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Form **990-PF** 

# **Return of Private Foundation**

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

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.

OMB No 1545-0052

2009

For o	alendar year 2009, or tax year beginning	<del>, ,</del>	, and ending		
G C	heck all that apply: Initial return	Initial return of a fo	· —	Final return Name change	
	Amended return  Amended return	Address chang		A Employer identification	numher
	the IRS			Cimpleyor recinametation	
	erwise, SACKS FAMILY FOUNDATI	ON		36-4053778	
	Print Number and street (or P O box number if mail is not de	•	Room/suite	B Telephone number	
	type C/O MICHAEL SACKS 185	0 2ND ST., S'	re.201	312-506-65	01
	Specific City or town, state, and ZIP code			C If exemption application is p	
		035	<del> </del>	D 1. Foreign organizations	t, check here
H_C	heck type of organization: X Section 501(c)(3) ex			Foreign organizations me check here and attach co	mputation
<u> </u>		Other taxable private founda	Accrual	E If private foundation star	
	ir market value of all assets at end of year J Accounting	her (specify)	Accruai	under section 507(b)(1)	
(11°			oasis)	F If the foundation is in a ( under section 507(b)(1)	
	rt 1 Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	3,700,000.			
	2 Check If the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	107.	107.	0.	STATEMENT 1
	4 Dividends and interest from securities		· · · · · · · · · · · · · · · · · · ·		
	5a Gross rents				
	Net rental income or (loss)			RECE	IVED
Pe	6a Net gain or (loss) from sale of assets not on line 10  Gross sales price for all				70
Revenue	assets on line 6a		0.	S NOV 1	9 2010 0
Re	7 Capital gain net income (from Part IV, line 2)		0.	10 100	
	8 Net short-term capital gain 9 Income modifications			005	
	Gross sales less returns and allowances			LOGDE	N. UT
	b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income				
	12 Total. Add lines 1 through 11	3,700,107.	107.	0.	
	13 Compensation of officers, directors, trustees, etc	0.	0.	0.	0
	14 Other employee salaries and wages				
s	15 Pension plans, employee benefits				
nse	16a Legal fees b Accounting fees STMT 2	2,582.	2,582.	0.	0
Expenses	b Accounting fees STMT 2 c Other professional fees	4,362.	2,302.	•	· · · · · ·
	17 Interest			<del> </del>	<del>                                     </del>
ativ	18 Taxes STMT 3	25.	0.	0.	0
istr	19 Depreciation and depletion				
Ē	20 Occupancy				
Ad	21 Travel, conferences, and meetings				
and	22 Printing and publications				
g	23 Other expenses STMT 4	4,492.	210.	0.	0
Operating and Administrative	24 Total operating and administrative				
Ope	expenses. Add lines 13 through 23	7,099.	2,792.	0.	0
_	25 Contributions, gifts, grants paid	3,699,006.		<del> </del>	3,699,006
	26 Total expenses and disbursements.	3,706,105.	2,792.	. 0.	3,699,006
	Add lines 24 and 25  27 Subtract line 26 from line 12:	3,700,103.	4,134		3,033,000
	Subtract line 26 from line 12:     a Excess of revenue over expenses and disbursements	-5,998.			
	b Net investment income (if negative, enter -0-)	3,330.	0.	,	
	c Adjusted net income (if negative, enter -0-)			0.	1
-	.,	<del></del>	·	<del></del>	<del></del>

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

Form **990-PF** (2009)



Form 990-PF (2009) SACKS FAMILY FOUNDATION 36-405				
Part II Balance Sheets Attached schedules and amounts in the description of the foreign and amounts of	Beginning of year	End of		
Column should be not end-of-year amounts of	(a) Book Value	(b) Book Value	(c) Fair Market Value	
1 Cash - non-interest-bearing	76,998.	386,147.	386,147.	
2 Savings and temporary cash investments	337,684.	22,537.	22,537.	
3 Accounts receivable ►				
Less: allowance for doubtful accounts			<del></del>	
4 Piedges receivable ►				
Less, allowance for doubtful accounts				
5 Grants receivable				
6 Receivables due from officers, directors, trustees, and other				
disqualified persons				
7 Other notes and loans receivable				
Less, allowance for doubtful accounts			····	
8 Inventories for sale or use				
9 Prepaid expenses and deferred charges				
■ 10a Investments - U.S. and state government obligations				
b investments - corporate stock				
c Investments - corporate bonds				
11 Investments - land, buildings, and equipment basis				
Less accumulated depreciation				
12 Investments - mortgage loans	<u> </u>			
13 Investments - other			<del></del>	
14 Land, buildings, and equipment; basis				
Less accumulated depreciation				
15 Other assets (describe ►	)			
16 Total assets (to be completed by all filers)	414,682.	408,684.	408,684.	
17 Accounts payable and accrued expenses				
18 Grants payable				
19 Deferred revenue				
20 Loans from officers, directors, trustees, and other disqualified persons				
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable  22 Other liabilities (describe		<u>.</u>		
22 Other liabilities (describe	)			
23 Total liabilities (add lines 17 through 22)	0.	0.		
Foundations that follow SFAS 117, check here	▶ └			
and complete lines 24 through 26 and lines 30 and 31.				
Temporarily restricted Temporarily restricted Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg., and equipment fund Retained earnings, accumulated income, endowment, or othe Total net assets or fund balances				
26 Permanently restricted				
Foundations that do not follow SFAS 117, check here	X			
and complete lines 27 through 31.	1			
27 Capital stock, trust principal, or current funds	0.	0.		
28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.		
Retained earnings, accumulated income, endowment, or othe		408,684.		
30 Total net assets or fund balances	414,682.	408,684.		
A 7	414 692	400 604		
31 Total liabilities and net assets/fund balances	414,682.	408,684.		
Part III Analysis of Changes in Net Assets or	Fund Balances			
1 Total net assets or fund balances at beginning of year - Part II, colu	mn (a), line 30	<del></del>		
(must agree with end-of-year figure reported on prior year's return)		1	414,682.	
2 Enter amount from Part I, line 27a		2	-5,998.	
3 Other increases not included in line 2 (itemize)		3	3,550.	
4 Add lines 1, 2, and 3	<del></del>		408,684.	
5 Decreases not included in line 2 (itemize)		5	0.	
6 Total net assets or fund balances at end of year (line 4 minus line 5	) - Part II, column (h) line 30	- 6	408,684.	
	ζ γ ζ Σ γ σ σ σ		Form <b>990-PF</b> (2009)	

Part IN	Capital Gains	and Loss	es for Tax on In	ivestment	Income						
	(a) List and desc 2-story brick wa	ribe the kind(s irehouse; or c	s) of property sold (e.g ommon stock, 200 sh	., real estate, s. MLC Co.)		( <b>b)</b> Ho P - D -	ow acqui Purchas Donatio	ired (d ie n	) Date ac (mo., day		(d) Date sold (mo., day, yr.)
1a											
b	NO	NE				ļ					<u>-</u>
C						—					
d	<del> </del>				<u>.</u>	<del> </del>		-+			
<u>e</u>		(O.D		(-) 0	harathar basis	1			(h) Com	05 (1000)	
(e	) Gross sales price		eciation allowed rallowable)		t or other basis opense of sale	$\bot$			(ii) Gaii (e) plus (i	or (loss) ) minus (	
<u>a</u>			<u>.</u>				<del></del>	_	-		
<u>b</u>	<del> </del>										·
C				ļ							
<u>d</u>						$\dashv$					
e Comm	lata anki far annata ahavur		mn /h) and award by	the foundation	on 12/21/60			//\ C	Yara (Cal	(h) =0:0	
Comp	lete only for assets showing			•		$\dashv$		(1) C col. (l	lains (Col. k), but not	. (n) gain : less than	minus 1 -0-) or
(i) F	.M.V. as of 12/31/69		djusted basis of 12/31/69		cess of col. (i) col. (j), if any			l	osses (fr	om col. (I	1))
a											
b				<u> </u>							
C											
d											
е				<u> </u>							
2 Capital	gain net income or (net ca	apıtal loss)	If gain, also enter			}	2				
3 Notch	ort-term capital gain or (lo	cc) ac defined				1					
	also enter in Part I, line 8,	,	11 3000013 1222(0) al	ia (0).		)	- 1				
If (loss	), enter -0- in Part I, line 8					$\mathcal{L}$	3				
Part V	Qualification U	Inder Sec	tion 4940(e) for	Reduced	Tax on Net	t Inve	estme	nt Inco	me		
(For optio	nal use by domestic private	e foundations	subject to the section	4940(a) tax on	net investment ir	ncome.	)				
If section	4940(d)(2) applies, leave t	his nart hlank									
	oundation liable for the sec					riod?					Yes X No
	e foundation does not qua										
1 Enter	the appropriate amount in	each column		uctions before	making any entri				<del></del>		(4)
	(a) Base period years		(b) Adjusted qualifying dis	tributions	Net value of no	(C) anchari	table-usi	e assets	(0.	Distrib	(d) ution ratio ided by col. (c))
Calenda	ar year (or tax year beginni	ing in)			14Ct Value of the			,670.	(0	oi. (b) uiv	9.140884
	2008			1,721.				<u>,570.</u> ,548.		<del>.</del>	2.719013
	2007			1,757.				, 340. , 777.			1.600955
	2006			7,505.				<del>, , , , , ,</del> , , , , , , , , , , , , ,			1.501221
	2005			$\frac{17,303.}{19,133.}$		1		, 255.			.838544
	2004		0.5	79,133.		т,	, 0 / 2	, 433.	<del> </del>	-	.030344
2 Total	of line 1, column (d)								2		15.800617
	ge distribution ratio for the	5-voor hace n	eriod - divide the total	on line 2 hv 5	or by the number	r of vea	ire		<del>                                     </del>		
-	indation has been in existe	-		on mic 2 by 0,	or by the homou	. 01 900	., .		3		3.160123
											411 000
4 Enter t	he net value of noncharital	ble-use assets	for 2009 from Part X,	line 5					4		411,090.
5 Multip	ly line 4 by line 3								5		1,299,095
& Enter	1% of net investment incor	ma (1% of Pai	t I line 27h)						6		0.
o ciller	1 vo ot tier macemient meoi	170 UI FAI	. i, iiii						+		
7 Add lir	nes 5 and 6								7		1,299,095
8 Enter	qualifying distributions froi	m Part XII, lini	e <b>4</b>						8		3,699,006
	8 is equal to or greater tha e Part VI instructions.	n line 7, check	the box in Part VI, line	e 1b, and comp	lete that part usii	ng a 1%	% tax rate	Э.			

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	t VI   Excise Tax Based on Investment Income (Section 494				940(e)	or 4	948	- see i	nstru	ction	ns)
1a E	xempt operating foundations described in section 4940(d)(2), check here 🕨 📖 and e				)						
	Date of ruling or determination letter: (attach copy of letter if nec	cessary-	see ins	tructio	ns)						_
b C	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	<b>► LX.</b> J a	and ent	ter 1%	Ì	•	1				0.
	of Part I, line 27b										
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% $^{\prime\prime}$				(b) ∫						^
	Fax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. O	thers ent	ter -0-)				2				0.
	Add lines 1 and 2						3				0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. O	Others en	iter -0-)	)			4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-						5				<u> </u>
	Credits/Payments:	ایما	I		2	20.					
	2009 estimated tax payments and 2008 overpayment credited to 2009	6a				20.					
	Exempt foreign organizations - tax withheld at source	6b									
	Fax paid with application for extension of time to file (Form 8868)	6c									
	Backup withholding erroneously withheld	6d	L <u>-</u>				_			2	20.
	Total credits and payments. Add lines 6a through 6d						7				20.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	acneo					8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed						9			2	20.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		2	ാവ	Refund		10				0.
	t VII-A Statements Regarding Activities			20.	Retund	eu	- 11				<del></del>
	During the tax year, did the foundation attempt to influence any national, state, or local legis	clation or	did it r	narticin	ate or int	orvene	ın			Yes	No
	ourning the tax year, did the foundation attempt to influence any national, state, or local legislance political campaign?	SIALIUITUI	ulu it p	Jai ticip	ate or in	CI VCIIC	•••		1a		X
	only political campaigh? Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	1000	inetriic	rtions f	or definit	10n\2			1b		X
	if the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and						d or		<del>'''</del>		
	distributed by the foundation in connection with the activities	u copies	3 OI aii	iy iiiati	enais pe	ibiisiic	u u				
	Did the foundation file Form 1120-POL for this year?								10		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	e vear							<del>- "</del>		
	(1) On the foundation $\blacktriangleright$ \$ 0 • (2) On foundation managers					0.					
	Enter the reimbursement (if any) paid by the foundation during the year for political expend		ımnose	ed on f	nundatio						
	managers. > \$ 0.	indio tax	шроос	<b></b> 011 1	Januano						
	Has the foundation engaged in any activities that have not previously been reported to the I	IRS?							2		Х
	If "Yes," attach a detailed description of the activities										
	Has the foundation made any changes, not previously reported to the IRS, in its governing	ınstrume	ent, arti	cles of	incorpor	ation, o	ır		1		
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chang		,						3		Х
	Did the foundation have unrelated business gross income of \$1,000 or more during the year								4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?						N	/A	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year	?							5		Х
-	If "Yes," attach the statement required by General Instruction T										
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	either:									
	By language in the governing instrument, or										
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandator</li> </ul>	iry directi	ions tha	at confl	ct with t	he state	law				
	remain in the governing instrument?								6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year?								7	Х	
	If "Yes," complete Part II, col (c), and Part XV									1	
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ons) 🕨				_					
	IL										
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney	Genera	l (or de	signate)				1		
	of each state as required by General Instruction G? If "No," attach explanation								8b	Х	
	is the foundation claiming status as a private operating foundation within the meaning of se				42(j)(5)	for cale	ndar				<b>l</b>
	year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," $lpha$								9	<u> </u>	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a sched	dule listing	their nar	mes and	addresse	S			10	L _	X

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Part VII-A Statements Regarding Activities (continued)				
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
section 512(b)(13)? If "Yes," attach schedule (see instructions)		11		X
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before				
August 17, 2008?		12		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		_13	X	<u> </u>
Website address  N/A	(240)	~ ~	<u> </u>	
	one no. ► (312)5	06-	650	<u> </u>
Located at ► 1850 2ND STREET, STE. 201, HIGHLAND PARK, IL	ZIP+4 ▶6 C	035		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	s. 1 1	3.7	<b>,</b> →	•
and enter the amount of tax-exempt interest received or accrued during the year	<b>▶</b> 15	N	/A	
Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>	,	V	
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a During the year did the foundation (either directly or indirectly):				1
(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?		1 [		
(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	Yes X No			
for the benefit or use of a disqualified person)?	Yes 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	Yes X No			
termination of government service, if terminating within 90 days.)	Tes NO			
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	N/A	1b		
section 53.4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	N/A	- <del>"</del>		_
Organizations relying on a current notice regarding disaster assistance check here	ostad.			
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corre	cteu	1c		Х
before the first day of the tax year beginning in 2009?  Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating fou	endation		-	
	madon			
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)	hearning			
before 2009?	Yes X No			
If "Yes," list the years ▶ , , , , ,	100 122 110		i	
b Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to				
valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" a				
statement - see instructions.)	N/A	2b		
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	-1, -1	<del></del>		
h the provisions of cooling to talk and approve to any of the years noted in any notions of the cooling approve to any of the years noted in any of				
3a 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 pe				
May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c			Ì	
of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Sch				
Form 4720, to determine if the foundation had excess business holdings in 2009 )	N/A	3b		
4a 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	e purpose that			
had not been removed from jeopardy before the first day of the tax year beginning in 2009?		4b		Х
	Foi	m <b>990</b>	-PF	(2009)

Form 990-PF (2009) SACKS FAMILY FOUNDATION			36-40537	78	Page 6			
Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be R	lequired (contin	ued)					
5a During the year did the foundation pay or incur any amount to:	-							
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	s X No					
(2) Influence the outcome of any specific public election (see section 4955); of		ctly,						
any voter registration drive?								
(3) Provide a grant to an individual for travel, study, or other similar purposes?								
(4) Provide a grant to an organization other than a charitable, etc., organization								
509(a)(1), (2), or (3), or section 4940(d)(2)?		☐ Ye	s X No					
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo							
the prevention of cruelty to children or animals?	or baddational parpagon, ar to		s X No					
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described in							
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b				
Organizations relying on a current notice regarding disaster assistance check h	· ·							
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ned						
expenditure responsibility for the grant?		/A 🔲 Ye	s No					
If "Yes," attach the statement required by Regulations section 53.494		,		-				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				- 1				
a personal benefit contract?	pay promising on		s X No					
b Did the foundation, during the year, pay premiums, directly or indirectly, on a g	personal honefit contract?		.5 (22) 110	6ь	x			
, , , , , , , , , , , , , , , , , , , ,	ocisonal benefit contract,		-	-				
If "Yes" to 6b, file Form 8870	shalter transaction?		s X No					
7a At any time during the tax year, was the foundation a party to a prohibited tax s		16	N/A	7b				
b If yes, did the foundation receive any proceeds or have any net income attribut    Post VIII   Information About Officers, Directors, Trust		nagare Highly		70				
Paid Employees, and Contractors	<u>-</u>							
1 List all officers, directors, trustees, foundation managers and their		( ) Company in	(d\a	<del></del>				
(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	aci	e) Expense count, other illowances			
A. LEE SACKS	DIRECTOR PART	-TIME						
1850 2ND STREET, SUITE 201	1							
HIGHLAND PARK, IL 60035	0.00	0.	0.	.	0.			
KENNETH SACKS	SECRETARY PAR	T-TIME	-					
900 NORTH MICHIGAN AVE., SUITE 1500	<u> </u>							
CHICAGO, IL 60611	0.00	0.	0.	.	0.			
MICHAEL SACKS	PRES/TREAS PA	RT-TIME						
1850 2ND STREET, SUITE 201								
HIGHLAND PARK, IL 60035	0.00	0.	0.		0.			
	1							
2 Compensation of five highest-paid employees (other than those in		enter "NONE."		,				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	aci	e) Expense count, other illowances			
NONE								
	1							
	1							
	<del></del>	<del></del>	i	1				
	1	ŀ						
Total number of other employees paid over \$50,000			▶		0			

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		ļ
		1
		<del> </del>
	<del></del>	<u></u>
		<u> </u>
Total number of others receiving over \$50,000 for professional services	<u> </u>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce	information such as the d, etc.	Expenses
1 NOT APPLICABLE		
	-	_
		0.
2		
3		
S	···	
4		
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines	s 1 and 2	Amount
1 NONE	Tana 2.	
INONE		
		0.
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	<b>&gt;</b>	0.
	For	m <b>990-PF</b> (2009)

Form 990-PF (2009) SACKS FAMILY FOUNDATION 36-4053778

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	<u>0.</u> 417,350.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	417,350.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	417,350.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	6,260.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	411,090.
6	Minimum investment return. Enter 5% of line 5	6	20,555.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	ıd certain	
1	Minimum investment return from Part X, line 6	1	20,555.
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	20,555.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	20,555.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	20,555.
_	art XII Qualifying Distributions (see instructions)	<del>                                     </del>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		3,699,006.
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	3,033,000.
	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
_	Suitability test (prior IRS approval required)	3a	
b		3b	2 600 006
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	3,699,006.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	_	Λ
	income. Enter 1% of Part I, line 27b	6	3,699,006.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (4940(e) reduction of tax in those years	qualities for	the section

## Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
Distributable amount for 2009 from Part XI.	Corpus	Tears prior to 2000	2000	2003
line 7				20,555.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004 845,520.				
b From 2005 1,389,675.				
c From 2006 1,484,552.				
dFrom 2007 2,344,916.				
eFrom 2008 4,496,987.	10 561 650			
f Total of lines 3a through e	10,561,650.			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶\$ 3,699,006.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior		<del></del>		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.1			
d Applied to 2009 distributable amount				20,555.
e Remaining amount distributed out of corpus	3,678,451.			
5 Excess distributions carryover applied to 2009	0.			0.
(if an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	14,240,101.			
b Prior years' undistributed income Subtract	****			
line 4b from line 2b		0.		
c Enter the amount of prior years'	,			
undistributed income for which a notice of deficiency has been issued, or on which				
the section 4942(a) tax has been previously		_		
assessed		0.		
d Subtract line 6c from line 6b. Taxable		•		
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract				
lines 4d and 5 from line 1. This amount must be distributed in 2010				0.
7 Amounts treated as distributions out of				· · · · · · · · · · · · · · · · · · ·
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2004			-	
not applied on line 5 or line 7	845,520.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	13,394,581.			
10 Analysis of line 9:				
a Excess from 2005 1,389,675.				
b Excess from 2006 1,484,552.				
c Excess from 2007 2,344,916.			1	
dExcess from 2008 e Excess from 2009 4,496,987. 3,678,451.				
e Excess from 2009   3,678,451.		<u> </u>	<u> </u>	Form <b>990-PF</b> (2009)
				101111 000 1 1 (2003)

Part XIV   Private Operating F	oundations (see ins	structions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo	r 2009, enter the date of t	he ruling	▶		
b Check box to indicate whether the found	lation is a private operatir	ng foundation described	in section	4942(j)(3) or 494	<b>12(j)(5)</b>
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
investment return from Part X for					<u> </u>
each year listed					
<b>b</b> 85% of line 2a				İ	
c Qualifying distributions from Part XII,					··
line 4 for each year listed					
d Amounts included in line 2c not				<del> </del>	
used directly for active conduct of					
exempt activities				1	
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the			<del></del>	<del>               </del>	
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>b</b> "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:	·				
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)		·		+	
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(iii)		<del></del>	<del> </del>		
(3) Largest amount of support from		-			
an exempt organization					
(4) Gross investment income	(0		if the factor dealers		
Part XV Supplementary Info			if the foundation	nad \$5,000 or mo	re in assets
at any time during t		instructions.)			
1 Information Regarding Foundation	•				
a List any managers of the foundation wh	o have contributed more	than 2% of the total con	tributions received by the	foundation before the clos	e of any tax
year (but only if they have contributed r	nore than \$5,000). (See s	section 507(u)(2) )			
MICHAEL SACKS		<del></del>	<del> </del>		<u>.</u>
b List any managers of the foundation who other entity) of which the foundation had			(or an equally large porte	on of the ownership of a pa	rtnership or
NONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan	. Scholarship, etc., P	rograms:		
				not accept unsolicited requi	ests for funds If
the foundation makes gifts, grants, etc					
a The name, address, and telephone num				<del>- ÷</del>	
N/A	bol of the person to time		, 444, 666, 66		
b The form in which applications should	ne submitted and informa	ition and materials they s	hould include.		<del></del>
N/A			=:= :::= <b>::::::</b>		
c Any submission deadlines:				<del></del>	
N/A					
d Any restrictions or limitations on award N/A	s, such as by geographic	al areas, charitable fields	, kınds of institutions, or	other factors:	

3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year SEE ATTACHED SCHEDULE				3699006.
Total	1		<b>▶</b> 3a	3699006.
b Approved for future payment				
NONE				
Total			<b>▶</b> 3h	0.

Form **990-PF** (2009)

# Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		led by section 512, 513, or 514	(e)		
	(a)	(b)	(C) Exclu-	(d)	Related or exempt		
1 Program service revenue:	Business code	Amount	sion code	Amount	function income		
a					<del></del>		
b							
C							
d							
e							
1							
g Fees and contracts from government agencies							
2 Membership dues and assessments							
3 Interest on savings and temporary cash investments			15	107.			
4 Dividends and interest from securities							
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			i				
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	_		<del></del> -l				
C	_		-				
d	_						
e	_	······································	<del>.    </del>	107			
12 Subtotal Add columns (b), (d), and (e)			0.	107.	0. 107.		
13 Total Add line 12, columns (b), (d), and (e)				13	107.		
(See worksheet in line 13 instructions to verify calculations.	)						

Part X	VI-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).
	NOT APPLICABLE

# Form 990-PF (2009) SACKS FAMILY FOUNDATION 36-4053778 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

		Exempt Organ	nizations						
1	Did t	ne organization directly or indi	rectly engage in any of the following	ng with any other organiza	ation described in	section 501(c) of		Yes	No
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?									
a Transfers from the reporting foundation to a noncharitable exempt organization of:									
	(1) Cash								Х
(2) Other assets									X
b Other transactions:							1a(2)		
	(1) 5	Sales of assets to a noncharita	able exempt organization				15(1)	ļ	Х
	(2) F	Purchases of assets from a no	oncharitable exempt organization				1b(2)		X
		Rental of facilities, equipment,					1b(3)		X
		Reimbursement arrangements					1b(4)	<u> </u>	X
		oans or loan guarantees					1b(5)		X
		•	embership or fundraising solicitation	nns			1b(6)	<b></b> -	X
С			ailing lists, other assets, or paid em				10	<del> </del>	X
			"Yes," complete the following sch		always show the	fair market value of the goods of		ote	
•			foundation. If the foundation receiv					5613,	
			other assets, or services received.		aldo ili dily d'alist	iction of sharing arrangement, s	11014 111		
(a)	Line no	(b) Amount involved	(c) Name of noncharitable		(d) Desc	ription of transfers, transactions, and s	sharing as		
		(0)	N/A		(4) 5050	riphori or translers, bansactions, and t	maing an	angeme	
			11,721						
					<del></del>	***************************************			
			-			<del></del>			
			<del>                                     </del>	<del></del>		<del></del>			
			<del> </del>	<del></del>	-+				
				<del>-</del>	<del></del>				
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		<u> </u>			<del></del>	· <del>-</del> ,			
		<b></b>		<del></del>					
				<del></del>					
	1- 44-	favordation diseasts and and		<del></del>		<del></del>			
2 <b>a</b>			tly affiliated with, or related to, one		anizations describ		_		7
			r than section 501(c)(3)) or in sect	tion 52/7		L	Yes	X	J No
	II Ye	s," complete the following sch (a) Name of org		(b) Type of organization	<u> </u>	(a) Description of valetionals			
		N/A	gamzation	(b) Type of organization		(c) Description of relationsh	<u> </u>		
		IN/A							
			<del></del>		<del></del>				
	·	· <del>····································</del>				<del></del>			
$\neg$	Under n	enalties of periory. I declare that I h	nave examined this return, including acco	mpanung sehadulas and stat	lomania and to the	and of multiplication and ball of the			
	and con	nplete Declaration of preparer (other	er than taxpayer or fiduciary) is based on	all information of which prepa	rer has any knowled	ge	rue, corre	CI,	
		$\sim$		والماألات	, Dia	ocidont			
<u>و</u> ا	Si	gnature of officer or trustee				esident			
ᇍ		-		Date	Title	Chack if Propaga	'n identifi		har
Sign Here	<u>ح</u> ک	Preparer's signature	a - 2 - 1 - 1 - 1	<b>.</b>	Date	self-	's identify	y num	, '
σį:	Preparer's Use Only	DCM	MCGLADREY INC	<del>y</del>	11/9/10	employed			
- [	repa Use	The control (or years		IVE, SUITE	900	EIN ▶			
- }	ゲコ		SOUTH WACKER DR		000	212	2.4	2 4 0	^
		applicas, and zir tout , CTIC	₩ <del>2</del> 0' IT 00000-2	J 7 4		Phone no. 312 – 6		340	

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

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

➤ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

**Employer identification number** 

2009

36-4053778 SACKS FAMILY FOUNDATION Organization type (check one): Filers of: Section: \_ا 501(c)( ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, chantable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, chantable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify

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

that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Employer identification number

# SACKS FAMILY FOUNDATION

36-4053778

Contributors (see instructions)		
(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
MICHAEL & CARI SACKS  1425 WAVERLY ROAD  HIGHLAND PARK, IL 60035	\$\$.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	\$	Person Payroll Oncash Complete Part II if there is a noncash contribution )
(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.)
(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)
(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)
(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
	s	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
	(b) Name, address, and ZIP + 4  MICHAEL & CARI SACKS  1425 WAVERLY ROAD  HIGHLAND PARK, IL 60035  (b) Name, address, and ZIP + 4   (b)	

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH IN	NVESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
JP MORGAN CHASE BANK, NA (CHE JP MORGAN CHASE BANK, NA (SAV MERRILL LYNCH EMA			_	4.4 2.1 4.2	
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A	=	107	_ '• =
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
RSM MCGLADREY, INC KATTEN MUCHIN & ZAVIS	2,250. 332.				).
TO FORM 990-PF, PG 1, LN 16B	2,582.	2,582.	(	0. 0	). =
FORM 990-PF	TAX	ES		STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
ILLINOIS CHARITY BUREAU FUND ILLINOIS SECRETARY OF	15.	0.	(	0. 0	·
STATE	10.	0.	(	0. 0	
TO FORM 990-PF, PG 1, LN 18	25.	0.		0.	·

# SACKS FAMILY FOUNDATION

FORM 990-PF	OTHER E	XPENSES	ST	PATEMENT 4	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
BANK FEES MISCELLANEOUS EXPENSE	210. 4,282.	210.	0.	0.	
TO FORM 990-PF, PG 1, LN 23	4,492.	210.	0.	0.	

TYPE	NAME	Contribution
ART		
AIXI	American Patrons of Tate	9,746
	Aspen Music Festival & School	3,000
	Black Ensemble Theater	2,060
	Chicago Children's Choir	5,000
	Jazz Aspen Snowmass	7,070
	Lookingglass Theatre Company	10,000
	Open Studio Project	3,500
	Smart Museum of Art	2,500
	Steppenwolf Theater Company	5,000
00.00	Victory Gardens Theater	5,000
CIVIC	Asnen Community Foundation	20,000
	Aspen Community Foundation Aspen Valley Ski and Snowboard Club	30,000
	BUILDing our Future	1,800 5,000
	Center on Halsted	1,000
	Chicago Council on Global Affairs	50,000
	Chicago Police Memorial Foundation	25,000
	Chicago Public Radio (WBEZ)	2,000
	Common Threads	500
	Conservation International	25,000
	Elnet - Stand With Us	15,000
	Fabretto Children's Foundation	12,500
	FOP II Dept of Corrections Lodge #263	50
	Friends of the Highland Park Public Library	1,000
	Greater Los Angeles Zoo Association	25,000
	Highland Park Community Foundation	5,000
	Highland Park Firefighter's Association	100
	Highwood Small Fry Scholarship Fund	500
	Housewares Charity Foundation	10,000
	Illinois Association of Retired Firefighters	25
	Illinois Vietnam Veterans	100
	Make a Better Place	2,500
	Marine Corps-Law Enforcement Foundation	25,000
	Mobile CARE Foundation	200
	Neighbor to Neighbor NOW Foundation	5,000
	Oxfam America	1,000
	PADS Crisis Services	1,000
	Parkways Foundation	1,000 5,000
	Peaceworks Foundation	25,000
	Sage Community Partnership	1,000
	SCOPE Midwest	500
	The Center for Enriched Living	14,550
	The Family Institute	1,000
	US Ski & Snowboard Team Foundation	9,000
	Veterans Assistance Foundation	25
FOUCATIO	World Bicycle Relief	1,000
EDUCATIO	AIEF(American Israel Education Foundation)	75,000
	Branders University	20,000
	Chicagoland Jewish High School	500
	Daniel Murphy Scholarship Foundation	8,000
	Erickson Institute	195,000
	Friends of the IDF	21,000
	Fun(d) Run - District 112	500
	Hebrew Union College	50,000
	High Jump	10,000
	Highland Park High School	4,000
	Lincoln School PTA	3,000
	Marwen	5,000
	Merit School of Music	20,000

# Sacks Family Foundation Contributions 12/31/2009

TYPE	NAME_	Contribution
	North Lawndale College Prep	15,000
	Northwestern University	350,000
	Penn Hillel	1,000
	RISE International	1,000
	Say Yes to Education	25,000
	The Aspen Institute	5,000
	The Cove School	1,000
	Tulane University	505,000
HEALTH		
	American Cancer Society	250
	Aspen/Snowmass Ride for the Cure	500
	Cancer Wellness Center	2,500
	Center for Integrative Medicine & Wellness Children's Memorial Foundation	2,500 107,750
	Children's National Medical Center	107,750 2,000
	Children's Oncology Services, Inc	2,500
	Christopher & Dana Reeve Foundation	10,000
	Crohn's & Colitis Foundation of America	5,000
	Food Allergy Initiative	50,000
	Gastro Intestinal Research Foundation (GIRF)	1,000
	Juvenile Diabetes Research Foundation	6,000
	Les Turner ALS Foundation	10,000
	LINKS-North Shore Youth Health Services	300
	Lynn Sage Cancer Research Foundation	14,142
	Manhasset Women's Coalition Against Breast Cancer Mayo Clinic 42 Club	1,000
	Michael Rolfe Pancreatic Cancer Foundation	1,000 5,000
	Northwestern Brain Tumor Institute	6,000
	Northwestern Memorial Foundation	50,000
	NU-Feinberg School of Medicine	125,000
	OCD Chicago	1,000
	Ounce of Prevention Fund	10,000
	Snow City Arts	1,000
	The Foundation Fighting Blindness	2,500
	The Lustgarten Foundation The National Fragile X Foundation	5,000 5,000
	The Smile Train	3,500
	World Health Imaging Alliance	25,000
	Y Me/Walk to Empower	1,000
JEWISH/	·	·
RELIGIOUS		
	American Committee for the Weizmann Institute of Science	10,000
	American Friends of the Hebrew University	000,8
	American Jewish Committee	50,000
	American Jewish Joint Distribution Committee	150,000
	Amizade	300
	Birthright Israel Foundation	200,000
	Center for Entrepreneurial Jewish Philanthropy Chai South Africa	30,000
	Council for Jewish Elderly	5,000 10,000
	Facing History and Ourselves	15,000
	Friends of the IDF	10,000
	Greater Chicago Maot Chitim	10,000
	Holocaust Educational Foundation	5,000
	Illinois Holocaust Museum & Education Center	50,000
	JCC Women's Auxiliary	1,200
	Jerusalem Fellowships Inc	5,000
	Jewish Child & Family Services	1,000
	Jewish Council for Youth Services Jewish Council on Urban Affairs	160,000
	Jewish United Fund	10,000 264,000
	Keshet	10,000
	L'Chiam Center	2,500
	Nesiya Institute	15,000

### Sacks Family Foundation Contributions 12/31/2009

TYPE	NAME	Contribution
	Response Center	5,500
	The Jewish Women's Foundation of Metropolitan Chicago	2,000
	United States Holocaust Memorial Museum	92,738
	Women's American ORT	5,000
TEMPLES		,
	Am Shalom	210,000
	Congregation Bene Shalom	5,000
	Temple Beth-El	20,000
MUSEUMS	MUSEUMS & PARKS	
	Aspen Art Museum	43,600
	Chicago Children's Museum	12,500
	Kohl Children's Museum of Greater Chicago	5,000
	Lincoln Park Zoo	1,000
	Museum of Contemporary Art	126,000
	Museum of Science and Industry	10,000
	Ravinia	12,000
	TOTAL CONTRIBUTIONS - 2009	3,699,006

Contributions were made to the general purpose fund or to specific designated funds of public charitable organizations that are classified under section 501 (c)(3) of the Internal Revenue Code.

Addresses for the above organizations are available upon request.

Form **8868** 

(Rev. April 2009)
Department of the Treasury
Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

		<del></del>
• If 3	vou are filing for an Automatic 3-Month Extension, complete only Part I and check this box	form).
Pai	Automatic 3-Month Extension of Time. Only submit original (no copies needed).	
A cor Part	poration required to file Form 990-T and requesting an automatic 6-month extension - check this box and com-	nplete
	her corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an Income tax returns.	extension of time
noted (not a you n	tronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronic automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files. Its gov/efile and click on e-file for Charities & Nonprofits.	cally if (1) you want the additional nsolidated Form 990-T. Instead.
Туре		Employer identification number
print	SACKS FAMILY FOUNDATION	36-4053778
File by due da filing yo	the tor Number, street, and room or suite no. If a P.O. box, see instructions.	
return Instruc		***
Chec	k type of return to be filed (file a separate application for each return).	
	Form 990         Form 990-T (corporation)         Form 47           Form 990-BL         Form 990-T (sec. 401(a) or 408(a) trust)         Form 52           Form 990-EZ         Form 990-T (trust other than above)         Form 60           Form 990-PF         Form 1041-A         Form 88	27 69
Te • If t	MICHAEL SACKS e books are in the care of ▶ 1850 2ND STREET, STE. 201 - HIGHLAND PA lephone No. ▶ (312)506-6501 FAX No. ▶ he organization does not have an office or place of business in the United States, check this box his is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	
box I	. —	
1	request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unti-   AUGUST 15, 2010   , to file the exempt organization return for the organization named at its for the organization's return for:   X   calendar year 2009   or   tax year beginning   , and ending	
2	If this tax year is for less than 12 months, check reason: Initial return Final return	Change in accounting period
3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a \$ 0.
	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	
	tax payments made. Include any prior year overpayment allowed as a credit.  Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,	3b \$ 220.
	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).  See Instructions.	3c \$ 0.
		<u> </u>

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

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

Form 8868 (Rev. 4-2009)

Form 8	3868 (Rev 4-2009)					Page 2
Note.  • If y	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this b Only complete Part II if you have already been granted an automatic 3-month extension on a previously file ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).	d Form			▶ (	X
Par	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no	copies	needed)	·		
Type print			•		cation n	umber
•	SACKS FAMILY FOUNDATION	3	6 - 40	537	78	
File by t extende due dat filing the	Number, street, and room or suite no. If a P.O. box, see instructions.	For I	RS use	only	····	
retum 8 instructi	🗠   City, town or post office, state, and ZIP code. For a foreign address, see instructions.					
	k type of return to be filed (File a separate application for each return)  Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 1041-A  Form 990-BL Torm 990-PF Form 990-T (trust other than above) Form 4720	=	orm 522 orm 606		For	m 8870
STOP	Do not complete Part II if you were not already granted an automatic 3-month extension on a previo	usly fik	ed Form	8868		
	MICHAEL SACKS a books are in the care of ▶ 1850 2ND STREET, STE. 201 - HIGHLAND P.	ARK,	IL	600	35	
	ephone No ► <u>(312)506-6501</u> FAX No ►				_	
	ne organization does not have an office or place of business in the United States, check this box				<b>&gt;</b> {	
• If ti	his is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If the					
box 🎚		memb	ers the	exten	sion is fo	Эr
	request an additional 3-month extension of time until NOVEMBER 15, 2010.					
	For calendar year $2009$ , or other tax year beginning, and ending _	-				
6	If this tax year is for less than 12 months, check reason: Initial return Final return		Change	in ac	counting	period
	State In detail why you need the extension					
	INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE	RET	URN	<u>IS</u>	NOT	YET
	AVAILABLE.					
	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		}			_
	nonrefundable credits. See instructions.	8a	\$			0.
	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated					
	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid					
•	previously with Form 8868.	8b	\$			220.
	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit					_
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$			0.
	Signature and Verification					
t is trui	penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the e, correct, and complete, and that I am authorized to prepare this form			1		<b>ə</b> f,
Signatu	ire MacHaruay Title CPA	Date	▶ 7	128	7/10	

Form 8868 (Rev 4-2009)