# Form **990**

Department of the Treasury Internal Revenue Service

A For the 2011 calendar year, or tax year beginning

# **Return of Organization Exempt From Income Tax**

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

JUL 1,

benefit trust or private foundation)

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

2011

and ending JUN 30, 2012

OMB No. 1545-0047 **2011**Open to Public

Open to Public Inspection

В	Check if applicable:	C Name of organization		D Employer identi	fication number
	Address				
H	change Name			36-	3789505
H	change Initial	Doing Business As	oom/suite		
H	return Termin-	' '	oom/suite	E Telephone numb	er -486-7861
H	—lated ☐Amende return			G Gross receipts \$	152,049.56
H	Applica-			-	
	tion pending	F Name and address of principal officer: PATRICK BRENNAN		H(a) Is this a group for affiliates?	Yes X No
		POST OFFICE BOX 373, GLENVIEW, IL 6002	5	<b>H(b)</b> Are all affiliates in	
$\overline{\mathbf{T}}$	Ταν.Αναι	mpt status: X 501(c)(3)		1 '	a list. (see instructions)
		www.gef34.org	021	H(c) Group exempt	
		organization: X Corporation Trust Association Other	1 Year		M State of legal domicile: IL
_		Summary		01101111441011, = 2 2 3	W Clate of logar dofficions, ==
_		Briefly describe the organization's mission or most significant activities: ${ t Finance}$	cial	Support pro	ovided to
Governance	6	educators in IL Dist. #34 with education	grant	s.The prima	ary
ra	2 0	Check this box   if the organization discontinued its operations or dispose	ed of more	than 25% of its net	assets.
ove				з	1
ত	4 1	Sumber of independent voting members of the governing body (Part VI, line 1b)			
es	5 T	otal number of individuals employed in calendar year 2011 (Part V, line 2a)		5	
έĖ	6 T	otal number of volunteers (estimate if necessary)		6	
Activities &		otal unrelated business revenue from Part VIII, column (C), line 12			
_	bΛ	Net unrelated business taxable income from Form 990-T, line 34	<u></u>	71	0.00
				Prior Year	Current Year
ne	1	Contributions and grants (Part VIII, line 1h)		158,297.0	_
Revenue	1	Program service revenue (Part VIII, line 2g)		0.0	
æ		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		0.0	
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		1,475.0	
_		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		159,772.0	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.0	
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.0	
ses	15 S	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.0	
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)  ■ 0 • 0	<u> </u>	0.0	0.00
Ä	47 6	<u> </u>	_	135,527.0	0 154,984.46
	1	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)  Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		135,527.0	
		Revenue less expenses. Subtract line 18 from line 12		24,245.0	
- C	3	levertue less expenses. Subtract line 10 from line 12		ginning of Current Year	<u> </u>
ets (	<b>20</b> T	otal assets (Part X, line 16)	20	379,786.0	
ASS	21 T	otal labilities (Part X, line 26)		167,001.0	
Net Assets or Fund Balances	22 N	Net assets or fund balances. Subtract line 21 from line 20		212,785.0	
P	art II	Signature Block		•	<u> </u>
Unc	der penalt	ties of perjury, I declare that I have examined this return, including accompanying schedules a	and stateme	ents, and to the best of	my knowledge and belief, it is
true	e, correct,	, and complete. Declaration of preparer (other than officer) is based on all information of whic	h preparer	has any knowledge.	
		<u> </u>			
Sig	jn	Signature of officer		Date	_
He	re	PATRICK BRENNAN			
		Type or print name and title			
		Print/Type preparer's name Preparer's signature		Date Check	PTIN
Pai	-	Robert H. Landgren Robert H. Landgre	en	self-empl	
		Firm's name Landgren & Company P.C.		Firm's EIN ▶	36-3550882
Use	Only	Firm's address 222 Northfield Road, Suite #102			210 600 0000
		Northfield, IL 60093		Phone no.	312-699-9900
Ma	v the IR	S discuss this return with the preparer shown above? (see instructions)			

Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response to any question in this Part III	X
1	Briefly describe the organization's mission:	
	Financial support provided to educators in Il Dist. #34 with educati	on
	grants.	
2	Did the organization undertake any significant program services during the year which were not listed on	
_	the prior Form 990 or 990-EZ?	X No
	If "Yes," describe these new services on Schedule O.	=== 110
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	X No
_	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to	
	others, the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$100,000.00 including grants of \$) (Revenue \$	)
	Big Learning - Bigger Learners	
	¬	
4b	(Code:) (Expenses \$ 24 , 040 • 00 including grants of \$) (Revenue \$	)
	Science Olympiad	
_	(Code: ) (Expenses \$ 10,000.00 including grants of \$ ) (Revenue \$	
4c	(Code:) (Expenses \$10,000.00 including grants of \$) (Revenue \$)  E-Books: Using Technology Increase Reading Performance	)
	E-Books: Using recimology increase reading reliabilities	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ 20,944.46 including grants of \$ ) (Revenue \$ )	
4e	Total program service expenses ► 154,984.46	-
	Form <b>990</b>	(2011)

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#### Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		37	
_	If "Yes," complete Schedule A	1	Х	v
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	public office? If "Yes," complete Schedule C, Part I  Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3		<u> </u>
7	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			l
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			7.7
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
_	as applicable.  Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
а	Part VI	11a		х
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	11a		
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>complete</i>	۱.,		x
	Schedule D, Parts XI, XII, and XIII	12a		Α_
D	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization			
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40	Х	
10	1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18	Λ	
19	complete Schedule G, Part III	19		х
20a		20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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#### Part IV Checklist of Required Schedules (continued)

21 Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX. column (A), Line 21 Pt "Piss", complete Schedule, Parts I and II    22				Yes	No
Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX.  22	21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			37
column [A], line 27 If "Yes," complete Schedule I, Parts I and III  22 X  23 Id the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule I, I and I I I I I I I I I I I I I I I I I I I			21		Х
Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J.  23	22		22		x
and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", yo to fine 25  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24b C Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  24c C Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d	23				
Schedule J  24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25  b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year to defease any tax-exempt bonds?  25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person out a prior year, and that the transaction has not been reported on any of the organization with a disqualified person on a prior year, and that the transaction has not been reported on any of the organization sprior Forms 990 or 990 E27 If "Yes," complete Schedule person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part If yes," complete Schedule L, Part If yes," organization or or unployee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV yes, and the prior of the organization or explored schedule L, Part IV yes, and the prior of the organization or explored schedule L, Part IV yes, and the prior of the organization organization organization receive more than \$250,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV yes, and year the prior than \$250,000 in non-cash contributions? If "Yes," complete Schedule L, Part IV yes, complete Schedule L, Part IV yes, complete Schedul	20				
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25  b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year of defease any tax-exempt bonds?  d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year of defease any tax-exempt bonds?  25a Section 501(x)3 and 501(x)40 organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		Orbital	23		х
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b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?  d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?  24c  25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I    25b X  25b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I    25c Was a loan to or by a current or former officer, director, frustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tay year? If 'Yes, 'complete Schedule L, Part II    25c Was a loan to or by a current or former officer, director, frustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tay year? If 'Yes, 'complete Schedule L, Part II    25c Was the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee threeol, a grant selection committee member, or to a 39% controlled entity or family member of any of these persons? If 'Yes, 'complete Schedule L, Part IV    27d Was the organization aparty to a business transaction with one of the following parties (see Schedule L, Part IV    28d A family member of a current or former officer, director, trustee, or key employee (or a family member of a current or former officer, director, trustee, or key employee (or a family member of a current or former officer, director, trustee, or key employee (or a family member of a current or former officer, directo			24a		Х
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any tax-exempt bonds? did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I  25a X  b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I  25b X  27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part III  26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part III  27 Did the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  d) Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  27 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M, Part II  28 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," co					
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a X  b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I 25b X  25 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 27b X  26 Was aloan to or by a current or former officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part IV 27b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27b A member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27b A member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 27b A member of a current or former officer, director, trustee, or key employee?			24c		
Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a	d				
disqualified person during the year? If "Yes," complete Schedule L, Part I b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 If "Yes," complete Schedule L, Part I 25b X  26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 X  27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 X  28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X  30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II 31 X  31 Did the organization on 100% of an entity disregarded as separate from the organization under Regulation sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 31 X  32 Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? 52 X  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 53 X  36 Section 501(c)(3) organizations. Did th					
b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part II 25b X  26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 X  27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X  28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28c X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X  31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 32 X  32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I I 32 X  33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, IV, and V, line 1 3 X  34 Was the organization orelated to any tax-exe			25a		Х
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27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X  28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28a X  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b X  c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or developed of a family member thereof) was an officer, director, trustee, or developed of a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28b X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 290 X  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 30 X  31 Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I 31 X  32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I   34 X  33 Did the organization related to any tax-exempt or taxable entity?  If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 34 X  34 Was the organization have a controlled entity within the meaning of section 501(c)(3)? If "Yes," complete Schedule R, Part V, line 2 35b X  35 Section 501(c)(3) organizatio	26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
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of any of these persons? If "Yes," complete Schedule L, Part III  Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  28b X  c An entity of which a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  29 X  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  31 Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part II  31 X  32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  32 X  33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  34 X  35 Did the organization related to any tax-exempt or taxable entity?  If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1  36 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  37 X  38 Did the organization conduct mo	27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
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instructions for applicable filing thresholds, conditions, and exceptions):  a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV  28c X  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  29 X  30 Did the organization individate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I  31 X  32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete  Schedule N, Part II  31 X  32 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations  sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  33 X  34 Was the organization related to any tax-exempt or taxable entity?  If "Yes," complete Schedule R, Parts, III, III, IV, and V, Iine 1  34 X  35 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, Iine 2  36 Section 501(c)(3) organizations. Did the organization make any transaction with a controlled entity within the meaning of section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, Iine 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, Iine 2  37 Did the organization		of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  30 X  31 Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I  31 X  32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete  Schedule N, Part II  31 X  32 Was the organization own 100% of an entity disregarded as separate from the organization under Regulations  sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  33 X  34 Was the organization related to any tax-exempt or taxable entity?  If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1  35a X  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  35b X  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  35b X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  37 X  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV  c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV  29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M  29 X  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M  30 X  31 Did the organization liquidate, terminate, or dissolve and cease operations?  If "Yes," complete Schedule N, Part I  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete  Schedule N, Part II  32 X  33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations  sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity?  If "Yes," complete Schedule R, Part II, II, IV, and V, line 1  34 X  35a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?					
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If "Yes," complete Schedule N, Part I  31	0.4		30		Λ
Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II  32 X  33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  34 Was the organization related to any tax-exempt or taxable entity?  If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  35a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  36 X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  37 X  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	31		24		y
Schedule N, Part II  32 X  33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  33 X  34 Was the organization related to any tax-exempt or taxable entity?  If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1  34 X  35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?  b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  35b X  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?  If "Yes," complete Schedule R, Part V, line 2  36 X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	22		31		21
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b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  35b X  36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2  36 X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	35a				Х
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If "Yes," complete Schedule R, Part V, line 2  36 X  37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	36				
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and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI  37 X  38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	37				
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			37		X
Note. All Form 990 filers are required to complete Schedule O	38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?			
		Note. All Form 990 filers are required to complete Schedule O	38	Х	

# Form 990 (2011) GLENVIEW EDUCATION FOUNDATION Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country: ►			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0-		
a	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
a				
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
''	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
-	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
-	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
-	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
			<b>990</b> (	2011)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response to any question in this Part VI					X
Sec	tion A. Governing Body and Management					
			ı.		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	34	<u> </u>		
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	34	:		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with	any other	1		
	officer, director, trustee, or key employee?			2		Х
3	Did the organization delegate control over management duties customarily performed by or under th					
	of officers, directors, or trustees, or key employees to a management company or other person?		•	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form S			4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's ass			5		Х
6	Did the organization have members or stockholders?			6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a					
	more members of the governing body?			7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s					
	persons other than the governing body?			7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year					
а	The governing body?	-	=	8a	Х	
b	Each committee with authority to act on behalf of the governing body?			8b		Х
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea					
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	e Code.)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such cl	napte	rs, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y bef	ore filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a		Х
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to co	ıflicts?	12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," c	lescribe			
	in Schedule O how this was done			12c		
13	Did the organization have a written whistleblower policy?			13		X
14	Did the organization have a written document retention and destruction policy?			14		Х
15	Did the process for determining compensation of the following persons include a review and approve	al by i	ndependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
	The organization's CEO, Executive Director, or top management official			15a		Х
b	Other officers or key employees of the organization			15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements	ment	with a			
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		: ' <u>-</u>			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic					
	exempt status with respect to such arrangements?			16b		
	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed > IL					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-1	(Sec	tion 501(c)(3)s only)	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co	ontlict	of interest policy, ar	id tinar	ncial	
00	statements available to the public during the tax year.					
20	State the name, physical address, and telephone number of the person who possesses the books a	nd red	cords of the organiza	ition:		
	P.O. Box 373, GLENVIEW, IL 60025					

01-23-12

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

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

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

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

(A)	(B)			_ (0	C)			(D)	(E)	(F)
Name and Title	Average		not c		more	than		Reportable	Reportable	Estimated
	hours per week		, unle cer an					compensation from	compensation from related	amount of other
	(describe	ctor						the	organizations	compensation
	hours for	trustee or director				ted		organization	(W-2/1099-MISC)	from the
	related	stee	truste		يو	beusa		(W-2/1099-MISC)		organization
	organizations in Schedule	ual tri	ional		ploye	t com	L			and related organizations
	O)	Individual	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) Maureen Pekosh	,	<del>  -</del>	_		_	<u> </u>				
Director	0.00	Х						0.00	0.00	0.00
(2) MIKE BRENNAN										
Director	0.00	Х						0.00	0.00	0.00
(3) PATRICK BRENNAN										
TREASURER	0.00	Х		Х				0.00	0.00	0.00
(4) James R. Baumstark										
CHAIR	3.00	Х		Х				0.00	0.00	0.00
(5) Beth Ann Solem		l								
DIRECTOR	0.00	Х						0.00	0.00	0.00
(6) JEAN BUCHBAND	0.00								0.00	0 00
Director	0.00	Х					<u> </u>	0.00	0.00	0.00
(7) Gayle Gottfried	0 00	٦,						0.00	0 00	0 00
Director (8) Julie Bruch	0.00	Х						0.00	0.00	0.00
Director	0.00	Х						0.00	0.00	0.00
(9) MONIQUE COLLINS	0.00							0.00	0.00	0.00
Director	0.00	х						0.00	0.00	0.00
(10) Jennifer Kramer	""							0.00	0.00	
Director	0.00	x						0.00	0.00	0.00
(11) Jakie Lutz										
DIRECTOR	0.00	Х						0.00	0.00	0.00
(12) BRYAN FRESE										
Director	0.00	Х						0.00	0.00	0.00
(13) Samuel W. Ach										
PAST - CHAIR	0.00	Х		Х				0.00	0.00	0.00
(14) JILL LEACH										
Director	0.00	Х						0.00	0.00	0.00
(15) ALISON OLSEN		l								
Director	0.00	X	_			<u> </u>	<u> </u>	0.00	0.00	0.00
(16) Patty Marfise-Patt										
Director	0.00	X						0.00	0.00	0.00
(17) Cathy Cunningham	0.00	٦,						0.00	0.00	0 00
Director	0.00	X						0.00	0.00	0.00

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Part VII   Section A. Officers, Directors,	Trustees, Key E	mplo	oyee	es, a	nd l	High	est	Compensated Employ	ees (continued)		
(A)	(B)			(0	C)			(D)	(E)	(1	F)
Name and title	Average hours per week	box	not c	ss pe	more rson	than is bot or/trus	h an	Reportable compensation from	Reportable compensation from related	amoı	nated unt of her
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from organ and re	ensation n the nization elated zations
(18) MARY PATRONIK										1	
Director	0.00	Х						0.00	0.00		0.00
(19) Keryl Klemm										1	
Vice Chair	0.00	Х		Х				0.00	0.00		0.00
(20) Ed Leszynski Director	0.00	х						0.00	0.00		0.00
(21) TOM PRCHAL								0,00	0.00		
Director	0.00	Х						0.00	0.00		0.00
(22) Peg Macaluso										1	
Director	0.00	Х						0.00	0.00		0.00
(23) Renee Morosky Director	0.00	x						0.00	0.00		0.00
(24) Elizabeth Sedin	+	╫							0.00		
Director	0.00	Х						0.00	0.00		0.00
(25) LAURA SHAW DIRector	0.00	х						0.00	0.00	ĺ	0.00
(26) ANNE WALTON	0.00	122						0.00	0.00		0.00
DIRECTOR	0.00	Х						0.00	0.00	i	0.00
1b Sub-total	•					▶		0.00	0.00		0.00
c Total from continuation sheets to Part	VII, Section A					•		0.00	0.00		0.00
d Total (add lines 1b and 1c)						•		0.00	0.00		0.00
2 Total number of individuals (including bu						e) wl	no re	eceived more than \$100	0,000 of reportable		
compensation from the organization											0
										Y	es No
2 Did the organization list any former office	or director or tr	ictor	o ka	ov or	mnla		or	highest compensated a	mployee on		

line 1a? If "Yes," complete Schedule J for such individual 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual \_\_\_\_\_\_ 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

#### Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address NONE	<b>(B)</b> Description of services	(C) Compensation

\$100,000 of compensation from the organization See Part VII, Section A Continuation sheets

Total number of independent contractors (including but not limited to those listed above) who received more than

Form 990 (2011) GLENVIEW									36-3/8	9505
Part VII Section A. Officers, Directors, Tr	ustees, Key E	mple	oyee	es, a	nd l	ligh	est	Compensated Employ	rees (continued)	
(A) Name and title	(B) Average			(0	C) sition			(D) Reportable	<b>(E)</b> Reportable	<b>(F)</b> Estimated
Name and title	hours	(c	(check all that a					compensation	compensation	amount of
	per week	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
		Individ	Institu	Officer	Key er	Highe	Former			
(27) GREG ADAMS										
DIRECTOR	0.00	Х			<u> </u>			0.00	0.00	0.00
(28) MANDY CHIARIERI DIRECTOR	0.00	x						0.00	0.00	0.00
(29) LORI EVANS	0.00				⊢			0.00	0.00	0.00
DIRECTOR	0.00	X						0.00	0.00	0.00
(30) JENNIFER GERSHOWITZ	0.00	22			┢			0.00	0.00	0.00
DIRECTOR	0.00	Х						0.00	0.00	0.00
(31) WILL KADEL	0 00	.,						0.00	0.00	0.00
DIRECTOR (32) JIM KENDALL	0.00	Х			⊢			0.00	0.00	0.00
DIRECTOR	0.00	X						0.00	0.00	0.00
(33) SANDY MORSE										
DIRECTOR	0.00	Х						0.00	0.00	0.00
(34) STEPHANIE STEENBERGEN										
DIRECTOR	0.00	Х						0.00	0.00	0.00
					<u> </u>					
					L					
					_					
					L					
		T			$\vdash$					
		_			igspace					
	•									
Total to Part VII, Section A, line 1c					<u></u>					

Pa	rt VII	Statement of Revenue					
				(A) Total revenue	<b>(B)</b> Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	c d e f	Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and	3,257.79				
9	n	Total. Add lines Ta-TT					
Program Service Revenue	2 a b c d		Business Code				
₾	f	All other program service revenue					
	g	Total. Add lines 2a-2f	<b>&gt;</b>				
	3 4 5	Investment income (including dividends, interest other similar amounts)  Income from investment of tax-exempt bond properties	proceeds				
		(i) Real	(ii) Personal				
	6 a b	Gross rents Less: rental expenses					
		Rental income or (loss)					
		( ,	1				
	7 a	Gross amount from sales of (i) Securities	(ii) Other				
		Less: cost or other basis and sales expenses					
		Gain or (loss)					
		Net gain or (loss)	<b>D</b>				
Other Revenue	8 a	Gross income from fundraising events (not including \$ 43,257.79 of contributions reported on line 1c). See  Part IV, line 18 a	43257.79				
됩		Less: direct expenses b					
-		Net income or (loss) from fundraising events	<b>_</b>	0.00			
		Gross income from gaming activities. See Part IV, line 19					
		Less: direct expenses b					
		Net income or (loss) from gaming activities Gross sales of inventory, less returns	······				
		and allowances a Less: cost of goods sold b					
		Net income or (loss) from sales of inventory	<b>&gt;</b>				
Ī		Miscellaneous Revenue	Business Code				
Ī	11 a	Interest Income	611710	791.29			
	b	Securities Capital Gai	611710	95.94	95.94		
	С	Securities Income/Expe	611710	13.42	13.42		
	d						
		Total. Add lines 11a-11d	<b>&gt;</b>	900.65			
	12	Total revenue. See instructions.		152,049.56	900.65	0.00	0.00
13200 01-23							Form <b>990</b> (2011)

#### Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	Check if Schedule O contains a respon	(Å)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
_	section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management				
b	Legal	750.00	750.00		
С	Accounting	750.00	750.00		
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	4 060 00	4 260 00		
12	Advertising and promotion	4,269.00	4,269.00		
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	211.00	211.00		
23	Insurance Other expanses Itamize expanses not severed	411.00	411.00		
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	Program Services - Part	137,748.54	137,748.54		
b	Program Service Benefit	6,665.23	6,665.23		
С	ANNUAL SOFTWARE SERVICE	2,855.43	2,855.43		
d	Credit Card Expenses	2,076.69	2,076.69		
е	All other expenses	408.57	408.57		
25	Total functional expenses. Add lines 1 through 24e	154,984.46	154,984.46	0.00	0.0
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2011)
Part X | Balance Sheet

Pa	rt X	Balance Sheet			
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	47,428.00		114,408.70
	2	Savings and temporary cash investments		2	258,026.65
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	159.07
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees. Complete Part II			
		of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instructions)		6	
Assets	7	Notes and loans receivable, net		7	
Ass	8	Inventories for sale or use		8	
•	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	1,901.27
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets	1	14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)		16	374,495.69
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	164,645.75
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
S	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees	S,		
iabi		highest compensated employees, and disqualified persons. Complete Par	t II		
		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of	of		
		Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	167,001.00	26	164,645.75
		Organizations that follow SFAS 117, check here   X  and complete	ete		
es		lines 27 through 29, and lines 33 and 34.			
anc	27	Unrestricted net assets	212,785.00	27	209,849.94
3al	28	Temporarily restricted net assets		28	
Б	29	Permanently restricted net assets		29	
Ē		Organizations that do not follow SFAS 117, check here   and			
٥		complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	_
Ass	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds		32	
2	33	Total net assets or fund balances			209,849.94
	34	Total liabilities and net assets/fund balances	379,786.00	34	374,495.69

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response to any question in this Part XI				X	
1	Total revenue (must equal Part VIII, column (A), line 12)	1	152			
2	Total expenses (must equal Part IX, column (A), line 25)	2	154			
3	Revenue less expenses. Subtract line 2 from line 1	3		,934		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	212		.00	
5	Other changes in net assets or fund balances (explain in Schedule O)					
_6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	209	,849	.94	
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII				Ш	
				Yes	No	
1	Accounting method used to prepare the Form 990:  Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.				
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?					
b	Were the organization's financial statements audited by an independent accountant?		2b		X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		2c			
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.				
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit				
	Act and OMB Circular A-133?		. 3a		Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	ired audit				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b			
			Forn	n <b>990</b> (	2011)	

132012

#### **SCHEDULE A** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

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

OMB No. 1545-0047

**Open to Public** Inspection

Name of the organization

**Employer identification number** 36-3789505 GLENVIEW EDUCATION FOUNDATION

Part I	Reason		ity Status (All organiz			te this par	t.) See ins	tructions.		, 3703	303	
			because it is: (For lines									
1		•	s, or association of chur	•		•	•	١				
2			' <b>0(b)(1)(A)(ii).</b> (Attach Sc				(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,.				
3			tal service organization			170/b\/1\	/ <b>/</b> \ \ / i i i \					
4			operated in conjunction					VhV1VAViii	i) Enter ti	ne hospital	l'e nam	10
4		-	operated in conjunction	With a rios	spital desci	indea iii <b>3c</b>	Cuon 170		ı <b>y.</b> Eriter ti	ie nospita	i S Hall	ic,
E	city, and stat		benefit of a college or u	nivorcity o	wood or or	acratad by	, a govern	montal uni	t docoribo	nd in		
5				riiversity o	wried or of	berated by	a govern	mentai uni	describe	eu III		
•	1	(b)(1)(A)(iv). (Comple	•			4=0(1.1)						
6	1		ent or governmental uni									
7	-	-	eives a substantial part	of its supp	ort from a	governme	ental unit d	or from the	general p	oublic desc	ribed	in
		<b>b)(1)(A)(vi).</b> (Comple										
8 🖳	· ·		ection 170(b)(1)(A)(vi).									
9 X			eives: (1) more than 33									
			nctions - subject to certa									
			axable income (less sec	tion 511 ta	ax) from bu	sinesses	acquired b	by the orga	nization a	fter June 3	30, 197	75.
	See section	<b>509(a)(2).</b> (Complete	e Part III.)									
10	An organizat	ion organized and op	perated exclusively to te	st for publ	ic safety. S	See <b>sectio</b>	on 509(a)(4	4).				
11 🗀	An organizat	ion organized and op	perated exclusively for the	ne benefit	of, to perfo	orm the fu	nctions of	, or to carr	out the	purposes o	of one	or
	more publicly	supported organiza	ations described in secti	on 509(a)(	1) or section	on 509(a)(2	2). See <b>se</b> e	ction 509(a	a)(3). Che	ck the box	that	
	describes the	e type of supporti <u>ng</u>	organization and compl									
	<b>a</b> L Type	l b∟	ا Type II و	с 📖 Тур	e III - Func	tionally in	tegrated		d L	Type III - 0	Other	
е 📖	By checking	this box, I certify tha	at the organization is not	controlled	d directly o	r indirectly	/ by one o	r more disc	qualified p	ersons oth	ner tha	ın
	foundation m	nanagers and other t	han one or more publicl	y supporte	ed organiza	ations des	cribed in s	section 509	(a)(1) or s	section 509	9(a)(2).	
f	If the organiz	ation received a writ	ten determination from	the IRS tha	at it is a Ty	pe I, Type	II, or Type	e III				
	supporting o	rganization, check th	nis box									. Ш
g	Since Augus	t 17, 2006, has the c	organization accepted ar	ny gift or c	ontribution	from any	of the foll	owing pers	ons?			
	(i) A perso	n who directly or ind	irectly controls, either a	lone or tog	ether with	persons of	described	in (ii) and (i	ii) below,		Yes	No
	the gov	erning body of the su	upported organization?							11g(i)		
	(ii) A family	member of a persor	n described in (i) above?							11g(ii)		
	(iii) A 35%	controlled entity of a	person described in (i)	or (ii) abov	e?					11g(iii)		
h	Provide the f	ollowing information	about the supported or	ganization	(s).							
(i) Nam	e of supported	(ii) EIN	(iii) Type of	(iv) Is the o	organization	(v) Did yo	u notify the	(vi) ls	the	(vii) An	nount o	 if
	ganization		organization (described on lines 1-9		sted in your		ion in col.	organizátio (i) organiz U.S.	ed in the		port	
			above or IRC section	governing	document?	(i) of you	r support?	U.S.	?	·	•	
			(see instructions))	Yes	No	Yes	No	Yes	No			
Total												
	Paperwork Re	duction Act Notice	, see the Instructions f	or				Schedule	e A (Form	1 990 or 99	00-F7)	2011

Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

#### Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
Sec	ction B. Total Support			•			
Cale	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	<b>Total support.</b> Add lines 7 through 10						
	Gross receipts from related activities,	etc. (see instructi	ons)			12	
	First five years. If the Form 990 is for						
	organization, check this box and stor	_					<b>&gt;</b>
Sec	ction C. Computation of Publ		rcentage				•
14	Public support percentage for 2011 (	line 6, column (f) d	ivided by line 11,	column (f))		14	%
	Public support percentage from 2010		•			15	%
	33 1/3% support test - 2011. If the					nore, check this bo	
	stop here. The organization qualifies						
b	33 1/3% support test - 2010. If the						
	and stop here. The organization qual	ifies as a publicly	supported organiz	ation			▶□
17a	10% -facts-and-circumstances tes						or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes						
	more, and if the organization meets the	-					
	organization meets the "facts-and-circ		•		•		<b>▶</b> □
18	<b>Private foundation.</b> If the organization		•	•	,		s
						edule A (Form 990	

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

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

Sec	ction A. Public Support	relew, piedee cerrip	oloto i art ii.j				_		
	endar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total		
	Gifts, grants, contributions, and		. ,	. ,		. ,			
	membership fees received. (Do not include any "unusual grants.")	219112.00	150927.00	128155.00	158297.00	151148.91	807639.91		
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose								
3	Gross receipts from activities that are not an unrelated trade or business under section 513								
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf								
5	The value of services or facilities furnished by a governmental unit to								
_	the organization without charge	210112 00	150027 00	120155 00	150207 00	1511/0 01	807639.91		
	Total. Add lines 1 through 5	219112.00	130327.00	120133.00	130297.00	131140.91	007039.91		
	Amounts included on lines 1, 2, and 3 received from disqualified persons Amounts included on lines 2 and 3 received						0.00		
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.00		
	Add lines 7a and 7b						0.00		
	Public support (Subtract line 7c from line 6.)						807639.91		
	ction B. Total Support	<del> </del>			1	Γ			
	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total 807639.91		
		219112.00	150927.00	178122.00	158297.00	151148.91	80/639.91		
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources								
b	Unrelated business taxable income								
	(less section 511 taxes) from businesses acquired after June 30, 1975								
c	Add lines 10a and 10b								
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on								
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)				1,475.00		13,417.65		
13	Total support (Add lines 9, 10c, 11, and 12.)	226794.00	152612.00	129830.00	д59772.00	152049.56	821057.56		
14	First five years. If the Form 990 is for	J		, ,	•	( )( )	· · · ·		
_	check this box and stop here						<b>&gt;</b>		
	ction C. Computation of Publ					г г	00 20		
	Public support percentage for 2011 (					15	98.37 %		
	Public support percentage from 2010					16	97.46 %		
	ction D. Computation of Inve					T T	0.0		
	Investment income percentage for 20					17	.00 %		
	Investment income percentage from					18	%		
19a	33 1/3% support tests - 2011. If the	-							
b	more than 33 1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization								
	line 18 is not more than 33 1/3%, che	eck this box and <b>st</b>	t <b>op here.</b> The orga	nization qualifies	as a publicly supp	orted organization	▶□		
20	Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check th	nis box and see ins	structions	<u></u> ▶□		

#### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

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

Attach to Form 990. ► See separate instructions.

2011
Open to Public Inspection

Name of the organization

GLENVIEW EDUCATION FOUNDATION

Employer identification number 36-3789505

Pai	t I Organizations Maintaining Donor Advised Fo		or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line 6.		·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writin	g that the assets held in donor advised	funds
	are the organization's property, subject to the organization's exclu	~	
6	Did the organization inform all grantees, donors, and donor advisor		
_	for charitable purposes and not for the benefit of the donor or dor		
Pai			
1	Purpose(s) of conservation easements held by the organization (c		,
	Preservation of land for public use (e.g., recreation or educa		rically important land area
	Protection of natural habitat	Preservation of a certifie	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified c	onservation contribution in the form of	a conservation easement on the last
	day of the tax year.		
	<b>,,</b>		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified historic structur		
	Number of conservation easements included in (c) acquired after		
	listed in the National Register	· ·	
3	Number of conservation easements modified, transferred, release		
	year >	-, <b>g</b> ,	· 9
4	Number of states where property subject to conservation easeme	nt is located ▶	
5	Does the organization have a written policy regarding the periodic		
	violations, and enforcement of the conservation easements it hold		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and		
7	Amount of expenses incurred in monitoring, inspecting, and enfor		
8	Does each conservation easement reported on line 2(d) above sat		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIV, describe how the organization reports conservation ea		
	include, if applicable, the text of the footnote to the organization's	·	·
	conservation easements.		
Pai	t III Organizations Maintaining Collections of Ar	t, Historical Treasures, or Oth	er Similar Assets.
	Complete if the organization answered "Yes" to Form 990,	Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC 95	8), not to report in its revenue statemer	nt and balance sheet works of art,
	historical treasures, or other similar assets held for public exhibition	on, education, or research in furtherance	e of public service, provide, in Part XIV,
	the text of the footnote to its financial statements that describes t	hese items.	
b	If the organization elected, as permitted under SFAS 116 (ASC 95	8), to report in its revenue statement ar	nd balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, educate	ion, or research in furtherance of public	c service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
			<b>L</b> .
2	If the organization received or held works of art, historical treasure		
	the following amounts required to be reported under SFAS 116 (A	SC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		<b>&gt;</b> \$
b			<b>.</b>

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 132051 01-23-12

Schedule D (Form 990) 2011

	t III Organizations Maintaining Co	ollections of A				Other	Simila			nued)
3	Using the organization's acquisition, accession									
3	(check all that apply):	i, and other record	as, criecr	carry or tire	Tollowing that a	are a sig	illicant (	use of its	Collection	TILETTIS
а	Public exhibition	d	. 🗀	oan or evo	hange program	ne				
b	Scholarly research	e								
C	Preservation for future generations	•	,							
4	Provide a description of the organization's coll	ections and explai	in how th	ev further t	he organization	ı's evem	nt nurna	se in Par	· XIV	
5	During the year, did the organization solicit or							700 IIII UI	. / ( 7 .	
Ū	to be sold to raise funds rather than to be mail								Yes	☐ No
Par	t IV Escrow and Custodial Arrang									
	reported an amount on Form 990, Part	-		o. gaa				, , .	,	
1a	Is the organization an agent, trustee, custodial		diary for	contribution	ns or other asse	ets not ir	ncluded			
	on Form 990, Part X?								Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV a									
	, .	·	ŭ						Amount	
С	Beginning balance						1c			
	Additions during the year									
е	Distributions during the year									
f	Ending balance									
2a	Did the organization include an amount on For								Yes	No No
	If "Yes," explain the arrangement in Part XIV.									
Par	t V Endowment Funds. Complete if t	the organization an	swered	"Yes" to Fo	rm 990, Part IV	, line 10				
		(a) Current year	<b>(b)</b> P	rior year	(c) Two years I	back (c	<b>i)</b> Three y	ears back	(e) Four	years back
1a	Beginning of year balance									
b	Contributions									
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curre		ce (line 1	g, column (a	a)) held as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Temporarily restricted endowment	%								
_	The percentages in lines 2a, 2b, and 2c should	•								
За	Are there endowment funds not in the possess	sion of the organiz	ation tha	it are held a	ınd administere	ed for the	e organiz	ation	Г	<u>, , , , , , , , , , , , , , , , , , , </u>
	by:									Yes No
	(i) unrelated organizations								3a(i)	
	(ii) related organizations								3a(ii) 3b	
4	Describe in Part XIV the intended uses of the c								SD	
Par										
	Description of property	(a) Cost or o			or other	(c) Acc	cumulate	ed	(d) Book	c value
	Becomplian or property	basis (investr			(other)		eciation	~	( <b>a</b> ) <b>B</b> 001	· value
1a	Land	<u> </u>			` '	1				
	Buildings									
	Leasehold improvements									
d	Equipment				<u> </u>					
	Other									
	Add lines 1s through 1s. (Column (d) must ag		V ookun	on (D) line 1	10(a) )					0.00

Schedule D (Form 990) 2011

Part VII	Investments - Other Securities. Securities.	e Form 990, Part X, line	12.		<b>.</b>
(a	) Description of security or category (including name of security)	(b) Book value	Co	(c) Method of valua	
(1) Financia	l derivatives				
	neld equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D) (E)					
(F)					
(G)					
(H)					
(I)					
	) must equal Form 990, Part X, col (B) line 12.) ▶				
Part VIII	Investments - Program Related. Se	ee Form 990, Part X, lin	e 13.		
	(a) Description of investment type	(b) Book value	Co	(c) Method of valua ost or end-of-year mar	
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(10)					
	) must equal Form 990, Part X, col (B) line 13.)				
	Other Assets. See Form 990, Part X, line	15.			
	(a)	Description			(b) Book value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)	mn (b) must equal Form 990, Part X, col (B) line	15)			
	Other Liabilities. See Form 990, Part X,			······	
1.	(a) Description of liability		(b) Book value		
	eral income taxes			-	
(2)				-	
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)				-	
(11)				-	
Total. (Colur	mn (b) must equal Form 990, Part X, col (B) line C 740 Footnote. In Part XIV, provide the text of the footnote to C 740).	the organization's financial sta	atements that reports the organ	nization's liability for uncertai	n tax positions under
<ol> <li>FIN 48 (ASC</li> </ol>	U 740).				

132053

	rt XI Reconciliation of Change in Net Assets from Form 9		nancial Sta		105505 Page <del>1</del>
1	Total revenue (Form 990, Part VIII, column (A), line 12)				152,049.56
2	Total expenses (Form 990, Part IX, column (A), line 25)				154,984.46
3	Excess or (deficit) for the year. Subtract line 2 from line 1				<2,934.90
4	Net unrealized gains (losses) on investments				(2,50105
5	Donated services and use of facilities				
6	Investment expenses				<0.16
7	Prior period adjustments		·····   -		70.10
8	Other (Describe in Part XIV.)				<0.16
9	Total adjustments (net). Add lines 4 through 8  Excess or (deficit) for the year per audited financial statements. Combine line				<2,935.06
10 Pai	rt XII Reconciliation of Revenue per Audited Financial Sta			Return	<b>\Z</b> ,555.00
1			-		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			··	
		2a			
a	Net unrealized gains on investments			_	
b	Donated services and use of facilities			_	
C	Recoveries of prior year grants				
d	Other (Describe in Part XIV.)	·			
e	Add lines 2a through 2d				
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1.1			
a	Investment expenses not included on Form 990, Part VIII, line 7b			_	
b	Other (Describe in Part XIV.)				
_C					
5 <b>D</b> 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XIII Reconciliation of Expenses per Audited Financial Sta	stomonte With I	vnoncoc n	5	<u> </u>
					· · · · · · · · · · · · · · · · · · ·
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	ا ما			
a	Donated services and use of facilities				
b	Prior year adjustments			_	
C	Other losses			_	
d	Other (Describe in Part XIV.)				
e	Add lines 2a through 2d				
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1			
а	Investment expenses not included on Form 990, Part VIII, line 7b				
	Other (Describe in Part XIV.)	4b			
	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	.)		5	
	rt XIV Supplemental Information	B	4.5 11	41 101	
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9; e 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also				
Pa	rt XII, Line 4b - Other Adjustments:				
In	terest Income				
Se	curities Income/Expense				

#### SCHEDULE G (Form 990 or 990-EZ)

# **Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No. 1545-0047

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

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

Open To Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

Employer identification number

GLENVIEW EDUCATION FOUNDATION						36-3789505		
Part I Fundraising Activities required to complete this par	Complete if the organization answett.	ered "\	'es" to	Form 990, Part IV,	line 17. Form 99	0-EZ filers are not		
Indicate whether the organization raised funds through any of the following activities. Check all that apply.  a								
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount pa to (or retained fundraiser listed in col. (	by) to (or retained by)		
		Yes	No					
			<b>&gt;</b>					
3 List all states in which the organization or licensing.	n is registered or licensed to solicit (	contrib	utions	s or has been notified	d it is exempt fro	om registration		

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

Schedule G (Form 990 or 990-EZ) 2011

Schedule G (Form 990 or 990-EZ) 2011 GLENVIEW EDUCATION FOUNDATION 36-3789505 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

(a) Event #1 (b) Event #2 (c) Other events (add col. (a) through

		<u> </u>	(a) Event #1	(b) Event #2	(c) Other events	
					(c) Other events	(d) Total events
				CORPORATE AD	•	(add col. (a) through
			TICKET SALES		2	col. <b>(c)</b> )
Φ			(event type)	(event type)	(total number)	551. <b>(5</b> ))
Revenue						
eve	1	Gross receipts	10,425.00	20,182.79	12,650.00	43,257.79
Œ					•	<u> </u>
	2	Less: Charitable contributions	0.00	0.00	0.00	
	_	Less. Chantable Contributions	0.00	0,00	0.00	
		Out to increase (line of maintain line O)	10,425.00	20,182.79	12,650.00	43,257.79
	3	Gross income (line 1 minus line 2)	10,423.00	20,102.19	12,030.00	43,431.13
	4	Cash prizes				
S	5	Noncash prizes				
J.SC						
ç	6	Rent/facility costs				
Direct Expenses						
9	7	Food and beverages				
₫	•	redu and perchages				
	0	Entortainment				
	8	Entertainment Other divises any areas				
	9	Other direct expenses	<b>O</b> : 1 (1)			,
	10	Direct expense summary. Add lines 4 through				43,257.79
Da	11	Net income summary. Combine line 3, column	n (d), and line 10	000 D 1 N/ E 10		43,257.79
Pč	rt I		answered "Yes" to Form	990, Part IV, line 19, or r	eported more than	
		\$15,000 on Form 990-EZ, line 6a.	T			
e n			(a) Bingo	<b>(b)</b> Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add
Revenue				billgo/progressive billgo		col. (a) through col. (c))
Zev						
	1	Gross revenue				
S	2	Cash prizes				
nse						
ĝ	3	Noncash prizes				
Direct Expenses						
ē	4	Rent/facility costs				
⊡						
	5	Other direct expenses				
	Ť		Yes %	Yes %	Yes %	
	6	Volunteer labor	No No	No No	□ No / 1	
	٠	Volunteer labor	140			
	7	Direct expense summary. Add lines 2 through	a 5 in column (d)			(
	′	bliect expense summary. Add lines 2 tillougi	15 III Column (a)			
		Not remine in come assessment. Combine line 4	Lastrona dandina 7		_	
	8	Net gaming income summary. Combine line 1	, column a, and line 7		<b>P</b>	
_	_					
		ter the state(s) in which the organization opera	<u> </u>			
а		the organization licensed to operate gaming ac				└── Yes └── No
b		No," explain:				
b						
	If "	No," explain:				
	If "				/ear?	Yes No
10a	If "	No," explain:			/ear?	Yes No
10a	If "	No," explain:  ere any of the organization's gaming licenses re			/ear?	Yes No

132082 01-23-12

Schedule G (Form 990 or 990-EZ) 2011

Sch	nedule G (Form 990 or 990-EZ) 2011 GLENVIEW EDUCATION FOUNDATION 36-3	789	505	Page 3
	Does the organization operate gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed			
	to administer charitable gaming?	$\square$	Yes	└─ No
	Indicate the percentage of gaming activity operated in:			
	a The organization's facility			<u>%</u>
	b An outside facility  Enter the name and address of the person who prepares the organization's gaming/special events books and records:	13b		<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records.			
	Name			
	Address >			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Yes	☐ No
k	b If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount			
	of gaming revenue retained by the third party  \$			
•	c If "Yes," enter name and address of the third party:			
	Name			
	Address ▶			
16	Gaming manager information:			
	Name			
	Gaming manager compensation > \$			
	Gaming manager compensation			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?		Yes	☐ No
k	b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year ▶ \$			
Pa	Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information		-	

## SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization

GLENVIEW EDUCATION FOUNDATION

Employer identification number 36-3789505

Form 990, Part I, Line 1, Description of Organization Mission:

grant-making activity of the Glenview Eduation Foundation is the

Educator Developement Grants. These Grants are intended to support

teachers at various stagges of the inquiry process as they seek to

implement new ideas in their classrooms.

Form 990, Part III, Line 4d, Other Program Services:

OTHER GRANTS AND EXPENSES

Expenses \$ 3,709. including grants of \$ 0. Revenue \$ 0.

Administrative Program Service Expense Part II

Expenses \$ 17,236. including grants of \$ 0. Revenue \$ 0.

Form 990, Part VI, Section A, line 8b: TOTAL BOARD APPROVAL IS NECESSARY FOR ALL ACTIONS OF SUB COMMITTEE.

Form 990, Part VI, Section B, line 11: The Treasurer and the Chariperson review and approve for the Internal Revenue Service and State of Illinois the From 990 to filed.

Form 990, Part VI, Section C, Line 18: www.gef34.org

Form 990, Part VI, Section C, Line 19: All Form 990 information filed with the internal revenue service and the State of Illinois is made available to the public by request, and is posted to the web-site.

Name of the organization  GLENVIEW EDUCATION FOUNDATION	Employer identification number 36-3789505
Form 990, Part XI, line 5, Changes in Net Assets:	
Prior period adjustments:	0.

Form 8	8868 (Rev. 1-2012)					Page <b>2</b>	
• If yo	ou are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this	s box		<b>■</b> X	
	Only complete Part II if you have already been granted an a						
	ou are filing for an Automatic 3-Month Extension, comple						
Parl				al (no c	opies nee	ded).	
	·		, ,		•	see instructions	
Туре	or Name of exempt organization or other filer, see instru	ıctions			mployer identification number (EIN) or		
print				Linployo	,p.o., o		
File by t	he GLENVIEW EDUCATION FOUNDATIO	ON		X	X 36-3789505		
	due date for filling your return. See  C/O Robert H. Landgren, CPA - 222 Northfield Road,						
				CI (CCI4)			
instructi							
	Northfield, IL 60093	orcigir add	ness, see mandellons.				
	professional field and the professional field an						
Entor	the Deturn ends for the return that this application is far (file		to application for each return)			011	
Lillei	the Return code for the return that this application is for (file	e a separa	te application for each return)				
Applie	nation	Poturn	Application			Return	
Applic		Return					
Is For		Code	Is For			Code	
Form 9		01	F 1011 A			- 00	
	990-BL	02	Form 1041-A			08	
	990-EZ	01	Form 4720			09	
	990-PF	04	Form 5227			10	
	990-T (sec. 401(a) or 408(a) trust)	05 Form 6069			11		
-	990-T (trust other than above)	06	Form 8870			12	
STOP	! Do not complete Part II if you were not already granted		natic 3-month extension on a prev	iously file	ed Form 886	<u> </u>	
	PATRICK BRENNAI						
	books are in the care of $\triangleright$ P.O. Box 373 –	GLEN					
	ephone No. ► 847-998-5000		FAX No. ▶				
	ne organization does not have an office or place of busines					▶ ∟	
	nis is for a Group Return, enter the organization's four digit						
box	lacksquare . If it is for part of the group, check this box $lacksquare$ $lacksquare$		ach a list with the names and EINs of	all memb	ers the exte	nsion is for.	
	I request an additional 3-month extension of time until	May	15, 2013			0.1.0	
			, 2011 , and ending	g JUN	30, 2	012	
6	If the tax year entered in line 5 is for less than 12 months, c	heck reas	on: Initial return	⊥ Final r	eturn		
	Change in accounting period						
7	State in detail why you need the extension						
	GEF organization has a new Tre						
	account for the contributions						
	is necessary to close the Gene	eral 1	Ledger and Complete	e the	tax r	eturn.	
8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any				
	nonrefundable credits. See instructions.			8a	\$	0.00	
b	If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated				
	tax payments made. Include any prior year overpayment all	lowed as a	a credit and any amount paid				
	previously with Form 8868.				\$	0.00	
С	Balance due. Subtract line 8b from line 8a. Include your pa	ayment wit	th this form, if required, by using				
EFTPS (Electronic Federal Tax Payment System). See instructions.		8c	\$	0.00			
	Signature and Verificat	ion mus	st be completed for Part II o	nly.			
Under it is tru	penalties of perjury, I declare that I have examined this form, includ e, correct, and complete, and that I am authorized to prepare this fo	ling accomp orm.	panying schedules and statements, and to	the best o	f my knowled	ge and belief,	
Signature ▶ Title ▶ Date ▶							
J.g.iutt	11110			Date		0060 (Dov. 1.0010)	

Form **8868** (Rev. 1-2012)

Form AG990-IL Revised 3/05

	ice Use Only  ILLINOIS CHARITABLE ORGANIZATION ANNUAL	Form AG990-IL Revised 3/05			
PMT	# Attorney General LISA MADIGAN State of III Charitable Trust Bureau, 100 West Rando 11th Floor, Chicago, Illinois 60601	#			
	, , ,	v	Check all items attached:		
AMT	·	X	Copy of IRS Return		
	Beginning of (04 (0044	Make Checks	Audited Financial Statements		
		Payable to the Illinois	Copy of Form IFC		
INIT	& Ending	Charity X	\$15.00 Annual Report Filing Fee		
	- 06/30/2012	Bureau Fund	\$100.00 Late Report Filing Fee		
Federa	MO DAY YR		MO DAY YR		
Are co	ontributions to the organization tax deductible? X Yes No Date Org	ganization was created	d:		
	LEGAL	Year-end			
	NAME GLENVIEW EDUCATION FOUNDATION	amounts			
	MAIL	A) ASSETS	A) \$ 374,496.		
A A	DRESS POST OFFICE BOX 373	B) LIABILITIES	B) \$ 164,646.		
	STATE GLENVIEW, IL	C) NET ASSETS	c) \$ 209,850.		
	P CODE 60025	3).11.7.1832.13	2037030		
	SUMMARY OF ALL REVENUE ITEMS DURING THE YEAR:	PERCENTAGE	AMOUNT		
ı.	D) PUBLIC SUPPORT, CONTRIBUTIONS & PROGRAM SERVICE REV. (GROSS AMTS.)	127.857%	D) \$ 194,407.		
	,	%	E) \$		
	E) GOVERNMENT GRANTS & MEMBERSHIP DUES	<27.857 <sub>%</sub>	F) \$ < 42,357.		
	F) OTHER REVENUES	<47.037%	(F) \$\ \42,337.		
			152 050		
l	G) TOTAL REVENUE, INCOME AND CONTRIBUTIONS RECEIVED (ADD D, E, & F)	100 %	G) \$ 152,050.		
II.	SUMMARY OF ALL EXPENDITURES DURING THE YEAR:	100 000	1-1-001		
	H) OPERATING CHARITABLE PROGRAM EXPENSE	100.000%	H) \$ 154,984.		
	I) EDUCATION PROGRAM SERVICE EXPENSE	%	l) \$		
	J) TOTAL CHARITABLE PROGRAM SERVICE EXPENSE (ADD H & I)	100.000%	J) \$ 154,984.		
	J1) JOINT COSTS ALLOCATED TO PROGRAM SERVICES (INCLUDED IN J): \$				
	K) GRANTS TO OTHER CHARITABLE ORGANIZATIONS	%	K) \$		
	L) TOTAL CHARITABLE PROGRAM SERVICE EXPENDITURE (ADD J & K)	100.000%	L) \$ 154,984.		
	M) MANAGEMENT AND GENERAL EXPENSE	%	M) \$		
	,		, +		
	N) FUNDRAISING EXPENSE	%	N) \$		
	n) Totalitiona Ext Ende	70	N)		
	0) TOTAL EXPENDITURES THIS PERIOD (ADD L, M, & N)	100 %	0) \$ 154,984.		
		100 70	σ, ψ = σ = γ = σ = σ		
HII.	SUMMARY OF ALL PAID FUNDRAISER AND CONSULTANT ACTIVITIES:				
1	(Attach Attorney General Report of Individual Fundraising Campaign- Form IFC. One for each PFR.)  PROFESSIONAL FUNDRAISERS:				
	P) TOTAL AMOUNT RAISED BY PAID PROFESSIONAL FUNDRAISERS	100 %	P) \$ 0.		
	F) TOTAL ANNOUNT RAISED BY FAID FROI ESSIONAL TONDRAISERS	100 %	Ι΄, Ψ		
	O) TOTAL FUNDDAIGEDS FFES AND EVDENOES	0/	0) \$		
	Q) TOTAL FUNDRAISERS FEES AND EXPENSES	%	Q) \$		
	D) MET DECEMED BY THE QUADITY /D MINING Q. D)	0/	D) #		
1	R) NET RECEIVED BY THE CHARITY (P MINUS Q=R)	%	R) \$		
1	PROFESSIONAL FUNDRAISING CONSULTANTS:		C) 6		
,,	S) TOTAL AMOUNT PAID TO PROFESSIONAL FUNDRAISING CONSULTANTS	· A D	S) \$ 0.		
IV.	COMPENSATION TO THE (3) HIGHEST PAID PERSONS DURING THE YE	:AK:	Τ', Φ		
	T) NAME, TITLE:		T) \$		
1	U) NAME, TITLE:		U) \$		
1	V) NAME, TITLE:		V) \$		
V.	CHARITABLE PROGRAM DESCRIPTION: CHARITABLE PROGRAM (3 HIGHEST BY \$ EXPENDE CODE CATEGORIES	ED)	List on back side of instructions		
	CODE CATEGORIES		CODE		
198091 05-01-11	W) DESCRIPTION:		W)#		
91 0	X) DESCRIPTION:		X) #		
198(	Y) DESCRIPTION:		Y) #		

IF	THE ANSWER TO ANY OF THE FOLLOWING IS YES, ATTACH A DETAILED EXPLANATION:		YES	NO
1.	WAS THE ORGANIZATION THE SUBJECT OF ANY COURT ACTION, FINE, PENALTY OR JUDGMENT?	1.		X
2.	HAS THE ORGANIZATION OR A CURRENT DIRECTOR, TRUSTEE, OFFICER OR EMPLOYEE THEREOF, EVER BEEN CONVICTED BY ANY COURT OF ANY MISDEMEANOR INVOLVING THE MISUSE OR MISAPPROPRIATION OF FUNDS OR ANY FELONY?	2.		X
3.	DID THE ORGANIZATION MAKE A GRANT AWARD OR CONTRIBUTION TO ANY ORGANIZATION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES OWNS AN INTEREST; OR WAS IT A PARTY TO ANY TRANSACTION IN WHICH ANY OF ITS OFFICERS, DIRECTORS OR TRUSTEES HAS A MATERIAL FINANCIAL INTEREST; OR DID ANY OFFICER, DIRECTOR OR TRUSTEE RECEIVE ANYTHING OF VALUE NOT REPORTED AS COMPENSATION?	3.		X
4.	HAS THE ORGANIZATION INVESTED IN ANY CORPORATE STOCK IN WHICH ANY OFFICER, DIRECTOR OR TRUSTEE OWNS MORE THAN 10% OF THE OUTSTANDING SHARES?	4.		X
5.	IS ANY PROPERTY OF THE ORGANIZATION HELD IN THE NAME OF OR COMMINGLED WITH THE PROPERTY OF ANY OTHER PERSON OR ORGANIZATION?	5.		X
6.	DID THE ORGANIZATION USE THE SERVICES OF A PROFESSIONAL FUNDRAISER? (ATTACH FORM IFC)	6.		Х
7a.	DID THE ORGANIZATION ALLOCATE THE COST OF ANY SOLICITATION, MAILING, ADVERTISEMENT OR LITERATURE COSTS BETWEEN PROGRAM SERVICE AND FUNDRAISING EXPENSES?	7.		Х
7b.	IF "YES", ENTER (i) THE AGGREGATE AMOUNT OF THESE JOINT COSTS \$ ; (ii) THE AMOUNT ALLOCATED TO PROGRAM SERVICES \$ ; (iii) THE AMOUNT ALLOCATED TO MANAGEMENT AND GENERAL \$ ; AND (iv) THE AMOUNT ALLOCATED TO FUNDRAISING \$			
8.	DID THE ORGANIZATION EXPEND ITS RESTRICTED FUNDS FOR PURPOSES OTHER THAN RESTRICTED PURPOSES?	8.		Х
9.	HAS THE ORGANIZATION EVER BEEN REFUSED REGISTRATION OR HAD ITS REGISTRATION OR TAX EXEMPTION SUSPENDED OR REVOKED BY ANY GOVERNMENTAL AGENCY?	9.		X
10.	WAS THERE OR DO YOU HAVE ANY KNOWLEDGE OF ANY KICKBACK, BRIBE, OR ANY THEFT, DEFALCATION, MISAPPROPRIATION, COMMINGLING OR MISUSE OF ORGANIZATIONAL FUNDS?	10.		Х
11.	LIST THE NAME AND ADDRESS OF THE FINANCIAL INSTITUTIONS WHERE THE ORGANIZATION MAINTAINS ITS THREE LARGEST ACCOUNTS:			
	GLENVIEW STATE BANK, 800 WAUKEGAN ROAD, GLENVIEW, IL 60025			
12.	NAME AND TELEPHONE NUMBER OF CONTACT PERSON: PATRICK BRENNAN - 847-998-5000			
ALI	ATTACHMENTS MUST ACCOMPANY THIS REPORT - SEE INSTRUCTIONS			

UNDER PENALTY OF PERJURY, I (WE) THE UNDERSIGNED DECLARE AND CERTIFY THAT I (WE) HAVE EXAMINED THIS ANNUAL REPORT AND THE ATTACHED DOCUMENTS, INCLUDING ALL THE SCHEDULES AND STATEMENTS AND THE FACTS THEREIN STATED ARE TRUE AND COMPLETE AND FILED WITH THE ILLINOIS ATTORNEY GENERAL FOR THE PURPOSE OF HAVING THE PEOPLE OF THE STATE OF ILLINOIS RELY THEREUPON. I HEREBY FURTHER AUTHORIZE AND AGREE TO SUBMIT MYSELF AND THE REGISTRANT HEREBY TO THE JURISDICTION OF THE STATE OF ILLINOIS.

#### BE SURE TO INCLUDE ALL FEES DUE:

- 1.) REPORTS ARE DUE WITHIN SIX MONTHS OF YOUR FISCAL YEAR END.
- 2.) FOR FEES DUE SEE INSTRUCTIONS.
- 3.) REPORTS THAT ARE LATE OR INCOMPLETE ARE SUBJECT TO A \$100.00 PENALTY.

#### JIM BAUMSTARK

PRESIDENT OF TRUSTEE (PRINT NAME)

SIGNATURE

DATE

PATRICK BRENNAN

TREASURER OF TRUSTEE (PRINT NAME)

SIGNATURE

DATE

## Robert H. Landgren

198101 05-01-11