

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form 990-PF

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

OMB No 1545 0052

2009

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2009, or tax year beginning , 2009, and ending G Check all that apply Initial return Initial Return of a former public charity Final return Amended return Address change Name change Employer identification number Use the RAMZAN AND PARVIN DHANJI FAMILY FOUNDATION INC
Number and street (or PO box number if mail is not delivered to street address) Room/suite IRS label 30-0207845 Otherwise. Telephone number (see the instructions) print (847) 551-1113 22 WESTLAKE DRIVE or type State ZIP code See Specific City or town If exemption application is pending, check here Instructions SOUTH BARRINGTON IL 60010 1 Foreign organizations, check here X Section 501(c)(3) exempt private foundation Check type of organization 2 Foreign organizations meeting the 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust | Other taxable private foundation If private foundation status was terminated Accounting method X Cash Accrual Fair market value of all assets at end of year J under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here Part I Analysis of Revenue and (c) Adjusted net (d) Disbursements (a) Revenue and (b) Net investment Expenses (The total of amounts in expenses per books for charitable income columns (b), (c), and (d) may not necespurposes sarily equal the amounts in column (a) (cash basis only) (see the instructions)) 300,000. Contributions gifts grants etc received (att sch) 2 Ck ► if the foundn is not req to att Sch B Interest on savings and temporary cash investments Dividends and interest from securities 9,590. 9,590 9,590 5a Gross rents b Net rental income REVENUE 6a Net gain/(loss) from sale of assets not on line 10 **b** Gross sales price for all assets on line 6a RECEIVED 0 Capital gain net income (from Part IV line 2) Ø 8 Net short-term capital gain 0 003 003 0 9 Income modifications OCT 0.5 2010 ζ d 10 a Gross sales less returns and allowances b Less Cost of OGDEN c Gross profit/(loss) (att sch) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 309,590. 9.590 9.590 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) **b** Accounting fees (attach sch) c Other prof fees (attach sch) L-16c Stmt 6,856 6,856 6,856 6,856 17 Interest 170 170 170. 170 Taxes (attach schedule)(see instr.) 990-PF 2008 19 Depreciation (attach sch) and depletion Occupancy ķ 21 Travel, conferences, and meetings 22 Printing and publications EXPENSES 23 Other expenses (attach schedule) ANNUAL REPORT FEE 430 430 430 430 Total operating and administrative expenses. Add lines 13 through 23 7,456 7,456 7,456 7,456 25 Contributions, gifts, grants paid 46,500. 46,500. Total expenses and disbursements. Add lines 24 and 25 53,956 7,456 7,456 53,956. Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements 255,634 2,134 b Net investment income (if negative enter 0.) 2,134.

C Adjusted net income (if negative enter 0)

Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) 1,464,047 2 2 Enter amount from Part I, line 27a 255,634 3 Other increases not included in line 2 (itemize) ► ROUNDING 3 4 Add lines 1, 2, and 3 4 1,719,681 5 Decreases not included in line 2 (itemize) 5 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 1,719,681.

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company) (b) How ac P - Purc D - Don				hase	(C) Date acquired (month, day, year)	(d) Date sold (month day year)
1a SEE ATTACHED SALE OF STOCKS P					Various	12/31/09
b SEE ATTACHED SALE O			P		Various	12/31/09
c			-			
d						
е						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa			(h) Gain or (e) plus (f) m	
a 294,918.		29	5,394.			-476
b 478,438.		53	1,357			-52,919.
СС						
d						
<u>e</u>		·				
(i) Fair Market Value as of 12/31/69	ng gain in column (h) and owned by (j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a	1 (1)		(I) Gains (Colu ain minus column (k an -0-) or Losses (fr	(), but not less
a						-476.
b						-52,919.
С						
d						
e						
, ,	capital loss) If gain, also If (loss), enloss) as defined in sections 1222(5) 8, column (c) (see the instructions)	— ₁		3		-53,395
	Section 4940(e) for Reduce	d Tay on Net Investme	ent Inco	me		
Was the foundation liable for the sec If 'Yes,' the foundation does not qual		mplete this part		es	[_] Yes	☐ No
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as			(d) Distribution umn (b) divided	
2008			0.			0 000000
2007	4,678.		0.			0 000000
2006	3,368.					
2005	56,003.					
2004	15,010.	~	· · · · · · · · · · · · · · · · · · ·			
2 Total of line 1, column (d)				2		0 000000
3 Average distribution ratio for th number of years the foundation	e 5-year base period — divide the to has been in existence if less than 5	stal on line 2 by 5, or by the 5 years		3		0 000000
4 Enter the net value of nonchard	table-use assets for 2009 from Part	X. line 5		4		0_
5 Multiply line 4 by line 3				5		0
6 Enter 1% of net investment inc	ome (1% of Part I, line 27b)			6		21
7 Add lines 5 and 6			:	7		21
8 Enter qualifying distributions from	om Part XII, line 4			8		53,956
If line 8 is equal to or greater the Part VI instructions	nan line 7, check the box in Part VI,	line 1b, and complete that	part using	a 1%	_	
BAA						n 990-PF (2009)

Form 990-PF (2009) RAMZAN AND PARVIN DHAN	JI FAMILY FOUNDATION IN	NC 30-	0207845		P	age 4
Part VI Excise Tax Based on Investment	nt Income (Section 4940(a), 49	40(b), 4940(e), or 4948 - see	the instruct	ions)		
1 a Exempt operating foundations described in section 4940(d)(2)	, check here 🕨 🔲 and enter '	N/A' on line 1				
Date of ruling or determination letter	(attach copy of letter if necessa	ry - see instr.)				
b Domestic foundations that meet the section 494	(e) requirements in Part V,	<u> </u>	1			21.
check here 🕨 🗓 and enter 1% of Part I, line 2	?7b					
c All other domestic foundations enter 2% of line 27b Exempt	foreign organizations enter 4% of Part I, I	ine 12, column (b)				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable					
foundations only Others enter -0-)			2			0
3 Add lines 1 and 2			3			21_
4 Subtitle A (income) tax (domestic section 4947(, , ,	,	4			0
5 Tax based on investment income. Subtract line	4 from line 3 If zero or less, ent	er -0-	5		· - · · _	21.
6 Credits/Payments						
a 2009 estimated tax pmts and 2008 overpayment credited to 20		6a	-			
b Exempt foreign organizations — tax withheld at		6b 79.	-			
c Tax paid with application for extension of time to	tile (Form 8868)	6c	-			
d Backup withholding erroneously withheld		6d				
7 Total credits and payments Add lines 6a throug			7			79.
8 Enter any penalty for underpayment of estimate		220 is attached	8			
9 Tax due If the total of lines 5 and 8 is more than line 7, ent		•	9			
10 Overpayment. If line 7 is more than the total of lines 5 and 3	•	1 5 4 4 4 5	10			58
11 Enter the amount of line 10 to be Credited to 2010 estimate		Refunded	11			58
Part VII-A Statements Regarding Activitie	5				V	
1 a During the tax year, did the foundation attempt participate or intervene in any political campaig		r local legislation or did it		1 a	Yes	X
b Did it spend more than \$100 during the year (eill (see the instructions for definition)?	her directly or indirectly) for polit	ical purposes		1 b		_X
If the answer is 'Yes' to 1a or 1b, attach a detai or distributed by the foundation in connection w		nd copies of any materials pul	olished			
c Did the foundation file Form 1120-POL for this y	ear [?]			1 c		X
d Enter the amount (if any) of tax on political expenses		during the year				
(1) On the foundation	(2) On foundation mar	• • • • • • • • • • • • • • • • • • • •				1
e Enter the reimbursement (if any) paid by the for foundation managers ► \$	indation during the year for politic	cal expenditure tax imposed of	'n		•	
2 Has the foundation engaged in any activities that	t have not previously been repor	ted to the IRS?		2		х
If 'Yes,' attach a detailed description of the activ		ted to the mo				
3 Has the foundation made any changes, not prev	iously reported to the IRS, in its	noverning instrument, articles				
of incorporation, or bylaws, or other similar insti	uments? If 'Yes,' attach a confor	med copy of the changes		3		X
4a Did the foundation have unrelated business gros	s income of \$1,000 or more durii	ng the year?		4a		X
b if 'Yes,' has it filed a tax return on Form 990-T f	or this year?			4b		
5 Was there a liquidation, termination, dissolution, or substanti	al contraction during the year?			5		X
If 'Yes,' attach the statement required by General	al Instruction T					
6 Are the requirements of section 508(e) (relating	to sections 4941 through 4945) s	satisfied either		[
 By language in the governing instrument, or 						
 By state legislation that effectively amends the 	e governing instrument so that no	mandatory directions that co	inflict	_		
with the state law remain in the governing ins				6	<u> X</u>	
7 Did the foundation have at least \$5,000 in assets at any time				7	X	
8a Enter the states to which the foundation reports	or with which it is registered (see	e the instructions)				
IL - Illinois						
b If the answer is 'Yes' to line 7, has the foundation furnished (or designate) of each state as required by General Instruction	a copy of Form 990-PF to the Attorney Ger n G ² If 'No,' attach explanation	neral		8ь	<u>X</u>	
9 Is the foundation claiming status as a private of for calendar year 2009 or the taxable year begin	erating foundation within the me ining in 2009 (see instructions fo	aning of section 4942(j)(3) or r Part XIV)? <i>If 'Yes,' complete</i>	4942(j)(5) ∍ Part XIV	9		x
10 Did any persons become substantial contributor	s during the tax year? If 'Yes,' at	tach a schedule listing their n	ames	_		
and addresses BAA			Fc	10 rm 99	0-PF	X (2009)
SET 17 1			, ,		•	·/

Forn	n 990-PF (2009) RAMZAN AND PARVIN DHANJI FAMILY FOUNDATION INC	30-020784	5	_ P	age 5
Par	t VII-A Statements Regarding Activities Continued				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)		11	N/A	A X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?		12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption Website address N/A	application?	13	Х	
14	The books are in care of ► Ramzan Dhanji Telephone	e no ► (847)	551	-111	3
	Located at ► 22 Westlake Dr Barrington IL ZIP + 4 ►	60010			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here			•	
	and enter the amount of tax-exempt interest received or accrued during the year	▶ 15			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		1	·	
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.			Yes	No
1 8	a During the year did the foundation (either directly or indirectly)				
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a				
	disqualified person?	Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	Yes X No		;	
I	b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instruction)	ns) ⁷	1 b		X
	Organizations relying on a current notice regarding disaster assistance check here	▶ [_]			
•	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?		1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section $4942(j)(3)$ or $4942(j)(5)$)				
	a At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?	Yes X No			
	If 'Yes,' list the years 20, 20, 20, 20				
ا	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942((relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a all years listed, answer 'No' and attach statement — see the instructions)		2b		X
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years h	ere			
	► 20, 20, 20				
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No			
	b If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)		3 b		X
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		Х
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?		4b		х
BAA	4	F	orm 99	0-PF ((2009)

Part VII-B Statements Regarding Activiti	<u>es for Which Form</u>	4720 May Be Requ	ured (continued)			_
5a During the year did the foundation pay or incur	any amount to			İ	1 1	
(1) Carry on propaganda, or otherwise attempt	t to influence legislation	(section 4945(e)) ⁷	∐ Yes X	No		
(2) Influence the outcome of any specific publi	ic election (see section	4955), or to carry	Yes X	No		
(3) Provide a grant to an individual for travel,		ourposes?		No		
(4) Provide a grant to an organization other th in section 509(a)(1), (2), or (3), or section	an a charitable, etc. orç 4940(d)(2)? (see instru	ganization described ctions)	Yes X	No		
(5) Provide for any purpose other than religiou educational purposes, or for the prevention	is, charitable, scientific, n of cruelty to children o	literary, or or animals?	Yes X	No	:	
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in (see instructions)?	he transactions fail to q a current notice regard	ualify under the exceptions of the control of the c	ons	5	b X	
Organizations relying on a current notice regar	ding disaster assistance	e check here	▶ [-		_
c If the answer is 'Yes' to question 5a(4), does that because it maintained expenditure responsiff 'Yes,' attach the statement required by Required.	ibility for the grant?	•	Yes	No		
		. ,				
6a Did the foundation, during the year, receive an on a personal benefit contract?	•		Yes X	1		
b Did the foundation, during the year, pay premit	6	<u>ы X</u>				
If 'Yes' to 6b, file Form 8870 7a At any time during the tax year, was the found	ation a norty to a probit	arted tay chalter transac	tion? Yes X	No		
b If yes, did the foundation receive any proceeds				7	h	
Part VIII Information About Officers, Di					- 1	_
and Contractors					· · · · · · · · · · · · · · · · · · ·	
1 List all officers, directors, trustees, foundation	n managers and their c	ompensation (see instr	uctions).	,		_
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		nse account Illowances	.,
Ramzan Dhanji						
22 Westlake Dr	President					
Barrington IL 60010	5.00	0.	0.		0	
Parvın Dhanji						
22 Westlake Dr	Vice-President					
Barrington IL 60010	5 00	0.	0.		0	
Khurrum Dhanjı				1		
22 Westlake Dr	Secretary					
Barrington IL 60010	5 00	0.	0.		0	
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1- see in:	structions). If none, en	ter 'NONE.	•	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation		nse account allowances	ί,
None			•			
0						
0						_
0						
0						_
Total number of other employees paid over \$50,000			•	1	Non	
BAA	TFF A0306 0	07/06/09		Form 9	990-PF (200	

30-0207845

Page 6

Form 990-PF (2009) RAMZAN AND PARVIN DHANJI FAMILY FOUNDATION INC

Form 990-PF (2009) RAMZAN AND PARVIN DHANJI FAMILY FOUNDATION INC 30-0207845

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

3 Five highest-paid independent enter 'NONE.'	contractors for professional services – (see i	nstructions). If none,	
	ch person paid more than \$50,000	(b) Type of service	(c) Compensation
None		, , ,	
			
			
			· · · · · · · · · · · · · · · · · · ·
Total number of others receiving over	\$50,000 for professional services	>	None
Part IX-A Summary of Direct	Charitable Activities		
List the foundation's four largest direct charitab organizations and other beneficiaries served, co	e activities during the tax year. Include relevant statistical inferences convened, research papers produced, etc.	information such as the number of	Expenses
	one		
·			
			0
2 No	ne		
			0
3 No	one		
			0
4			
· _ +			
Part IX-B Summary of Progr	am-Related Investments (see instruc	tions)	
Describe the two largest program-rela	ated investments made by the foundation during	ng the tax year on lines 1 and 2	Amount
	lone		
			0.
2			·
All other program-related investment	s See instructions		
3			
Total. Add lines 1 through 3		•	None
BAA			Form 990-PF (2009)

Page 8

Part X Minimum Investment Ret see instructions.)	urn (All domestic foundation	ons must complete this part. Fo	reign fou	ndations,
1 Fair market value of assets not used (a Average monthly fair market value of s	or held for use) directly in carrying ecurities	g out charitable, etc, purposes	1 a	
b Average of monthly cash balances			1 b	
c Fair market value of all other assets (s	ee instructions)		1 c	
d Total (add lines 1a, b, and c)			1 d	
e Reduction claimed for blockage or other	er factors reported on lines 1a and	t Ic		
(attach detailed explanation)	ractors reported on times ra and	1e		
2 Acquisition indebtedness applicable to	line 1 assets	101	2	
3 Subtract line 2 from line 1d	me 1 433613		3	0
				
4 Cash deemed held for charitable activi (for greater amount, see instructions)	ties Enter 1-1/2% of line 3		4	0
5 Net value of noncharitable-use assets	. Subtract line 4 from line 3. Ente	r here and on Part V. line 4	5	0
6 Minimum investment return. Enter 5%			6	0
		942(j)(3) and (j)(5) private opera	ating four	
and certain foreign organia		and do not complete this pa		
1 Minimum investment return from Part	K, line 6		1	0.
2a Tax on investment income for 2009 fro	m Part VI, line 5	2a 21.		
b Income tax for 2009 (This does not in	clude the tax from Part VI)	2b		
c Add lines 2a and 2b	ŕ		2c	21
3 Distributable amount before adjustmen	ts Subtract line 2c from line 1		3	0
4 Recoveries of amounts treated as qual			4	
5 Add lines 3 and 4	, ,		5	0
6 Deduction from distributable amount (s	ee instructions)		6	
7 Distributable amount as adjusted Sub		e and on Part XIII, line 1	7	0
Part XII Qualifying Distributions				
1 Amounts paid (including administrative a Expenses, contributions, gifts, etc — to	expenses) to accomplish charita stal from Part I, column (d), line 2	ble, etc, purposes 6	1a	53,956
b Program-related investments — total fi			1 b	0
2 Amounts paid to acquire assets used (or held for use) directly in carryin	g out charitable, etc, purposes	2	
3 Amounts set aside for specific charitat a Suitability test (prior IRS approval requ	ole projects that satisfy the irred)		3a	
b Cash distribution test (attach the requi	red schedule)	:	3b	
4 Qualifying distributions Add lines 1a	through 3b Enter here and on Pa	art V, line 8, and Part XIII, line 4	4	53,956
5 Foundations that qualify under section Enter 1% of Part I, line 27b (see instru	4940(e) for the reduced rate of tactions)	ax on net investment income	5	21
6 Adjusted qualifying distributions. Sub	•		6	53,935
Note: The amount on line 6 will be	used in Part V, column (b), in su	bsequent years when calculating wheth	er the foun	idation

qualifies for the section 4940(e) reduction of tax in those years

BAA Form **990-PF** (2009)

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
Distributable amount for line 7	r 2009 from Part XI,				0
2 Undistributed income, if any, a	es of the end of 2009				
a Enter amount for 2008	i			0.	
b Total for prior years 20	· · · · · · · · · · · · · · · · · · ·			0.	
3 Excess distributions carryover					
a From 2004	15,010.				
b From 2005	56,200.				
c From 2006	3,589.				
d From 2007	4,984.				
e From 2008	46,039.				
f Total of lines 3a through		125,822.			
4 Qualifying distributions	F	125,022.			
XII, line 4 > \$					
a Applied to 2008, but no					
	[<u></u>			
b Applied to undistributed (Election required — see	I income of prior years e instructions)				
c Treated as distributions (Election required — se					
d Applied to 2009 distribu	table amount				
e Remaining amount disti	ributed out of corpus	53,956.			
5 Excess distributions carryover	• •				
(If an amount appears a same amount must be	in column (d), the shown in column (a))				
Same amount must be	3/10/// 1// 00/2//// (2//				
6 Enter the net total of ea indicated below:	ach column as				
a Corpus Add lines 3f, 4c, and	4e Subtract line 5	179,778.			
b Prior years' undistribute line 4b from line 2b	ed income. Subtract		0.1		
c Enter the amount of pri	or years' undistribut-				
ed income for which a r	notice of deficiency				
has been issued, or on 4942(a) tax has been p					
d Subtract line 6c from lii	as Sh. Tayabla				
amount — see instruction			0.		
e Undistributed income for 2008	Subtract line to from				
line 2a Taxable amount — se				0.	
				" · · · · · · · · · · · · · · · · · · ·	
f Undistributed income for 4d and 5 from line 1. The	or 2009 Subtract lines				
distributed in 2010	niis amount must be				0
7 Amounts treated as dis					
corpus to satisfy require by section 170(b)(1)(F)	ements imposed				
(see instructions)	01 4342(9)(3)				
8 Excess distributions ca	rrvover from 2004 not				
applied on line 5 or line		15,010			
9 Excess distributions c. Subtract lines 7 and 8		164,768.			
10 Analysis of line 9					#
a Excess from 2005	56,200.				
b Excess from 2006	3,589.				
c Excess from 2007	4,984.				
d Excess from 2008	46,039.				
e Excess from 2009	53,956.				
BAA					Form 990-PF (2009)

Form 990-PF (2009) RAMZAN AND PARVIN I				30-0207845	
Part XIV Private Operating Foundation 1 a If the foundation has received a ruling or d					N/A
is effective for 2009, enter the date of the i	uling			_	
b Check box to indicate whether the foundation		erating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	42.0000	Prior 3 years	4 10 00000	() -
investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
b 85% of line 2a		 	 	<u> </u>	
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 					
3 Complete 3a, b, or c for the alternative test relied upon					· · · · · · · · · · · · · · · · · · ·
a 'Assets' alternative test — enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter					
 Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) 					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information	(Complete this	part only if the	organization ha	ad \$5,000 or moi	e in
assets at any time during th 1 Information Regarding Foundation Management		istructions.)		· <u> </u>	
a List any managers of the foundation who h close of any tax year (but only if they have	ave contributed m	ore than 2% of the t than \$5,000) (See	otal contributions re section 507(d)(2))	eceived by the founda	ation before the
b List any managers of the foundation who o a partnership or other entity) of which the		0% or greater intere		ally large portion of the	ne ownership of
2 Information Regarding Contribution, Gran Check here X if the foundation only n requests for funds. If the foundation makes complete items 2a, b, c, and d	nakes contributions gifts, grants, etc.	s to preselected cha (see instructions) to	ritable organizations o individuals or orga	anizations under othe	
a The name, address, and telephone numbe	r of the person to	whom applications s	should be addressed	i	
b The form in which applications should be s	ubmitted and info	rmation and materia	ls they should inclu	de	
c Any submission deadlines					
d Any restrictions or limitations on awards, s	uch as by geograp	ohical areas, charita	ble fields, kinds of i	nstitutions, or other	actors
BAA		EEA0310 07/06/09			Form 990-PF (2009)

3 Grants and Contributions Paid During the Yo	ear or Approved for Fut	ure Paymen		
Recipient	If recipient is an individual, show any relationship to any foundation manager or	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year				
AGA KHAN FOUNDATION USA			TO ASSIST ORG. CARRYING	
1825 K Street N.W. Suite 901	N/A	501 (C) (3)	l I	
Washington DC 20006	i		ON EXEMPT ACTIVITIES	10,000
FOCUS USA			TO ASSIST ORG CARRYING	
7777 LEESBURGH PIKE SUITE 303S	N/A	501(C)(3)		
FALLS CHURCH VA 22043			ON EXEMPT ACTIVITIES	5,000
APNA GHAR			TO ASSIST ORG CARRYING	
4753 N BROADWAY SUITE 632	N/A			
CHICAGO IL 60640)	501 (C) (3)	ON EXEMPT ACTIVITIES	5,000
TURNING POINT			TO ASSIST ORG CARRYING	
8423 SKOKIE BLVD	N/A		EXEMPT ACTIVITIES	
SKOKIE IL 60077		501 (C) (3)	1 1	10,000
CENTRAL ASIA INSTITUTE	N/A		TO ASSIST ORG CARRYING	
P O BOX 7209			EXEMPT ACTIVITIES	
BOZEMAN MT 59771		501 (C) (3)		2,000
ZINDAGI TRUST INC	N/A		TO ASSIST ORG CARRYING	
9406 WICKHAM WAY			EXEMPT ACTIVITIES	
ORLANDO FL 32836	5	501 (C) (3)		11,000
PETA	N/A		TO ASSIST ORG CONTINUE	
501 FRONT ST			EXEMPT ACTIVITIES	
NORFOLK VA 23510)	501 (C) (3)		500
SUSAN G. KOMEN FOR THE CURE			TO SUPPORT ORG CONTINUE	
5005 LBJ FREEWAY SUITE 250			EXEMPT ACTIVITES	
DALLAS TX 75244	N/A	501(C)(3)		1,000
OPEN CHICAGO			TO SUPPORT ORGANIZATION	
5202 W. 70TH PLACE			CONTINUE EXEMPT ACTIVITIES	
BEDFORD PARK IL 60638	N/A	501 (C) (3)		1,000
See Line 3a statement				
				1,000
			İ	
		<u> </u>		
Total	 	<u> </u>	► 3a	46,500
b Approved for future payment				
			1	
			1	
			1	
			<u> </u>	
Total			► 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	
Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
a					
b					
c					
d					
е					
1					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments					
4 Dividends and interest from securities					9,590
5 Net rental income or (loss) from real estate					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal property				•	
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					-
11 Other revenue					
a					
b					
c	1	-			
d					
e					
Subtotal Add columns (b), (d), and (e)		· · · · · · · · · · · · · · · · · · ·			9,590
13 Total. Add line 12, columns (b), (d), and (e)			-	13	9,590
(See worksheet in the instructions for line 13 to verify	calculations)				

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See the instructions)
3	THE FOUNDATION REPORTED INTEREST FROM INVESTMENTS THE FOUNDATION RECEIVES
	CONTRIBUTIONS FROM FRIENDS AND FAMILY MEMBERS AND FUNDS ARE INVESTED
	TO INCREASE THE AMOUNT OF FUNDS AVAILABLE FOR FOUNDATIONS OBJECTIVES.
	THE FOUNDATION HAS NO FUND RAISING ACTIVITIES AND ITS MAIN SOURCE OF INCOME
	IS FROM DONATIONS FROM FRIENDS AND FAMILY OF THE FOUNDATION AS A RESULT,
	CONTRIBUTIONS ARE DEPOSITED IN INCOME PRODUCING INVESTMENTS TO RECEIVE
	ADDITIONAL INCOME FOR ITS CAUSE

Form **990-PF** (2009)

				FOUNDATION			30			age 1:
Part XVII	Information Re Exempt Organ	egarding Tra izations	ansfers To and Ti	ransactions	and	d Relationsh	ips With	Noncharitab	le	
									Yes	No
descri	ie organization directly i ibed in section 501(c) o ng to political organizati	of the Code (oth	igage in any of the following than section 501(c	illowing with ar c)(3) organizat	ny oth ions)	ner organization or in section 52	27.			
a Trans	fers from the reporting	foundation to a	a noncharitable exemp	pt organization	n of					
(1) C								1a(X
	ther assets							1a (2	2)	X
	transactions	abaritable avan	mat araanization					1 b (X
• •	ales of assets to a none urchases of assets from		•	on				1b(X
. ,	ental of facilities, equip							1 b (Х
	eimbursement arranger							1b(4)	Х
(5) Lo	oans or loan guarantees	s						1 b (5)	X
• •	erformance of services							1b(5)	X
c Sharii	ng of facilities, equipme	ent, mailing list	s, other assets, or pa	iid employees				1 c		X
the ac	answer to any of the at oods, other assets, or s ransaction or sharing ar	ervices given b	ov the reporting found	ation If the fo	unda	tion received les	s than fair	market value ir	lue of	
(a) Line no	(b) Amount involved		f noncharitable exempt orga			Description of trans			rangemer	its
		<u> </u>								
							·			
	,									
							_			
			·							
								··		
								· · · · · · · · · · · · · · · · · · ·		
		-								
		-	<u> </u>							
descr	e foundation directly or in the section 501(c) or section 501(c) or s,' complete the following	of the Code (ot	ited with, or related to her than section 501(o, one or more c)(3)) or in sec	tax-e	exempt organiza 527?	itions		'es X	No
	(a) Name of organizati	on	(b) Type of o	rganization		(с) Descriptio	n of relationshi	р	
						<u> </u>				
				· · · · · · · · · · · · · · · · · · ·						
Under pen	allies of perjury, I declare that	I have examined th	is return including accompa	nying schedules ar	nd state	ements and to the be	est of my knowl	edge and belief, it is	true, corr	ect and
Under pen complete	allies of perjury. I declare that Declaration of preparer (other I	I have examined th than taxpayer or fid	is return including accompa uciary) is based on all inforn	nying schedules an	nd state	ements and to the benas any knowledge			A	ect and
complete	allies of perjury. I declare that Declaration of preparer (other form)	l have examined th	is return including accompa uciary) is based on all inforn	nying schedules ar nation of which pre	nd state	ements and to the benas any knowledge			A	ect and
complete	allies of perjury. I declare that Declaration of preparer (other that When the state of the stat	l have examined th than taxpayer or fid	is return including accompa uciary) is based on all inform	nying schedules ar nation of which pre	nd state	ements and to the benas any knowledge		edge and belief, it is	A	ect and
complete Agents Paid	Declaration of Preparer (other)	I have examined th than taxpayer or fid	is return including accompa luciary) is based on all inforn	nying schedules ar nation of which pre	Date	7/30/10	Title Check if self		ntifying nu	mber
Paid Pre-	Declaration of treparer (other the control of the control of treparer is signature	l have examined th than taxpayer or fid	is return including accompa luciary) is based on all inforn	nying schedules ar nation of which pre	parer n	7/30/10	Title Check if self employed	Preparer s Idea	ntifying nu	mber
complete Sign	Preparer's signature Firm's name (or yours if self	I have examined the than taxpayer or fid	luciary) is based on all inform	nying schedules ar nation of which pre	parer n	7/30/10	Title Check if self	Preparer s Idea	ntifying nu	mber

BAA

Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF

OMB No 1545 0047

2009

Name of the organization		Employer identification number
RAMZAN AND PARVIN DHANJI	30-0207845	
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not tr 527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treate 501(c)(3) taxable private foundation	ed as a private foundation
Check if your organization is covered by Note: Only a section 501(c)(7), (8), or (the General Rule or a Special Rule 10) organization can check boxes for both the General Ru	ule and a Special Rule See instructions
General Rule -		
	990-EZ, or 990-PF that received, during the year, $\$5,000$)) or more (in money or property) from any one
Special Rules —		
509(a)(1)/170(b)(1)(A)(vi) and receive	filing Form 990 or 990-EZ, that met the 33-1/3% support ved from any one contributor, during the year, a contribut ne 1h or (ii) Form 990-EZ, line 1 Complete Parts I and I	tion of the greater of (1) \$5,000 or (2) 2% of the
For a section 501(c)(7), (8), or (10) aggregate contributions of more that prevention of cruelty to children or a	organization filing Form 990 or 990-EZ, that received from \$1,000 for use <i>exclusively</i> for religious, charitable, scientimals. Complete Parts I, II, and III	m any one contributor, during the year. intific, literary, or educational purposes, or the
contributions for use <i>exclusively</i> for this box is checked, enter here the t purpose Do not complete any of the	organization filing Form 990 or 990-EZ, that received froi religious, charitable, etc, purposes, but these contribution total contributions that were received during the year for a parts unless the General Rule applies to this organization	ns did not aggregate to more than \$1,000 If an exclusively religious, charitable, etc.
religious, charitable, etc. contributio	ns of \$5,000 or more during the year	▶ \$
990-PF) but it must answer 'No' on Par	vered by the General Rule and/or the Special Rules does t IV, line 2 of their Form 990, or check the box on line H the filing requirements of Schedule B (Form 990, 990-EZ	of its Form 990-EZ, or on line 2 of its Form
BAA For Privacy Act and Paperwork For Form 990, 990EZ, or 990-PF.	Reduction Act Notice, see the Instructions S	Schedule B (Form 990, 990-EZ or 990-PF) (2009

of 1

of Part I

RAMZAN AND PARVIN DHANJI FAMILY FOUNDATION INC

Employer identification number

30-0207845

Part I	Contributors (see instructions)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	IMAGINEERING INC 180 MARTIN LANE ELK GROVE VILLAGE IL 60007	\$300,000	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Recipient	If recipient is an individual,	Foun- dation	Purpose of grant or contribution	Person or Business	
Name and address	show any	status		Checkbox	
(home or business)	relationship to	of re-			
	any foundation	cipient		Amount	
	manager or substantial contributor				
a Paid during the year					
CHICAGO PUBLIC RADIO			TO SUPPORT ORG CONTINUE	Person or	
848 E GRAND AVE			EXEMPT ACTIVITIES	Business X	
CHICAGO IL 60611	N/A	501 (C) (3)		500	
DISTRICT 31 EDUCATION FOUNDATION			TO SUPPORT ORGANIZATION C	Person or	
3131 TECHNY ROAD			ITS EXEMPT ACTIVITIES	Business X	
NORTHBROOK IL 60062	N/A	501 (C) (3)		500	

Total

1,000.

Form 990-PF, Page 1, Part I Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CHARLES SCHWAB	MANAGE INVESTMENT PORTF	6,856	6,856.	6,856.	6,856.
Total		6,856.	6,856.	6,856.	6,856

Supporting Statement of:

Form 990-PF, p1/Line 1(a)

Description	Amount		
IMAGINEERING INC	300,000		
Total	300,000		

Supporting Statement of:

Form 990-PF, p4/Line 6b Amount

	Amount		
FOREIGN TAX P.	AID ON CHARLES	SCHWAAB 2281-9922	79.
Total			79

Form 8868

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury

Internal Revenue	Service	1	File a sep	arate application	for each return	•			
• If you are	e filing for an	Automatic 3-Mont	h Extension, com	piete only Part i a	ind check this b	ox			► X
•	_ ,	Additional (Not A	-				this form)		
•	- 12	iless you have alre	•		•			3868	
		3-Month Exter							
A corporation	n required to f	ile Form 990-T an	d requesting an ai	utomatic 6-month	extension – che	eck this box and	d complete P	art I only	► [
All other corp		uding 1120-C filer	s), partnerships, F	REMICS, and trus	ts must use Fori	n 7004 to requi	est an extens	ion of time to	o file
the additional Form 990-T	d below (6 moi il (not automai Instead, you r	enerally, you can on this for a corpora tic) 3-month exten must submit the fu wefile and click on	tion required to file sion or (2) you file lly completed and	e Form 990-T). Ho e Forms 990-BL, (signed page 2 (P	want a 3-month swever, you can 5069, or 8870, g art II) of Form E	automatic exte not file Form 88 roup returns, or 868. For more	nsion of time 368 electronic a composite details on the	to file one ocally if (1) you or consolidate electronic fi	of the u want ated uling of
	Name of Exempt	Organization					Employer to	dentification num	nber
Type or	ļ						1		
print	RAMZAN A	ND PARVIN D	HANJI FAMIL	Y FOUNDATIO	N INC		30-020	7845	
File by the		and room or suite numb					1=,=		
due date for filling your return See	22 WESTL	AKE DRIVE							
instructions		t office, state, and ZIP of	ode For a foreign addr	ess, see instructions	A/FE-				
	SOUTH BA	RRINGTON		•	" ERNA!	.	IL	60010	
Check type o		filed (file a separ	ate application for	each return).	68.4	SEVEN	·		
X Form 990		mea (me a copa.	Form 990-T (c	•	SCHILL FIL	LOGILE	SZP.		
Form 990				ection 401(a) or 4	ω8(a) trust)	PARTITION	WYVICE		
Form 990				rust other than ab		Form	MOE.		
Form 990			Form 1041-A	400 00101 01411 04	313)	1 9 70som	3870		
	s are in the ca	are of >		 FAX No. ►	RECE 243	IVED-			
		not have an offic		ness in the United	States, check t	his box			▶ []
		turn, enter the org					If this is for	the whole gre	oup,
		If it is for part of					and EINs of	all members	3
	sion will cover	•							
1 I reques	st an automati	c 3-month (6 mon	ths for a corporate	on required to file	Form 990-T) ex	tension of time			
until A	ug 16	, 20 10 , to fill	e the exempt orga	•	•				
_	calendar year	-	Clarit for.						
		uning	20	and ending	20	n			
							۱ ۵۰		
2 If this ta	ax year is for i	ess than 12 month	ns, check reason.	Initial retur	nFinal	return	Change in a	ccounting pa	riod
3a If this a nonrefu	pplication is fo ndable credits	or Form 990-BL, 9 See instructions	90-PF, 990-T, 472	D, or 6069, enter	the tentative tax	, less any	3a \$		0.
		or Form 990-PF or or year overpaym			and estimated	tax payments	3b \$		0.
c Balance deposit See inst	Due. Subtractivith FTD couptructions	t line 3b from line oon or, if required,	3a. Include your p by using EFTPS	payment with this Electronic Federa	form, or, if requ I Tax Payment	ired, System).	3c \$		0.
Caution. If yo payment instr		make an electror	ic fund withdrawa	with this Form 8	868, see Form 8	3453-EO and Fo	rm 8879-EO	for	
BAA For Priv	acy Act and F	Paperwork Reduct	ion Act Notice, se	e instructions.			Form	n 8868 (Rev	4-2009)

Form 8868	(Rev 4-2009) RAMZAN AND PARVIN DHANJI FAMILY FOUNDATION INC	30-0207845	Page 2
• If you a	are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and ch	eck this box	. ▶ 🗓
Note. Only	complete Part II if you have already been granted an automatic 3-month extension on a pre-	viously filed Form 8868	
• If you a	are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).		
子包括训修	Additional (Not Automatic) 3-Month Extension of Time. Only file the original	nal (no copies needed).	
Type or	Name of Exempt Organization RAMZAN AND PARVIN DHANJI FAMILY FOUNDATION INC	Employer Identification number	
•	Number, street, and room or suite number. If a P O box, see instructions	For IRS use only	
File by the extended due date for filling the return. See instructions	2.2 WESTLAKE DRIVE City, town or post office, state, and ZIP code. For a foreign address, see instructions		
	SOUTH BARRINGTON IL 60010	Maria Landa California	BEADTED
X Form 99 Form 99	90-BL Form 990-T (section 401(a) or 408(a) trust) Form 47	20 Form 88	
STOP! Do r	not complete Part II if you were not already granted an automatic 3-month extension on a p	reviously filed Form 8868.	
Telepho If the or If this is whole group	oks are in care of one No FAX No reganization does not have an office or place of business in the United States, check this box for a Group Return, enter the organization's four digit Group Exemption Number (GEN) p, check this box I it it is for part of the group, check this box and attach a lift the extension is for	If this i	► ☐ is for the
	uest an additional 3-month extension of time until Nov 15 , 20 10.	· · · · · · · · · · · · · · · · · · ·	
5 For ca 6 If this 7 State	alendar year 2009, or other tax year beginning , 20, and ending tax year is for less than 12 months, check reason. Initial return Final return in detail why you need the extension Additional tax related docs are using to file a complete and accurate tax return.	Change in accounting	
1120			
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less a fundable credits. See instructions	Ba \$	0.
payme	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and esting lents made. Include any prior year overpayment allowed as a credit and any amount paid pre Form 8868.		0.
c Balan with F	nce Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, do FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See in	eposit nstrs . 8c \$	0.
	Signature and Verification		
Under penaltige correct and op	s of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of smaller, and that I are authorized to prepare this form. Title Title	f my knowledge and belief, it is true Date ► C &	10.10
BAA	FIFZ0502 03/11/09	Form 8868 (R	lev 4-2009)

RECEIVED
Internal Key mile Service

AUG 1 2 2010

SCHILLIA PARK, ILLINOIS