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Form **990-PF**

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

Department of the Treasury Internal Revenue Service

For	cale	ndar year 2012 or tax year beginning		, and en	ding		
Na	ne o	foundation				A Employer identificatio	n number
_1	HE	SEQUOIA FOUNDATION				26-090296!	5
		and street (or P O box number if mail is not delivered to street	address)		Room/suite	B Telephone number	
		1 ESTES AVENUE				847-427-0	020
		own, state, and ZIP code				C If exemption application is	pending, check here
		GROVE VILLAGE, IL 600					. —
G (Check	call that apply: Initial return	Initial return of a fo	rmer public ch	narity	D 1. Foreign organization	ns, check here
		Final return	Amended return			Foreign organizations m check here and attach or	neeting the 85% test, 🔪 🦳
	\haal	Address change	Name change				
<u>"</u> -	_	type of organization: X Section 501(c)(3) exection 4947(a)(1) nonexempt charitable trust	cempt private foundation Other taxable private founda	tion		E If private foundation st	
يط نقا		arket value of all assets at end of year J Accounti		Accru		under section 507(b)(1	
			ther (specify)		iai	F If the foundation is in a under section 507(b)(1	
	\$	14,973. (Part I, colu		oasis.)		under section sor(b)(I)(D), CHECK Here
	irt l	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net inv	restment	(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	inco		income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	49,179.			N/A	
	2	Check If the foundation is not required to attach Sch B Interest on savings and temporary				-	ļ
	3	cash investments					
	4	Dividends and interest from securities					
		Gross rents					
	_	Net rental income or (loss)	<56.				STATEMENT 1
ş		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 30,158.	<50.	<u>-</u>		<u> </u>	SIKIEMENI I
Revenue	_b			1	1,376.		
Re	8	Capital gain net income (from Part IV III II 2)			L,370 <u>.</u>	 	
	9	Net short-leaf eating the local material from the local material material from the local material material from the local material m					
	10a	Gross sales less returns					
	_	Less Dast of goods sold					
	C						
	11	Gross profit of loss DEN, UT Other Income					
	12	Total. Add lines 1 through 11	49,123.	1	1,376.	ļ	<u> </u>
	13	Compensation of officers, directors, trustees, etc	0.		0.		0.
	14	Other employee salaries and wages					
s	15	Pension plans, employee benefits					
nses		Legal fees	1 000		<u> </u>		F00
je G	1	Accounting fees STMT 2	1,000.		500.		500.
ij		Other professional fees					
īţ.	17	Interest				·	
Operating and Administrative Expens	18 19	Taxes Depreciation and depletion					<u> </u>
ij	20	Occupancy			- - -	<u> </u>	
Agn	21	Travel, conferences, and meetings		·····			
ğ	22	Printing and publications					
gai	23	Other expenses STMT 3	25.		0.		25.
atin	24	Total operating and administrative	291				
3er		expenses. Add lines 13 through 23	1,025.		500.		525.
Ö	25	Contributions, gifts, grants paid	54,784.				54,784.
	26	Total expenses and disbursements.					
		Add lines 24 and 25	55,809.		500.		55,309.
_	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements	<6,686.				
	Ь	Net investment income (if negative, enter -0-)		1(),876.		<u> </u>
2005		Adjusted net income (if negative, enter -0-)				N/A	
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_	Attached echedules and amounts in the descriptor	Beginning of year	End of	Vear		
Part	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		
1	Cash - non-interest-bearing	21,659.	14,973.	14,973.		
	Savings and temporary cash investments	21,0351	14,5150	14,010.		
	Accounts receivable					
"	Less: allowance for doubtful accounts					
	Pladage recoveries	-				
"	Less: allowance for doubtful accounts					
_						
5						
6	, , , , , , , , , , , , , , , , , , , ,					
,	disqualified persons					
'	Other notes and loans receivable		1			
	Less: allowance for doubtful accounts					
<u>ਰ</u> ਹ	Inventories for sale or use					
888	· · · · · · · · · · · · · · · · · · ·					
1 108	Investments - U.S. and state government obligations					
	n Investments - corporate stock					
	Investments - corporate bonds					
11	Investments - land, buildings, and equipment basis					
	Less accumulated depreciation					
Į.	investments - mortgage loans					
13	Investments - other					
14	Land, buildings, and equipment: basis					
	Less accumulated depreciation					
15	Other assets (describe			<u></u>		
16	Total assets (to be completed by all filers)	21,659.	14,973.	14,973.		
17	Accounts payable and accrued expenses					
18	Grants payable					
ഗ്ല 19	Deferred revenue					
Liabilities 50 51 50 51	Loans from officers, directors, trustees, and other disqualified persons					
<u>e</u> 21	Mortgages and other notes payable					
ے ₂₂	Other liabilities (describe >)					
			ļ			
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.					
8 24	Unrestricted					
E 25	Temporarily restricted					
g 26	Permanently restricted					
or Fund Balance	Foundations that do not follow SFAS 117, check here					
편	and complete lines 27 through 31.					
ō 27	Capital stock, trust principal, or current funds	0.	0.			
Net Assets	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.			
¥ 29	Retained earnings, accumulated income, endowment, or other funds	21,659.	14,973.			
₹ 30	Total net assets or fund balances	21,659.	14,973.			
2 "	10001110110011001100110011001		==1.			
31	Total liabilities and net assets/fund balances	21,659.	14,973.			
Part	Analysis of Changes in Net Assets or Fund Ba	alances				
1 Tota	Il net assets or fund balances at beginning of year - Part II, column (a), line 3	30				
	st agree with end-of-year figure reported on prior year's return)	· -	1	21,659.		
	er amount from Part I, line 27a		2	<6,686.		
	er increases not included in line 2 (itemize)		3	0.		
	lines 1, 2, and 3		4	14,973.		
	reases not included in line 2 (itemize)		5	0.		
	If net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	lumn (b), line 30	6	14,973.		
<u>U 1010</u>	a not about or rand paramoto at one or your time 4 times line of - ratt if, cor	1071 1110 00		Form 990-PF (2012)		

2 Total of line 1, column (d) 4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5 43,399. 5 Multiply line 4 by line 3 109. 6 Enter 1% of net investment income (1% of Part I, line 27b) 43,508. 7 7 Add lines 5 and 6 8 55,309<u>.</u> 8 Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

See the Part VI instructions.

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	n 990-PF (2012) THE SEQUOIA FOUNDATION 2 Int VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	6-090 48 - see		ction	Page 4
	Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup \) and enter "N/A" on line 1.				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1		1	09.
	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).	-			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0.
	Add lines 1 and 2	3		1	09.
4	Subtitle A (Income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		1	09.
	Credits/Payments:				
	2012 estimated tax payments and 2011 overpayment credited to 2012 6a 6a				
	Exempt foreign organizations - tax withheld at source 6b				
	Tax paid with application for extension of time to file (Form 8868) 6c 475.	ĺ			
	Backup withholding erroneously withheld 6d 6d				
	Total credits and payments. Add lines 6a through 6d	7		4	75.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	<u> </u>		
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		3	66.
	Enter the amount of line 10 to be: Credited to 2013 estimated tax	11			0.
	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene ii			Yes	No
	any political campaign?		1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or		·	
	distributed by the foundation in connection with the activities.				
C	Did the foundation file Form 1120-POL for this year?		1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0.				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. ▶ \$ 0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		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				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X
b	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		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 I	aw			
	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)		_		
	IL		_		
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 calen	dar			
	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10		X
			orm 990	-PF	2012)

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orm 990-PF (2012) THE SEQUOIA FOUNDATION			<u> 26-090296</u>	55 <u>Page 6</u>
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (continu	ued)	
5a During the year did the foundation pay or incur any amount to:				1 1
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	es 🗓 No	
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire			1 1
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f			1 1
the prevention of cruelty to children or animals?			es 🗶 No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	·	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	·		N/A 5	b
Organizations relying on a current notice regarding disaster assistance check t				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption to		_		1 1
expenditure responsibility for the grant?	N	「∕A	es L No	
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Ye	es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a j	personal benefit contract?		<u> </u>	b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax		Ye	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attrib			N/A 7	b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	inagers, Higniy	y	
List all officers, directors, trustees, foundation managers and their	compensation.			
		(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account, other allowances
DENICE STEINMANN	DIRECTOR, PRE			
1901 ESTES AVENUE				
ELK GROVE VILLAGE, IL 60007	1.00	0.	0.	0.
CINDY AVERITT	DIRECTOR			
1901 ESTES AVENUE	7			
ELK GROVE VILLAGE, IL 60007	1.00	0.	0.	0.
ASHLEY STEINMANN	DIRECTOR			
1901 ESTES AVENUE	7			
ELK GROVE VILLAGE, IL 60007	1.00	0.	_ 0.	0.
		1	1	
2 Compensation of five highest-paid employees (other than those in		enter "NONE."	(d) Contributions to	() [
(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	(e) Expense account, other allowances
NONE				
	1			
	<u> </u>			
	1			
	ļ	<u> </u>	<u> </u>	
	4			
	<u> </u>	J		
Total number of other employees paid over \$50,000			<u> </u>	990-PF (2012)
			Form \$	200-FF (2012)

<u>For</u>	m 990-PF (2012) THE SEQUOIA FOUNDATION	26-0902965	Page 8
P	art X , Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, see instructions.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	0. ,909.
b	Average of monthly cash balances	1b 15	<u>,909.</u>
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d 15	,909.
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 15	,909.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	239.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5 15	,670.
<u>6</u>	Minimum investment return. Enter 5% of line 5	6	784.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	784.
2a	Tax on investment income for 2012 from Part VI, line 5		
Ь	Income tax for 2012. (This does not include the tax from Part VI.)]	
C	Add lines 2a and 2b	2c	109.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	675.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	675.
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	675.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		200
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		,309.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4 55	,309.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	109.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		,200.
	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	

4940(e) reduction of tax in those years.

Part XIII, Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,				
line 7				675.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2012:	İ			
a From 2007				
b From 2008				
c From 2009 64,178.				
d From 2010 29,582.				
e From 2011 27,793.				
f Total of lines 3a through e	121,553.			
4 Qualifying distributions for 2012 from				
Part XII, line 4: ► \$ 55,309.				
a Applied to 2011, but not more than line 2a			0.	
b Applied to undistributed income of prior		2		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2012 distributable amount	54.504			675.
e Remaining amount distributed out of corpus	54,634.			
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	0.		<u> </u>	0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	176,187.			
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 2011. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2012. Subtract				
lines 4d and 5 from line 1. This amount must				_
be distributed in 2013				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2013.	456 405			
Subtract lines 7 and 8 from line 6a	176,187.			
10 Analysis of line 9:]			
a Excess from 2008	ļ			
b Excess from 2009 64,178.				
c Excess from 2010 29,582.	1			
d Excess from 2011 27,793. e Excess from 2012 54,634.				
e Excess from 2012 54,634.			L	Form 990-PF (2012)

Part XV Supplementary Informat	ion (continued)			1
3 Grants and Contributions Paid During th	e Year or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	**	
a Paid during the year				
				B
YOUNG AT HEART PET RESCUE	NONE	501 C 3	GENERAL FUNDS	
PO BOX 1293 PALATINE IL 60078				5,639
ANIMAL HOUSE SHELTER	NONE	501 C 3	GENERAL FUNDS	
13005 ERNESTI RD				
HUNTLEY, IL 60142				5,155
RED DOOR ANIMAL SHELTER	NONE	501 C 3	GENERAL FUNDS	
PO BOX 60608				21,995
CHICAGO, IL 60660				21,333
CAMPA A MEDITAL AND A	10177	501 C 3	GENERAL FUNDS	
SAVE A VET NFP 387 NORTHGATE RD	NONE	501 C 3	GENERAL FUNDS	
LINDENHURST, IL 60046				21,995
•				
Total		<u> </u>	> 3a	54,784
b Approved for future payment				33,702
NONE				
HOME				
		 	 	
				
				<u> </u>
Total			▶ 3b	0

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Part XVI-A Analysis of Income-Pro		es					
Enter gross amounts unless otherwise indicated.	Unrelated	business income	Exclude	ded by section 512, 513, or 514 (e)			
entor gross amounts amess otherwise maleated.		(b)	(C) Exclu-	(d)	Related or exempt		
1 Program service revenue;	(a) Business code	Amount	sion	Amount	function income		
			1000				
a	1 1		 				
b	1 1		├				
c			┝─┼				
d			↓				
e			↓ ↓		- 		
f			<u> </u>				
g Fees and contracts from government agencies					·		
2 Membership dues and assessments							
3 Interest on savings and temporary cash							
investments			1				
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			1 1				
property			╄╼═┼╌				
7 Other investment income							
8 Gain or (loss) from sales of assets other				F.C.			
than inventory	<u> </u>		18	<56.	>		
9 Net income or (loss) from special events			 				
10 Gross profit or (loss) from sales of inventory			\longrightarrow				
11 Other revenue:			1 1				
a							
b							
C							
d	i i						
8			T				
12 Subtotal. Add columns (b), (d), and (e)		0.		<56.	>0.		
13 Total. Add line 12, columns (b), (d), and (e)				13	<56.		
(See worksheet in line 13 instructions to verify calculation	ne \						
							
Part XVI-B Relationship of Activit	ies to the Accor	nplishment of Ex	kempt	Purposes			
Line No. — Fundam halous house and natural for unbig	h income in connected in	naluma (a) of Bart VIII-		ited importantly to the accord	anlichment of		
Line No. Explain below how each activity for which the foundation's exempt purposes (other	n income is reported in i	column (e) of Part AVI-F	i continuu	neu importantiy to the accon	ihiigiiiiieiii oi		
the foundation's exempt purposes (other	than by providing fund	s for such purposes).					
				- 			
					 		
		<u></u>					
					·····		
							
							

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Part XVII	Information Regarding Transfers To Exempt Organizations	and Transactions a	and Relationsh	ips With Noncharita	able	
1 Did the or	ganization directly or indirectly engage in any of the follow	ing with any other organization	on described in section	n 501(c) of	Yes	s No
	(other than section 501(c)(3) organizations) or in section 5	-		00 1(0) 01	-	+
	from the reporting foundation to a noncharitable exempt c					
(1) Cash	, ,	ŭ		1	a(1)	<u> </u>
(2) Othe	assets				a(2)	X
b Other tran					1	_
(1) Sales	of assets to a noncharitable exempt organization			1	b(1)	x_
(2) Purc	nases of assets from a noncharitable exempt organization			1	b(2)	X
(3) Renta	ıl of facilities, equipment, or other assets			1	b(3)	X
(4) Reim	bursement arrangements			1	b(4)	X
(5) Loan	s or loan guarantees			1	b(5)	X
(6) Perfo	rmance of services or membership or fundraising solicitat	เอกร		<u>1</u>	b(6)	X
c Sharing o	f facilities, equipment, mailing lists, other assets, or paid e	mployees			1c	X_
d If the ans	ver to any of the above is "Yes," complete the following sch	nedule. Column (b) should alv	ways show the fair ma	arket value of the goods, othe	r assets,	
	s given by the reporting foundation. If the foundation recei		ue in any transaction o	or sharing arrangement, show	ı ın	
	the value of the goods, other assets, or services received		1.40			
(a) Line no	(b) Amount involved (c) Name of noncharitab	ole exempt organization	(0) Description of	of transfers, transactions, and shar	ng arrangen	nents
	N/A					
		<u> </u>				
						
		······································				
				·		
		 				
~						
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			<u> </u>			
	ndation directly or indirectly affiliated with, or related to, or		izations described		, r	.
	501(c) of the Code (other than section 501(c)(3)) or in se	ction 52/7			Yes 🚨	X No
b if Yes, c	omplete the following schedule. (a) Name of organization	(b) Type of organization	1) Description of relationship		
	N/A	(b) Type of organization	ļ	1 Description of relationship		
	N/A			· · · · · · · · · · · · · · · · · · ·		
		 				
Under	penalties of Perjury, I declare that I have examined this return, include	ling accompanying schedules and	statements, and to the b	est of my knowledge May the	IRS discus	s this
Sign and b	elief, it is true correct, and complete deciaration of preparer (other th	nan taxpayer) is based on all inform	PRESID	return w	oth the prepared	arer
Here	Menu Suman	2// <i>3/ا</i> لا	DIRECT			☐ No
Sigi	ature of officer or trustee	Date	Title			
	Print/Type preparer's name Preparer's	signature	(Check if PTIN		
D-3.1	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	18	B/11/13 3	self- employed		_
Paid	MARK ZIVKOVIC // C.		61111		08829)
Preparer Use Only	Firm's name ► PASQUESI SHEPPARD	PTG.		Firm's EIN ► 36-404	9282	
OSC OINY	Firm's address N EQE DANTE TANTE					
	Firm's address ► 585 BANK LANE	60045		Phone no. 847 23	1-500	0.0
··	LAKE FOREST, IL	60045			990-PF	
				1 0/1//		,·-/

	Supplementary		THE S	3E(2001	A FOU	NDAT	ION_					<u> 26-0</u>	90296	25	
Part XV	Supplementary	' Int	formatic	n				<u> </u>								
3a Grants ar	nd Contributions Pa	id C	uring the	Yea	ar Conti	nuation	of Purpo	se of Gra	ant or C	ontribu	tion					
																
NAME OF	RECIPIENT	_	CAUE	7\	77Em	MED										
MAME OF	RECIPIENT		DAVE		ATL	MLL	-	_							·	
GENERAL	FUNDS															
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GENERAL	FUNDS		· -													
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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

2012

Employer identification number Name of the organization 26-0902965 THE SEQUOIA FOUNDATION Organization type (check one): Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 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, total contributions of more than \$1,000 for use exclusively for religious, charitable, 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 total 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, charitable, 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 Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

THE SEQUOIA FOUNDATION

26-0902965

s needed.
5

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	DENICE L. STEINMANN 1901 ESTES AVENUE ELK GROVE VILLAGE, IL 60007-5415	\$18,965.	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
2	DENICE L. STEINMANN 1901 ESTES AVENUE ELK GROVE VILLAGE, IL 60007-5415	\$30,214.	Person Payroll Noncash X (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.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash 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.)
223452 12-2	1-12	Schedule B (Form	990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

THE SEQUOIA FOUNDATION

26-0902965

art II	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	COMMON STOCK		
2			
		\$ 30,214.	10/30/12
(a)		(2)	
No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
arti			
1		\$	n 990-F7 or 990-PF)

vame or orga	,		Employer identification number						
<u>PHE</u> SE	QUOIA FOUNDATION	vidual contributions to section 501/c)/7\	26-0902965 (8), or (10) organizations that total more than \$1,000 for the						
raitiii	year. Complete columns (a) through (e) and the total of exclusively religious, charitable, et Use duplicate copies of Part III if addition	he following line entry. For organizations c c., contributions of \$1,000 or less for the	completing Part III. enter						
(a) No. from 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, a	nd ZIP + 4	Relationship of transferor to transferee						
(a) No. from 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, a	nd ZIP + 4	Relationship of transferor to transferee						
(a) No. from 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, a	nd ZIP + 4	Relationship of transferor to transferee						
(a) No. from 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, a	nd ZIP + 4	Relationship of transferor to transferee						

FORM 99)-PF	G <i>P</i>	AIN OR (LOSS)	FROM SALE	OI	FA	SSETS		STA'	TEMENT	1
DESCRIP	(A) FION OF PROP	ERTY	_				ANNER QUIRED		TE IRED	DATE S	OLD
17 SHRS	APPLE		_			DO:	NATED	10/3	0/12	11/05	/12
	(B) GROSS		(C) VALUE AT	(D) EXPENSE	Ω Ι	F	(E)			(F)	
	SALES PRIC	E	TIME OF ACQ.	SALE	O1	L	DEPRE	c.	GAIN	OR LOS	S
	10,1	01.	10,256.		(0.		0.		<1	55.
DESCRIP'	(A) TION OF PROP	ERTY					ANNER QUIRED		TE VIRED	DATE S	OLD
30 SHRS	VISA		-		-	DO	NATED	10/3	0/12	11/05	/12
	(B) GROSS SALES PRIC	E	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OI	F	(E)	c.		(F) OR LOS	S
-		68.	4,148.		(0.		0.			20.
DESCRIP'	(A) FION OF PROP	ERTY					ANNER QUIRED		TE UIRED	DATE S	OLD
90 SHRS	CVS CAREMEA	RK	<u>-</u>		-	DO	NATED	10/3	0/12	11/05	/12
	(B) GROSS		(C) VALUE AT	(D) EXPENSE	01	F	(E)			(F)	
	SALES PRIC	E	TIME OF ACQ.	SALE		_	DEPRE	c.	GAIN	OR LOS	S
-	4,1	62.	4,158.		(0.		0.			4.

										
PESCRIPT	(A) ION OF PROPERTY			i	MANNEI ACQUIRI		DA ACQU	TE IRED	DATE S	SOLD
980 SHRS	GILEAD	_]	OONATE)	10/30/12		11/05	5/12
	(B) GROSS	(C) VALUE AT	(D) EXPENSE	O₽.	ı	(E)			(F)	
	SALES PRICE	TIME OF ACQ.	SALE		DE	PREC	! •	GAIN	OR LOS	SS
	5,409.	5,404.		0	•		0.			5.
DESCRIPT	(A) ION OF PROPERTY			j	MANNEI ACQUIRI		DA ACQU		DATE S	SOLD
140 SHRS	VERIZON	-]	DONATE	<u> </u>	10/3	0/12	11/05	5/12
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE			(E) PREC	! .	GAIN	(F)	ss
	6,318.	6,248.		0	•		0.			70.
CAPITAL	GAINS DIVIDENDS	FROM PART IV								0.
TOTAL TO	FORM 990-PF, P.	ART I, LINE 6A							*	<56.
FORM 990	-PF	ACCOUN	TING FEE	 S	<u> </u>			STA	TEMENT	2
DESCRIPT	ION	(A) EXPENSES PER BOOK	NET I			ADJ	C) USTE INCO		(D) CHARITA PURPOS	
ACCOUNTI	NG FEES	1,00	0.			_				500.
TO FORM	990-PF, PG 1, L	N 16B 1,00	0.		500 .					500.

FORM 990-PF	OTHER E	XPENSES	STATEMENT 3			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
ILLINOIS SECRETARY OF STATE FEES	25.	0.		25.		
TO FORM 990-PF, PG 1, LN 23	25.	0.		25.		