |                 |          |              |
| 3   |                 |          |              |
|   |                 |          |              |
|   | <del></del>     |          |              |
| 4   | <del></del>     |          |              |
|   |                 |          |              |
| 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 <u>N/A</u>  |                 |          |              |
|   |                 |          |              |
| 2   | <del></del>     |          | <del> </del> |
|   |                 |          |              |
| All other program-related investments. See instructions.  |                 |          |              |
| 3   |                 |          |              |
|   |                 |          |              |
| Total Add lines 1 through 3   | <b>—</b>        |          | <u> </u>     |

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| P  | art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four  | ndations, se     | e 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               | 734,626.        |
| b  | Average of monthly cash balances   | 1b               | 31,566.         |
| C  | Fair market value of all other assets  | 1c               |                 |
| d  | Total (add lines 1a, b, and c)   | 1đ               | 766,192.        |
| е  | 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                | 766,192.        |
| 4  | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)  | 4                | 11,493.         |
| 5  | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4   | 5                | 754,699.        |
| 6  | Minimum investment return. Enter 5% of line 5  | 6                | 37,735.         |
| P  | <b>art XI</b> Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here  and do not complete this part.) | id certain       |                 |
| 1  | Minimum investment return from Part X, line 6  | 1                | 37,735.         |
| 2a | Tax on investment income for 2012 from Part VI, line 5   |                  |                 |
| b  | Income tax for 2012. (This does not include the tax from Part VI.)   |                  |                 |
| C  | Add lines 2a and 2b  | 2c               | 1,272.          |
| 3  | Distributable amount before adjustments. Subtract line 2c from line 1  | 3                | 36,463.         |
| 4  | Recoveries of amounts treated as qualifying distributions  | 4                | 0.              |
| 5  | Add lines 3 and 4  | 5                | 36,463.         |
| 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                | 36,463.         |
| Þ  | art XII Qualifying Distributions (see instructions)  |                  |                 |
| 1  | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:   |                  |                 |
| а  | Expenses, contributions, gifts, etc total from Part I, column (d), line 26   | 1a               | 37,169.         |
| b  | Program-related investments - total from Part IX-B   | 1b               | 0.              |
| 2  | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes  | 2                |                 |
| 3  | Amounts set aside for specific charitable projects that satisfy the:   |                  |                 |
| а  | Suitability test (prior IRS approval required)   | 3a               |                 |
| b  | Cash distribution test (attach the required schedule)  | 3b               |                 |
| 4  | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4   | 4                | 37,169.         |
| 5  | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment   |                  |                 |
|    | income. Enter 1% of Part I, line 27b   | 5                | 0.              |
| 6  | Adjusted qualifying distributions. Subtract line 5 from line 4   | 6                | 37,169.         |
|    | Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years.                      | qualifies for th | ne section      |

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Part XIII Undistributed Income (see instructions)

|   | (a)<br>Corpus | (b)<br>Years prior to 2011 | (c)<br>2011 | (d)<br>2012                           |
|---|---------------|----------------------------|-------------|---------------------------------------|
| 1 Distributable amount for 2012 from Part XI,   |               |                            |             |                                       |
| line 7  |               |                            |             | 36,463.                               |
| 2 Undistributed income, if any, as of the end of 2012   |               |                            |             |                                       |
| a Enter amount for 2011 only  |               |                            | 0           |                                       |
| <b>b</b> Total for prior years:   |               |                            |             |                                       |
| 3 Excess distributions carryover, if any, to 2012:  |               | 0.                         |             | · · · · · · · · · · · · · · · · · · · |
| a From 2007 5,314.  |               |                            |             |                                       |
| b From 2008 3,896.  |               |                            |             |                                       |
| c From 2009 221.  |               |                            |             |                                       |
| d From 2010   |               |                            | '           |                                       |
| e From 2011 2,226.  |               |                            |             |                                       |
| f Total of lines 3a through e   | 11,657.       |                            |             |                                       |
| 4 Qualifying distributions for 2012 from  |               |                            |             |                                       |
| Part XII, line 4: ►\$ 37,169.   |               |                            |             |                                       |
| a Applied to 2011, but not more than line 2a  |               |                            | 0.          |                                       |
| <b>b</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  |               |                            |             | 36,463.                               |
| e Remaining amount distributed out of corpus  | 706.          |                            |             |                                       |
| 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:  |               |                            |             |                                       |
| & Corpus Add lines 3f, 4c, and 4e Subtract line 5   | 12,363.       |                            |             |                                       |
| <b>b</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.                         |             | <u> </u>                              |
| 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   | 0.            |                            |             |                                       |
| section 170(b)(1)(F) or 4942(g)(3)  8 Excess distributions carryover from 2007  | 0.            |                            |             |                                       |
| not applied on line 5 or line 7   | 5,314.        |                            |             |                                       |
| 9 Excess distributions carryover to 2013.   | 3,312.        |                            |             | _                                     |
| Subtract lines 7 and 8 from line 6a   | 7,049.        |                            |             |                                       |
| 10 Analysis of line 9:  | ,,015.        |                            |             |                                       |
| a Excess from 2008 3,896.   |               |                            |             |                                       |
| <b>b</b> Excess from 2009 221.  |               |                            |             |                                       |
| c Excess from 2010  |               |                            |             |                                       |
| d Excess from 2011 2,226.   |               |                            |             |                                       |
| e Excess from 2012 706.   |               |                            |             | <u> </u>                              |
|   |               |                            |             | Form <b>QQO-PF</b> (2012)             |

|  | MILY CHARI                |                             |                              |                             | 82837 Page 1   |
|--|---------------------------|-----------------------------|------------------------------|-----------------------------|----------------|
|  | <del> </del>              |                             | <del></del>                  | N/A                         |                |
| 1 a If the foundation has received a ruling or                         |                           | , , ,                       | ' [                          |                             |                |
| foundation, and the ruling is effective for                            |                           | -                           |                              | 40.40(.)(0) == 1.40         | 240(:)(E)      |
| b Check box to indicate whether the founda                             |                           | ig foundation described     |                              | 4942(J)(3) or49             | 942(j)(5)<br>T |
| 2 a Enter the lesser of the adjusted net                               | Tax year (a) 2012         | <b>(b)</b> 2011             | Prior 3 years (c) 2010       | (d) 2009                    | (a) Tatal      |
| income from Part I or the minimum                                      | (a) 2012                  | (0) 2011                    | (6) 2010                     | (0) 2009                    | (e) Total      |
| investment return from Part X for                                      |                           |                             |                              |                             |                |
| each year listed   |                           |                             |                              | _                           |                |
| <b>b</b> 85% of line 2a  |                           |                             | -                            |                             |                |
| c Qualifying distributions from Part XII,                              |                           |                             |                              |                             |                |
| line 4 for each year listed  |                           |                             |                              |                             | -              |
| d Amounts included in line 2c not                                      |                           |                             |                              |                             |                |
| used directly for active conduct of                                    |                           |                             |                              |                             |                |
| exempt activities  |                           |                             |                              |                             |                |
| e Qualifying distributions made directly                               |                           |                             |                              |                             |                |
| for active conduct of exempt activities.                               |                           |                             |                              |                             |                |
| Subtract line 2d from line 2c  |                           |                             |                              | ļ                           |                |
| 3 Complete 3a, b, or c for the alternative test relied upon;           |                           |                             |                              |                             |                |
| a "Assets" alternative test - enter:                                   |                           |                             |                              |                             |                |
| (1) Value of all assets  |                           |                             |                              | <del> </del>                |                |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i)          |                           |                             |                              |                             |                |
| <b>b</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<br>organizations as provided in                   |                           |                             |                              |                             |                |
| section 4942(j)(3)(B)(iii)   |                           |                             |                              |                             |                |
| (3) Largest amount of support from                                     |                           |                             |                              |                             |                |
| an exempt organization   |                           |                             |                              |                             |                |
| (4) Gross investment income  |                           | <u> </u>                    |                              |                             | <u>L</u>       |
| Part XV   Supplementary Infor  |                           |                             | , if the foundation          | n had \$5,000 or mo         | ore in assets  |
| at any time during th  | <del></del>               | ructions.)                  |                              |                             |                |
| 1 Information Regarding Foundation                                     | •                         |                             |                              |                             |                |
| a List any managers of the foundation who                              |                           |                             | ntributions received by the  | foundation before the clo   | se of any tax  |
| year (but only if they have contributed mo                             | ore man 45,000). (See S   | ection 507(a)(2).)          |                              |                             |                |
| NONE   |                           |                             |                              |                             |                |
| <b>b</b> List any managers of the foundation who                       |                           |                             | n (or an equally large porti | on of the ownership of a p  | artnership or  |
| other entity) of which the foundation has                              | a 10% of greater interes  | SL.                         |                              |                             |                |
| NONE   |                           |                             |                              |                             |                |
| 2 Information Regarding Contribution                                   |                           |                             | -                            |                             |                |
| Check here ► if the foundation on                                      | •                         | •                           | •                            | •                           |                |
| the foundation makes gifts, grants, etc. (s                            | <del></del>               |                             |                              | ompiete items za, b, c, and | J 0.           |
| a The name, address, and telephone number                              | er or e-mail of the perso | on to whom applications     | s should be addressed:       |                             |                |
| C. MICHAEL REESE   |                           |                             |                              |                             |                |
| 435 LOWELL AVENUE, GI  | -                         |                             |                              |                             |                |
| <b>b</b> The form in which applications should be                      | submitted and informa     | tion and materials they     | should include;              |                             |                |
| IN WRITING.  |                           |                             |                              | 1                           |                |
| c Any submission deadlines:  |                           |                             |                              |                             |                |
| d Any restrictions or limitations on awards,                           | such as by geographica    | al areas, charitable field: | s, kinds of institutions, or | other factors:              | R              |
| LOCAL AND REGIONAL CH  |                           |                             |                              |                             |                |
|  |                           |                             |                              |                             |                |

| 3 Grants and Contributions Paid During the Yea     |  | Payment                              | <del></del>                      |                 |
|--|--|--------------------------------------|----------------------------------|-----------------|
| Name and address (home or business)                | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or contribution | Amount          |
| a Paid during the year                             | Or outstantial contributor   |                                      |                                  | <del></del> -   |
| 3.1,1  |  |                                      |                                  |                 |
|  |  |                                      |                                  |                 |
|  |  |                                      |                                  |                 |
| AMERICAN CANCER SOCIETY                            |  | 501C3                                | GENERAL                          |                 |
| 225 N MICHIGAN AVE SUITE 1200<br>CHICAGO, IL 60601 |  |                                      |                                  | 50              |
| chicked, in outer                                  | <del>- 1717</del>  | <u> </u>                             |                                  |                 |
|  |  |                                      |                                  |                 |
|  |  |                                      |                                  |                 |
| AMERICAN DIABETES ASSOCIATION                      |  | 501C3                                | GENERAL                          |                 |
| PO BOX 1130<br>FAIRFAX VA 22038                    |  |                                      |                                  | 0.5             |
| FAIRFAX, VA 22030                                  |  |                                      |                                  | 950             |
|  |  |                                      |                                  |                 |
|  |  |                                      |                                  |                 |
| AMERICAN HEART ASSOCIATION                         |  | 501C3                                | GENERAL                          |                 |
| 208 SOUTH LA SALLE STREET                          |  |                                      |                                  | 25/             |
| CHICAGO, IL 60604                                  |  |                                      |                                  | 250             |
|  |  |                                      |                                  |                 |
| AMERICAN INSTITUTE FOR CANCER                      |  | 501C3                                | GENERAL                          |                 |
| RESEARCH   |  |                                      |                                  |                 |
| 1759 R STREET                                      |  |                                      |                                  | 4.04            |
| WASHINGTON, DC 20009                               |  |                                      |                                  | 100             |
|  |  |                                      |                                  |                 |
|  |  |                                      |                                  |                 |
| AMERICAN RED CROSS                                 |  | 501C3                                | GENERAL                          |                 |
| P.O. BOX 37243                                     |  |                                      |                                  |                 |
| WASHINGTON DC 20013  Total SEE CON                 | TINUATION SHEE   | T(S)                                 | ▶ 3a                             | 2,000<br>37,169 |
| b Approved for future payment                      |  |                                      |                                  | 51,10.          |
|  |  |                                      |                                  |                 |
| NONE   |  |                                      |                                  |                 |
| NONE   |  |                                      |                                  |                 |
|  |  |                                      |                                  |                 |
|  |  |                                      |                                  |                 |
|  |  |                                      |                                  |                 |
|  |  |                                      |                                  |                 |
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|  |  |                                      |                                  |                 |
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|  |  |                                      |                                  |                 |
| ı  |  | 1                                    |                                  |                 |
|  |  |                                      |                                  |                 |

223621 12-05-12

REESE FAMILY CHARITABLE FOUNDATION

**Analysis of Income-Producing Activities** 

| Enter gross amounts upless atherway and saled                   | Linrelated b       | ousiness income                       | Excluded by                                      | y section 512, 513, or 514 | (-)                                   |
|---|--------------------|---------------------------------------|--|----------------------------|---------------------------------------|
| Enter gross amounts unless otherwise indicated.                 | (a)<br>Business    | (b) Amount                            | (C)<br>Exclu-<br>sion                            | (d)<br>Amount              | (e) Related or exempt function income |
| 1 Program service revenue:                                      | code               | ,                                     | code   | Amount                     | Tangagii moonio                       |
| a   |                    |                                       | <del>   </del>                                   |                            |                                       |
|   |                    |                                       | <del>   </del>                                   |                            |                                       |
|   |                    |                                       | <del>   </del>                                   |                            |                                       |
| · · · · · · · · · · · · · · · · · · ·                           |                    |                                       |  |                            | ·                                     |
| e   |                    |                                       |  | <del></del>                | <del></del>                           |
| g Fees and contracts from government agencies                   |                    |                                       |  |                            |                                       |
| 2 Membership dues and assessments                               | <del> </del>       |                                       | <del>  </del>                                    |                            |                                       |
| 3 Interest on savings and temporary cash                        |                    | _                                     |  |                            |                                       |
| investments   |                    |                                       | 14   | 11                         |                                       |
| 4 Dividends and interest from securities                        |                    | -                                     | 14   | 11.<br>20,659.             |                                       |
| 5 Net rental income or (loss) from real estate:                 |                    |                                       |  | 20,033.                    |                                       |
| a Debt-financed property  |                    |                                       |  |                            |                                       |
| b Not debt-financed property                                    |                    |                                       |  |                            |                                       |
| 6 Net rental income or (loss) from personal                     |                    |                                       |  |                            | -                                     |
| property  |                    |                                       |  |                            |                                       |
| 7 Other investment income                                       |                    |                                       | 1 1  |                            |                                       |
| 8 Gain or (loss) from sales of assets other                     |                    |                                       | <del>                                     </del> |                            |                                       |
| than inventory  |                    |                                       | 18   | 44,563.                    |                                       |
| 9 Net income or (loss) from special events                      |                    |                                       |  | 44,303.                    |                                       |
| 10 Gross profit or (loss) from sales of inventory               |                    |                                       |  |                            |                                       |
| 11 Other revenue:   |                    |                                       |  |                            |                                       |
|   |                    |                                       |  |                            |                                       |
| a<br>b  |                    |                                       |  |                            |                                       |
| с   | <del></del>        | <del></del>                           |  |                            |                                       |
| d   | 1 1                |                                       |  |                            |                                       |
| e   |                    | <del></del> -                         |  |                            |                                       |
| 12 Subtotal. Add columns (b), (d), and (e)                      |                    |                                       | ).   | 65,233.                    | 0.                                    |
| 13 Total Add line 12, columns (b), (d), and (e)                 | <u> </u>           | <u>v</u>                              | <u></u>  | 13                         |                                       |
| (See worksheet in line 13 instructions to verify calculations.) |                    |                                       |  |                            | 00,200                                |
| Part XVI-B Relationship of Activities t                         | to the Accom       | nnlishment of                         | Exempt Pi  | irnoses                    |                                       |
| Telationship of Activities                                      |                    |                                       | Literinger                                       |                            |                                       |
| Line No. Explain below how each activity for which inco         |                    |                                       | I-A contributed                                  | importantly to the accom   | olishment of                          |
| the foundation's exempt purposes (other than                    | by providing funds | s for such purposes).                 |  |                            |                                       |
|   |                    |                                       |  |                            |                                       |
|   |                    | <del></del>                           | . –  |                            |                                       |
|   |                    |                                       |  |                            |                                       |
|   |                    |                                       |  |                            |                                       |
|   |                    |                                       |  |                            |                                       |
|   |                    |                                       |  |                            |                                       |
|   |                    |                                       |  |                            |                                       |
|   |                    |                                       |  |                            |                                       |
|   |                    |                                       |  |                            |                                       |
|   |                    |                                       |  |                            |                                       |
|   |                    |                                       |  |                            |                                       |
|   |                    |                                       |  |                            | <u>.</u>                              |
|   |                    |                                       | <del></del>                                      |                            |                                       |
|   | <del></del>        | · · · · · · · · · · · · · · · · · · · |  | <del></del>                |                                       |
|   |                    |                                       |  |                            | <del></del>                           |
|   |                    |                                       |  |                            |                                       |
|   | <u> </u>           |                                       |  |                            |                                       |

| Part )         |          |   | garding Tran             |                     | BLE FOUNDAT<br>and Transactions                                    |                       |                             | 3882837<br>Incharitable                       |                      | ige 13 |
|----------------|----------|---|--------------------------|---------------------|--|-----------------------|-----------------------------|---|----------------------|--------|
| 1 Did          | the ord  | <del></del>   |                          | of the followin     | g with any other organiza  | ation described in se | ction 501(c) of             |   | Yes                  | No     |
|                |          |   |                          |                     | 7, relating to political org                                       |                       | `,                          |   |                      |        |
| <b>a</b> Tra   | nsfers   | from the reporting found                              | ation to a noncharita    | ble exempt or       | ganization of:   |                       |                             | į   |                      | ĺ      |
| (1)            | Cash     |   |                          |                     |  |                       |                             | 1a(1)   |                      | X      |
| (2)            | Other    | assets  |                          |                     |  |                       |                             | 1a(2)   |                      | X      |
|                |          | sactions:   |                          |                     |  |                       |                             |   |                      | l      |
|                |          | of assets to a noncharita                             | • •                      |                     |  |                       |                             | 1b(1)   |                      | X      |
|                |          | ases of assets from a no                              | •                        | organization        |  |                       |                             | 1b(2)   |                      | X      |
|                |          | I of facilities, equipment,<br>oursement arrangements |                          |                     |  |                       |                             | 1b(3)<br>1b(4)                                |                      | X      |
|                |          | or loan guarantees                                    |                          |                     |  |                       |                             | 1b(4)   |                      | X      |
|                |          | rmance of services or me                              | embership or fundrai     | sına solicitatio    | ns   |                       |                             | 1b(6)   |                      | X      |
|                |          | facilities, equipment, ma                             |                          |                     |  |                       |                             | 10  |                      | X      |
|                |          |   |                          |                     | dule. Column ( <b>b)</b> should                                    | always show the fail  | r market value of the       | goods, other as:                              | sets,                |        |
|                |          |   |                          |                     | ed less than fair market v   | alue ın any transactı | on or sharing arrang        | ement, show in                                |                      |        |
|                | <u>`</u> | ) the value of the goods,                             | -                        |                     |  |                       |                             |   |                      |        |
| (a) Line n     | ·        | (b) Amount involved                                   | (c) Name of              |                     | exempt organization  | (d) Descript          | ion of transfers, transacti | ions, and sharing ar                          | rangeme              | ints   |
|                |          |   |                          | N/A                 |  |                       |                             |   |                      |        |
|                | +        | <del>-</del>  |                          |                     |  |                       |                             |   | ····                 |        |
|                | +        |   |                          |                     |  |                       |                             |   |                      |        |
|                |          |   |                          | <del></del>         |  | -                     |                             |   |                      |        |
|                |          |   |                          |                     |  |                       |                             |   |                      |        |
|                |          |   |                          |                     |  |                       |                             |   |                      |        |
|                |          |   |                          |                     |  |                       |                             |   |                      |        |
|                | <u> </u> |   |                          |                     |  |                       |                             |   |                      |        |
|                |          |   |                          |                     |  |                       |                             | ···   |                      |        |
|                |          |   |                          |                     |  |                       |                             |   |                      |        |
|                |          |   |                          |                     |  | <del></del>           |                             |   |                      |        |
|                |          |   |                          |                     |  |                       |                             |   |                      |        |
|                |          |   |                          |                     |  |                       |                             |   |                      |        |
|                |          |   |                          |                     |  |                       |                             |   |                      |        |
| ın s           | ection   | 501(c) of the Code (othe                              | r than section 501(c     |                     | or more tax-exempt orga<br>ion 527?                                | anizations described  |                             | Yes   | X                    | ] No   |
| 0 11           | es, cc   | mplete the following sch<br>(a) Name of org           |                          |                     | (b) Type of organization   | n T                   | (c) Description of r        | elationshin                                   |                      |        |
|                |          | N/A   | ,                        |                     | (4) 1)   10   11   12   13   14   15   15   15   15   15   15   15 | ·                     | (0)                         |   |                      |        |
|                |          |   |                          |                     |  |                       |                             |   |                      |        |
|                |          |   |                          |                     |  |                       |                             |   |                      |        |
|                |          |   |                          |                     |  |                       |                             |   |                      |        |
|                |          | <del> </del>  |                          |                     | <u> </u>   |                       |                             |   |                      |        |
| Sign<br>Here   | and be   | elief, it is true Orrect and con                      | Polete Declaration of pr | reparer (other than | ng accompanying schedules a<br>n taxpayer) is based on all info    | TRUST                 | rer has any knowledge       | May the IRS return with the shown below X Yes | e prepar<br>(see ins | er     |
|                | Sign     | ature of officer or trustee                           |                          | I D-+               | Date   | Title                 | Charle                      | LOTIN   |                      |        |
|                |          | Print/Type preparer's na                              | ame                      | Preparer's s        | ignature // // /   | Date                  | Check if self- employed     | PTIN  |                      |        |
| Paid           |          | JAMES P. H  | OFNER                    | 1/m                 | w/ Home  | 745113                | Sen- employed               | P00583  | 256                  |        |
| Prepa<br>Use ( |          | Firm's name ► DUG                                     |                          | YKA, C              | PA'S PC  |                       | Firm's EIN ► 3              |   |                      |        |
| U36 (          | √ı ıı y  | Firm's address ▶ 10                                   | 4 E. ROOS                | SEVEI T             | ROAD SUITE   | 102                   | _                           |   |                      |        |
|                |          |   | EATON, II                |                     |  |                       | Phone no. 6                 | 30-665-                                       | 444                  | 0      |

630-665-4440 Form **990-PF** (2012)

| Part XV Supplementary Information                        |  |                      |                                  |         |
|--|--|----------------------|----------------------------------|---------|
| 3 Grants and Contributions Paid During the               |  | <del></del>          |                                  |         |
| Recipient  | If recipient is an individual,<br>show any relationship to<br>any foundation manager | Foundation status of | Purpose of grant or contribution | Amount  |
| Name and address (home or business)                      | or substantial contributor   | recipient            |                                  |         |
|  |  |                      |                                  |         |
| AMERICAN RED CROSS OF LEE CO.                            |  | 501C3                | GENERAL                          |         |
| 6310 TECHSTER BLVD.                                      |  |                      |                                  |         |
| FT, MYERS, FL 33912                                      |  |                      |                                  | 500     |
|  |  |                      |                                  |         |
| B. R. RYALL YMCA   |  | 501C3                | GENERAL                          |         |
| 49 DEICKE DRIVE<br>GLEN ELLYN, IL 60137                  |  |                      |                                  | 500     |
| SHIN EBBIN, IB 00137                                     |  |                      |                                  | 300     |
| BRIDGE COMMUNITIES, INC.                                 |  | 501C3                | GENERAL                          |         |
| 505 CRESCENT BLVD.                                       |  | 50163                | GENERALI                         |         |
| GLEN ELLYN, IL 60137                                     |  |                      |                                  | 700     |
|  |  |                      |                                  |         |
| BUCKNELL UNIVERSITY                                      |  | 501C3                | GENERAL                          |         |
| COOLEY HALL  |  |                      |                                  |         |
| LEWISBERG, PA 17837                                      |  |                      |                                  | 500.    |
|  |  |                      |                                  |         |
| C.A.S.A.   |  | 501C3                | GENERAL                          |         |
| 505 N. COUNTY FARM ROAD                                  |  |                      |                                  |         |
| WHEATON, IL 60187  |  |                      |                                  | 600.    |
| CARD OF LIED   |  | 50103                |                                  |         |
| CAFE OF LIFE<br>P.O. BOX 367794                          |  | 501C3                | GENERAL                          |         |
| BONITA SPRINGS FL 34136                                  |  |                      |                                  | 800.    |
|  |  |                      |                                  |         |
| CADENCE HEALTH FOUNDATION                                |  | 501C3                | GENERAL                          |         |
| 25 N. WINFIELD ROAD                                      |  |                      |                                  |         |
| WINFIELD, IL 60190-1295                                  |  |                      |                                  | 1,000,  |
|  |  | İ                    |                                  |         |
| CONSERVANCY OF SW FLORIDA                                |  | 501C3                | GENERAL                          |         |
| 1450 MERRIHUE DR   |  |                      |                                  |         |
| NAPLES, FL 34102   |  |                      |                                  | 500,    |
| CONCEDIVATION FOR THE TON                                |  | E0103                | GENED A I                        |         |
| CONSERVATION FOUNDATION, THE<br>10S404 KNOCH KNOLLS ROAD |  | 501C3                | GENERAL                          |         |
| NAPERVILLE IL 60565                                      |  |                      |                                  | 750.    |
|  |  |                      |                                  |         |
| DISABLED AMERICAN VETERANS                               |  | 501C3                | GENERAL                          |         |
| P.O. BOX 14301   |  |                      |                                  |         |
| CINCINNATI OH 45250  Total from continuation sheets      |  | <u> </u>             |                                  | 1,000.  |
| TOTAL HOLL CONTINUATION SHEETS                           |  |                      |                                  | 33,369. |

| Part XV Supplementary Informatio 3 Grants and Contributions Paid During the |   | <del></del> -        |                                  |        |
|---|---|----------------------|----------------------------------|--------|
| Recipient   | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business)   | any foundation manager<br>or substantial contributor    | recipient            | Contribution                     |        |
|   |   |                      |                                  |        |
| OUPAGE COMMUNITY FOUNDATION   |   | 501C3                | GENERAL                          |        |
| 110 N. CROSS ST.  |   |                      |                                  |        |
| WHEATON, IL 60187   |   |                      |                                  | 2,00   |
| FAMILY SHELTER SERVICE  |   | 501C3                | GENERAL                          |        |
| P.O. BOX 3404   |   | 50103                | GENERAL                          |        |
| GLEN ELLYN, IL 60137  |   |                      |                                  | 80     |
|   |   |                      |                                  |        |
| FISHER HOUSE FOUNDATION   |   | 501C3                | GENERAL                          |        |
| 1401 ROCKVILLE PIKE ROCKVILLE MD 20852                                      |   |                      |                                  | 0.5    |
| COCKVILLE, MD 20032   |   |                      |                                  | 85     |
| GLEN ELLYN HISTORICAL SOCIETY   |   | 501C3                | GENERAL                          |        |
| BOX 283   |   |                      |                                  |        |
| GLEN ELLYN, IL 60138  |   |                      |                                  | 5.0    |
|   |   | į                    |                                  |        |
| GLEN ELLYN VOLUNTEER FIRE COMPANY<br>524 PENNSYLVANIA AVE                   |   | 501C3                | GENERAL                          |        |
| GLEN ELLYN, IL 60138  |   |                      |                                  | 25     |
|   |   |                      |                                  |        |
| GLEN OAK FOUNDATION   |   | 501C3                | GENERAL                          |        |
| C/O GLEN OAK CC 21w451 HILL AVE   |   |                      |                                  |        |
| GLEN ELLYN, IL 60137  |   |                      |                                  | 30     |
| GOLDIE FLOBERG CENTER   |   | 501C3                | CENTED A I                       |        |
| 58 W. ROCKTON ROAD  |   | 50103                | GENERAL                          |        |
| ROCKTON, IL 61072   |   | -                    |                                  | 85     |
|   |   |                      |                                  |        |
| HABITAT FOR HUMANITY  |   | 501C3                | GENERAL                          | ŀ      |
| 1288 N. TAMIAMI TR.   |   |                      |                                  | 50     |
| NORTH FT. MYERS, FL 33903   |   |                      |                                  | 50     |
| ISREAL CHILDREN'S CENTERS   |   | 501C3                | GENERAL                          |        |
| 3275 W. HILLSBORO BLVD.   |   |                      |                                  |        |
| DEERFIELD BEACH, FL 33442   |   |                      |                                  | 75     |
|   |   |                      |                                  |        |
| JUVENILE DIABETES RESEARCH<br>500 N. DEARBORN, STE 305                      |   | 501C3                | GENERAL                          |        |
| CHICAGO, IL 60610-4901  |   |                      |                                  | 50     |
| Total from continuation sheets  |   | •                    |                                  |        |

36-3882837

REESE FAMILY CHARITABLE FOUNDATION

| Part XV Supplementary Informatio 3 Grants and Contributions Paid During the |  |                      |                                  |        |
|---|--|----------------------|----------------------------------|--------|
| Recipient   | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business)   | or substantial contributor   | recipient            |                                  |        |
| ADDA WADDA GAMMA GODODITMU  |  | E0102                | ODVID A F                        |        |
| APPA KAPPA GAMMA SORORITY .O. BOX 38  |  | 501C3                | GENERAL                          |        |
| OLUMBUS, OH 43216-0038  |  |                      |                                  | 500    |
|   |  | F04-53               |                                  |        |
| JEERTY YOUTH RANCH FOUNDATION<br>17225 OLD RT. 41                           |  | 501C3                | GENERAL                          |        |
| ONITA SPRINGS, FL 34135   | <del> </del>   |                      |                                  | 50     |
|   |  | F0103                | OTHER 1.                         |        |
| ITERACY VOLUNTEERS OF AMERICA 4 W 500 MAPLE AVENUE                          |  | 501C3                | GENERAL                          |        |
| APERVILLE, IL 60540   |  |                      |                                  | 70     |
| MARIANJOY REHAB. HOSPITAL   |  | 501C3                | GENERAL                          |        |
| P.O. BOX 795  |  | 50103                | GENERAL                          |        |
| THEATON, IL 60187   |  |                      |                                  | 1,00   |
|   |  |                      |                                  |        |
| MUSCULAR DYSTROPHY ASSOCIATION  |  | 501C3                | <br>  GENERAL                    |        |
| 430 N. MICHIGAN AVE.  |  |                      |                                  |        |
| CHICAGO, IL 60611   |  |                      |                                  | 10     |
| TODAYIN TITLIYOTA TOOD DAW  |  | 501C3                | GENERAL                          |        |
| NORTHERN ILLINOIS FOOD BANK<br>273 DEARBORN COURT                           |  | 50103                | GENERAL                          |        |
| GENEVA, IL 60134  |  |                      |                                  | 1,25   |
|   |  |                      |                                  |        |
| OUTREACH COMMUNITY MINISTRIES   |  | 501C3                | GENERAL                          |        |
| 22 W. LIBERTY WHEATON, IL 60187-5124  |  |                      |                                  | 1,00   |
|   |  |                      |                                  |        |
| P.A.D.S.  |  | 501C3                | GENERAL                          |        |
| 705 W. LIBERTY  |  |                      |                                  |        |
| HEATON, IL 60187  | -  |                      |                                  | 50     |
| PANCREATIC CANCER ACTION NETWORK  |  | 501C3                | GENERAL                          |        |
| 2141 ROSENCRANS AVE   |  |                      |                                  |        |
| EL SEGUNDO, CA 90245  |  | -                    |                                  | 50     |
| PEOPLES RESOURCE CENTER   |  | 501C3                | GENERAL                          |        |
| PEOPLES RESOURCE CENTER<br>1506 E. ROOSEVELT ROAD                           |  |                      |                                  |        |
| WHEATON, IL 60187  Total from continuation sheets                           |  | 1                    |                                  | 1,00   |

REESE FAMILY CHARITABLE FOUNDATION

| Part XV Supplementary Information                 |  |                      |                                  |        |
|---|--|----------------------|----------------------------------|--------|
| 3 Grants and Contributions Paid During the Y      | <del>, ; ;</del>   |                      |                                  |        |
| Recipient  Name and address (home or business)    | If recipient is an individual,<br>show any relationship to<br>any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (nome of business)               | or substantial contributor   | recipient            | <del>-</del>                     |        |
|   |  |                      |                                  |        |
| SALVATION ARMY<br>515 SLATERS ST.                 |  | 501C3                | GENERAL                          |        |
| ALEXANDRIA, VA 22313                              |  |                      |                                  | 75     |
|   |  |                      |                                  |        |
| SALVATION ARMY (FLORIDA)                          |  | 501C3                | GENERAL                          |        |
| P.O. BOX 60087 FORT MYERS FL 33906                |  |                      |                                  | 85     |
| CONT MILEO, TH. 33300                             |  |                      |                                  | 03     |
| SOUTHWEST FLORIDA COMMUNITY FOUNDATION            |  | 501C3                | GENERAL                          |        |
| 3771 COLLEGE PKWY, BLDG 2, ST 201                 |  |                      |                                  |        |
| FORT MYERS, FL 33919                              |  |                      |                                  | 1,00   |
|   |  |                      |                                  |        |
| SPECTROIS INSTITUTE FOR LOW VISION 219 E COLE AVE |  | 501C3                | GENERAL                          |        |
| WHEATON, IL 60187                                 |  |                      |                                  | 55     |
|   |  |                      |                                  |        |
| ST. MARK'S EPISCOPAL CHURCH                       |  | 501C3                | GENERAL                          |        |
| 393 N MAIN ST.<br>GLEN ELLYN, IL 60137            |  |                      |                                  | 1,20   |
|   |  |                      |                                  | 1,20   |
| ST. MARY'S EPISCOPAL CHURCH                       |  | 501C3                | GENERAL                          | :      |
| PO BOX 1923                                       |  |                      |                                  |        |
| BONITA SPRINGS, FL 34133                          |  |                      |                                  | 1,20   |
|   |  |                      |                                  |        |
| SUNSHINE THROUGH GOLF FOUND.<br>11855 ARCHER AVE. |  | 501C3                | GENERAL                          |        |
| LEMONT, IL 60439                                  |  |                      |                                  | 50     |
|   |  |                      |                                  |        |
| SUSAN KOMAN RALLY FOR A CURE                      |  | 501C3                |                                  |        |
| PO BOX 650309<br>DALLAS, TX 75265                 |  |                      |                                  | 10     |
|   |  |                      |                                  |        |
| THETA CHI FUNDS FOUNDATION                        |  | 501C3                | GENERAL                          |        |
| 3330 FOUNDERS ROAD                                |  |                      |                                  | 25     |
| INDIANAPOLIS, IN 46268                            |  |                      |                                  | 23     |
| UNITED WAY OF DUPAGE CO                           |  | 501C3                | GENERAL                          |        |
| P.O. BOX 317                                      |  | 50103                | Shirin                           |        |
| WHEATON IL 60189  Total from continuation sheets  | <u> </u>   | <u> L.</u>           |                                  | 50     |

REESE FAMILY CHARITABLE FOUNDATION
Supplementary Information

| Part XV Supplementary Information 3 Grants and Contributions Paid During the You |  | <del></del>                          | -                                |        |
|--|--|--------------------------------------|----------------------------------|--------|
| Recipient  | If recipient is an individual,   |                                      |                                  |        |
| Name and address (home or business)  | show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or contribution | Amount |
|  | or substantial contributor   | Toolploit                            |                                  |        |
| INITED WAY OF LEE COUNTY   |  | 501C3                                | GENERAL                          | :      |
| 7275 CONCOURSE DRIVE   |  |                                      |                                  |        |
| FORT MYERS, FL 33908   |  |                                      |                                  | 1,00   |
| VALPARAISO UNIVERSITY  |  | 501C3                                | GENERAL                          |        |
| GRALAND HALL   |  |                                      |                                  |        |
| VALPARAISO, IN 46383-6493  |  |                                      |                                  | 50     |
| WCGU PUBLIC RADIO  |  | 501C3                                | GENERAL                          |        |
| 10501 FGCU BLVD. SOUTH   |  |                                      |                                  |        |
| FORT MYERS, FL 33965   |  |                                      |                                  | 14     |
|  |  |                                      |                                  |        |
| WESTERN GOLF EVANS SCHOLARSHIP   |  | 501C3                                | GENERAL                          |        |
| L BRIAR ROAD   |  | <u> </u>                             |                                  |        |
| GOLF, IL 60029   |  |                                      |                                  | 25     |
| WGN NEEDIEST KIDS FUND   |  | 501C3                                | GENERAL                          |        |
| 435 N. MICHIGAN AVE.   |  |                                      |                                  |        |
| CHICAGO, IL 60611  |  |                                      |                                  | 50     |
| WTTW CHANNEL 11  |  | 501C3                                | GENERAL                          |        |
| 5400 N. ST. LOUIS AVE.   |  | 50103                                | GENERAL                          |        |
| CHICAGO, IL 60625-3698   |  |                                      |                                  | 25     |
|  |  |                                      |                                  |        |
| YOUNG MEN'S EDUC NETWORK   |  | 501C3                                | GENERAL                          |        |
| 1241 S. PULASKI  |  |                                      |                                  |        |
| CHICAGO, IL 60623  |  |                                      | · ·                              | 50     |
| AMIGOS CENTER AT HOPE LUTHERAN CHURCH  |  | 501C3                                | GENERAL                          |        |
| 25999 OLD 41 ROAD  |  |                                      |                                  |        |
| BONITA SPRINGS, FL 34135   |  |                                      |                                  | 50     |
|  |  |                                      |                                  |        |
| AUDUBON OF FLORIDA   |  | 501C3                                | GENERAL                          |        |
| 375 SANCTUARY RD W   |  |                                      |                                  |        |
| NAPLES FL 34120  |  |                                      |                                  | 50     |
| BONITA SPRINGS ASSISTANCE OFFICE   |  | 501C3                                | GENERAL                          |        |
| 5 25300 BERNWOOD DR  |  |                                      |                                  |        |
| BONITA SPRINGS FL 34135  |  |                                      |                                  | 50     |
| Total from continuation sheets   |  |                                      |                                  |        |

| 3 Grants and Contributions Paid During the Ye | or (Continuation)  |                      |                                  |              |
|---|--|----------------------|----------------------------------|--------------|
| Recipient                                     | If recipient is an individual  |                      |                                  | <del> </del> |
| Name and address (home or business)           | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount       |
| Traine and address (nome of business)         | or substantial contributor   | recipient            | <u> </u>                         |              |
|   |  | İ                    |                                  |              |
| NUTUAL GROUND INC.                            |  | 501C3                | GENERAL                          |              |
| 118 OAK AVE                                   |  |                      |                                  |              |
| AURORA_ IL 60506                              |  |                      |                                  | 375          |
|   |  |                      |                                  |              |
| SHADOW WOOD CHARITABLE FOUNDATION             |  | 501C3                | GENERAL                          |              |
| BOX 162, 24600 TAMIAMI TRAIL, STE. 212        |  |                      |                                  |              |
| BONITA SPRINGS, FL 34134                      |  |                      |                                  | 250          |
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|   |  |                      |                                  |              |
| Total from continuation sheets                |  |                      | 1                                |              |

| FORM 990-PF  | ACCOUNTI                     | NG FEES                           |  | STATEMENT 1  |
|--|------------------------------|-----------------------------------|--|--|
| DESCRIPTION  | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME |  |  |
| TAX RETURN PREP FEES   | 1,625.                       | 1,625.                            |  | 0.   |
| TO FORM 990-PF, PG 1, LN 16B   | 1,625.                       | 1,625.                            |  | 0.   |
| FORM 990-PF  | TAX                          | ES                                |  | STATEMENT 2  |
| DESCRIPTION  | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C) ADJUSTED NET INCOM   |  |
| FEDERAL TAXES  | 242.                         | 0.                                |  | 0.   |
| TO FORM 990-PF, PG 1, LN 18 =  | 242.                         | 0.                                |  | 0.   |
| FORM 990-PF  | OTHER E                      | XPENSES                           |  | STATEMENT 3  |
| DESCRIPTION  | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME |  | (D)<br>CHARITABLE<br>E PURPOSES  |
| STATE FILING FEE   | 15.                          | 15.                               |  | 0.   |
| TO FORM 990-PF, PG 1, LN 23  | 15.                          | 15.                               |  | 0.   |
| FORM 990-PF  | CORPORAT                     | E STOCK                           |  | STATEMENT 4  |
| DESCRIPTION  |                              | ВО                                | OK VALUE   | FAIR MARKET<br>VALUE   |
| JP MORGAN CHASE & CO WASHINGTON MUTUAL INVESTORS O AMERICAN ELEC PWR INC ARCHER DANIELS MIDLAND CO CVS CAREMARK CORP CONOCOPHILLIPS KRAFT FOODS GROUP INC MCDONALDS CORP | CL A                         | - <del>1-1</del> -                | 473,775. 5,000. 12,070. 11,908. 10,361. 9,952. 10,353. 15,534. | 729,563.<br>4,626.<br>12,343.<br>12,558.<br>10,472.<br>10,277.<br>10,298.<br>15,321. |

| * REESE FAMILY CHARITABLE FOUNDATION  |                     |                   | 36-3882837           |
|---------------------------------------|---------------------|-------------------|----------------------|
| PFIZER INC<br>UNITEDHEALTH GROUP INC  |                     | 9,987.<br>10,057. | 9,302.               |
| TOTAL TO FORM 990-PF, PART II, LINE 1 | -<br>0в<br>=        | 568,997.          | 824,349.             |
| FORM 990-PF OTHER                     | INVESTMENTS         |                   | STATEMENT 5          |
| DESCRIPTION                           | VALUATION<br>METHOD | BOOK VALUE        | FAIR MARKET<br>VALUE |
| HCP INC REIT                          | COST                | 10,445.           | 10,660.              |
| TOTAL TO FORM 990-PF, PART II, LINE 1 | 3                   | 10,445.           | 10,660.              |