

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



Form 990-PF

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

OMB No 1545 0052 2012

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 ar beginning , 2012, and ending ,

For cal	endar year 2012, or tax year beginning	, 2012,	and ending		,		
	RAZA AND MARYANN KHAN FOUNDA	TION		A	Employer identification num 45–3591158		
	ATH & TENNIS CLUB ROAD BLUFF, IL 60044			В	Telephone number (see the instructions) (262) 657-2060		
				С	If exemption application is	pending, check here	
G Che	eck all that apply: Initial return	Initial return of a forn Amended return	ner public charity	D	1 Foreign organizations, chec	k here	
	Address change	Name change			2 Foreign organizations meet here and attach computation	ing the 85% test, check	
H C	heck type of organization X Section 50 Section 4947(a)(1) nonexempt charitable t	(c)(3) exempt private for rust Other taxable p		E	If private foundation status	was terminated	
	air market value of all assets at end of year J Acc	ounting method X Ca	ash Accrual	l_	under section 507(b)(1)(A)		
► \$		column (d) must be or	cash basis)	F	If the foundation is in a 60 under section 507(b)(1)(B)	, check here.	
Part	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	(a) Revenue and expenses per books	(b) Net investmer income	nt	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)	
	1 Contributions, gifts, grants, etc, received (att sch) 2 Ck lift the foundn is not reg to att Sch B	26,822.					
	2 Ck I if the foundn is not req to att Sch B 3 Interest on savings and temporary cash investments	1	<u> </u>	_	1		
	4 Dividends and interest from securities	1.		1.	1.		
	5 a Gross rents b Net rental income					-	
R E V	or (loss) 6 a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all						
V E N	7 assets on line 6a Capital gain net income (from Part IV, line 2)						
U	8 Net short-term capital gain 9 Income modifications						
E	10 a Gross sales less returns and allowances						
	b Less Cost of goods sold.						
2013 2013	c Gross profit/(loss) (att sch) 11 Other income (attach schedule)						
7	12 Total. Add lines 1 through 11	26 022		1			
₹ <u> </u>	13 Compensation of officers, directors, trustees, etc	26,823. 0.		1.	1.		
) 	14 Other employee salaries and wages 15 Pension plans, employee benefits						
A	16a Legal fees (attach schedule)	1					
	b Accounting fees (attach sch) c Other profifees (attach sch)						
	17 Interest 3EP 2 3 2013 10						
CANAMED - MA	18 Taxes (attact schedule (See instrs) 19 Depreciation; (attach:						
N V	19 Depreciation: (attach sch) and (depletion 20 Occupancy						
	21 Travel, conferences, and meetings 22 Printing and publications						
A E N X D P	23 Other expenses (attach schedule)						
E N S E	24 Total operating and administrative expenses. Add lines 13 through 23						
S	25 Contributions, gifts, grants paid Stmt 1	3,000.				3,000.	
	26 Total expenses and disbursements. Add lines 24 and 25	3,000.		0.	0.	3,000.	
	27 Subtract line 26 from line 12: a Excess of revenue over expenses					-	
	and disbursements b Net investment income (if negative, enter 0-).	23,823.		1.			
B4* -	C Adjusted net income (if negative, enter -0-)	A			1.	Form 990-PF (2012)	
KAA F	or Paperwork Reduction Act Notice, see ins	TOUCTIONS		11-1-	A0504L 12/23/12	ronn 330-rr (2012)	

5

Decreases not included in line 2 (itemize)

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

23,823.

5

(a) List and describe	e the kind(s) of property sold (e.g., rese; or common stock, 200 shares ML	eal estate, C Company)	(b) How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a N/A		-	D - Donation		
b					
					
d				-	
					
(e) Gross sales price	(f) Depreciation allowed	(g) Cost or other bas	l	(h) Gain or	(loss)
(e) Gloss sales price	(or allowable)	plus expense of sal	e	(e) plus (f) m	iinus (g)
					
	 				
<u> </u>					
d					_
e Constitution of the contract of the		. th - fd-b 10/21/6			
	ving gain in column (h) and owned by			(I) Gains (Col ain minus column (
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a		an -0-) or Losses (f	
a					
b					
С					
d					
e					
2 Capital gain net income or (ne	et capital loss). If gain, also If (loss), en	enter in Part I, line 7 ter -0- in Part I, line 7	- 2		
3 Net short-term capital gain or	(loss) as defined in sections 1222(5)	and (6).			
If gain, also enter in Part I, lir in Part I, line &	ne 8, column (c) (see instructions). If	(loss), enter -0-	- 3		
· · · · · · · · · · · · · · · · · · ·	er Section 4940(e) for Reduce	d Tay on Not Investm			
	te foundations subject to the section			N/A	
If 'Yes,' the foundation does not qua	ction 4942 tax on the distributable an alify under section 4940(e) Do not co in each column for each year, see the	mplete this part		Yes	∐ No
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as:	sets (col	(d) Distribution umn (b) divided	ratio by column (c))
2011		* *	<u> </u>		
2010					
2009	 				·
2008	 				
2007					
	<u> </u>		2		-
				 	
3 Average distribution ratio for the number of years the foundation	the 5-year base period — divide the to on has been in existence if less than t	otal on line 2 by 5, or by the 5 years	3		
4 Enter the net value of noncha	ritable-use assets for 2012 from Part	X, line 5.	4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investment in	come (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		
8 Enter qualifying distributions t	from Part XII, line 4		8		-
, , ,	than line 7, check the box in Part VI,	line 1b, and complete that	part using a 19	% tax rate See	the
BAA				- Cor	m 990-PF (2012

	3591158		Р	age 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see	nstruction	<u>s)</u>		
1 a Exempt operating foundations described in section 4940(d)(2), check here				
Date of ruling or determination letter (attach copy of letter if necessary — see instrs)				_
b Domestic foundations that meet the section 4940(e) requirements in Part V,	1			0.
check here ► and enter 1% 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, column (b)				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable	2			٥
foundations only. Others enter -0-) 3 Add lines 1 and 2	3			<u>0.</u> 0.
	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			0.
6 Credits/Payments				0.
a 2012 estimated tax pmts and 2011 overpayment credited to 2012				
b Exempt foreign organizations — tax withheld at source 6b				
c Tax paid with application for extension of time to file (Form 8868)				
d Backup withholding erroneously withheld 6d				
7 Total credits and payments Add lines 6a through 6d	7			0.
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	9			0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
11 Enter the amount of line 10 to be Credited to 2013 estimated tax	11			
Part VII-A Statements Regarding Activities				
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
participate or intervene in any political campaign?		1 a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes		1 ь		v
(see the instructions for definition)?		- 10		X
If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities				
c Did the foundation file Form 1120-POL for this year?		1 c		Х
d 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 ►\$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	0.			
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?		4 a		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		4 b	N,	/A
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		Х
with the state law remain in the governing instrument?		7	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV 8 a Enter the states to which the foundation reports or with which it is registered (see instructions)		\vdash		
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		8Ь	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If 'Yes,' complete	4942(j)(5)			
for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If 'Yes,' complete	: raπ 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
BAA	Fo	rm 990	-PF (2	

1

	VII-A Statements Regarding Activities (continued)	45-	359115	<u> </u>	P	age 5
,——		 -				
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		х
	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualifie advisory privileges? If 'Yes,' attach statement (see instructions).	d person had		12		X
	Did the foundation comply with the public inspection requirements for its annual returns and exer Website address N/A	mption applica	tion?	13	X	_
14	The books are in care of ► PPG PARTNERS, LLC Tele	phone no.	(262)	657	-206	0
			44-373			
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check and enter the amount of tax-exempt interest received or accrued during the year	1	15	Ņ/Ą	•	∐ N/A
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other autibank, securities, or other financial account in a foreign country?	nority over a		16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If 'Yes,' enter the name foreign country ►	ne of the				
	VII-B Statements Regarding Activities for Which Form 4720 May Be Requi	red				
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.				Yes	No
1 a	During the year did the foundation (either directly or indirectly).			-		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	XNo			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	_ Yes	_ X No	,		
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	Yes	χNο		,	
h	If any answer is 'Ves' to 1a(1).(6), did any of the acts fail to qualify under the exceptions describ	ed in				
-	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions describ Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instruc	tions)?		1 b	N	/A
	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 that were not corrected before the first day of the tax year beginning in 2012?	acts,		1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).	а				
	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012?	∏Yes	XNo			
	If 'Yes,' list the years ▶ 20 , 20 , 20 , 20		Α			
	Are there any years listed in 2a for which the foundation is not applying the provisions of section (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section					
	all years listed, answer 'No' and attach statement — see instructions)	4942(a)(2) 10		2b		/A
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the y	ears here				
	► 20 , 20 , 20 , 20					
	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			
	If 'Yes,' did it have excess business holdings in 2012 as a result of (1) any purchase by the found or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period apply the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or beques (3) the lapse of the 10, 15, or 20 year first phase holdings period 2.4 for School (10, 2).	proved t; or				
,	(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, determine if the foundation had excess business holdings in 2012.)	iU		3 b	N	/A
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4 a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could					
;	jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012?			4 b		
BAA			For)-PF (2012)

Form 990-PF (2012) THE RAZA AND MARY	ANN KHAN FOUNDA	TION	<u>45-359</u>)11 <u>5</u> 8	Page 6
Part VII-B Statements Regarding Activiti		1 4720 May Be Req	uired (continued)		
5a During the year did the foundation pay or incu	•			.	
(1) Carry on propaganda, or otherwise attempt	_		∐ Yes X	No	
(2) Influence the outcome of any specific publion, directly or indirectly, any voter registra	ition drive?		H. H	No	
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	∐ Yes 🛛	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, or 4940(d)(2)? (see instru	rganization described uctions)	Yes X	No	
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the excep ding disaster assistance	tions	5 b	N/A
Organizations relying on a current notice rega	rding disaster assistand	ce check here	▶ 🗌		
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respons	the foundation claim ex sibility for the grant?	emption from the	N/A Yes	No	
If 'Yes,' attach the statement required by Regi	ulations section 53 494	5-5(d)			
6 a Did the foundation, during the year, receive ar on a personal benefit contract?	ny funds, directly or ind	irectly, to pay premium:	s Yes X	No	
b Did the foundation, during the year, pay premi	iums, directly or indirec	tly, on a personal bene	fit contract?	6 b	X
If 'Yes' to 6b, file Form 8870		.h.tod tov oboltov troppe			
7 a At any time during the tax year, was the found b If 'Yes,' did the foundation receive any procee				No	
Part VIII Information About Officers, D			_	1/ 11	
and Contractors		· ouridation mana	go. 5, 1gy 1 a.a =	p. 103 400,	
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).		
(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	(e) Expense other allo	
See Statement 2			oon,ponodion		
		0.	0.		0.
2 Compensation of five highest-paid employees (of	ther than those included	on line 1 – see instruction	ns). If none. enter 'NONE	<u>.</u>	
(a) Name and address of each employee	(b) Title, and average	(c) Compensation	(d)Contributions to	(e) Expense	account,
paid more than \$50,000	hours per week devoted to position	.,	employee benefit plans and deferred compensation	other allo	
None					
				_	
				1	
				 	
Total number of other employees paid over \$50,000			•		0
BAA	TEE 402061 1	205/12	—	Form 990LP	''OUIO\

		5-3591158	Page 8
Par	Minimum Investment Return (All domestic foundations must complete this part. F see instructions.)	oreign foundat	lions,
1 a	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	1 a	
t	Average of monthly cash balances	1 b	
c	Fair market value of all other assets (see instructions)	1 c	
c	Total (add lines 1a, b, and c)	1 d	0.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation)	1 2 3	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0.
6	Minimum investment return. Enter 5% of line 5.	6	0.
Par	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private oper and certain foreign organizations check here ► ☐ and do not complete this part.)		ons
1	Minimum investment return from Part X, line 6	1	
2 a	Tax on investment income for 2012 from Part VI, line 5		
ŧ	Income tax for 2012 (This does not include the tax from Part VI.).		
•	Add lines 2a and 2b	2 c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	0.
Par	t XIII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	3,000.
t	Program-related investments – total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 a	Amounts set aside for specific charitable projects that satisfy the. Suitability test (prior IRS approval required)	3a	
t	Cash distribution test (attach the required schedule)	3 b	
	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	3,000.
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 (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,000.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the forgular gualifies for the section 4940(e) reduction of tax in those years.	oundation	

Form **990-PF** (2012)

BAA

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Fine 7	Part XI,				0.
2 Undistributed income, if any, as of the end of	2012.				<u></u>
a Enter amount for 2011 only			,	0.	
b Total for prior years 20 , 20 , 20			0.		
3 Excess distributions carryover, if any, to 2012		_			
a From 2007			•		
b From 2008					
c From 2009					
d From 2010					
e From 2011					
f Total of lines 3a through e.		0.			
4 Qualifying distributions for 2012 from	n Part				
XII, line 4 ► \$ 3, (000.				
a Applied to 2011, but not more than			,	0.	
b Applied to undistributed income of p	rior vears				
(Election required — see instructions			0.		
c Treated as distributions out of corpu					
(Election required — see instructions	· -	0.			
d Applied to 2012 distributable amoun	⊢				0.
e Remaining amount distributed out of	f corpus	3,000.		, ., ,,	
5 Excess distributions carryover applied to 2012 (If an amount appears in column (d)	\ . \	0.			0.
same amount must be shown in col	umn (a))			•	,
	`				
6 Enter the net total of each column a	is	,			
indicated below:	_		,		
a Corpus. Add lines 3f, 4c, and 4e. Subtract line	5	3,000.			
b Prior years' undistributed income S	ubtract				
line 4b from line 2b	,		0.		
c Enter the amount of prior years' und ed income for which a notice of defi-	ciency				
has been issued, or on which the se	ction				
4942(a) tax has been previously ass	essea		0.		
d Subtract line 6c from line 6b Taxab	le		_		
amount – see instructions	-		0.		
e Undistributed income for 2011 Subtract line line 2a Taxable amount — see instructions	4a from			0	
Title 2a Taxable afflount — see Histructions	-	···		0.	
f Undistributed income for 2012. Subt	ract lines				
4d and 5 from line 1. This amount in distributed in 2013.	nust be				0.
7 Amounts treated as distributions out	e of				<u> </u>
corpus to satisfy requirements impo-	sed				
by section 170(b)(1)(F) or 4942(g)(3 (see instructions))	0.			
,	-	0.			
8 Excess distributions carryover from applied on line 5 or line 7 (see instri	2007 not	0.			
9 Excess distributions carryover to 2 Subtract lines 7 and 8 from line 6a	013.	3,000.			
10 Analysis of line 9.	<u> </u>	3,000.			
a Excess from 2008.	1				
b Excess from 2009					
c Excess from 2010					
d Excess from 2011					
	3,000.				
	<u> </u>				F 000 DE (0010)

BAA

Form 990-PF (2012) THE RAZA AND MAR				45-3591158	N/A Page 10	
Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling						
is effective for 2012, enter the date of the	ruling					
b Check box to indicate whether the foundate		erating foundation of		4942(J)(3) or	4942(j)(5)	
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	4	Prior 3 years	4 15 0000		
investment return from Part X for each year listed	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total	
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						
 Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c 						
3 Complete 3a, b, or c for the alternative test relied upon.						
a 'Assets' alternative test — enter.						
(1) Value of all assets						
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)						
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed						
c 'Support' alternative test — enter						
 Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) 						
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)						
(3) Largest amount of support from an exempt organization						
(4) Gross investment income						
Part XV Supplementary Information assets at any time during the	(Complete this e year – see ir	part only if the structions.)	foundation had	\$5,000 or more	in	
 Information Regarding Foundation Managers of the foundation who hav 	e contributed more t	han 2% of the total of	contributions received	by the foundation bef	ore the	
close of any tax year (but only if they have None	e contributea more	tnan \$5,000) (See	section 507(d)(2))			
b List any managers of the foundation who owr	100/ or more of the	stock of a corporate	on for an equally large	nortion of the owner	rehin of	
a partnership or other entity) of which the	foundation has a	0% or greater inter	est	e portion of the owner	Simp of	
None						
2 Information Regarding Contribution, Gra	nt, Gift, Loan, Sch	olarship, etc, Progr	ams:			
Check here $\stackrel{\blacktriangleright}{}$ \boxed{X} if the foundation only material requests for funds. If the foundation make	akes contributions to s gifts, grants, etc	preselected charitab (see instructions) t	ole organizations and on orga	does not accept unso nizations under oth	licited er conditions,	
a The name, address, and telephone number o	r e-mail of the nerso	n to whom application	ons should be address	ed .		
a the hame, address, and telephone humber o	re-mail of the perse	in to whom application	ons should be dudiess	.		
b The form in which applications should be	submitted and info	rmation and materi	als they should inclu	de·		
c Any submission deadlines						
d Any restrictions or limitations on awards,	such as hy geograp	obical areas charita	able fields, kinds of i	nstitutions, or other	factors	
army resultations on amounts,		Livoo, chanc				

TEEA0310L 12/23/12

Form 990-PF (2012)

BAA

Page 11

3 Grants and Contributions Paid During the Year or Approved for Future Payment									
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount					
Name and address (home or business)	substantial contributor	recipient							
Name and address (home or business) a Paid during the year	substantial contributor	recipient							
Total		<u> </u>	► 3a						
b Approved for future payment Total			► 3b						

Part XVI-A	Analysis of	Income-Producing	Activities
------------	-------------	------------------	-------------------

BAA

Enter gr	oss amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	(e)
1 Pr	ogram service revenue	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions)
a a			,	code		
b						
c		ļ <u>.</u>				
d				 		·
e				 		
g Fe	es and contracts from government agencies			 		
-	embership dues and assessments					, , , , , , , , , , , , , , , , , , , ,
	erest on savings and temporary cash investments					1.
	vidends and interest from securities		<u>.</u>	_		
	et rental income or (loss) from real estate abt-financed property			 		
	ot debt-financed property	 	 		· · ·	
	t rental income or (loss) from personal property					
	her investment income			·		
	in or (loss) from sales of assets other than inventory					
	et income or (loss) from special events					
	oss profit or (loss) from sales of inventory her revenue		*			
11 Ot	ner revenue		•			
ъ́						
c						
d_						
e		ļ				
	ubtotal. Add columns (b), (d), and (e)				13	1.
	otal. Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calculations.	ons.)			13 -	
	VI-B Relationship of Activities to the		hwant of Evam	nt Durnos		
raitA	······································					
Line N ▼	Explain below how each activity for which in accomplishment of the foundation's exempt	ncome is report	ted in column (e) of	Part XVI-A c	ontributed important	y to the
N/A						
N/F			· · · · · · · · · · · · · · · · · · ·			
		.				
			····			
						· · · · · · · · · · · · · · · · · · ·
				_		
						
						
	_					
						
					····	
BAA		TEEA05	02L 12/23/12			Form 990-PF (2012)

TEEA0502L 12/23/12

Form-990-PF (2012) THE RAZA AND MARYANN KHAN FOUNDATION 45-3591158 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

	Exempl Organ	IIZAUUIIS									
d€	id the organization directed in section 501(celeting to political organization)	c) of the Code (ot	ngage in any of ther than section	the following w 501(c)(3) orga	ith any o	ther organizations) or in sections	on 527,	,	Yes	No	
	ransfers from the reporti		a noncharitable	exempt organi	zation of						
) Cash	ng touridation to	a montenament	exempt organi	zation or.			10(1)			
•	•							1 a (1) 1 a (2)		X	
•	(2) Other assets b Other transactions.										
(1) Sales of assets to a noncharitable exempt organization										_X_	
(2	Purchases of assets f	rom a noncharita	ble exempt orga	nızatıon				1 b (2)		X	
(3	Rental of facilities, eq	uipment, or other	r assets					1 b (3)		X	
(4	Reimbursement arran	gements						1 b (4)		X	
(5) Loans or loan guarant	tees						1 b (5)		X	
•	Performance of service		in or fundraising	solicitations				1 b (6)		X	
•	haring of facilities, equip		. •		VAAS			1 c	-	X	
C 0.	riaring or racinties, equip	ment, maning ns	its, other assets,	or paid emplo	yccs			[[J		
th	the answer to any of the e goods, other assets, or s ny transaction or sharing	services given by t	the reporting found	dation. If the foi	ındatıon r	eceived less thai	n fair market va	alue in	ue of		
(a) Line	no (b) Amount involved	(c) Name o	f noncharitable exem	pt organization	(d)	Description of tran	sfers, transaction	s, and sharing arran	gement	s	
N/A				· · · · · · · · · · · · · · · · · · ·		•		-			
					1						
					†						
				•	-			-			
		- 			+	 					
					+			· · · · · · · · · · · · · · · · · · ·			
					.						
				-							
			•		† · · · ·						
					+						
											
			-		4						
		_l									
d€	the foundation directly or escribed in section 501 (c 'Yes,' complete the following the section 501).	c) of the Code (ot	l with, or related to her than section	o, one or more 501(c)(3)) or I	tax-exemp n section	ot organizations 527?		Yes	X	No	
	(a) Name of organiz		(b) Type	of organizatio	n	(0) Description	of relationship			
N/A	(J)		(-));		·	,-	,				
117 21										—	
										—	
						-					
								· · · · · ·	_		
	·	i		·····		<u> </u>					
i	Under penalties of perjury, I dec correct, and complete Declarate	clare that I have examing on of preparer (other t	ned this return, includi han taxpayer) is base	ing accompanying s d on all information	chedules an	d statements, and to	the best of my kn ledge	owledge and belief, if	is true,		
Sign	0 . 1		, , , , , , , , , , , , , , , , , , , ,				J	May the II	RS disci	uss	
- 1	Carolisto.	•		0/12/12	▶.			this return	with th	e	
Here	rasa w lug	<u>en</u>		9/18/13		President		(see pstr	uctions)	<u>-</u>	
	Signature of officer or trustee			Date	Ti	IDete 4		LIDTIN	Yes	No	
	Print/Type preparer's	name	Prepared	W/Jan	CAR	Date //2/12	Check	ıf PTIN			
Paid	JACK OSTER	CPA	JÆK C	STER CPA	<u> </u>	1117119	self-employe	d P00359	846		
Prepa		PPG Partne	rs, L.C.				Firm's EIN - 3	9-1016701			
Use O		5525 Green									
33¢ U	,		I 53144				Phone no ((262) 657-2	2060		
BAA		iteliopiia, ii	_ 55144				,	Form 990		012)	
DAA								1 01111 330	(2	-12)	

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

Name of the organization		Employer identification number					
THE RAZA AND MARYANN KHAN FOU	NDATION	45-3591158					
Organization type (check one)							
Filers of:	Section:						
Form 990 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-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a priv	ate foundation					
	501(c)(3) taxable private foundation						
Check if your organization is covered by the Go	eneral Rule or a Special Rule						
Note. Only a section 501(c)(7), (8), or (10) ord.	anization can check boxes for both the General Rule and a S	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							
509(a)(1) and 170(b)(1)(A)(vi) and received	orm 990 or 990-EZ that met the 33-1/3% support test of the I from any one contributor, during the year, a contribution of VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I ar	the greater of (1) \$5,000 or					
	on filing Form 990 or 990-EZ that received from any one contributuse <i>exclusively</i> for religious, charitable, scientific, literary, or nals. Complete Parts I, II, and III						
contributions for use exclusively for religious, or lift this box is checked, enter here the total contributions.	on filing Form 990 or 990-EZ that received from any one contribut charitable, etc, purposes, but these contributions did not total to r ributions that were received during the year for an exclusively reless the General Rule applies to this organization because it recei	nore than \$1,000 Igious, charitable, etc, ved nonexclusively					
religious, charitable, etc, contributions of \$	5,000 or more during the year	► \$					
Caution: An organization that is not covered by the General answer 'No' on Part IV, line 2, of its Form 990, or check meet the filing requirements of Schedule B (Fo	Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or the box on line H of its Form 990-EZ or on Part I, line 2, of itsForm 990-rm 990, 990-EZ, or 990-PF)	990-PF) but it must PF, to certify that it does not					
BAA For Paperwork Reduction Act Notice, se or 990-PF.	e the Instructions for Form 990, 990EZ, Schedule B (Form 990, 990-EZ, or 990-PF) (2012)					

	B (Form 990, 990-EZ, or 990-PF) (2012)		Page	1 of	1 of Part 1
Name of org	anization AZA AND MARYANN KHAN FOUNDATION		' -	Identification nu 591158	mber
Part	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed	i.	<u> 45</u> -55	91130	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributio	ons	Type of c	(d) ontribution
1	RAZA KHAN 2011 C.L.A.T.			Person Payroll	X
	60 BATH & TENNIS CLUB RD	\$26	<u>,822.</u>	Noncash	
	LAKE BLUFF, IL 60044			(Complete P a noncash c	art II if there is ontribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributio	ons	Type of c	(d) ontribution
		\$		Person Payroll Noncash (Complete Pa noncash c	art II if there is ontribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributio	ons	Type of c	(d) ontribution
		\$		Person Payroll Noncash (Complete Panoncash complete	art II if there is ontribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributio	ons	Type of c	(d) ontribution
		\$		Person Payroll Noncash (Complete Panoncash complete	art II if there is ontribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributio	ons	Type of c	(d) ontribution
		\$		Person Payroll Noncash (Complete P a noncash co	art II if there is
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributio	ons	Type of c	(d) ontribution
		\$		Person Payroll Noncash (Complete Pa noncash co	art II if there is
BAA	TEEA0702L 11/30/12	Schedule B (990-PF) (2012)

Page

1 to 1 of Part II
Employer Identification number

THE RAZA AND MARYANN KHAN FOUNDATION

45-3591158

Part II	Noncash Property (see instructions). Use duplicate copies of Part 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
	N/A		
		\$\$	
(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.	(b)		(d)
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
		\$\$	
BAA		Schedule B (Form 990, 990-EZ	, or 990-PF) (2012

Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2012)		Page 1 to 1 of Part		
lame of organ	nization ZA AND MARYANN KHAN FOUNDATIO	NN	Employer Identification number 45-3591158		
Part III	Exclusively religious, charitable, et				
	organizations that total more than serior organizations completing Part III, enter the contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional serior contributions is serior to the property of the prop	\$1,000 for the year. Complete of the control of exclusively religious, charic (Enter this information once. See	columns (a) through (e) and the following line entry. table. etc.		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	N/A				
		(2)			
	(e) Transfer of gift Transferee's name, address, and 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, and ZIP + 4 Rela		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, and ZIP + 4		Relationship of transferor to transferee		
(a)	(b)	(c)	(d) Description of how gift is held		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	Description of how gift is held		
		(e) Transfer of gift			

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

112 F	ederal Statement	S			Page 1
THE RAZA	AND MARYANN KHAN FO	OUNDATION	, _		45-359115
Statement 1 Form 990-PF, Part I, Line 25 Contributions, Gifts, and Grants Cash Grants and Allocations Class of Activity: Donee's Name: Donee's Address: Relationship of Donee: Organizational Status of Donee: Amount Given:	ISLAMIC FOUNDATI 1751 S. O'PLAINE WAUKEGAN, IL 600 NONE PUBLIC CHARITY	E RD	To	\$ tal <u>\$</u>	3,000. 3,000.
Statement 2 Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees, and Name and Address	Title and Average Hours	Compen- sation	buti	ntri- ion to & DC	Expense Account/ Other
Form 990-PF, Part VIII, Line 1	Title and	<u>sation</u>	buti		Account/ Other
Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees, and Name and Address RAZA KHAN 60 BATH AND TENNIS CLUB RD	Title and Average Hours Per Week Devoted President	sation (buti EBP	ion to	Account/ Other \$ 0.
Porm 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees, and Name and Address RAZA KHAN 60 BATH AND TENNIS CLUB RD LAKE BLUFF, IL 60044 MARYANN KHAN 60 BATH AND TENNIS CLUB RD	Title and Average Hours Per Week Devoted President 1.00 Vice President	<u>sation</u>	buti EBP	ion to & DC 0.	Account/ Other
Name and Address RAZA KHAN 60 BATH AND TENNIS CLUB RD LAKE BLUFF, IL 60044 MARYANN KHAN 60 BATH AND TENNIS CLUB RD LAKE BLUFF, IL 60044 FAUZIA KHAN-ALSIKAFI 60 BATH AND TENNIS CLUB RD	Title and Average Hours Per Week Devoted President 1.00 Vice President 1.00 Trustee	<u>sation</u> \$ (buti EBP). \$	O.	Account/ Other \$ 0.

Form **8868**

(Rev January 2013)

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

 If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box X If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extention on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension — check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions Employer identification number (EIN) or Type or print THE RAZA AND MARYANN KHAN FOUNDATION 45-3591158 Social security number (SSN) Number, street, and room or suite number. If a P.O. box, see instructions File by the due date for 60 BATH & TENNIS CLUB ROAD filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions return See instructions LAKE BLUFF, IL 60044 Enter the Return code for the return that this application is for (file a separate application for each return) . 04 Application Is For Return **Application** Return Code Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 08 Form 1041-A Form 4720 (individual) 03 Form 4720 09 Form 990-PF 04 Form 5227 10 Form 990-T (section 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 The books are in the care of PPG PARTNERS, LLC Telephone No. ► (262) 657-2060 _ _ FAX No ► (262) 657-2080 If the organization does not have an office or place of business in the United States, check this box . If this is for the whole group, If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box check this box ▶ and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time , 20 13 , to file the exempt organization return for the organization named above. 8/15 The extension is for the organization's return for: |X| calendar year 20 12 or tax year beginning ____, 20 ___, and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial 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 3 alŝ

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

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax

c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using

payments made Include any prior year overpayment allowed as a credit

EFTPS (Electronic Federal Tax Payment System) See instructions

0.

3 b/s

3 c | \$

Form 886	8 (Rev 1-2013)					Page 2
• If you	are filing for an Additional (Not Automatic) 3-Mont	th Extension	n, complete only Part II and check t	his box		► X
Note. Only	y complete Part II if you have already been granted	d an automa	atic 3-month extension on a previou	sly filed For	m 8868	
• If you	are filing for an Automatic 3-Month Extension, con	nplete only	Part I (on page 1).			
Part II	Additional (Not Automatic) 3-Month E	xtension	of Time. Only file the origina	l (no copi	es needed	d).
		<u>.</u>	Enter filer's i	dentifying n	umber, see ir	structions
	Name of exempt organization or other filer, see instructions	**		Employer ider	tification numbe	er (EIN) or
Type or						
print	THE RAZA AND MARYANN KHAN FOUN	DATION		45-3591	.158	
- 1	Number, street, and room or suite number. If a P O box, see instructions Social security number (
File by the extended	PPG Partners, L.L.C.					
due date for filing your return See	5525 Green Bay Road					
instructions	City, town or post office, state, and ZIP code. For a foreign address	ess, see instruct	ions			
_	Kenosha, WI 53144					
Enter the	Return code for the return that this application is f	or (file a se	parate application for each return)			04
						
Application	on	Return	Application			Return
Is For		Code	Is For			Code
	or Form 990-EZ	01				
Form 990		02	Form 1041-A			08
) (individual)	03	Form 4720			10
Form 990	-Fr -T (section 401(a) or 408(a) trust)	04	Form 5227 Form 6069			11
	-T (trust other than above)	06	Form 8870			12
1 01111 330	-1 (trust other than above)	1 00	7 0111 6870		.	1 12
If theIf thiswhole gro	organization does not have an office or place of but is for a Group Return, enter the organization's four pup, check this box.	usiness in th ir digit Group	Exemption Number (GEN)	ith the name		Is is for the
members	the extension is for		 	<u></u>		
5 For 6 If th 7 Stat	quest an additional 3-month extension of time until calendar year 2012 , or other tax year beginning tax year entered in line 5 is for less than 12 more Change in accounting period the in detail why you need the extension Taxt , ther information necessary to find the control of the contr	ng nths, check r payer re	, 20, and ending _ reason	_ l <u>ditiona</u>	<u>l_time_t</u>	 t <u>o</u>
	ils application is for Form 990-BL, 990-PF, 990-T, 4 refundable credits. See instructions	1720, or 606	9, enter the tentative tax, less any	8 a	\$	0.
payı	us application is for Form 990-PF, 990-T, 4720, or 0 ments made. Include any prior year overpayment a 1 Form 8868				\$	0.
c Bala EFT	ance due. Subtract line 8b from line 8a Include yo PS (Electronic Federal Tax Payment System) See	ur payment instruction	with this form, if required, by using s	8 c	\$	0.
	Signature and Verific	ation mu	st be completed for Part II o	nly.		
Under penalt correct, and	ties of perjury, I declare that I have examined this form, including accomplete, and that I am authorized to prepare this form	companying sch	nedules and statements, and to the best of my k	nowledge and b	elief, it is true,	
Signature •	► Title ►	Presid	ent	D	ate 🕨	
BAA		FIFZ0502L			Form 8868	(Rev 1-2013)