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Form 990-PF Department of the Treasury

Internal Revenue Service

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

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

OMB No 1545-0052

For calendar year 2011 or tax year beginning and ending Name of foundation A Employer identification number ROBERT AUGUST KORANDA MEMORIAL FOUNDATION C/O KENNETH R KORANDA 36-7417497 Number and street (or P O box number if mail is not delivered to street address) B Telephone number 7 S 541 DONWOOD DRIVE 630-663-5600 City or town, state, and ZIP code C If exemption application is pending, check here NAPERVILLE, G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation Check type of organization E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust _____ Other taxable private foundation under section 507(b)(1)(A), check here Fair market value of all assets at end of year J Accounting method X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 829,583. (Part I, column (d) must be on cash basis.) ▶\$ Part | Analysis of Revenue and Expenses (c) Adjusted net (d) Disbursements (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not for chantable purposes (cash basis only) expenses per books income income necessanly equal the amounts in column (a)) 414,178. N/A Contributions, gifts, grants, etc., received Check I if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 23. 23 STATEMENT 3 30,715. 30,715 STATEMENT 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) -13,9876a Net gain or (loss) from sale of assets not on line 10 Revenue b Gross sales price for all assets on line 6a 151,938. 0. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 1,958. 1,958. 3 STATEMENT 11 Other income 432,887. 32,696. 12 Total. Add lines 1 through 11 0. 0. Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits Administrative Expenses 16a Legal fees STMT 4 485. Ο. 0. **b** Accounting fees Ō. STMT 5 3,220. 0. c Other professional fees 17 Interest RECEIVED STMT 6 740. 0. 18 19 Depreciation and depletion 1 9 2012 20 21 Travel, conferences, and meetings 22 Printing and publications OGDEN IT 23 Other expenses 24 Total operating and administrative 4,445 0. 0. expenses. Add lines 13 through 23 89,765 89,765. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 94,210 0. 89,765. Add lines 24 and 25 27 Subtract line 26 from line 12 338,677 2 Excess of revenue over expenses and disbursements 32,696 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-) LHA For Paperwork Reduction Act Notice, see instructions

Eo.	Of	ROBERT AUGUST KORANDA MI 90-PF (2011) FOUNDATION C/O KENNETH F		36-	7417497 Page 2
			Beginning of year		
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
		 ,,,,,,,,	(a) book value	(D) BOOK VAIDE	(C) Fair Ivial Ket Value
	1	Cash - non-interest-bearing	7,011.	5,768.	5,768.
	2	Savings and temporary cash investments	7,011.	3,700.	5,700.
	3	Accounts receivable			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ►		1	
		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 ▶			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges	3,753.	3,426.	3,426.
Ä	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock STMT 7	496,885.	837,132.	820,389.
		Investments - corporate bonds		-	<u> </u>
	l	Investments - land, buildings, and equipment basis	, ,	. "	
	' '	Less accumulated depreciation			
	12	Investments - mortgage loans			_
	13	Investments - other	**		· · · · · · · · · · · · · · · · · · ·
	14	Land, buildings, and equipment basis		, , , , , , , , , , , , , , , , , , ,	· · · · ·
	' "	Less accumulated depreciation	;	i	
	16				
	15	Other assets (describe			
	10	Total anada (ta ba anadatad bu all filan)	507,649.	846,326.	829,583.
	16	Total assets (to be completed by all filers)	301,043.	040,320.	025/303.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Liabilities	19	Deferred revenue			
Ē	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>ā</u> .	1	Mortgages and other notes payable			
_	-22-	-Other-liabilities-(describe-▶)-			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
s		and complete lines 24 through 26 and lines 30 and 31.			
Ö	24	Unrestricted			
lan	25	Temporarily restricted			
8	26	Permanently restricted			
ဋ		Foundations that do not follow SFAS 117, check here			
Ę	İ	and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other funds	507,649.	846,326.	
ě	30	Total net assets or fund balances	507,649.	846,326.	
_	-				
_	31	Total liabilities and net assets/fund balances	507,649.	846,326.	
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
_ 1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
•		st agree with end-of-year figure reported on prior year's return)		1	507,649.
2	•	r amount from Part I, line 27a		2	338,677.
		er increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	846,326.

846,326.

5 Decreases not included in line 2 (itemize) ▶

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

FOUNDATION C/O KENNETH R KORANDA

Part IV Capital Gain	s and Lo	osses for Tax on In	vestmen	t Income						
		and(s) of property sold (e g , or common stock, 200 shs			P	How a - Purd - Don	mase		acquired ay, yr)	(d) Date sold (mo , day, yr)
1a NORTHERN TRUS	T VAR	IOUS					P '	VARI	ous	VARIOUS
b NORTHERN TRUS	T VAR	IOUS					Р '	VARI	ous	VARIOUS
c NORTHERN TRUS	T VAR	IOUS					P '	VARI	ous	VARIOUS
d CAPITAL GAINS	DIVI	DENDS			ļ					
e					<u></u>					
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale		(h) Gain or (loss) (e) plus (f) minus (g)				
a 36,944			,	45,86	0.					-8,916.
b 84,286				86,97						-2,686.
c 28,776				33,09	3.					-4,317.
d 1,932	•									1,932.
е										
Complete only for assets sho	wing gain in	column (h) and owned by t	the foundation	on 12/31/69					ol (h) gain	
(i) FMV as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any			COI		not less that (from col. (
a										-8,916.
<u>b</u>										-2,686.
C										-4,317.
d										1,932.
<u>e</u>										
2 Capital gain net income or (ne	capital loss	If gain, also enter If (loss), enter -0-	in Part I, line In Part I, line	7 7	}	2				-13,987.
3 Net short-term capital gain or	loss) as def				. [
If gain, also enter in Part I, line		, ,	u (0))					
If (loss), enter -0- in Part I, line	8	•				3			N/A	
Part V Qualification	Under S	Section 4940(e) for	Reduced	l Tax on Net	Inv	estn	nent Inc	ome		
(For optional use by domestic private	ate foundati	ions subject to the section 4	1940(a) tax on	net investment in	come)				
If section 4940(d)(2) applies, leav	e this nart h	lank								
, ,, , , , ,	•									
Was-the-foundation-liable-for-the-s					10d?-				_ .	Yes X No
If "Yes," the foundation does not q						_				
1 Enter the appropriate amount	in each colu		ictions before	making any entrie	es					(d)
(a) Base period years		(b)	ributions	Not volve of no	(c)	utabla				(d) outlon ratio
Calendar year (or tax year begi	nning in)	Adjusted qualifying dist		Net value of no	пспаг				(col (b) div	ided by col (c))
2010			8,060.			4 /	2,998	<u> </u>		.186174
2009			7,116.				5,403			.137104
2008			4,035.				6,595			.090625
2007			4,200.				3,723			.033907
2006			3,714.			38	5,374	+		.061535
2 Total of line 1, column (d)								2		.509345
3 Average distribution ratio for t			on line 2 by 5,	or by the number	of ye	ars				
the foundation has been in exi	stence if less	s than 5 years						3		.101869
4 Enter the net value of nonchar	table-use as	sets for 2011 from Part X, I	ine 5					4		716,870.
5 Multiply line 4 by line 3								5		73,027.
6 Enter 1% of net investment inc	ome (1% of	f Part I, line 27b)						6		327.
7 Add lines 5 and 6								7		73,354.
8 Enter qualifying distributions f	rom Part XII	, line 4						8		89,765.
If line 8 is equal to or greater the See the Part VI instructions			1b, and comp	olete that part using	g a 19	% tax	rate			

ROBERT AUGUST KORANDA MEMORIAL

7	n 990-PF (2011) FOUNDATION C/O KENNETH R KORANDA 36-741			Page 4
	ert VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ctio	ns)
1à	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔛 and enter "N/A" on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary-see instructions)		_	
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%		3	27.
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u>0.</u>
3	Add lines 1 and 2		3	27.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		3	27.
6	Credits/Payments			
a	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 3, 753.			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c			
	Backup withholding erroneously withheld 6d			
	Total credits and payments Add lines 6a through 6d		3,7	53.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	•		3.4	26.
	Enter the amount of line 10 to be Credited to 2012 estimated tax ► 3,426 • Refunded ► 11		- , -	0.
	art VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
u		''		
	If the answer is "Yes" to 1aor 1b, attach a detailed description of the activities and copies of any materials published or			
_	distributed by the foundation in connection with the activities	4.		х
	Did the foundation file Form 1120-POL for this year?	10		
u	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation \$\bigsirem \\$ 0 \cdot \(\text{(2)} \) On foundation managers \$\bigsirem \\$ 0 \cdot \(\text{(2)} \)			
_				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers > \$			v
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	-If-"Yes;"-attach-a-detailed-description-of-the-activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	i		.,
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?	46		1,,
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	-	X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6		X
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	
	If "Yes," complete Part II, col. (c), and Part XV.			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		Х

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10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

ROBERT AUGUST KORANDA MEMORIAL

orm	990-PF(2011) FOUNDATION C/O KENNETH R KORANDA 36-7417	<u> 497</u>		Page 5
	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12	<u> </u>	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► KENNETH R KORANDA Telephone no ►630-66	3-5	600	
	Located at ▶ 7 S 541 DONWOOD DRIVE, NAPERVILLE, IL ZIP+4 ▶60	540		
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	N	/A	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If "Yes," enter the name of the foreign			
	country >			
Pε	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(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)			
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 instructions)? N/A	1b	L	
	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-201 12	10		<u>X</u>
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))			
а	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2011? Yes X No			
	If "Yes," list the years >			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions) N/A	2b	ļ	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
_	<u> </u>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 2011 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 2011.) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	<u> </u>	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			v
	had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b	1	Х

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5a During the year did the foundation pay or incur any amount to	· · · · · · · · · · · · · · · · · · ·	· -				
` (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?						
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly,						
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 described in section						
509(a)(1), (2), or (3), or section 4940(d)(2)?						
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for						
the prevention of cruelty to children or animals?						
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations						
section 53 4945 or in a current notice regarding disaster assistance (see instructions)? N/A						
Organizations relying on a current notice regarding disaster assistance check here						
Organizations relying on a current notice regarding disaster assistance check nete						
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A Yes No						
If "Yes," attach the statement required by Regulations section 53.494		,		ŀ		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				Ì		
a personal benefit contract?	pay premiums on	□ ve	s X No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	pare anal hanafit contract?		13 <u>21</u> NU	6b	1	X
If "Yes" to 6b, file Form 8870.	reisonal beliefit contract?		-			<u> </u>
•	halter transaction?	[v.	s X No	[
7a. At any time during the tax year, was the foundation a party to a prohibited tax s			N/A	7b		
b If "Yes," did the foundation receive any proceeds or have any net income attribution. About Officers, Directors, Trust		nogoro Highly		70		
Part VIII Information About Officers, Directors, Trust	ees, roundation wa	nagers, nigni	,			
List all officers, directors, trustees, foundation managers and their	compensation.					
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expe	ense
(a) Name and address	hours per week devoted	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred	aè	e) Expe count, allowan	other
KENNETH R. KORANDA	TRUSTEE	enter-u-)	compensation	°	III Wall	1063
7 S 541 DONWOOD DRIVE	IROBILL					
NAPERVILLE, IL 60540	0.00	0.	0.			0.
	TRUSTEE	0.	0.	<u>'</u>		•
7 S 541 DONWOOD DRIVE	INODILL					
NAPERVILLE, IL 60540	0.00	0.	0.			0.
JOHN_KORANDA	TRUSTEE	0.	0.	'		<u> </u>
730 HIGHLAND AVENUE	TKOOT DE-					
NAPERVILLE, IL 60540	0.00	0.	0.			0.
	TRUSTEE	0.	0.	`		•
1444 N ORLEANS	IROSIEE					
CHICAGO, IL 60610	0.00	o.	0.			0.
2 Compensation of five highest-paid employees (other than those inc			0.	•		0.
	(b) Title, and average	THE PARTY OF THE P	(d) Contributions to	1	e) Exna	ense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	ač	e) Expe	other
NONE	devoted to position		compensation	 	illowan	ices
NONE						
				+		
				1		
				 		
				1		
				 		
				1		
				+-		
						
Total number of other employees paid over \$50,000	l					
			▶			0

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "N	IONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	 	
		• (
Total number of others receiving over \$50,000 for professional services 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		Expenses
	70, 00	
1N/A		
2		-
2		
	-	
3		
<u> </u>		
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 line	s 1 and 2	Amount
1N/A		·
2		
		<u> </u>
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3	▶	0.

Minimum Investment Return (All domestic foundations must complete this part Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes 1 710,556. a Average monthly fair market value of securities 1a 17,231. 1b b Average of monthly cash balances c Fair market value of all other assets 1c 727,787. 1d d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 727,787. 3 Subtract line 2 from line 1d 10,917. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 716,870. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 5 35,844. Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part) 35,844. Minimum investment return from Part X, line 6 327. 2a Tax on investment income for 2011 from Part VI, line 5 Income tax for 2011 (This does not include the tax from Part VI) Add lines 2a and 2b 20 Distributable amount before adjustments. Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions 35,517 Add lines 3 and 4 5 6 Deduction from distributable amount (see instructions) 35,517 7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes 89,765. a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 1a b 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 Amounts set aside for specific charitable projects that satisfy the -a-Suitability-test-(prior-IRS-approval-required) --3a 3b **b** Cash distribution test (attach the required schedule) 89,765. 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b 5 438. 6 Adjusted qualifying distributions Subtract line 5 from line 4

Form **990-PF** (2011)

4940(e) reduction of tax in those years

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,	/ 117			
line 7				35,517.
2 Undistributed income, if any, as of the end of 2011			^	
a Enter amount for 2010 only			0.	aramantikihilihilihilihili
b Total for prior years		0.		
5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5		<u> </u>	**************************************	······································
3 Excess distributions carryover, if any, to 2011				
a From 2006 4,617. b From 2007 1,978.				
00 = 0=				
c From 2008 29,535. d From 2009 55,714.				
e From 2010 64,770.				
f Total of lines 3a through e	156,614.			
4 Qualifying distributions for 2011 from	100,0210			
Part XII, line 4 > \$ 89,765.				
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior	ti''			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	771111111111111111111111111111111111111	, , , , , , , , , , , , , , , , , , ,		
(Election required - see instructions)	0.			,
d Applied to 2011 distributable amount				35,517.
e Remaining amount distributed out of corpus	54,248.		1	
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	210,862.			
b Prior years' undistributed income Subtract				
line-4b-from-line-2b		0- <u>.</u>	(A)	
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 2010 Subtract line		······································		
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2011 Subtract				
lines 4d and 5 from line 1 This amount must				
be distributed in 2012				0.
7 Amounts treated as distributions out of	1			
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2006	4 617			
not applied on line 5 or line 7	4,617.		<u> </u>	
9 Excess distributions carryover to 2012.	206 245			
Subtract lines 7 and 8 from line 6a	206,245.			
10 Analysis of line 9				
a Excess from 2007 b Excess from 2008 29,535.				
c Excess from 2009 55,714. d Excess from 2010 64,770.				
e Excess from 2011 54, 248.			<u>. </u>	Form QQ0-DF (2011)

ROBERT AUGUST KORANDA MEMORIAL FOUNDATION C/O KENNETH R KORANDA Form 990-PF (2011) 36-7417497 Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 à If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling 4942(1)(5) b Check box to indicate whether the foundation is a private operating foundation described in section 4942(I)(3) or 2 a Enter the lesser of the adjusted net Tax year Prior 3 years (a) 2011 (b) 2010 (c) 2009 (d) 2008 (e) Total income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 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 (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) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2)) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here 🕨 🗶 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d a The name, address, and telephone number of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Form **990-PF** (2011)

ROBERT AUGUST KORANDA MEMORIAL FOUNDATION C/O KENNETH R KORANDA 36-7417497 Page 11 Form 990-PF (2011) Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or Foundation show any relationship to Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year THE MAKE A DENT FOUNDATION NONE CHARITABLE 333 N MICHIGAN AVE SUITE 1810 5,000. CHICAGO, IL 60601 CHARITABLE ARRANMORE CENTER FOR THE ARTS NONE 34 RANCE ROAD 500. OSWEGO, IL 60543 THE ANTIQUE AND CLASSIC BOAT SOCIETY NONE CHARITABLE **422 JAMES STREET** CLAYTON, NY 13624 300. GENEVA LAKE CONSERVANCY NONE CHARITABLE P.O. BOX 588 FONTANA, WI 53125 1,000. NONE CHARITABLE HERITAGE YMCA GROUP 34 S WASHINGTON STREET 1,400. NAPERVILLE, IL 60540 SEE CONTINUATION SHEET (S) ➤ 3a 89,765. Total b Approved for future payment NONE

Total

3 Grants and Contributions Paid During the Y			- 	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
HYDE PARK NEIGHBORHOOD CLUB	NONE		CHARITABLE	
5480 S. KENWOOD				
CHICAGO, IL 60615				50
GLOBAL CITIZENSHIP EXPERIENCE	NONE		CHARITABLE	
L535 N DAYTON STREET				5.00
CHICAGO, IL 60642		.		5,00
JANICE MCARDLE CANCER RESEARCH	NONE		CHARITABLE	
FOUNDATION				
3575 SCOTTSDALE CIRCLE				
NAPERVILLE, IL 60564				47
J. KYLE BRAID FOUNDATION	NONE		CHARITABLE	
53634 ROAD NN56 - P.O. BOX 166				
VILLA GROVE, CO 81155				6,00
KISHWAUKETOE NATURE CONSERVANCY	NONE		CHARITABLE	
PO BOX 580 WILLIAMS BAY, WI 53191				1,35
WIBBINES BAT, WI 33131				1,33
WODEN, ADDODUM				
MORTON ARBORETUM 4100-ROUTE-53	NONE		CHARITABLE	
LISLE, IL 60532				33,50
NATIONAL INSTITUTE FOR COMMUNITY	NONE		CHARITABLE	
175 HIGHPOINT DRIVE				
ROMEOVILLE, IL 60446				30
NORTH CENTRAL COLLEGE	NONE		CHARITABLE	
30 N BRAINARD STREET				_
NAPERVILLE, IL 60540				14,35
NORTHWESTERN UNIVERSITY SCHOOL OF LAW	NONE		CHARITABLE	
375 E CHICAGO AVENUE				F 00
CHICAGO, IL 60611				5,00
DRAVET SYNDROME FOUNDATION INC.	NONE		CHARITABLE	
11 NANCY DRIVE MONROE, CT 06468				1,00
Total from continuation sheets				81,56

ROBERT AUGUST KORANDA MEMORIAL FOUNDATION C/O KENNETH R KORANDA

36-7417497

Part XV Supplementary Information 3 Grants and Contributions Paid During the N				
				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
THE RON BUONAURO MEMORIAL FOUNDATION	NONE		CHARITABLE	
200 E. 5TH AVE NAPERVILLE, IL 60563				600
SALVATION ARMY	NONE		CHARITABLE	
615 SLATERS LANE				
ALEXANDRIA, VA 22313				1,200.
STANFORD UNIVERSTY	NONE		CHARITABLE	
450 SERRA MALL STANFORD, CT 94305				11,000
				,
WATER SAFETY PATROL	NONE		CHARITABLE	
P.O. BOX 548	NONE		CHARTIABLE	
WILLIAMS BAY, WI 53191	<u> </u>			1,290.
		V		
Total from continuation sheets				

FOUNDATION C/O KENNETH R KORANDA

er gross amounts unless otherwise indicated	Unrelated b	usiness income		y section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a					
b					
C					
d					
e					
Fees and contracts from government agencies					
Membership dues and assessments					
nterest on savings and temporary cash				İ	
nvestments			14	23.	
Dividends and interest from securities			14	30,715.	
Net rental income or (loss) from real estate					
Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income			14	1,958.	
Gain or (loss) from sales of assets other					
han inventory			18	-13,987.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue					
i					
b					
C					
d					
e					
		0	•	18,709.	
Subtotal-Add-columns-(b), (d), and-(e)		<u> </u>			
Subtotal-Add-columns-(b),-(d),-and-(e) Fotal. Add line 12, columns (b), (d), and (e)				13	18,7
Subtotal-Add-columns-(b), (d), and-(e) otal. Add line 12, columns (b), (d), and (e)		<u>`</u>		13	18,7
Subtotal–Add-columns-(b),-(d),-and-(e) Total. Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculation	s)		xempt P		18,7
Subtotal-Add-columns-(b),-(d), and-(e) Fotal. Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculation BET XVI-B Relationship of Activities	s) es to the Accom	plishment of E		urposes	
Fubtotal-Add-columns-(b), (d), and-(e) Fotal. Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculation Bart XVI-B Relationship of Activitie e No. Explain below how each activity for which	es to the Accom	plishment of E		urposes	
Subtotal-Add-columns-(b),-(d),-and-(e) Total. Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculation The extra XVI-B Relationship of Activities	es to the Accom	plishment of E		urposes	•
Fubtotal-Add-columns-(b), (d), and-(e) Fotal. Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculation Bart XVI-B Relationship of Activitie e No. Explain below how each activity for which	es to the Accom	plishment of E		urposes	•
Fubtotal-Add-columns-(b), (d), and-(e) Fotal. Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculation Bart XVI-B Relationship of Activitie e No. Explain below how each activity for which	es to the Accom	plishment of E		urposes	
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intotal-Add-columns-(b), (d), and-(e) fotal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation art XVI-B Relationship of Activitie e No. Explain below how each activity for which	es to the Accom	plishment of E		urposes	
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Fubtotal-Add-columns-(b), (d), and-(e) Fotal. Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculation Bart XVI-B Relationship of Activitie e No. Explain below how each activity for which	es to the Accom	plishment of E		urposes	
Fubtotal-Add-columns-(b), (d), and-(e) Fotal. Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculation Bart XVI-B Relationship of Activitie e No. Explain below how each activity for which	es to the Accom	nplishment of E		urposes	•
Foubtotal-Add-columns-(b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculation Bart XVI-B Relationship of Activitie Explain below how each activity for which	es to the Accom	nplishment of E		urposes	
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Foubtotal-Add-columns-(b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculation Bart XVI-B Relationship of Activitie Explain below how each activity for which	es to the Accom	nplishment of E		urposes	•
Foubtotal-Add-columns-(b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculation Bart XVI-B Relationship of Activitie Explain below how each activity for which	es to the Accom	nplishment of E		urposes	•
Foubtotal-Add-columns-(b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculation Bart XVI-B Relationship of Activitie Explain below how each activity for which	es to the Accom	nplishment of E		urposes	•
Foubtotal-Add-columns-(b),-(d), and-(e) Fotal. Add line 12, columns (b), (d), and (e) Explain below how each activity for which	es to the Accom	nplishment of E		urposes	
Foubtotal-Add-columns-(b), (d), and (e) Fotal. Add line 12, columns (b), (d), and (e) Eworksheet in line 13 instructions to verify calculation Bart XVI-B Relationship of Activitie Explain below how each activity for which	es to the Accom	nplishment of E		urposes	
Foubtotal-Add-columns-(b),-(d), and-(e) Fotal. Add line 12, columns (b), (d), and (e) Explain below how each activity for which	es to the Accom	nplishment of E		urposes	

Part X	Information Re Exempt Organ		nsfers To a	and Transactions	and Relations	hips With Nor	ncharitabl	е	
1 Did th	e organization directly or indi		y of the followin	a with any other organizati	on described in sect	ion E01(a) of	· · · · · ·	Yes	No
						1011 30 1(0) 01		163	140
	ode (other than section 501(c) fers from the reporting founda				ilizations,				
	. •	ation to a nonchan	table exempt on	yamzadon or			10/1	1	х
(1) (1a(1)	1	X
	Other assets transactions						1a(2)		
		hla ayamat arasaı	ation				15/1\	1	х
	Sales of assets to a noncharital Purchases of assets from a noi						1b(1) 1b(2)	1	X
	Rental of facilities, equipment,		i Organization				1b(3)		X
	Reimbursement arrangements						1b(4)		X
	oans or loan guarantees						1b(5)		X
	Performance of services or me	mharchin or fundr	aleina ealiaitatia	ne			1b(6)		X
• •	ng of facilities, equipment, ma	•	•				10		X
	answer to any of the above is	=			lwave show the fair r	market value of the o		sets	
	vices given by the reporting fo		-					3013,	
	nn (d) the value of the goods,				,				
(a) Line no	(b) Amount involved	(c) Name	of noncharitable	exempt organization	(d) Description	of transfers, transaction	ns, and sharing a	rrangeme	ents
			N/A			· · · · · · · · · · · · · · · · · · ·			
									
					- 	•			
		-							
2a Is the	foundation directly or indirect	tly affiliated with, o	r related to, one	or more tax-exempt organ	izations described				
	tion 501(c) of the Code (other	•		, ,			Yes	X	□No
	s," complete the following sch								
	(a) Name of org			(b) Type of organization	·	(c) Description of re	lationship		
	N/A								
				 -					
	Inder penalties of penury, I declare	that I have everying	this parties is objected	ng accompanying schedules ass	d statements, and to the	heet of my beautades			
	ind belief, it is true, correct, and con						May the IRS return with the	discuss ne prepar	this
Sign Tere	117			11/2/12	Tous	4.	shown below	v (see ins	tr)?
11010	Signature of officer or trustee			Date 17/17/12	Title	1-62	_ X Yes	š <u>L</u>	_l No
	Print/Type preparer's na		Preparer's s	ionature	Date	Check If	PTIN		
	Tring Type property of the) /		self- employed			
Paid	JEANNE M.	JENSEN		AX!	11/14/12		P01311	295	
Prepar			EN INC	. //	<u>,</u>	Firm's EIN ▶ 6			
Use O			()	()		1			
	Firm's address ▶ 12						-		
	HI	NSDALE,	IL 6052	1		Phone no 6:	<u>30/455-</u>		
					· · · · · · · · · · · · · · · · · · ·		Form 99 0	O-PF	(2011)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2011

Name of the organization

ROBERT AUGUST KORANDA MEMORIAL FOUNDATION C/O KENNETH R KORANDA

Employer identification number

36-7417497

Organization type (check one):						
Filers of	:	Section:				
Form 990	0 or 990-EZ	501(c)() (enter number) organization				
		4947(a)(1) nonexempt charitable trust not treated as a private foundation				
		527 political organization				
Form 990	0-PF	X 501(c)(3) exempt private foundation				
		4947(a)(1) nonexempt charitable trust treated as a private foundation				
		501(c)(3) taxable private foundation				
Note. Or General	nly a section 501(c)(covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. filling Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one ete Parts I and II.				
Special	Rules					
	509(a)(1) and 170(b)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections o)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.				
	total contributions	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or ruelty to children or animals. Complete Parts I, II, and III.				
	contributions for us If this box is checked purpose. Do not co	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, se exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. ed, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., emplete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions of \$5,000 or more during the year.				
but it mu	ust answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization
ROBERT AUGUST KORANDA MEMORIAL
FOUNDATION C/O KENNETH R KORANDA

Employer identification number

36-7417497

Part I	Contributors	(see instructions).	Use duplicate co.	pies of Part I if	additional space is needed.
--------	--------------	---------------------	-------------------	-------------------	-----------------------------

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	KORANDA FAMILY FOUNDATION 727 E. SEVENTH STREET HINSDALE, IL 60521	\$\$14,178.	Person X Payroll Noncash (Complete Part II if there Is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	Name, address, and ZIP + 4	(c) Total contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there Is a noncash contribution.)

Name of organization

ROBERT AUGUST KORANDA MEMORIAL

FOUNDATION C/O KENNETH R KORANDA

Employer identification number

36-7417497

Part II	Noncash Property	(see instructions)	. Use duplicate copies	of Part II if additional space is needed.
---------	------------------	--------------------	------------------------	---

(b)	(c)	1
Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) (b) Description of noncash property given	(b) Description of noncash property given \$ (c) FMV (or estimate) (see instructions) (b) Description of noncash property given (c) FMV (or estimate) (see instructions) \$ (c) FMV (or estimate) (see instructions)

Name of or			Employer identification number						
	T AUGUST KORANDA MEMORI								
	ATION C/O KENNETH R KOR		36-7417497						
Part III	year. Complete columns (a) through (e) and th	ie following line entry. For organization)(7), (8), or (10) organizations that total more than \$1,000 for the						
	the total of exclusively religious, charitable, etc	, contributions of \$1,000 or less for	r the year (Enter this information once) > \$						
(a) No.	Use duplicate copies of Part III if additiona	al space is needed.							
from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
Part I	., .								
}									
		(e) Transfer of gif	t						
	Transferencia norma address an	J 710 . 4	Deletionship of the reference to the reference						
ł	Transferee's name, address, an	10 ZIP + 4	Relationship of transferor to transferee						
	- 1/4								
(a) No.									
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
		1-34 No.							
	(e) Transfer of gift								
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee						
(a) No.									
from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
Part I									
}		(e) Transfer of gif							
		(e) Transfer of gir	•						
	Transferee's name, address, an	d 7IP + 4	Relationship of transferor to transferee						
-			Total Control of the						
			- 10-1						
(a) No. from	(h) D	/-\	(A) Daniel Alex (A)						
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
	(e) Transfer of gift								
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee						
		I							

FORM 990-PF INTEREST ON SAVING	S AND TEM	DOBARY CA	SH T	NVFSTMENTS	STATEMENT	
			.011 1.	NVLOTILINIO	- CIAILIILINI	
SOURCE				_	AMOUNT	
PNC BANK				_		23.
TOTAL TO FORM 990-PF, PART I, L	INE 3, CO	LUMN A		=		23.
FORM 990-PF DIVIDENDS	AND INTER	EST FROM	SECU	RITIES	STATEMENT	2
SOURCE	GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A AMOUNT)
NORTHERN TRUST US GOVERNMENT INTEREST		30,287. 2,360.	1,932.		28,355. 2,360. 30,715.	
TOTAL TO FM 990-PF, PART I, LN	4	32,647.		1,932.		
FORM 990-PF	OTHER I	NCOME			STATEMENT	3
DESCRIPTION		(A) REVENUE PER BOOKS		(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOI	
OTHER_INVESTMENT_INCOME NON DIVIDEND DISTRIBUTIONS	_		32. 26.	32. 1,926.		
TOTAL TO FORM 990-PF, PART I, L	INE 11	1,9	58.	1,958.	•	
FORM 990-PF	ACCOUNTI	NG FEES			STATEMENT	4
	(A) XPENSES ER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOME	(D) CHARITAI E PURPOSI	
ACCOUNTING FEES	485.		0.			0.
TO FORM 990-PF, PG 1, LN 16B	485.		0.			0.

FORM: 990-PF (THER PROFES	SIONAL FEES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM			
PROFESSIONAL FEES	3,220.	0.		0.		
TO FORM 990-PF, PG 1, LN 16C	3,220.	0.		0.		
FORM 990-PF	TAX	ES		STATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM			
FEDERAL TAX STATE TAX FOREIGN TAX	327. 15. 398.	0. 0. 0.		0. 0. 0.		
TO FORM 990-PF, PG 1, LN 18	740.	0.		0.		
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 7		
				FAIR MARKET		
DESCRIPTION		BC	OOK VALUE	VALUE		
NORTHERN TRUST SECURITUES			837,132.	820,389.		
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		837,132.	820,389		

Form 8868 (Rev. 1-2012)					Page 2	
If you are filing for an Additional (Not Automatic) 3-Month Ex	tension, o	complete only Part II and check this	s box		► X	
Note. Only complete Part II if you have already been granted an a				8868.		
 If you are filing for an Automatic 3-Month Extension, complete 						
Part II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	nal (no c	opies needed)	
		Enter filer's	identifyii	ng number, see ir	structions	
Type or Name of exempt organization or other filer, see instru	ctions			mployer identification number (EIN) o		
print ROBERT AUGUST KORANDA MEMORI	IAL		,		,	
File by the FOUNDATION C/O KENNETH R KON	RANDA		X	36-74174	97	
due date for Number, street, and room or suite no. If a P.O. box, so	ee instruc	tions.	Social se	curity number (SS		
filing your return See 7 S 541 DONWOOD DRIVE						
City, town or post office, state, and ZIP code. For a fond NAPERVILLE, IL 60540	oreign add	lress, see instructions.				
Enter the Return code for the return that this application is for (file	e a separa	te application for each return)			0 4	
Application	Return	Application			Return	
ls For	Code	Is For			Code	
Form 990	01					
Form 990-BL	02	Form 1041-A		-1	08	
Form 990-EZ	01	Form 4720		,	09	
Form 990-PF	04	Form 5227			10	
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990-T (trust other than above) 06 Form 8870					12	
STOP! Do not complete Part II if you were not already granted		natic 3-month extension on a prev	iously file	ed Form 8868.		
KENNETH R KORAN						
• The books are in the care of • 7 S 541 DONWOOD	DRIV	VE - NAPERVILLE, I	<u>ட 605</u>	40		
Telephone No. ► 630-663-5600		FAX No. ▶				
 If the organization does not have an office or place of business 				•	· []	
If this is for a Group Return, enter the organization's four digit (Group Exe	emption Number (GEN) l	f this is fo	r the whole group	, check this	
box ▶ If it is for part of the group, check this box ▶		ch a list with the names and EINs of	all memb	ers the extension	ıs for.	
	OVEW	BER 15, 2012.				
For calendar year 2011 , or other tax year beginning		, and ending			·	
-6 If the tax year entered in line 5 is for less than 12 months, cl	heck-reas	on LInitial return	 Fınal⁻r	eturn		
Change in accounting period						
7 State in detail why you need the extension ALL THE INFORMATION NECESSARY	mo co	OMDIEME MUE DDEDAD	7 III T () N	OF THE T	17. V	
RETURN IS NOT AVAILABLE AT THI			ATTON	OF THE T	AX	
RETORN TO NOT AVAILABLE AT THE	15 111	1111 •				
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, c	or 6060 or	ntar the tentative tax loss any	1			
nonrefundable credits. See instructions.	Ji 0003, e	inter the terriative tax, less arry	8a	s	3,753.	
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated	l Ga	Ψ	3,733.	
tax payments made. Include any prior year overpayment alle	-					
previously with Form 8868.	owed as a	credit and any amount paid	8ь	s	3,753.	
c Balance due. Subtract line 8b from line 8a. Include your par	vment wit	h this form if required by using	100	9	0,,55.	
EFTPS (Electronic Federal Tax Payment System). See instru	•	in this form, it required, by doining	8c	s	0.	
		st be completed for Part II o		· ·		
Under penalties of perjury, I declare that I have examined this form, includi it is true, correct, and complete, and that I am authorized to prepare this fo	ing accomp	•	-	f my knowledge and	belief,	
Signature ► Com Alfred Title ► C			Date	▶ 8/14/1	2	
The state of the s			Date		Rev. 1-2012)	
•				r onni ocoo (116V. 172012	