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## Form 990-PF Department of the Treasury Internal Revenue Service

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

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990-PF and its separate instructions is at <a href="https://www.irs.gov/form990pf">www.irs.gov/form990pf</a>.

For	<u>calen</u>	dar year 2013 or tax year beginning		, and ending		
Nar	ne of	foundation		<u> </u>	A Employer identification	n number
P	OL:	EN FAMILY FOUNDATION				
С	/0	EDWARD POLEN			20-3970463	3
		nd street (or P O box number if mail is not delivered to stree	t address)	Room/suite	B Telephone number	
2	78	0 RIDGE ROAD			847-689-22	200
		own, state or province, country, and ZIP or foreign p	postal code	<u> </u>	C If exemption application is p	
		HLAND PARK, IL 60035			,	
		all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	s, check here
•		Final return	Amended return	,		,
		Address change	Name change		Foreign organizations me check here and attach or	eeting the 85% test,
H (	heck	type of organization: X Section 501(c)(3) e				
	_	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	tion	E If private foundation sta under section 507(b)(1	
l Fa			ing method: X Cash	Accrual	1	• • • •
			ther (specify)		F if the foundation is in a under section 507(b)(1	
	\$		ımn (d) must be on cash b	pasis.)		/(b); 61100K 11010
	irt I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	35,000.		N/A	, , , , , , , , , , , , , , , , , , , ,
	2	Check fithe foundation is not required to attach Sch B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	10,456.	10,456.		
	5a	Gross rents				
		Net rental income or (loss)				
<b>.</b>	6a		6,733.			
U 2014 Revenue	Ь	Gross sales price for all assets on line 6a 61,858.				
	7	Capital gain net income (from Part IV, line 2)		6,733.		
>๕	8	Net short-term capital gain				
<b>O</b>	9	Income modifications				
₩ ¥	10a	Gross sales less returns and allowances				
	ь	Less Cost of goods sold				
7	c	Gross profit or (loss)				
Ž	11	Other income	63.	63.		STATEMENT 1
	12	Total. Add lines 1 through 11	52,252.	17,252.		
SCANNED	13	Compensation of officers, directors, trustees, etc	0.	0.		0.
S	14	Other employee salaries and wages				
,	15	Pension plans, employee benefits				
ses	16a	Legal fees				
ĕ	Ь	Accounting fees STMT 2	1,561.			0.
Ĕ	C	Other professional fees STMT 3	3,832.	3,832		0.
ïve	17	Interest			LULIVEU	-   -   -   -
trat	18	Taxes STMT 4	139.			O.
nist	19	Depreciation and depletion		2	MAY 2 1 2014	7
Ē	20	Occupancy			00.000	(2)
Ā	21	Travel, conferences, and meetings			DGDEN UT	( co
Operating and Administrative Expens	22	Printing and publications				
gu	23	Other expenses STMT 5	45.	30.	ļ	0.
rati	24	Total operating and administrative		<u> </u>		
þe		expenses Add lines 13 through 23	5,577.	<u>3,872.</u>		0.
J	25	Contributions, gifts, grants paid	54,625.	<del></del>		54,625.
	26	Total expenses and disbursements.				
	_	Add lines 24 and 25	60,202.	3,872.		54,625.
	27	Subtract line 26 from line 12:				Į.
		Excess of revenue over expenses and disbursements	<7,950.		ļ	
		Net investment income (if negative, enter -0-)		13,380.		
	C	Adjusted net income (if negative, enter -0-)	1 1		N/A	

LHA For Paperwork Reduction Act Notice, see instructions.

POLEN FAMILY FOUNDATION

For	m 99	00-PF (2013) C/O EDWARD POLEN		20-3	3970463 Page 2
_	art	Relance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
	art	Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			<u> </u>
	2	Savings and temporary cash investments	16,983.	15,107.	<u> 15,107.</u>
	3	Accounts receivable			
		Less; allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			V.
		Less: allowance for doubtful accounts ▶			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ÿ	10a	Investments - U.S. and state government obligations			
	Ь	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - tand, buildings, and equipment basis	_		_
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 6	279,844.	273,770.	<u>316,419.</u>
	14	Land, buildings, and equipment basis ▶	_		
		Less accumulated depreciation			<del> </del>
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers - see the			
_		instructions. Also, see page 1, item 1)	296,827.	288,877.	331,526.
П	17	Accounts payable and accrued expenses			
	18	Grants payable			ı
S	19	Deferred revenue			•
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
jab	21	Mortgages and other notes payable			*
_	22	Other liabilities (describe )			
					i .
_	23		0.	0.	
		Foundations that follow SFAS 117, check here	·		
Ś		and complete lines 24 through 26 and lines 30 and 31.			i.
JCe	24	Unrestricted		<del></del>	P F
ala	25	Temporarily restricted			ř
Net Assets or Fund Balances	26				
Ë		Foundations that do not follow SFAS 117, check here			·
5		and complete lines 27 through 31.	0.	0.	
ets	27	Capital stock, trust principal, or current funds	0.	0.	
155	28	Paid-in or capital surplus, or land, bldg., and equipment fund	296,827.	288,877.	
et /	29	Retained earnings, accumulated income, endowment, or other funds  Total net assets or fund balances	296,827.	288,877.	ī
Ž	30	Total net assets of lund balances	230,027.	200,011.	;
	24	Total liabilities and net assets/fund balances	296,827.	288,877.	
	31			200,077	
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
1		I 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	296,827.
		r amount from Part I, line 27a		2	<u> </u>
		er increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	288,877.
		reases not included in line 2 (itemize)			0.
<u>6</u>	Tota	il net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30		288,877.

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(a) List and descri	ind Losses for Tax on li be the kind(s) of property sold (e.ç ehouse; or common stock, 200 sh	g., real estate,		`P-P	v acquired urchase lonation	(c) Date acqu (mo., day, y	nred /r.)	(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADEI		_ <del></del>		5 5	P	<u> </u>	<u> </u>	
b PUBLICLY TRADEI					P			<del> </del>
c CAPITAL GAINS I				1				
d		**						
e					-			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain o (e) plus (f) i		)
a 10,571.			9,11					1,456
ь 50,702.			46,01	LO.				4,692
585.								585
d		ļ						
e			·					
Complete only for assets showing	gain in column (h) and owned by	the foundation	n on 12/31/69		(	I) Gains (Col. (I	h) gạin m	ninus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any		CC	l. (k), but not le Losses (fror		
a								1,456
b								4,692
С								585
d								
e								<u>-</u>
2 Capital gain net income or (net cap	ital loss) { If gain, also ente If (loss), enter -0	r in Part I, line )- in Part I, line	7 7	} _2				6,733
Net short-term capital gain or (loss	a) as defined in sections 1222(5) ar	nd (6):						
If gain, also enter in Part I, line 8, c	olumn (c).	, ,		<b>,</b> ]				
If (loss), enter -0- in Part I, line 8  Part V   Qualification Ur	nder Section 4940(e) for						N/A	
Was the foundation liable for the secti f "Yes," the foundation does not qualif	y under section 4940(e). Do not co	omplete this pa	ırt.					Yes X No
	ach column for each year; see the i	nstructions be	fore making any e	entries.				
(a) Base period years Calendar year (or tax year beginnin			Net value of no			(001.	Distribut (b) divid	d) tion ratio ed by col. (c))
2012		1,681.			72,846			.152764
2011		6,205.			30,13			.15732
2010		3,875 <u>.</u>			<u>.72,628</u>			.19623
2009		<u>.9,098.</u>		1	<u>.15,862</u>			.16483
2008	1	7,992.			61,120	).		.29437
2 Total of line 1, column (d)						2		.965522
3 Average distribution ratio for the 5- the foundation has been in existent	•	on line 2 by 5,	or by the number	of years		3		.19310
4 Enter the net value of noncharitable-use assets for 2013 from Part X, line 5				4		330,293		
5 Multiply line 4 by line 3				5		63,781		
6 Enter 1% of net investment income (1% of Part I, line 27b)					6		134	
7 Add lines 5 and 6						7		63,915
B Enter qualifying distributions from	Part XII, line 4					8		54,625
If line 8 is equal to or greater than See the Part VI instructions.	ine 7, check the box in Part VI, line	e 1b, and comp	olete that part usin	ng a 1% ta	ax rate.			
								rm <b>990-PF</b> (201

POLEN FAMILY FOUNDATION Form 990-PF (2013) C/O EDWARD POLEN 20-3970463 Page 4 Part VI' Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions 1a Exempt operating foundations described in section 4940(d)(2), check here \( \bigs \) 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 🕨 🔛 and enter 1% 268. 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-) 3 Add lines 1 and 2 3 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 6 Credits/Payments: a 2013 estimated tax payments and 2012 overpayment credited to 2013 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 64 0. 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here \_\_\_\_\_ if Form 2220 is attached 8 268. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 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 2014 estimated tax Refunded > Part VII-A | Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in X any political campaign? 1a b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? X 1b 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. X c Did the foundation file Form 1120-POL for this year? 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: O . (2) On foundation managers. ➤ \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 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 X 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? X 4a b If "Yes," has it filed a tax return on Form 990-T for this year? N/A 4b X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 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? If "Yes," complete Part II, col. (c), and Part XV X 7

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8a Enter the states to which the foundation reports or with which it is registered (see instructions)

of each state as required by General Instruction G? if "No," attach explanation

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)

year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV

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

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

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had not been removed from jeopardy before the first day of the tax year beginning in 2013?

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Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
· (1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X 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	s 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)?		Ye	8 X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or t			
the prevention of cruelty to children or animals?		Ye	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	uctions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check t	nere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it mainta	ined		
expenditure responsibility for the grant?		[/A 🛄 Ye	8 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	s X No	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b 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 s	shelter transaction?	Ye	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attrib	utable to the transaction?		N/A	7b
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	/	
Paid Employees, and Contractors				
1 List all officers, directors, trustees, foundation managers and their		L ( ) Componentian	(d) Contributions to	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	to position	enter -0-)	compensation	allowances
EDWARD POLEN	PRES/SEC/DIRE	CTOR		
2780 RIDGE ROAD		_		
HIGHLAND PARK, IL 60035	0.50	0.	0.	0.
TAMRA POLEN	TREASURER/DIR	ECTOR		
2780 RIDGE ROAD		_	_	
HIGHLAND PARK, IL 60035	0.25	0.	0.	0.
	ASST SECY/DIR	ECTOR		
ONE IBM PLAZA, SUITE 3000		_	_	_
CHICAGO, IL 60611	0.00	0.	0.	0.
<u> </u>				
<del></del>				
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If some	ontor "NONE "		
Compensation of the highest paid employees (other than those me		enter NONE.	(d) Contributions to	(a) Eynense
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
MONTE	devoted to position		compensation	allowances
NONE				
		<u> </u>		
	-			
	1		:	
	1			
			•	
•	1			
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Total number of other employees paid over \$50,000

3 Five highest-paid independent contractors for professional services. If none, enter "NON	E."	
(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	· · · · · · · · · · · · · · · · · · ·	<b>▶</b> C
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info	rmation such as the	Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produced, et	ic.	
N/A		
	· <del>-</del>	
2		
3		
Doct IV D. C		<u> </u>
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 a	and 2	Amount
N/A	IIIU Z.	Amount
N/R		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	•	0.
Total, Add lines 1 tillough 5		Form <b>990-PF</b> (2013

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

20-3970463 Form 990-PF (2013) C/O EDWARD POLEN Page 8 Part X 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: <u>315,515.</u> a Average monthly fair market value of securities 1a b Average of monthly cash balances 1b 19,808. 10 c Fair market value of all other assets 335,323. 1d d Total (add lines 1a, b, and c) e 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 335,323. 3 Subtract line 2 from line 1d 5,030. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 330,2<u>93.</u> Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 16,515. Part XI 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.) 16,515. Minimum investment return from Part X, line 6 268. Tax on investment income for 2013 from Part VI, line 5 2b Income tax for 2013. (This does not include the tax from Part VI.) 268. 2c Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions 5 Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 0. 247. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 54,625. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 18 b Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) За 3b b Cash distribution test (attach the required schedule) 54,625. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4

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

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income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI,				
line 7				16,247.
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only			0.	
b Total for prior years:				;
3 Excess distributions carryover, if any, to 2013:		0.		
a From 2008 14, 952.			•	
b From 2009 13,309. c From 2010 25,244.				•
d From 2011 24,868.				
e From 2012 28,158.				ŧ
f Total of lines 3a through e	106,531.			1
4 Qualifying distributions for 2013 from	100,551.			
Part XII, line 4: ►\$54,625.				ı
a Applied to 2012, but not more than line 2a			0.	, i
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		,
c Treated as distributions out of corpus			¢5	
(Election required - see instructions)	0.			
d Applied to 2013 distributable amount				16,247.
e Remaining amount distributed out of corpus	38,378.		<u> </u>	10,241.
5 Excess distributions carryover applied to 2013	0.		,	0.
(If an amount appears in column (d), the same amount must be shown in column (a)		· · · · · · · · · · · · · · · · · · ·		
6 Enter the net total of each column as indicated below:	4		,	;
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	144,909.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.	•	To de la constantina della con
e 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.		S .
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2012. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2013. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2014				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 2008				
not applied on line 5 or line 7	14,952.			
9 Excess distributions carryover to 2014.	400 075			,
Subtract lines 7 and 8 from line 6a	129,957.			<u> </u>
0 Analysis of line 9:				t
a Excess from 2009 13,309.				
b Excess from 2010 25,244.				t f
c Excess from 2011 24,868.				
d Excess from 2012 28,158.				
e Excess from 2013 38,378.				Farm 000 DE (0040)

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

c Any submission deadlines:

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Part XV Supplementary Information (continued)

3 · Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
AMERICAN CANCER SOCIETY	NONE	PC	CHARITABLE	
CHICAGO, IL				1,000.
AMERICAN RED CROSS	NONE	PC	CHARITABLE	
CHICAGO, IL				1,000.
AMERICAS VET DOGS	NONE	₽C	CHARITABLE	
CHICAGO, IL				500.
BOY SCOUTS NORTHERN ILLINOIS COUNCIL	NONE	₽C	CHARITABLE	
CHICAGO, IL				2,500.
CATHOLIC CHARITIES	NONE	PC	CHARITABLE	
CHICAGO IL		<u> </u>		1,000.
Total SEE COI  b Approved for future payment	NTINUATION SHEE	ET(S)	<b>▶</b> 3a	54,625.
NONE				
Total			<b>▶</b> 3b	0.

		_	_	
Part XVI-A	Analys	is of Incon	ne-Producing	, Activities

Catalana at la catala	Unrelated	business income	Excluded	by section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		COGE	Amount	
ab		<del></del>	<del>                                     </del>		
		<del></del>	1		<del></del>
	1		+ +		<del></del>
d			<del>                                     </del>		
e	-	-			
g Fees and contracts from government agencies			<del>                                     </del>		
2 Membership dues and assessments	<del> </del>				
3 Interest on savings and temporary cash					<del></del>
investments					
4 Dividends and interest from securities	1 "		14	10,456.	<u>.</u> .
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			14	63.	
8 Gain or (loss) from sales of assets other					<del></del>
than inventory			18	6,733.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	_	<del></del>	ļl		
b	_		ļ		
C			1		
d	_		<del>                                     </del>		
e	_			45.050	
12 Subtotal. Add columns (b), (d), and (e)		0.		17,252.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	17,252.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities		<u> </u>	<u> </u>		
Explain below how each activity for which income the foundation's exempt purposes (other than			A contribute	ed importantly to the accomp	lishment of
		_			
				<del></del>	<del></del>
				<del></del> ·	
					<del></del>
		<del></del>			
		<del></del>		<del></del>	<del></del>
				<del></del>	
					<del> </del>
					· · · · · · · · · · · · · · · · · · ·
323821				<del> </del>	

Page 13

Part XVII	Information Re Exempt Organ		sfers To a	and Transactions	and Relations	ships With Nonch	aritable	•	<u> </u>
1 Did the o			of the followin	g with any other organizati	on described in sec	tion 501(c) of		Yes	No
	<del>-</del>			7, relating to political orga		.,			
a Transfers	from the reporting found	ation to a noncharita	ble exempt or	ganization of:					
(1) Cash	ı						1a(1)		X
(2) Othe	r assets						1a(2)		X_
	nsactions:		_						
• •	s of assets to a noncharita			1b(1)		X			
• •	hases of assets from a no al of facilities, equipment,	•	organization				1b(2) 1b(3)	_	X
• •	nbursement arrangements						1b(4)		X
	ns or loan guarantees						1b(5)		X
• •	ormance of services or me	embership or fundrai	sing solicitatio	ns			1b(6)		X
c Sharing o	of facilities, equipment, ma	uling lists, other asse	ets, or paid em	ployees			1c		X
				dule. Column (b) should al		_		ets,	
				ed less than fair market val	ue in any transactio	n or sharing arrangement,	, show in		
	d) the value of the goods, (b) Amount involved			exempt organization	(4) 5				
(a) Line no	(b) Amount involved	(c) Name of	N/A	exempt organization	(u) Descriptio	n of transfers, transactions, an	d sharing an	angeme	nts
			N/A						
	<del></del>								
		<u> </u>							
	-	<del> </del>							
-							· · ·		
			<del></del>						
				. ==					
	i								
	<del> </del>								
		-		or more tax-exempt organ	izations described				7
	1 501(c) of the Code (other		)(3)) or in sect	ion 527?			Yes	LX	No
b IT Yes, C	omplete the following sch: (a) Name of org			(b) Type of organization		(c) Description of relation	shin		
-	N/A	janization		(b) Type of organization		(c) Description of relation	ыпр		
•									
								-	
		1							
				g accompanying schedules and n taxpayer) is based on all inforr		v ban anu knaveladan M	May the IRS o	discuss 1	this
Sign Here	/ 1/1, l. ex	6		15-14-14	DDDGT	s	hown below	(see ins	tr )?
	nature of officer of trustee	<u> </u>		Date	PRESI:	DENT	X Yes	L	J No
I July	Print/Type preparer's na		Preparer's si		Date	Check if PTIN	<del></del>		
	Trino Typo proparor o no	2000	, roparor o o	g.·ia.to. o		self- employed	•		
Paid	KIMBERLY A	. HAUMANN	KIMBER	LY A. HAUMA	05/12/14	· • I	0546	491	
Preparer	Firm's name ► PLA				,, <u>-</u> -	Firm's EIN ► 38-1			
Use Only	'								
				LAZA, 9TH FI	LOOR				
	CH	ICAGO, IL	<u>. 60606</u>			Phone no. (312)			
							Form <b>99</b> 0	)-PF	(2013)

## 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.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

2013

Name of the organization

POLEN FAMILY FOUNDATION

**Employer identification number** 

C/O EDWARD POLEN 20-3970463 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 its Form 990-PF, Part I, line 2, to certify that it does not meet 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) (2013)

Name of organization POLEN FAMILY FOUNDATION Employer identification number

<u>C/O E</u>	DWARD POLEN		<u> </u>
Part I	Contributors (see instructions). Use duplicate copies of Part I if		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	EMCO 2100 COMMONWEALTH AVE NORTH CHICAGO, IL 60064	\$\$.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
110.	Name, address, and an 44	\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Omniant II for noncash contributions )

Name of organization POLEN FAMILY FOUNDATION C/O EDWARD POLEN

Employer identification number

20-3970463

Part II	Noncash Proper	ty (see instructions). Use duplicate copies of Part II if additional space is neede	эd.
---------	----------------	---	-----

(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
(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
		 	990 990-F7 or 990-PF) (2013

POLEN	FAMILY	FOUNDATION
	1	TOUTIDITIES

OT.EN FA	MILY FOUNDATION			Employer Identification number		
O EDWA	ARD POLEN			20-3970463		
Part III	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and th the total of exclusively religious, charitable, etc Use duplicate copies of Part III if additiona	e following line entry. For organizati ., contributions of \$1,000 or less fo	ons completina Part III. entei	ons that total more than \$1,000 for the		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	(d) Description of how gift is held		
		(e) Transfer of gi	ft			
	Transferee's name, address, an	d ZIP + 4	Relationship of tra	ansferor to transferee		
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held		
Part I	(4).	(c) oct or <b>g</b>				
	-	(e) Transfer of git	ft			
	Transferee's name, address, an	d ZIP + 4	Relationship of tra	ansferor to transferee		
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	cription of how gift is held		
	Transferee's name, address, an	(e) Transfer of git		ansferor to transferee		
_			· · · · · · · · · · · · · · · · · · ·			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	(d) Description of how gift is held		
		(e) Transfer of git	n			
	Transferee's name, address, an	d ZIP + 4	Relationship of tra	ansferor to transferee		
-	<del></del>	<del></del>				

Part XV . Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution any foundation manager status of Name and address (home or business) or substantial contributor recipient CHARITABLE PC NONE CHICAGO BOTANICAL GARDEN 250. CHICAGO IL NONE ÞС CHARITABLE CHICAGO ZOOLOGICAL SOCIETY 2,500. CHICAGO, IL COLLEGE BOUND OPPORTUNITIES NONE ₽C CHARITABLE 1,000. RIVERWOODS IL DISABLED AMERICAN VETERANS NONE ÞС CHARITABLE 1,500. CHICAGO, IL PC CHARITABLE DOCTORS WITHOUT BORDERS NONE 4.000. CHICAGO IL FAMILY SERVICES NONE PC CHARITABLE 1,000. PLEASANT PRAIRIE, WI ÞС CHARITABLE FOR AUTISTIC KIDS FOUNDATION NONE 1,125. CHICAGO, IL FRIENDS OF THE ISRAEL DEFENSE FORCES PC CHARITABLE 1,000. CHICAGO IL PC CHARITABLE HEIFER INTERNATIONAL NONE 3,000. CHICAGO IL NONE ÞС CHARITABLE HIAS CHICAGO 1,000. CHICAGO IL 48 625. Total from continuation sheets

Part XV . Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient HP COMMMUNITY PROGRAM NONE PC CHARITABLE 1,000. CHICAGO IL ISRAEL DISABLED VETS NONE PC CHARITABLE 1,000. CHICAGO IL JEWISH WAR VETERANS OF USA NONE ÞC CHARITABLE WASHINGTON DC 2,500. NONE ₽C JIMMY FUND CHARITABLE BROOKLINE MA 1,000. LAKE COUNTY CARES NONE PC CHARITABLE BARRINGTON IL 2,500, LYNN SAGE FOUNDATION NONE ₽C CANCER RESEARCH CHICAGO IL 5,000, MASSACHUSETTS COLLEGE OF PHARMACY NONE ÞС CHARITABLE 1,000. BOSTON MA NATIONAL MULTIPLE SCLEROSIS SOCIETY NONE PC CHARITABLE CHICAGO, IL 500. NATIONAL PARK FOUNDATION NONE PC CHARITABLE CHICAGO, IL 1,000. NONE NO IL FOOD BANK PC CHARITABLE CHICAGO, IL 1,000. Total from continuation sheets

20-3970463

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient PC NONE CHARITABLE PADS OF LAKE COUNTY 1,000. NORTH CHICAGO IL NONE PC CHARITABLE PAWS 500. CHICAGO IL SALVATION ARMY NONE PC CHARITABLE 2,500. CHICAGO IL CHARITABLE SPECIAL OLYMPICS NONE PC 750. RALEIGH, NC ST. JUDES HOSPITAL NONE PC CHARITABLE 500. CHICAGO IL THE ARK NONE ÞС CHARITABLE 1,000. CHICAGO, IL NONE ÞС TROUT UNLIMITED CHARITABLE 500, ARLINGTON, VA UNITED WAY NONE PC CHARITABLE 3,500. CHICAGO, IL PC CHARITABLE US HOLOCAUST MUSEUM NONE CHICAGO IL 1,000. NONE PC CHARITABLE USO 1,000. CHICAGO, IL Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution any foundation manager status of Name and address (home or business) or substantial contributor recipient WOUNDED WARRIOR PROJECT NONE ₽C CHARITABLE CHICAGO IL 1 000 PARALYZED VETS OF AMERICA NONE PC CHARITABLE 1,000. CHICAGO IL ISRAEL SPORT CENTER FOR DISABLED NONE PC CHARITABLE CHICAGO IL 1,000. NONE HP COMMUNITY FOUNDATION ÞС CHARITABLE 500. CHICAGO IL Total from continuation sheets

FORM · 990-PF	OTHER :	INCOME		STATEMENT	
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME		
OTHER INCOME	_	63.	63.		
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	63.	63.		
FORM 990-PF	ACCOUNTING FEES			STATEMENT	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME		
ACCOUNTING FEES	1,561	. 0.	•	0	
TO FORM 990-PF, PG 1, LN 16B	1,561	0		0	
FORM 990-PF C	THER PROFE	SSIONAL FEES		STATEMENT	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
ADVISORY FEE	3,832	. 3,832	•		
TO FORM 990-PF, PG 1, LN 16C	3,832	3,832	•	0	
FORM 990-PF	TAXES		STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABL PURPOSES	
FOREIGN TAXES ON DIVIDENDS FEDERAL IL STATE TAXES	10 119 10	. 0	•	0 0 0	
TO FORM 990-PF, PG 1, LN 18	139	. 10	•		
=			<u> </u>		

FORM. 990-PF	OTHER EXPENSES			STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTEI NET INCOM		
IL LICENSE FEE BANK FEES	15. 30.		0. 30.			0.
TO FORM 990-PF, PG 1, LN 23	45.	·	30.			0.
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	6
DESCRIPTION		LUATION ETHOD	вос	OK VALUE	FAIR MARKET	r
HARRIS BROKERAGE		COST		273,770.	316,41	19.
TOTAL TO FORM 990-PF, PART II	I, LINE 13	•		273,770.	316,41	19.