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Form **990-PF**

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.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For calendar year 2	013 or tax year beginning		, and ending		
	AEL AND JACQUELINI	E FERRO FAMIL	Y	A Employer identification	
FOUNDATI			 	20-5520747	<u></u>
•	OS, P.O. BOX 1560	et address)	Room/suite	B Telephone number 212-382-86	521
City or town, state	or province, country, and ZIP or foreign ON, NJ 08534	postal code		C If exemption application is p	pending, check here
G Check all that ap	oty Initial return Final return	Initial return of a fo	rmer public charity	D 1. Foreign organization	s, check here
	Address change	Name change		Foreign organizations me check here and attach or	eeting the 85% test,
H Check type of or		exempt private foundation		1	
	(a)(1) nonexempt charitable trust	Other taxable private founda	ition	E If private foundation sta under section 507(b)(1	
		ting method: X Cash	Accrual	1	
(from Part II, coi	· 1 —	Other (specify)	/NOOTdai	F If the foundation is in a under section 507(b)(1	_
►\$	3,383,829. (Part I, col		hasis.)	under section 307(b)(1)(D), CHECK Hele
<u> </u>	of Revenue and Expenses			(a) Advisaged and	(d) Disbursements
(The total necessarii	of amounts in columns (b), (c), and (d) may not equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net	for chantable purposes (cash basis only)
1	ons, gifts, grants, etc , received	7,500.		N/A	
2 Check ►	If the foundation is not required to attach Sch. B	1 010	1 010		
	savings and temporary ments	1,010.	1,010.		STATEMENT 1
4 Dividends	and interest from securities	13,321.	13,321.		STATEMENT 2
5a Gross ren	·s				
D Net rental is	come or (loss)		*************************************	<u> </u>	} !}:::::::::::::::::::::::::::::::::::
6a Net gain or	loss) from sale of assets not on line 10	<14,334.	<u> </u>		
b Gross sales assets on li	price for all	**************************************			
7 Capital gair	net income (from Part IV, line 2)		0.		
8 Net short	term capital gain	**************************************	**************************************		
	odifications		·····		
10a Gross sales	less returns ces .				
b Less Cost	of goods sold		,		
c Gross pro	fit or (loss)		4444		
11 Other inco	me .	233,622.	24,091.		STATEMENT 3
12 Total. Ad	l lines 1 through 11	241,119.	38,422.		
13 Compensa	ion of officers, directors, trustees, etc	0.	0.	L	0
14 Other em	loyee salaries and wages				
15 Pension p	lans, employee benefits				
% 16a Legal fees	_				
b Accounting C Other pro		7,500.	0.		0
C Other pro	ressional fees .		, , , , , , , , , , , , , , , , , , , ,	1	Ebi
			13	0-6 2016	94
17 Interest 18 Taxes 19 Depreciat 20 Occupant			(3)	Mr. 8. 2. 2314 1	3.
19 Depreciat	on and depletion		2€.1	المتعدسيوسيون ويور	
E 20 Occupant	·		**	() () () () () () () () () ()	9
Z 21 Travel, co	nferences, and meetings			- Brand Street Land Street	
73	nd publications				
6	0 m v m - E	30,839.	30,788.		0
►	rating and administrative				
	. Add lines 13 through 23	38,339.	30,788.		0
<u>~</u>	ons, gifts, grants paid	226,000.	30,130		226,000
	enses and disbursements.	264,339.	30,788.		226,000
	24 and 25	2017337.	307,30	· · · · · · · · · · · · · · · · · · ·	220,000
i	ine 26 from line 12 ⁻	<23,220.		,	*
l l	evenue over expenses and disbursements	~23,220.	7,634.	,	
D Net inves	tment income (if negative, enter -0-) net income (if negative, enter -0-)	- 	1,034	N/A	-
,		•			

Dana 2

Attached schedules and amounts in the description	Beginning of year	End of	year
Part II 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	509,281.	741,369.	741,369.
2 Savings and temporary cash investments			
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			
Less: allowance for doubtful accounts			
8 Inventories for sale or use			<u>-</u>
8 Inventories for sale or use 9 Prepaid expenses and deferred charges			
10a Investments - U.S and state government obligations			
b Investments - corporate stock			
c Investments - corporate bonds			
11 Investments - land, buildings, and equipment basis			
Less: accumulated depreciation			
12 Investments - mortgage loans			
13 Investments - other STMT 6	2,897,767.	2,642,459.	2,642,460.
14 Land, buildings, and equipment. basis ▶		' !	
Less accumulated depreciation			
15 Other assets (describe ►)			
16 Total assets (to be completed by all filers - see the			
instructions. Also, see page 1, item 1)	3,407,048.	3,383,828.	3,383,829.
17 Accounts payable and accrued expenses			
18 Grants payable .			
g 19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified persons			
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable			
22 Other liabilities (describe >)			
	0.	0.	
23 Total liabilities (add lines 17 through 22)		<u>U•</u>	
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 30 and 31.			
24 Unrestricted			
25 Temporarily restricted			
26 Permanently restricted Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.			
and complete lines 27 through 31.	0.	0.	
28 Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	,
24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances	3,407,048.	3,383,828.	
30 Total net assets or fund balances	3,407,048.	3,383,828.	
2 00 Iddi iiot gaada di idiid balandoo		0,000,0200	
31 Total liabilities and net assets/fund balances	3,407,048.	3,383,828.	,
Part III Analysis of Changes in Net Assets or Fund B	aldilices		·
1 Total net assets or fund balances at beginning of year - Part II, column (a), line	30		
(must agree with end-of-year figure reported on prior year's return)		1	3,407,048.
2 Enter amount from Part 1, line 27a		2	<23,220.
3 Other increases not included in line 2 (itemize)		3	0.
4 Add lines 1, 2, and 3		. 4	3,383,828.
 Decreases not included in line 2 (itemize) Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, co 	 	5	0. 3,383,828.

Part IV Capital Gains and	Losses for Tax on Inve	stment	Income						<u> </u>
	2 start brok warshouse as common stock 200 she MIC Co.)			(b) How acquired P - Purchase D - Donation		(c) Date acquired (mo., day, yr)		(d) Date sold (mo , day, yr)	
18 SHORT TERM CAPITA	L LOSS - PARTNE	RSHII	PS	<u> </u>		P	01/0	1/13	12/31/13
b LONG TERM CAPITAL	LOSS - PARTNER	SHIP			P 01/01/12 12/				12/31/13
C									
d									
<u>e</u>				<u> </u>				_	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis kpense of sale					ain or (loss (f) minus	
2				1.					<11.
<u>b</u>			14,32	3.					<14,323.
C			·			·			
d			_						
Complete only for exacts showing gain	un column (h) and award by the f	inundation	an 10/01/60						
Complete only for assets showing gain								ol. (h) gain iot less tha	
(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	- 1				(from col (
	40 01 120 700								<11.
<u>a</u>									<14,323.
b c	· · · · · · · · · · · · · · · · · · ·								777/363.
d							_		
e e									
	∫ If gain, also enter in F	Part L line		7					
Capital gain net income or (net capital lo		-			2				<14,334.
	, (",,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•	7					
Net short-term capital gain or (loss) as e If gain, also enter in Part I, line 8, colum		''		1					
If (loss), enter -0- in Part I, line 8] [3			N/A	•
Part V Qualification Under	r Section 4940(e) for Re	duced	Tax on Net	Inv	estn	nent Inc	come		
Vas the foundation liable for the section 49 "Yes," the foundation does not qualify und Enter the appropriate amount in each c	ier section 4940(e). Do not compl	ete this pa	rt.		<u></u>		•		Yes X No
(a)	(b)	1000000	ore making any e				1		(d)
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distribu		Net value of no		itable-				pution ratio rided by col (c))
2012		500.				$\frac{0,542}{3,601}$.008857
2011		000.				2,601			.052989
2010		450.				8,524			.321519
2009	1,546,					2,476			.462655
2008	419,	045.		- 4	, 40	3,042	-		.093892
Total of the discount (d)									.939912
Total of line 1, column (d)		aa 0 h E	a. b., the momba				2		.333312
Average distribution ratio for the 5-year		ne z by 5,	or by the number	or ye	ars				.187982
the foundation has been in existence if I	ess than 5 years .		•				3		.10/902
Fatar the net value of panehartable use	annote for 2012 from Bort V. line	E							3,419,613.
Enter the net value of noncharitable-use	assets for 2013 from Part A, line	J	•	•			4		3,417,013.
Muttiply line 4 by line 3							5		642,826.
manapiy mic 4 by mio o				•		• •	<u> </u>		
Enter 1% of net investment income (1%	of Part I line 27b)						6		76.
(170 of not invosationt income (170				•			1		
Add lines 5 and 6							7		642,902.
		-			•	•	<u> </u>		<u>,</u>
Enter qualifying distributions from Part	XII, line 4						8		226,000.
If line 8 is equal to or greater than line 7		and comp	lete that nart user	10 a 1	% tax	rate		•	· · · · · · · · · · · · · · · · · · ·
See the Part VI instructions	,		part uom	·	un				
323521 10-10-13									Form 990-PF (2013)

THE MICHAEL AND JACQUELINE FERRO FAMILY

	990-PF'(2013) FOUNDATION						5520			Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 494	Ю(а <u>),</u>	4940(b)	, 4940(e)	, or 4	948	- see	nstru	ctio	ıs)
1a	Exempt operating foundations described in section 4940(d)(2), check here and e	enter "N	/A" on line	1 `						
	Date of ruling or determination letter: (attach copy of letter if ne	cessar	y-see instr	uctions)			"			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	▶	and enter	1%	•	1		· · · · · · · · · · · · · · · · · · ·	1	53.
	of Part I, line 27b									
ε	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 49		-)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only C)thers e	nter -0-) .			2				<u>0.</u>
3	Add lines 1 and 2					3			1	53.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	Others	enter -0-)	-		4				0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-					5			<u> </u>	53.
6	Credits/Payments	1 -	ı	2 .	700					
	2013 estimated tax payments and 2012 overpayment credited to 2013	62		۷,	708.					
	Exempt foreign organizations - tax withheld at source	6b		·	100					
	Tax paid with application for extension of time to file (Form 8868)	60		5,0	000.					
	Backup withholding erroneously withheld	<u>6d</u>				_			7 7	^ ^
7	Total credits and payments. Add lines 6a through 6d			•		7			/ , /	08.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ached				8	<u> </u>			
g	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	•			9			7 5	==
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		7 55	5 . Refund		10 11			7,5	0.
	Enter the amount of line 10 to be: Credited to 2014 estimated tax **IVI-A Statements Regarding Activities		1,33	2 • Relund	BU	_!.!_	L			<u> </u>
	During the tax year, did the foundation attempt to influence any national, state, or local legi-	elation	or did it na	rticinate or in	teniene	ın			Yes	No
14	any political campaign?	Siation	or did it pa	itiospate of it	110140110	111		1a	103	
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo) SAS	ae instructio	ons for the d	efinition	12	•	1b		X
_	If the answer is "Yes" to 1aor 1b, attach a detailed description of the activities ar					•	•			
	distributed by the foundation in connection with the activities.			material p						
C	Did the foundation file Form 1120-POL for this year?							16	:	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during th	e vear	•				•	7		
	(1) On the foundation > \$ 0. (2) On foundation manager		\$		0.					
8	Enter the reimbursement (if any) paid by the foundation during the year for political expend			on foundati	on					,
	managers ▶ \$ O .									
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	instrur	nent, article	es of incorpo	ration, o	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	ges						3		<u>X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the ye	ar?						4a		<u>X</u>
	of "Yes," has it filed a tax return on Form 990-T for this year?					N	/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year	7			-			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 6	ether.								
	By language in the governing instrument, or			. 61.4 14						
	By state legislation that effectively amends the governing instrument so that no mandato was in the appropriate section of the secti	ry aire	ctions that (CONTICT WITH	tne state	ıaw			v	
-	remain in the governing instrument?		- D II -	al (a) aa d	n - 4 VI	,		7	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co	mpiete	9 Part II, C	oı. (c), and	Pan XV					********
9.	Enter the states to which the foundation reports or with which it is registered (see instructi	one\	•							,
Oa.	IL	01137 -								
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attome	v General /	or designate	1					
	of each state as required by General Instruction G? If "No," attach explanation		, 45.10141 (a. avoiginate	,			8b	X	
g	Is the foundation claiming status as a private operating foundation within the meaning of s	ection (4942(i)(3) i	or 4942(1)(5)	for cale	ndar				
•	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes,"				, 0410			g	i '	Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a scheduler				.s	TMT	1.7.	10	X	

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4a

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

MICHAEL FERRO PRESIDENT 1500 N. LAKE SHORE DRIVE # 21A CHICAGO, IL 606106686 2.00 0 0 0. VICE PRESIDENT JACQUELINE FERRO 1500 N. LAKE SHORE DRIVE # 21A CHICAGO, IL 606106686 2.00 0. 0 0 BRUCE WHITE DIRECTOR 980 N. MICHIGAN AVENUE, 14TH FLOOR 1.00 CHICAGO, IL 606114501 0 0 0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000

NONE

(b) Title, and average hours per week devoted to position

(c) Compensation

(d) Combutors to employee benefit plans and deferred compensation

(e) Expense exployee benefit plans and deferred compensation

(f) Compensation

(h) Title, and average hours per week devoted to position

(c) Compensation

(d) Committees account, other allowances

(e) Expense exployees account, other allowances

(f) Compensation

(g) Expense exployees paid over \$50,000 ...

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		, <u>, , , , , , , , , , , , , , , , , , </u>
Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(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	•	0
Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the		Expenses
number of organizations and other beneficianes served, conferences convened, research papers produced, etc N/A	<u> </u>	Expenses
2	 	
	1	
3	 	
	_	
	1	
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 and 2.	<u>-l</u>	A
N/A		Amount
	-	
All other argamm-related investments. Can instructions	-	
All other program-related investments. See instructions.		
Total Add lines 1 through 3	 	0

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P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	712,010.
C	Fair market value of all other assets	10	2,759,678.
d	Total (add lines 1a, b, and c)	1d	3,471,688.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,471,688.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	52,075.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	3,419,613.
6	Minimum investment return. Enter 5% of line 5	6	170,981.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	170,981.
2a	Tax on investment income for 2013 from Part VI, line 5		<u></u>
b	Income tax for 2013 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	153.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	170,828.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	170,828.
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	170,828.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a_	226,000.
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		
a	Suitability test (prior IRS approval required)	3a	
	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	226,000.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	226,000.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation (qualifies fo	or the section

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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				170,828.
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only	*		0.	
b Total for prior years	,		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	······································	0.		
3 Excess distributions carryover, if any, to 2013				
a From 2008 59,782.				
b From 2009 1,384,218.				
c From 2010 844,024.				
d From 2011 15,233.	, and the second	<i>'</i>		
e From 2012				
f Total of lines 3a through e	2,303,257.	· /		,
4 Qualifying distributions for 2013 from				
Part XII, line 4· ► \$ 226,000.				, ,
a Applied to 2012, but not more than line 2a	, , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,	0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.	······································	
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.		#1. 1.1	
d Applied to 2013 distributable amount		/		170,828.
e Remaining amount distributed out of corpus	55,172.	***************************************	MIII	
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				,
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,358,429.	,		
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 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	59,782.	,		
9 Excess distributions carryover to 2014.				,
Subtract lines 7 and 8 from line 6a	2,298,647.	·····		, ,
10 Analysis of line 9	,		,	
a Excess from 2009 1,384,218.			,	· · · · · · · · · · · · · · · · · · ·
b Excess from 2010 844,024.	·			
E Excess from 2011 15,233.				
d Excess from 2012			,	
8 Excess from 2013 55, 172.	<u></u>	<u> </u>	<u> </u>	
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Part XIV Private Operating Fo	oundations (see ins	structions and Part VII	A, question 9)	N/A	
1 a If the foundation has received a ruling or	r determination letter that	it is a private operating			
foundation, and the ruling is effective for	r 2013, enter the date of t	he ruling			
b Check box to indicate whether the found	ation is a private operatin	ig foundation described in	n section	4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for		· · · · · · · · · · · · · · · · · · ·		\\	(4)
each year listed					
b 85% of line 2a		<u></u>			
			·	-	
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not)	
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly		i	}		
for active conduct of exempt activities					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter					
(1) Value of all assets (2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter.					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income Part XV Supplementary Info	motion (Comple	to this part only	if the foundation	had 65 000 as ma	
at any time during t			ii the loulidation	nau \$5,000 or me	ore in assets
		uotionis.j			
Information Regarding Foundation List any managers of the foundation who year (but only if they have contributed m MICHAEL FERRO	o have contributed more		nbutions received by the	foundation before the clo	se of any tax
b List any managers of the foundation who	n nwn 10% ar mare of th	a stock of a corporation (or an equally large ports	on of the ownership of a n	artnership or
other entity) of which the foundation has NONE			or an equally large point	on or the ownership of a p	arthership or
		0 5 1 1			
2 Information Regarding Contributi Check here ► X if the foundation o the foundation makes gifts, grants, etc.	nly makes contributions t	to preselected charitable	organizations and does r		
a The name, address, and telephone num	ber or e-mail address of t	he person to whom appli	cations should be address	ssed	
2 110 110110, 000100, 0101010		, , , , , , , , , , , , , , , , , , ,		••••	
b The form in which applications should b	e submitted and informat	tion and materials they st	nould include		
c Any submission deadlines					
d Any restrictions or limitations on awards	s, such as by geographica	al areas, charitable fields,	kınds of institutions, or o	other factors	
323601 10-10-13					Form 990-PF (2013)

Page 11

Form 990-PF (2013)

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or **Amount** status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year IMPACT 100 CHICAGO NONE NON-PROFIT EDUCATION P.O. BOX 607 ORGANIZATION PALATINE, IL 60078 1,000. NONE LATIN SCHOOL OF CHICAGO NON-PROFIT EDUCATION 59 W. NORTH BOULEVARD ORGANIZATION CHICAGO, IL 60610 25,000. KARTEMQUIN FILMS NONE NON-PROFIT EDUCATION 1901 WEST WELLINGTON AVE ORGANIZATION CHICAGO, IL 60657 200,000. **►** 3a Total 226,000. b Approved for future payment NONE Total **▶** 3b 0.

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

Enter gross amounts unless otherwise indicated	Unrelate	d business income	Exclu	ded by section 512, 513, or 514	(B)
•	(a) Busiņess	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue	code	Arribuit	code	Aisiouiit	TOTICUOTI IIICOTTIB
a					
b					
<u> </u>	<u> </u>				
d					
e	<u> </u>				
· · · · · · · · · · · · · · · · · · ·			-		
g Fees and contracts from government agencies	<u> </u>				
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments			14	1,010.	
4 Dividends and interest from securities			14	1,010. 13,321.	
5 Net rental income or (loss) from real estate.	7,000	· · · · · · · · · · · · · · · · · · ·		——————————————————————————————————————	1000-1000 - 1000
a Debt-financed property			<u> </u>		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property	ļ		l l		
7 Other investment income			15	24,091.	
8 Gain or (loss) from sales of assets other					
than inventory			18	<14,334.	>
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a UNREALIZED GAIN/LOSS		1			
b FROM PARTNERSHIPS				66,130.	
BOOK/TAX DIFFERENCE FROM					
d PARTNERSHIPS				143,401.	
8					
12 Subtotal. Add columns (b), (d), and (e)		0	•	233,619.	0.
13 Total. Add line 12, columns (b), (d), and (e)				. 13	233,619.
(See worksheet in line 13 instructions to verify calculations.)					

Part XVI-B Rela	tionship of Activities	to the Accomplishment o	f Exempt Purposes
-----------------	------------------------	-------------------------	-------------------

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)

323621 10-10-13

2	n	-5	5	2	U	7	47	
~	v	- ~	~	~	v	•	T /	

Form 990-PF (2	2013) FOUND	ATION				20-552	0747	Pa	ge 13
Part XVII			sfers To a	and Transactions a	and Relations	hips With Nonch	aritable		
	Exempt Organ							<u> </u>	
				g with any other organization		ion 501(c) of		Yes	No
	·			7, relating to political organ	nizations?				
	from the reporting founda	ation to a noncharital	ble exempt or	janization of					
(1) Cash							1a(1)		X
(2) Other						•	1a(2)		X
b Other tran									
	s of assets to a nonchanta	• •					1b(1)		X
	hases of assets from a no		organization				16(2)		X
(3) Renta	al of facilities, equipment,	or other assets .					1b(3)		X
(4) Reim	bursement arrangements	,					1b(4)		X
(5) Loan	s or loan guarantees			•			10(5)		X
(6) Perfo	ormance of services or me	mbership or fundras	sıng solicitatio	ns			1b(6)		X
	of facilities, equipment, ma	_		= = = = = = = = = = = = = = = = = = = =			10		X
				dule. Column (b) should al				ets,	
or service	es given by the reporting fo	oundation. If the four	ndation receive	ed less than fair market valu	ue in any transaction	or sharing arrangement,	show in		
column (c	d) the value of the goods,								
(a) Line no	(b) Amount involved	(c) Name of		exempt organization	(d) Description	of transfers, transactions, and	d sharing an	angeme	กts
			N/A						
			<u>-</u>						
			 						
									
		1		······································					·
									
									
in section	501(c) of the Code (othe	r than section 501(c)			·		Yes	X] No
	(a) Name of org	janization		(b) Type of organization	 	(c) Description of relation	ship		
	N/A				↓				
				· · · · · · · · · · · · · · · · · · ·	_				
					 				
									
	a company of the second	W-115-	<u> </u>		1	bank at a second			
Sign Here	pelief, It is true, correct, and cor	mplets Declaration of pr		g accompanying schedules and taxpayer) is based on all inform	PRESII	r has any knowledge R	lay the IRS of turn with the hown below X Yes	e prepar (see ins:	er
Sig	nature of officer or trustee		18	Date	Title	Obset: [] 4 [5-11			==
	Print/Type preparer's na	ame	Preparer's s	gnature	Date	Check if PTIN			
.			16/1	1.0.16	1.1.1.	self- employed			
Paid	B. ANTHONY		111/1	11/10	10/2/2014		00226		
Preparer	Firm's name ► MER	RILL LYNC	H PIER	CE FENNER &	SMITH INC	Firm's EIN ► 13-2	27405	99	
Use Only									
	Firm's address ► 15				H FLOOR				-
	PE	ENNINGTON,	NJ 08	534-4124		Phone no 212-3			
							Form 99 ()-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 www.irs.gov/form990

OMB No 1545-0047

2013

Name of the organization

THE MICHAEL AND JACQUELINE FERRO FAMILY FOUNDATION

Employer identification number

20-5520747

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 private foundation
	501(c)(3) taxable private foundation
	n is covered by the General Rule or a Special Rule . (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General Rule	
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one nplete Parts I and II.
Special Rules	
509(a)(1) and 17	1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 0(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% in (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
total contribution	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, ins of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or if cruelty to children or animals. Complete Parts I, II, and III.
contributions for If this box is che purpose. Do not	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, r use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. ecked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., complete any of the parts unless the General Rule applies to this organization because it received nonexclusively able, etc., contributions of \$5,000 or more during the year
but it must answer "No" o	n 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), 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 set the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).
LHA For Paperwork Re	duction 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 THE MICHAEL AND JACQUELINE FERRO FAMILY FOUNDATION

Employer identification number

20-5520747

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

(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MICHAEL FERRO 1500 N LAKE SHORE DR #21A CHICAGO, IL 60610	\$7,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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 Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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 Noncash (Complete Part II for noncash contributions.)

323452 10-24-13

Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization THE MICHAEL AND JACQUELINE FERRO FAMILY FOUNDATION

Employer identification number

20-5520747

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	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
		\$	
(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
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
323453 10-24		\$ Sabadula P./Farm	990, 990-EZ, or 990-PF) (2013

Schedule B (Form 990, 990-EZ, or 990-PF) (2013) Name of organization Employer identification number THE MICHAEL AND JACQUELINE FERRO FAMILY 20-5520747 **FOUNDATION** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once.) Part III Use duplicate copies of Part III if additional space is needed. (a) No. (b) Purpose of gift (c) Use of aift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part | (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

323454 10-24-13

TOTAL TO FORM 990-PF, PART I, LINE 11 233,622.

			 		·
FORM 990-PF INTERE	ST ON SAVING	S AND TEMPOR	ARY CASH I	NVESTMENTS	STATEMENT 1
SOURCE		(A) REVENUE PER BOOK		(B) NVESTMENT NCOME	(C) ADJUSTED NET INCOME
MERRILL LYNCH ****	04066	1,0	10.	1,010.	
TOTAL TO PART I, LI	INE 3	1,0	10.	1,010.	
FORM 990-PF	DIVIDENDS	AND INTEREST	FROM SECU	RITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVES MENT INCO	
DIVIDEND INCOME - PARTNERSHIPS	13,321.	0.	13,321	. 13,32	1.
TO PART I, LINE 4	13,321.	0.	13,321	. 13,32	1.
FORM 990-PF		OTHER INCO	ME		STATEMENT 3
DESCRIPTION		RE	_	(B) NET INVEST- MENT INCOME	
PORTFOLIO INCOME FE UNREALIZED GAIN/LOS		IIP	24,091.	24,091	•
PARTNERSHIPS BOOK/TAX DIFFERENCE			66,130.	0	•
PARTNERSHIPS			143,401.	0	•

24,091.

FORM 990-PF	ACCOUN	TING FEES		 	STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOK	(B) NET INVE S MENT INC		(C) ADJUSTED NET INCOM		
PROFESSIONAL FEES	7,50	0.	0.			0.
TO FORM 990-PF, PG 1, LN 16B	7,50	0.	0.			0.
FORM 990-PF	OTHER	EXPENSES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOK		_	(C) ADJUSTED NET INCOM		
DEDUCTIONS PORTFOLIO - (2% FLOOR) FROM PASS-THROUGH ILLINOIS CHARITY BUREAU ILLINOIS STATE FILING FEE BANK FEES		5. 6.	638. 0. 0. 150.			0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	30,83	9. 30,	788.			0.
FORM 990-PF	OTHER I	NVESTMENTS	<u> </u>		STATEMENT	6
DESCRIPTION		VALUATION METHOD	вос	OK VALUE	FAIR MARKE	r
THE ENDOWMENT TEI FUND LP GROSVERNOR CAPITAL MANAGEMENT		COST COST		1,461,385. 1,181,074.	1,461,3 1,181,0	
TOTAL TO FORM 990-PF, PART II	, LINE 13			2,642,459.	2,642,4	60.

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS
PART VII-A, LINE 10

STATEMENT

7

NAME OF CONTRIBUTOR

ADDRESS

MICHAEL FERRO

1500 N LAKE SHORE DR #21A

CHICAGO, IL 60610

22

Form **8868**

(Rev. January 2014)

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.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868

OMB No. 1545-1709

•	are filing for an Automatic 3-Month Extension, complete	_				X
	u are filing for an Additional (Not Automatic) 3-Month Ex			•		
	complete Part II unless you have already been granted a					
	nic filing (e-file). You can electronically file Form 8868 if y					
	d to file Form 990-T), or an additional (not automatic) 3-moi					
	to file any of the forms listed in Part I or Part II with the exc					
Person	al Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details o	n the elec	tronic filing of this	form,
	w.irs.gov/efile and click on e-file for Charities & Nonprofits					
Part	Automatic 3-Month Extension of Time	. Only s	submit original (no copies ne	eded).		
A corpo	pration required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and o	complete		
Part I o	•					-
	r corporations (including 1120-C filers), partnerships, REM	ICs, and t	rusts must use Form 7004 to reques			
	come tax returns.			Enter file	r's identifying nu	mber
Type o				Employer	identification num	iber (EIN) or
print	THE MICHAEL AND JACQUELINE	FERR	O FAMILY			
File by the	FOUNDATION				20-55207	<u>47</u>
due date i	or Number, street, and room or suite no. If a P.O. box, s	tions.	Social sec	cunty number (SS	N)	
filing your return Se	·					
instruction	5.1, to 5. post 6.1.00, 61.1.0, 11.1.	oreign add	ress, see instructions.			
	PENNINGTON, NJ 08534					
-	Date of the state					(A) (A)
Enter tr	ne Return code for the return that this application is for (file	a separa	te application for each return)	•		0 4
		0-4	Ta			
Applica	ation	Return	Application			Return Code
Is For	00 or Form 000 F7	Code	Is For			
	90 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 9		02	Form 1041-A			08
	720 (individual)	03	Form 4720 (other than individual)			09
Form 9		04	Form 5227			10
	90-T (sec. 401(a) or 408(a) trust)	05 06	Form 6069 Form 8870	·		11
Form 9	90-T (trust other than above) THE FOUNDATION	0	FOITI 6670			12
• The	books are in the care of ▶ C/O ML-FOS, P.O.	D. BO	X 1560 - PENNINGTO	N. N.T	08534	
	phone No. ► 212-852-3850		Fax No.		00334	
	e organization does not have an office or place of business	s in the lilr				• 🗂
	s is for a Group Return, enter the organization's four digit (f this is for	the whole group	check this
box 🕨		1	ich a list with the names and EINs of			
	request an automatic 3-month (6 months for a corporation				BIS THE EXTENSION	3 101.
• •		•	tion return for the organization name		The extension	
ic	for the organization's return for:		work to take to the organization have		THE EXCENSION	
	X calendar year 2013 or					
		, an	d endina			
•		· ·			·	
2 lf	the tax year entered in line 1 is for less than 12 months, c	heck reas	on: Initial return	Final retun	n	
	Change in accounting period					
3a II	this application is for Forms 990-BL, 990-PF, 990-T, 4720	or 6069,	enter the tentative tax, less any			
	onrefundable credits. See instructions.			3a	\$	7,708.
	this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	y refundable credits and			
	stimated tax payments made. Include any prior year over-			3b	\$	2,708.
	Balance due. Subtract line 3b from line 3a. Include your pa					
	by using EFTPS (Electronic Federal Tax Payment System).			3c	\$	5,000.
	n. If you are going to make an electronic funds withdrawal			453-EO ar		
ınstruc						
LHA	For Privacy Act and Paperwork Reduction Act Notice,	see instr	uctions.		Form 8868 (i	Rev. 1-2014)

LHA 323841 12-31-13

- myou	8 (Rev. 1-2014) are filing for an Additional (Not Automatic) 3-Month Ex	dension o	samplete only Part II and shock the	- boy		Page 2
Note On	ly complete Part II if you have already been granted an				8868	
	are filing for an Automatic 3-Month Extension, comple			ilea Foitii	0000.	
Part II				al (no c	opies ne	eeded).
						r, see instructions
Type or	Name of exempt organization or other filer, see instru	ictions.				tion number (EIN) or
print	THE MICHAEL AND JACQUELINE	FERRO	FAMILY			, ,
File by the	FOUNDATION				20-5	520747
due date for filing your return See	Number, street, and room or suite no. If a P.O. box, s C/O ML-FOS, P.O. BOX 1560	see instruc	tions.	Social se	curity nun	nber (SSN)
Instructions	City, town or post office, state, and ZIP code. For a f PENNINGTON, NJ 08534	oreign add	ress, see instructions.			
Enter the	Return code for the return that this application is for (fil	e a separa	te application for each return)			0 4
Applicat	ion	Return	Application			Return
ls For		Code	Is For			Code
Form 990	or Form 990-EZ	01				
Form 990)-BL	02	Form 1041-A			08
Form 472	20 (individual)	03	Form 4720 (other than individual)			09
Form 990		04	Form 5227			10
	7-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
)-T (trust other than above)	06	Form 8870			12
210P: D	o not complete Part II if you were not already granted THE FOUNDATION	a an auton	natic 3-month extension on a prev	TOUSIY THE	a Form 8	808.
• The h	ooks are in the care of P C/O ML-FOS, P.	о. во:	X 1560 - PENNINGTO	N. NJ	0853	4
	none No. ► 212-382-8621		Fax No. ▶			•
•	organization does not have an office or place of busines	s in the Ur				▶ □
If this	is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) I	f this is fo	r the whol	e group, check this
box ▶	. If it is for part of the group, check this box 🕨 🗔			all memb	ers the ex	tension is for.
	· -	NOVEM	BER 15, 2014.			
	calendar year 2013 , or other tax year beginning $_$, and endin			 .
6 if ti	ne tax year entered in line 5 is for less than 12 months, o	check reas	on: Initial return	i Final r	eturn	
_ L_	Change in accounting period					
	te in detail why you need the extension DDITIONAL TIME IS NEEDED IN	ORDER	TO FILE A COMPLET	E AND	ACC	URATE
411	ETURN.	OILDLIK	TO TIED IT COMPETE	<u> </u>	ACC	OIGHTE
RI						
RI						
	his application is for Forms 990-BL, 990-PF, 990-T, 4720), or 6069,	enter the tentative tax, less any		ı	
8a If t	nis application is for Forms 990-BL, 990-PF, 990-T, 4720 prefundable credits. See instructions.), or 6069,	enter the tentative tax, less any	8a	\$	7,708.
8a If t	• •		·····	8a	\$	7,708.
8a If to no. b If to	refundable credits. See instructions.	9, enter an	y refundable credits and estimated	8a	\$	
8a If to noo	nrefundable credits. See instructions. his application is for Forms 990-PF, 990-T, 4720, or 6069 payments made. Include any prior year overpayment a eviously with Form 8868.	9, enter an	y refundable credits and estimated a credit and any amount paid	8a 8b	\$	
8a lifti no b lifti tax pr c Ba	nrefundable credits. See Instructions. his application is for Forms 990-PF, 990-T, 4720, or 6068 payments made. Include any prior year overpayment at eviously with Form 8868. Iance due. Subtract line 8b from line 8a. Include your payment at the second	9, enter an llowed as a ayment wit	y refundable credits and estimated a credit and any amount paid	8b	\$	7,708.
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