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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>.

OMB No. 1545-0052

For ca	lendar year 2013 or tax year beginning		, and ending		
Name	e of foundation			A Employer identification	n number
JA	ACK & ROBIN HAKE FOUNDATION	ON		27-141716	2
	er and street (or P O box number if mail is not delivered to street a		Room/suite	B Telephone number	
22	24 N 10TH ST			314-422-7	437
	or town, state or province, country, and ZIP or foreign po	estal code		C if exemption application is	
_	LOUIS, MO 63102	70tur 0000		o il exemption application is	perioling, crieds need
	eck all that apply: Initial return	Initial satura of a fo	rmor public abority	D 1. Foreign organization	no obook horo
u Cit	Final return	Initial return of a fo	The public charty	I. Foreigh organization	is, check here
		Amended return		Foreign organizations recheck here and attach or	neeting the 85% test,
	Address change	Name change		check here and attach of	computation
_	eck type of organization: X Section 501(c)(3) exe			E If private foundation st	
		Other taxable private founda		under section 507(b)(	I)(A), check here $ ightharpoonup$
	market value of all assets at end of year   J Accounting	-	Accrual	F If the foundation is in a	
•		er (specify)	<del> </del>	under section 507(b)(1	I)(B), check here
<b>▶</b> \$		nn (d) must be on cash b	easis.)	<u></u>	<u></u>
Par	The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	600,000.		N/A	(CESIT DEBIC CITY)
	2 Check In I of the foundation is not required to attach Sch 8	000,000.		M/A	<del> </del>
	interest on savings and temporary				<del>                                     </del>
,	3 cash investments	100 266	100 200		CONTRACTOR 1
'	4 Dividends and interest from securities	199,266.	199,266.		STATEMENT 1
	5a Gross rents				<u> </u>
	Net rental income or (loss)				
<u>o</u>	68 Net gain or (loss) from sale of assets not on line 10  Gross sales price for all	750,925.			
2	b assets on line 6a 2,120,996.				
Revenue	7 Capital gain net income (from Part IV, line 2)		750,925.		
<u>" </u>	8 Net short-term capital gain				
	9 Income modifications				
10	Gross sales less returns and allowances				
	D Less Cost of goods sold				
	c Gross profit or (loss)				
1	1 Other income				
1:	2 Total. Add lines 1 through 11	1,550,191.	950,191.		
1	3 Compensation of officers, directors, trustees, etc	0.	0.		0.
1	4 Other employee salaries and wages				
1	5 Pension plans, employee benefits				
8 4	6a Legal fees STMT 2	174.	0.		0.
en en	b Accounting fees STMT 3	7,902.	0.		0.
and Administrative Expens	c Other-professional fees STMT 4	7,025.	7,025.		0.
10 €	7 Interest	,,025.	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		†
韻	8 Taxes STMT 5	18,233.	2,233.		0.
<u>st</u>		10,200	2/200.		
Ë,	Depreciation and depletion (1) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2				
P 2			<del> </del>		<del>                                     </del>
9 2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
E 2		7.	7.		
E 2	3 Other expenses STMT 6	/ •			0.
Operating	24 Total operating and administrative	22 244	0 065		
ŏ.	expenses. Add lines 13 through 23	33,341.	9,265.		0.
2	Contributions, gifts, grants paid	500,000.			500,000.
2	26 Total expenses and disbursements.				
	Add lines 24 and 25	533,341.	9,265.		500,000.
2	27 Subtract line 26 from line 12:				
	Excess of revenue over expenses and disbursements	1,016,850.	<del> </del>		
	b Net investment income (if negative, enter -0-)		940,926.		
	c Adjusted net income (if negative, enter -0-)			N/A	
323501 10-10-1	LHA For Paperwork Reduction Act Notice, see i	nstructions.		<del></del>	Form <b>990-PF</b> (2013)

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For	m 99	0-PF (2013) JACK & ROBIN HAKE FOUND		27-:	1417162 Page 2
	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
	<u>art</u>	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	798,142.	1,051,776.	1,051,776.
	2	Savings and temporary cash investments			
	ı	Accounts receivable			
	3				
		Less: allowance for doubtful accounts			
	4	Pledges receivable ►			
	1	Less: allowance for doubtful accounts			
	5	Grants receivable .			
	6	Receivables due from officers, directors, trustees, and other	ļ		
		disqualified persons			
	7	Other notes and loans receivable			
	·	Less: allowance for doubtful accounts	İ		
	8	Inventories for sale or use			
Assets	l	<b>F</b>			
Ąŝ	ı	Prepaid expenses and deferred charges	2 241 660	2 144 906	2,210,962.
•	ı	Investments - U.S. and state government obligations STMT 7	2,241,669.	2,144,806.	
	l	Investments - corporate stock STMT 8	4,222,897.	5,208,447.	7,019,301.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
	1	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 9	1,275,000.	1,100,000.	1,119,073.
	1	Land, buildings, and equipment basis			
	' -	Less accumulated depreciation	1		
	4-				
	•	Other assets (describe	· · · · · · · · · · · · · · · · · · ·		
	16	Total assets (to be completed by all filers - see the	0 537 700	0 505 000	11,401,112.
		instructions. Also, see page 1, item 1)	8,537,708.	9,505,049.	11,401,114.
	ı	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
api	21	Mortgages and other notes payable			
=	22	Other liabilities (describe  )			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
_		Foundations that follow SFAS 117, check here		· <del>-</del> ··	
		and complete lines 24 through 26 and lines 30 and 31.			
8	24	Unrestricted			
٤	25	Temporarily restricted			
ala		• •	<u> </u>		
g B	26	Permanently restricted		<del></del>	
5		Foundations that do not follow SFAS 117, check here			
Ĕ		and complete lines 27 through 31.			
ţ	27	Capital stock, trust principal, or current funds	0.	0.	
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
ğ	29	Retained earnings, accumulated income, endowment, or other funds	8,537,708.	9,505,029.	
Net Assets or Fund Balances	30	Total net assets or fund balances	8,537,708.	9,505,029.	
	31	Total liabilities and net assets/fund balances	8,537,708.	9,505,029.	
			alances		
Ц	art	Alialysis of Changes in Net Assets of Fund B	alalices		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	8,537,708.
2	•	r amount from Part I, line 27a		2	1,016,850.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	9,554,558.
		eases not included in line 2 (itemize) INVESTMENTS -	FMV ADJIISTMENT		49,529.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		6	9,505,029.
<u>0</u>	ı Uld	r not agosto di Tuna palancoo at ena di year (line 4 fillilia) line d) - Falt II, bi	ordinit 197 mm oo		Form <b>990-PF</b> (2013)
					10.1 (-010)

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Part IV Capital Gains	and Losses for Tax on In	vestment	Income	T				
(a) List and desc 2-story brick wa	ribe the kind(s) of property sold (e.g. arehouse; or common stock, 200 shs	., real estate, s. MLC Co.)		` P -	ow acquired Purchase Donation	(c) Date (mo., c	acquired ay, yr.)	(d) Date sold (mo,, day, yr.)
1a CHARLES SCHWAB	5321-8543				D	VARI	OUS	VARIOUS
b CHARLES SCHWAB	5321-8543				D	VARI	OUS	VARIOUS
c CHARLES SCHWAB	1937-0234				D	VARI	OUS	VARIOUS
d CHARLES SCHWAB	1937-0234				D	VARI	OUS	VARIOUS
e CAPITAL GAINS	DIVIDENDS							<u></u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				ain or (loss s (f) minus	
a 34,711.			32,83	2.				1,879.
ь 253,647.			175,60					78,044.
c 10,285.		•	2,36					7,925.
d 1,758,537.			1,159,27	6.				599,261.
e 63,816.								63,816.
Complete only for assets showing	ng gain in column (h) and owned by t	the foundation	on 12/31/69			(I) Gains (C		
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (j), ıf any		C	ol. (k), but l Losses	not less tha (from col. (	
a						• .		1,879.
b						-		78,044.
C								7,925.
d								599,261.
е	- · · · · · · · · · · · · · · · · · · ·		<del>- · · · · · · · · · · · · · · · · · · ·</del>					63,816.
	C 11	D		7				
2 Capital gain net income or (net ca	apıtal loss) $ \begin{cases} & \text{if gain, also enter} \\ & \text{if (loss), enter -0} \end{cases} $			∤	2			750,925.
3 Net short-term capital gain or (los		ıd (6):		٦ l				
If gain, also enter in Part I, line 8,							37/3	
If (loss), enter -0- in Part I, line 8  Part V   Qualification U	Inder Section 4940(e) for	Daduand	Tow on Not	<u> </u>	3		N/A	<u> </u>
If section 4940(d)(2) applies, leave t  Was the foundation liable for the sec  If "Yes," the foundation does not qua	tion 4942 tax on the distributable arr		•	od?				Yes X No
	each column for each year; see the ir			ntries.				
(a) Base period years Calendar year (or tax year beginni	ng in) Adjusted qualifying dis	tributions	Net value of no	(c) nchard	able-use asse	ts	Dıstri (col. (b) dı	(d) bution ratio vided by col. (c))
2012		0,000.		9.	412,02	7.		.017000
2011		5,172.		7.	994,65	8.	-	.091958
2010		4,170.			135,04			.070769
2009		0.			976,04			.000000
2008					<u> </u>			
			-					
2 Total of line 1, column (d)						2		.179727
3 Average distribution ratio for the	5-year base period - divide the total	on line 2 by 5	or by the number	of vea	re	<u> </u>		
the foundation has been in existe		on mie z by o,	or by the number	Oi you	13	3		.044932
the foundation has been in existe	sice il less tilati 5 years					-		
4 Enter the net value of noncharital	ble-use assets for 2013 from Part X,	line 5				4	1	LO,406,526.
5 Multiply line 4 by line 3						5		467,586.
6 Enter 1% of net investment inco	ne (1% of Part I, line 27b)					6		9,409.
7 Add lines 5 and 6						7		476,995.
8 Enter qualifying distributions from	m Part XII, line 4					8		500,000
If line 8 is equal to or greater tha See the Part VI instructions.	n line 7, check the box in Part VI, line	e 1b, and comp	olete that part usin	g a 1%	tax rate.			

_	n 990-PF (2013) JACK & ROBIN HAKE FOUNDATION		1417			Page 4
_	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	1948 -	See II	nstru	Cuor	15)_
18	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	1 . 1			^ 4	^^
ľ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	1			9,4	09.
_	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).  Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)					٥
3	Add lines 1 and 2	2			9,4	0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	3 4			<i>J</i> , 4	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			9,4	
6	Credits/Payments:	•			<i>J</i> , <del>T</del>	<u> </u>
-	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 13,046.					
	Exempt foreign organizations - tax withheld at source	1				
	Tax paid with application for extension of time to file (Form 8868)  6c 2,500.	1				
	Backup withholding erroneously withheld 6d	1				
	Total credits and payments. Add lines 6a through 6d	1 7		1	5.5	46.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				1.
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			6,1	36.
11	Enter the amount of line 10 to be: Credited to 2014 estimated tax	11				0.
Pa	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	: IN			Yes	No
	any political campaign?			1a		_X_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	ı)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	ed or				
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?			1c		_X_
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. ► \$ 0.	-				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ▶ \$0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
_	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	)r				7.5
4-	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?  If "Yes," has it filed a tax return on Form 990-T for this year?	N/	/ <b>a</b>	4a 4b	-	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	TA \	Ω	5		X
J	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:					
Ů	By language in the governing instrument, or					
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state</li> </ul>	e law				
	remain in the governing instrument?	, 1411		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	/		7	X	
	,,,,,,,,,,,,,,,,,,,					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	<u>MO</u> :					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	endar				
	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV		ĺ	9_		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10	<u> </u>	X

		<u>7-1417</u>	<u> 162</u>		Page 5
P	art VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				
	section 512(b)(13)? If "Yes," attach schedule (see instructions)		11_		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory priv	ileges?			
	If "Yes," attach statement (see instructions)		12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	Х	
	Website address ► N/A	1			
14	The books are in care of ► MRS . ROBIN G . HAKE  Telephone no. ►	314-42	2-7	437	
		IP+4 ▶63			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	P <u>55</u>		_	$\Box$
		15	N	/A	
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank,	10 1		Yes	No
	securities, or other financial account in a foreign country?	1	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign			-	42
	country				
Pá	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required				
•				Yes	No
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			163	140
18	During the year did the foundation (either directly or indirectly):	<b>T</b>			
		X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	( <del>11</del> )			
		X No			
	<u></u>	X No			
		X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			1	
	·	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				
	- · · · · · · · · · · · · · · · · · · ·	X No			
b	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations				
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b_		
	Organizations relying on a current notice regarding disaster assistance check here	▶□			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected				
	before the first day of the tax year beginning in 2013?		1 <u>c</u>		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation				
	defined in section 4942(j)(3) or 4942(j)(5)):				
а	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning				
	before 2013?	X No			
	If "Yes," list the years <b></b>			}	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect				
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach				
	statement - see instructions.)	N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	·			
	<b>&gt;</b>				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
-	<u> </u>	X No			
b	If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after				
-	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to disp	ose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	<b>-</b>			
	Form 4720, to determine if the foundation had excess business holdings in 2013.)	N/A	3b		
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	-1/45	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose the	at	7.5	Τ	
	had not been removed from jeopardy before the first day of the tax year beginning in 2013?	u.	4b		x
	man pagamag managan pagamag man pagamag	For	_	0-PF	
		FULL	55		(2010)

Part VII-B   Statements Regarding Activities for Which		Required (contin	<u> </u>	104	Page 6
5a During the year did the foundation pay or incur any amount to:	in total 4720 May be i	required (contain	1000)		
(1) Carry on propaganda, or otherwise attempt to influence legislation (sec	tion 4945(e))?		es X No		ļ
(2) Influence the outcome of any specific public election (see section 4955		• •			
any voter registration drive?	y, or to ourly on, unoutly or man		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purpos	ses?		es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					
509(a)(1), (2), or (3), or section 4940(d)(2)?		Y	es X No		ļ
(5) Provide for any purpose other than religious, charitable, scientific, litera	ary, or educational purposes, or				
the prevention of cruelty to children or animals?	. , , ,		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify	under the exceptions described	ın Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see ins	structions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance chec	k here		▶□		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemptio	n from the tax because it mainta	uned		ŀ	
expenditure responsibility for the grant?	Ŋ	1/A 🔲 Ye	es 🔲 No		1
If "Yes," attach the statement required by Regulations section 53.49	945-5(d).			1	
6a Did the foundation, during the year, receive any funds, directly or indirectly,	to pay premiums on				
a personal benefit contract?		Ye	es 🗶 No 📗	}	
${f b}\;$ Did the foundation, during the year, pay premiums, directly or indirectly, on	a personal benefit contract?		1	6b	<u>X</u> _
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited ta	x shelter transaction?	Ye	es 🗶 No		
b If "Yes," did the foundation receive any proceeds or have any net income attr			<u> </u>	7b	
Part VIII Information About Officers, Directors, True Paid Employees, and Contractors	stees, Foundation Ma	anagers, Highly	y		
List all officers, directors, trustees, foundation managers and the	eir compensation				
The state of the s		(c) Compensation	(d) Contributions to	(e)	Expense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	acci	Expense ount, other owances
JOHN J. HAKE	to position SECRETARY, TF	enter-0-)	DIR	an	OWAIICGS
41 COUNTRY CLUB VIEW	BECKETARI, II	CASURER &	DIK		
EDWARDSVILLE, IL 62025	0.50	0.	0.		0.
ROBIN G. HAKE	PRESIDENT & I			1	
41 COUNTRY CLUB VIEW		INDCION			
EDWARDSVILLE, IL 62025	5.00	0.	l o.		0.
MARK Z. SCHRAIER	DIRECTOR			1	
7700 FORSYTH BLVD., SUITE 1100					
ST. LOUIS, MO 63105	0.50	0.	l 0.		0.
<u> </u>					
				<u> </u>	
2 Compensation of five highest-paid employees (other than those		enter "NONE."	(d) Contributions to	<del>                                     </del>	\ <b>.</b>
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	acc	Expense ount, other lowances
NONE					
				<del> </del>	<del></del>
	$\dashv$				
		<del> </del>		+	
	-				
		<del>                                     </del>		<del> </del>	
Total number of other employees paid over \$50,000			<b>•</b>		0

	Form <b>990-PF</b> (201
Total, Add lines 1 through 3	<b>&gt;</b> 0
<u> </u>	
All other program-related investments. See instructions.  3	
All all and a second a second and a second a	
2	
1 <u>N/A</u>	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
Part IX-B Summary of Program-Related Investments	
4	
3	
2	
1 <u>N/A</u>	
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Lypenses
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the	Expenses
Part IX-A Summary of Direct Charitable Activities	
Total number of others receiving over \$50,000 for professional services	•
NONE	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensatio
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)	
Form 990-PF (2013) JACK & ROBIN HAKE FOUNDATION 2	<u>7-1417162 Page</u>

	m 990-PF (2013) JACK & ROBIN HAKE FOUNDATION	<u>27</u>	<u>-1417162</u>	Page 8
P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	s, see instructions.)	-
<del>_</del>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
a	Average monthly fair market value of securities	1a	10,015, 549,	970.
b	Average of monthly cash balances	1b	549,	031.
C	Fair market value of all other assets	1c		
đ	Total (add lines 1a, b, and c)	1d	10,565,	001.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation) 1e 0 •			
2	Acquisition indebtedness applicable to line 1 assets	2		0.
3	Subtract line 2 from line 1d	3	10,565,	001.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	158	475.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	10,406,	526.
6	Minimum investment return. Enter 5% of line 5	6	520	326.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certain		
_	foreign organizations check here 🕨 🔙 and do not complete this part.)			
1	Minimum investment return from Part X, line 6	1	520,	326.
2a	Tax on investment income for 2013 from Part VI, line 5			
b	Income tax for 2013. (This does not include the tax from Part VI.)			
C	Add lines 2a and 2b	2c	9.	409.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	510	917.
4	Recoveries of amounts treated as qualifying distributions	4		0.
5	Add lines 3 and 4	5	510	917.
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	510	917.
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	500	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	Surtability test (prior IRS approval required)	3a		
b	Cash distribution test (attach the required schedule)	3b		
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	500	,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment			
	income. Enter 1% of Part t, line 27b	5	9	<u>,409.</u>
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	490	,591.
	Note. The amount on line 6 will be used in Part V. column (b) in subsequent years when calculating whether the foundation of	malifies f		

Form **990-PF** (2013)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

<del></del>				
	(a) Corpus	(b) Years prior to 2012	(c) 2012	( <b>d)</b> 2013
Distributable amount for 2013 from Part XI,	Обірав	10d/3 p/10/10 20 12	2012	2010
line 7				510,917.
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2013:	·			
a From 2008				
<b>b</b> From 2009				
c From 2010				
d From 2011 184,712.				
e From 2012		Ì		
f Total of lines 3a through e	184,712.			
4 Qualifying distributions for 2013 from				
Part XII, line 4: ► \$ 500,000.				
a Applied to 2012, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior		_		
years (Election required - see instructions)		0.		<del></del>
c Treated as distributions out of corpus				
(Election required - see instructions)	0.	-		
d Applied to 2013 distributable amount				500,000.
e Remaining amount distributed out of corpus	0.			40.045
5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a))	10,917.			10,917.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	173,795.			
<b>b</b> Prior years' undistributed income. Subtract	1737733.			
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	1			
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	0.			
9 Excess distributions carryover to 2014.	172 705			
Subtract lines 7 and 8 from line 6a	<u>173,795.</u>			
10 Analysis of line 9:				
a Excess from 2009 b Excess from 2010				
c Excess from 2011 173,795.				
d Excess from 2012				
e Excess from 2013				
Q EXCOSO ITOM EQ TO				- 000 DE (00.48)

Form 990-PF (2013)		ROBIN HAKE	FOUNDATION		27-1	1417162 Page 10
Part XIV Priv	vate Operating F	oundations (see in	structions and Part VII	-A, question 9)	N/A	
1 a If the foundatio	n has received a ruling o	r determination letter that	t it is a private operating			
foundation, and	the ruling is effective fo	r 2013, enter the date of t	the ruling	. ▶		
b Check box to in	idicate whether the found	lation is a private operatir	ng foundation described i	n section .	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser	of the adjusted net	Tax year		Prior 3 years		
income from Pa	art I or the minimum	(a) 2013	<b>(b)</b> 2012	(c) 2011	(d) 2010	(e) Total
investment retu	rn from Part X for					
each year listed	l					
<b>b</b> 85% of line 2a	-					
c Qualifying distri	ibutions from Part XII,					
line 4 for each y	vear listed .				_	
d Amounts includ	led in line 2c not					
used directly fo exempt activitie	r active conduct of					
•	butions made directly					<del> </del>
	act of exempt activities.					
Subtract line 2d	from line 2c					
3 Complete 3a, b, alternative test i	or c for the					
a "Assets" alternat	tive test - enter:					
(2) Value of as	sets qualifying on 4942(j)(3)(B)(i)					
	ternative test - enter					
	i investment return I, line 6 for each year					
c "Support" altern	ative test - enter:					
	ort other than gross					
investment	income (interest,			-		
•	rents, payments on					
	oans (section or royalties)					
	om general public					
and 5 or m	ore exempt					
section 494	ns as provided in I2(i)(3)(B)(iii)					
(3) Largest am	ount of support from					
an exempt	organization					
(4) Gross inves						
			te this part only	f the foundation	n had \$5,000 or	more in assets
at a	ny time during t	he year-see instr	uctions.)			
1 Information F	Regarding Foundation	n Managers:				
			than 2% of the total contr	ibutions received by th	ne foundation before the	close of any tax
		ore than \$5,000). (See so	ection 507(d)(2).)			
SEE STATEM					· · · · · · · · · · · · · · · · · · ·	_
		o own 10% or more of the a 10% or greater interes	e stock of a corporation ( it.	or an equally large por	tion of the ownership of	a partnership or
NONE						
2 Information P	Regarding Contribution	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
Check here	X if the foundation of	nly makes contributions t	o preselected charitable o	organizations and does	s not accept unsolicited re	equests for funds. If
the foundation r	makes gifts, grants, etc. (	see instructions) to indiv	iduals or organizations u	nder other conditions,	complete items 2a, b, c,	and d.
a The name, addr	ess, and telephone numb	per or e-mail address of t	he person to whom appli	cations should be addi	essed:	
<b>b</b> The form in whi	ch applications should b	e submitted and informat	ion and materials they sh	ould include:		
c Any submission				·		
d Any restrictions	or limitations on awards	s, such as by geographica	ıl areas, charitable fields,	kinds of institutions, o	r other factors:	

Page 11

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation Purpose of grant or **Amount** any foundation manager or substantial contributor status of contribution Name and address (home or business) recipient a Paid during the year JUNIOR SERVICE CLUB OF EDWARDSVILLE NONE PUBLIC CHARITY PLAYGROUND P.O. BOX 414 EDWARDSVILLE, IL 62025 30,000. SAINT BONIFACE CATHOLIC CHURCH NONE PUBLIC CHARITY PLAYGROUND AND ANGEL 110 N. BUCHANAN ST., PO BOX 423 FUND EDWARDSVILLE IL 62025 20,000. ARMS OF LOVE NONE PUBLIC CHARITY EQUIPMENT FOR CLINIC 4854 N ALBY ST. GODFREY, IL 62035 15,000. FATHER MCGIVNEY HIGH SCHOOL NONE PUBLIC CHARITY TUITION FOR LOW INCOME 142 WILMA DRIVE KIDS; BABY FUND MARYVILLE, IL 62062 90 000. HELMETS FIRST NONE PUBLIC CHARITY BICYCLE HELMETS FOR 107 N. MAIN ST. #2B UNDERPRIVILEGED COLUMBIA IL 62236 CHILDREN 5 000. SEE CONTINUATION SHEET(S) Total ▶ 3a 500,000. **b** Approved for future payment NONE Total

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

Enter aro	ss amounts unless otherwise indicated.	Unrelat	ed business income	Exclu	rded by section 512, 513, or 514	(e)
	am service revenue:	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
		code		0000	701104111	10110001110
		-		<del> </del>		
				<del> </del>		
, _		<del></del>		<del> </del>		<del></del>
<u> </u>		-		<del>                                     </del>		
f _	<del> </del>		·····	1		
• —	es and contracts from government agencies			i -		
	ership dues and assessments	<b></b>		1		
	et strip dues and assessments at on savings and temporary cash		<del> </del>			
investi						
	nds and interest from securities			14	199,266.	
	ntal income or (loss) from real estate:			1 3	199,200.	
	ot-financed property					
	t debt-financed property			<del>                                     </del>		
	ntal income or (loss) from personal			<b>-</b>		
proper						
	nvestment income			14		
	r (loss) from sales of assets other	-		1.4		· · · · · · · · · · · · · · · · · · ·
	ventory			18	750,925.	
	come or (loss) from special events			10	130,923.	
	profit or (loss) from sales of inventory					
11 Other i						
. —				<del>                                     </del>		<u> </u>
						<del></del>
				<u> </u>		<u>-</u>
•						
12 Subtot	al. Add columns (b), (d), and (e)		0.		950,191.	0.
	Add line 12, columns (b), (d), and (e)				13	
	sheet in line 13 instructions to verify calculations.)				· " <u>-</u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Part X		a tha Assa	ampliahment of Ev		t Dumosoo	
Part	VI-B Relationship of Activities to	o the Acci	omplishment of Ex	emp	t Purposes	
Line No.	Explain below how each activity for which incor the foundation's exempt purposes (other than I			contrib	outed importantly to the accom	olishment of
	N/A	by providing it	ilus ioi sucii purposes j.			
01	W/A					
	+		· · · · · · · · · · · · · · · · · · ·			
		<u> </u>		-		<del></del>
						<del></del>
					····	<del> </del>
	<del> </del>				· ···· · · · · · · · · · · · · · · · ·	
	<del></del>				·	
	1				<del></del>	<del></del>
_						

Parl	Information Regarding Transfers To a Exempt Organizations	and Transactions a	and Relationships With Nonch	naritable	<u> 10 10 </u>
1 D	id the organization directly or indirectly engage in any of the following	o with any other organization	on described in section 501(c) of	Yes	No
	e Code (other than section 501(c)(3) organizations) or in section 52				
	ransfers from the reporting foundation to a noncharitable exempt or				
(	) Cash	-		1a(1)	X
(2	Other assets			1a(2)	X
b Ò	ther transactions:	·			
(1	) Sales of assets to a noncharitable exempt organization			1b(1)	X
(2	Purchases of assets from a noncharitable exempt organization			1b(2)	X
(3	Rental of facilities, equipment, or other assets			1b(3)	X
(4	) Reimbursement arrangements			1b(4)	X
(5	) Loans or loan guarantees			1b(5)	X
(6	) Performance of services or membership or fundraising solicitation	ons		1b(6)	X
c S	haring of facilities, equipment, mailing lists, other assets, or paid em	ployees		1c	X
d If	the answer to any of the above is "Yes," complete the following sche	edule. Column (b) should alv	vays show the fair market value of the good	s, other assets,	
OI	services given by the reporting foundation. If the foundation receive	ed less than fair market valu	e in any transaction or sharing arrangemen	t, show In	
CC	olumn (d) the value of the goods, other assets, or services received.			. <u></u>	
a) Line	no (b) Amount involved (c) Name of noncharitable	e exempt organization	(d) Description of transfers, transactions, a	nd sharing arrangemen	nts
	N/A				
				<del></del>	
		<del></del>			
				<del></del> _	
			<u> </u>		
		<del> </del>	<del> </del>		
		· · · · · · · · · · · · · · · · · · ·			
				<u> </u>	
Da Ic	the foundation directly or indirectly affiliated with, or related to, one	or more tay-evernt organi	zatione described		
	section 501(c) of the Code (other than section 501(c)(3)) or in section	• •	Zations described	Yes X	] No
	Yes, complete the following schedule.	11011 J27 :			, 140
<u></u>	(a) Name of organization	(b) Type of organization	(c) Description of relatio	nship	
	N/A	(-, ,,		<u> </u>	
	Under penalties of perjury, I declare that I have examined this return, including		and a second a second and a second a second and a second	May the IRS discuss t	his
Sign	and belief, it is true, correct, and complete Declaration of preparer (other tha	n taxpayer) is based on all inform		return with the prepare shown below (see inst	
Here	1 12 112 19 1	10/22/14	PRESIDENT	X Yes	No
	Signature of officer or trustee	Date	Title		
	Print/Type preparer's name Preparer's 8	gnature	Date Check I If PTI	N	
D-: '			self- employed		
Paid	THOS C. TROBER	~_//		00045329	
-	Parer Firm's name ► UHY ADVISORS MO, I	inc.	Firm's EIN ► 43-	1305800	
use	Only		<del> </del>		
	Firm's address ► 15 SUNNEN DR, SUI	TE 100			

Phone no. 314-615-1200 Form **990-PF** (2013)

ST. LOUIS, MO 63143

#### 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 **Employer identification number** JACK & ROBIN HAKE FOUNDATION 27-1417162 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 X 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

Employer identification number

JACK	æ	ROBIN	HAKE	FOUNDATION

JACK_	& KORIN HAKE LOUNDALION		-141/162
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JACK AND ROBIN HAKE  41 COUNTRY CLUB VIEW  EDWARDSVILLE, IL 62025	\$9,972.	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
2	JACK AND ROBIN HAKE  41 COUNTRY CLUB VIEW  EDWARDSVILLE, IL 62025	\$590,028.	Person Payroli Noncash X (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.)
(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 Complete Part II for noncash contributions.)

Employer identification number

# JACK & ROBIN HAKE FOUNDATION

27-1417162

Part li	Noncash Property (see instructions). Use duplicate copies of Part II if	f additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	VARIOUS PUBLICLY TRADED STOCKS - SEE ATTACHED SCHEDULE	-	
		\$ 590,028.	12/10/13
(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

### Jack & Robin Hake Foundation

SCHEDULZ B

Purchase			Unit			Market	Unrealized	%
Date	Quantity	Security	Cost	Total Cost	Price	Value	Gain/Loss	G/L
			-					
						•		
Blackrock	Small Cap Grov	wth Equity (psgix)						
09/25/09	0.002		18.35	0.04	32.46	0.06	0.03	76.99
12/30/09	12,689.340		19.70	250,000.00	32.46	411,895.98	161,895.98	64.89
03/31/10	3,468.085		21.63	75,000.00	32.46	112,574.04	37,574.04	50.19
12/06/11	719.644		22.84	16,435.08	32.46	23,359.64	6,924.56	42.19
12/06/12	52.007		22.75	1,183.17	32.46	1,688.15	504.98	42.79
12/06/12	374.618		22.75	8,522.56	32.46	12,160.10	3,637.54	42.7%
12/06/12	873.387		22.75	19,869.56	32.46	28,350.14	8,480.58	42.7%
-	18.177.083			371.010.41		590,028,11	219,017,71	51.79

Name of org	ganization		Employer identification number					
TA'CTE	C DODING WAVE POUNDAMION		27 1417162					
Part III	EXClusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if addition	vidual contributions to section 501(c) ne following line entry. For organization c., contributions of \$1,000 or less for	27-1417162 (7), (8), or (10) organizations that total more than \$1,000 for the ns completing Part III, enter the year. (Enter this information once)  \$					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
rati								
		(e) Transfer of gift						
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee					
(a) Na								
(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, ar	nd ZIP + 4	Relationship of transferor to transferee					
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
_		(e) Transfer of gift						
_	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee					
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Part I								
-	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					

. 27-1417162

	JACK	&	ROBIN	HAKE	FOUNDATION
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Recopent Share and address (home or business) of substantial contribution contribution of substantial contribution contribution of substantial contribution contr	Part XV Supplementary Information				T
SAINTS PETER AND FAIL CATROLIC CHURCH NONE PUBLIC CHARITY SCHOOL IN HAITI CONTINUENT OF SAUSMANNIA CONTINUENT SCHOOL IN HAITI			<del></del>		
SAINTS PETER AND FAUL CATHOLIC CHURCH NONE PUBLIC CHARITY SCHOOL IN HAITI  207 VANDALIA ST. CCLLINSVILLE, IL 62234  AMERICAN HEART ASSOCIATION 7272 GREENVILLE AVENUE BALLAS, TX 75231  ANTIONAL KIDNEY FOUNDATION 10 EASY 3330 ST. NEW YORK, NY 10016  REBUILDING TOGETHER - ST. LOUIS 157 MARSHALL AVE. WEBSTER GROVES, MO 63119  COVENANT RADIO 4424 HAMPION AVENUE ST. LOUIS, MO 63109  SOCIETY OF SAINT VINCENT DE FAUL S FROCARSE FARRMAY MANYLAND HEIGHTE, MO 63043  CATHOLIC ANSWERS 2020 CILLESPIE NAY BL CAJON, CA 92020  DYNAMIC CATHOLIC 2330 KENER LANE CINCINNATI, OR 45206  10 .000  DYNAMIC CATHOLIC 2330 KENERE LANE CINCINNATI, OR 45206  10 .000  DYNAMIC CATHOLIC 2330 KENERE LANE CINCINNATI, OR 45206  10 .000		show any relationship to	status of	Purpose of grant or contribution	Amount
AMERICAN HEART ASSOCIATION  TO 72 TO GREENVILLE AVERUE  PUBLIC CHARITY  REART RESEARCH  25,000  NATIONAL KIDNEY FOUNDATION  NONE  NATIONAL KIDNEY FOUNDATION  NONE  PUBLIC CHARITY  RESEARCH  25,000  REBUILDING TOGETHER - ST. LOUIS  NONE  PUBLIC CHARITY  CANCER CENTER FOR  CHILDREN  25,000  COVENANT RADIO  NONE  PUBLIC CHARITY  CANCER CENTER FOR  CHILDREN  25,000  COVENANT RADIO  NONE  PUBLIC CHARITY  SPREAD CATHOLIC  MESSAGE  100,000  SOCCIETY OF SAINT VINCENT DE PAUL  SO PROGRESS PARKWAY  MANYLAND REIGHTS MO 63043  CATHOLIC ANSWERS  2020 GILLESPIE WAY  LE CAJON, CA 12020  DYNAMIC CATHOLIC  NONE  PUBLIC CHARITY  CATHOLIC EDUCATION  20,000  20,000  DYNAMIC CATHOLIC  NONE  PUBLIC CHARITY  CATHOLIC EDUCATION  10,000  10,000	SAINTS PETER AND PAUL CATHOLIC CHURCH	or substantial contributor		SCHOOL IN HAITI	
30 EAST 33RD ST.  NEW YORK, NY 10016  REBUILDING TOGETHER - ST. LOUIS  NONE  PUBLIC CHARITY CANCER CENTER FOR CHILDREN  25,000  COVENANT RADIO  4424 HAMPTON AVENUE  ST. LOUIS, MO 63119  SOCIETY OF SAINT VINCENT DE PAUL SO FORGESS PARKWAY MARYLAND HEIGHTS, MO 63043  CATHOLIC ANSWERS  NONE  PUBLIC CHARITY SUPPORT COLLEGE STUDENT  35,000  CATHOLIC ANSWERS NONE  PUBLIC CHARITY CATHOLIC EDUCATION  20,000  PUBLIC CHARITY CATHOLIC EDUCATION  213,000	AMERICAN HEART ASSOCIATION	NONE	PUBLIC CHARITY	HEART RESEARCH	100,000. 25,000.
357 MARSHALL AVE. WEBSTER GROVES, MO 63119  COVENANT RADIO 4424 HAMPTON AVENUE ST. LOUIS, MO 63109  SOCIETY OF SAINT VINCENT DE PAUL SF PROGRESS PARKWAY MARYLAND HEIGHTS, MO 63043  CATHOLIC ANSWERS 2020 GILLEPIE WAY EL CAJON, CA 92020  DYNAMIC CATHOLIC 2330 KEMPER LAME CINCINNATI, OH 45206  CHILDREN  25,000  PUBLIC CHARITY SPREAD CATHOLIC EDUCATION  25,000  AUGUST CHARITY CATHOLIC EDUCATION  20,000  10,000	NATIONAL KIDNEY FOUNDATION 30 EAST 33RD ST. NEW YORK, NY 10016	NONE	PUBLIC CHARITY	RESEARCH	25,000.
4424 HAMPTON AVENUE  ST, LOUIS, MO 63109  SOCIETY OF SAINT VINCENT DE PAUL  NONE  PUBLIC CHARITY SUPPORT COLLEGE STUDENT  35,000  CATHOLIC ANSWERS  ANONE  PUBLIC CHARITY CATHOLIC EDUCATION  DYNAMIC CATHOLIC  2330 KEMPER LANE  CINCINNATI, OH 45206  MESSAGE  100,000  PUBLIC CHARITY CATHOLIC EDUCATION  10,000	REBUILDING TOGETHER - ST. LOUIS 357 MARSHALL AVE. WEBSTER GROVES, MO 63119	NONE	PUBLIC CHARITY		25,000.
58 PROGRESS PARKWAY  MARYLAND HEIGHTS, MO 63043  CATHOLIC ANSWERS 2020 GILLESPIE WAY EL CAJON, CA 92020  DYNAMIC CATHOLIC 2330 KEMPER LANE CINCINNATI, OH 45206  STUDENT  35,000  AUTHOLIC EDUCATION  PUBLIC CHARITY CATHOLIC EDUCATION  10,000	COVENANT RADIO 4424 HAMPTON AVENUE ST. LOUIS, MO 63109	NONE	PUBLIC CHARITY		100,000.
2020 GILLESPIE WAY EL CAJON, CA 92020  DYNAMIC CATHOLIC 2330 KEMPER LANE CINCINNATI, OH 45206  20,000	SOCIETY OF SAINT VINCENT DE PAUL 58 PROGRESS PARKWAY MARYLAND HEIGHTS, MO 63043	NONE	PUBLIC CHARITY	†	35,000.
2330 KEMPER LANE CINCINNATI, OH 45206  10,000	CATHOLIC ANSWERS 2020 GILLESPIE WAY EL CAJON, CA 92020	NONE	PUBLIC CHARITY	CATHOLIC EDUCATION	20,000.
	DYNAMIC CATHOLIC 2330 KEMPER LANE CINCINNATI, OH 45206	NONE	PUBLIC CHARITY	CATHOLIC EDUCATION	10,000,
Total from continuation sheets 340,000	CINCINNATI, UH 452U6				10,000,
	Total from continuation sheets				340 000

FORM 990-PF	DIVIDENDS	AND INTER	EST FROM SECUE	RITIES ST	PATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
BROOKFIELD PROPERTY PARTNERS LP	29.		0. 29.	29.	
CHARLES SCHWAB	254,179.	63,81	6. 190,363.	190,363.	
CHARLES SCHWAB 8543	8,729.		0. 8,729.	8,729.	
ENTERPRISE BANK & TRUST	145.		0. 145.	145.	
TO PART I, LINE 4	263,082.	63,81	6. 199,266.	199,266.	
FORM 990-PF		LEGAL	FEES	ST	'ATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL		174.	0.		0.
TO FM 990-PF, PG 1, I	LN 16A	174.	0.		0.
FORM 990-PF		ACCOUNTI	NG FEES	SI	'ATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING		7,902.	0.		0.
TO FORM 990-PF, PG 1,	 . LN 16B	7,902.	0.		0.

FORM 990-PF	THER PROFES	SIONAL FEES	S'	ratement 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
INVESTMENT FEES	7,025.	7,025.		0.
TO FORM 990-PF, PG 1, LN 16C	7,025.	7,025.		0.
FORM 990-PF	TAX	ES	S'	ratement 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OTHER TAXES FOREIGN TAXES	16,000. 2,233.			0.
TO FORM 990-PF, PG 1, LN 18	18,233.	2,233.		0.
FORM 990-PF	OTHER E	XPENSES	S	ratement 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
HATTERAS CORE ALTERNATIVES TEI INST FD LP BROOKFIELD PROPERTY PARTNERS	2.	2.		0.
LP	5.	5.		0.
TO FORM 990-PF, PG 1, LN 23	7.	7.		0.

FORM 990-PF U.S. AND STATE/	CITY GOVE	RNMENT	OBLIGATIONS	STATEMENT	7
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET	Г
US GOVERNMENT INVESTMENTS STATE & MUNICIPAL OBLIGATIONS	x	x	702,581. 1,442,225.	776,59 1,434,37	
TOTAL U.S. GOVERNMENT OBLIGATIONS		-	702,581.	776,59	€1.
TOTAL STATE AND MUNICIPAL GOVERNMEN	NT OBLIGA	TIONS	1,442,225.	1,434,37	71.
TOTAL TO FORM 990-PF, PART II, LINE	E 10A	=	2,144,806.	2,210,96	52.
FORM 990-PF COR	RPORATE S	TOCK		STATEMENT	8
DESCRIPTION			BOOK VALUE	FAIR MARKET	C
MISCELLANEOUS INVESTMENTS		-	5,208,447.	7,019,30	<u> </u>
TOTAL TO FORM 990-PF, PART II, LINE	E 10B	=	5,208,447.	7,019,30	)1.
FORM 990-PF OTHE	ER INVEST	'MENTS		STATEMENT	9
DESCRIPTION	VALUA METH		BOOK VALUE	FAIR MARKET	r
MISCELLANEOUS INVESTMENTS	FMV	<del></del> -	1,100,000.	1,119,0	73.
TOTAL TO FORM 990-PF, PART II, LINE	E 13	=	1,100,000.	1,119,0	73.
FORM 990-PF PART 2	XV - LINE			STATEMENT	10

NAME OF MANAGER

JOHN J. HAKE ROBIN G. HAKE

# 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

• ir you	are iming for an Automatic 3-Month Extension, comple	ne only P	art I and check this box			لما
<ul><li>If you</li></ul>	are filing for an Additional (Not Automatic) 3-Month E	ctension,	complete only Part II (on page 2 of	this form)	•	
Do not	complete Part II unless you have already been granted	an autom	atic 3-month extension on a previous	sly filed Fo	orm 8868.	
Electro	nic filing (e-file). You can electronically file Form 8868 if	you need	a 3-month automatic extension of tin	ne to file (	6 months for a corp	poration
required	to file Form 990-T), or an additional (not automatic) 3-mo	onth exten	sion of time. You can electronically fi	ile Form 8	868 to request an e	extension
of time t	to file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for I	Transfers .	Associated With Ce	ertain
	l Benefit Contracts, which must be sent to the IRS in pa					
	w.irs.gov/efile and click on e-file for Charities & Nonprofit		·			
Part	Automatic 3-Month Extension of Time	e. Only	submit original (no copies ne	eded).		
A corpo	ration required to file Form 990-T and requesting an auto					
Part I on				•		• 🗆
	corporations (including 1120-C filers), partnerships, RENcome tax returns.			t an exter	sion of time	mher
Type or	Name of exempt organization or other filer, see instru	otions			e <b>r's identifying nu</b> r r identification num	
print	Teams of exempt organization of other mer, see motion	icuoris.		Li i pioye	i identification nam	Der (Elly) Of
•	JACK & ROBIN HAKE FOUNDATION	ON			27-14171	62
File by the due date fo filing your	Number, street, and room or suite no. If a P.O. box, s 2224 N 10TH ST	ee instruc	tions.	Social se	curity number (SSI	<b>V</b> )
return. See instructions	City, town or post office, state, and ZIP code. For a fe	oreign add	ress, see instructions.	_		
	ST. LOUIS, MO 63102				·	
_						
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4
Applicat	ion	Return	Application	•		Return
is For		Code	ls For			Code
Form 99	0 or Form 990-EZ	01	Form 990-T (corporation)			07
Form 99	D-BL	02	Form 1041-A	" -		08
Form 47	20 (individual)	03	Form 4720 (other than individual)		<u> </u>	09
Form 99	OPF	04	Form 5227			10
Form 99	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069		<u> </u>	11
Form 99	0-T (trust other than above)	06	Form 8870			12
	MRS. ROBIN G. 1	HAKE				
• The b	cooks are in the care of $\triangleright$ 2224 N 10TH ST	- ST	LOUIS, MO 63102			
Telep	hone No. ► 314-422-7437	_	Fax No.			
<ul><li>If the</li></ul>	organization does not have an office or place of business	s in the Un	ited States, check this box			▶ □
	is for a Group Return, enter the organization's four digit					check this
box 🕨	. If it is for part of the group, check this box	and atta	ch a list with the names and EINs of	all memb	ers the extension i	s for.
1 Ire	equest an automatic 3-month (6 months for a corporation	required t	to file Form 990-T) extension of time	until		
	AUGUST 15, 2014 , to file the exemp	t organiza	tion return for the organization name	d above.	The extension	
is	for the organization's return for:					
<b>&gt;</b>	X calendar year 2013 or					
	tax year beginning	, an	d ending		_·	
2 . If 1	he tax year entered in line 1 is for less than 12 months, o	heck reas	on: Initial return F	Final return	n	
	Change in accounting period					
3a if t	his application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069, o	enter the tentative tax, less any			
no	nrefundable credits. See instructions.			3a	s <u>1</u>	<u>5,546.</u>
b If	his application is for Forms 990-PF, 990-T, 4720, or 6069	, enter any	refundable credits and			. —
es	estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$ 13,046.					
c Ba	alance due. Subtract line 3b from line 3a. Include your pa	yment wit	h this form, if required,			
by	using EFTPS (Electronic Federal Tax Payment System).	See instru	ctions.	3c	\$	<u>2,500.</u>
Caution	, If you are going to make an electronic funds withdrawal	(direct de	bit) with this Form 8868, see Form 84	453-EO ar	nd Form 8879-EO f	or payment

instructions.

Form 8868 (Rev. 1-2014)					Page 2	
• If you are filing for an Additional (Not Automatic) 3-Mont	h Extension,	complete only Part II and check this	s box		<b>▶</b> X	
Note. Only complete Part II if you have already been granted	an automatic	3-month extension on a previously fi	led Form	8868.		
If you are filing for an Automatic 3-Month Extension, cor						
Part II Additional (Not Automatic) 3-Mont	h Extensio	<b>n of Time.</b> Only file the origin	al (no c	opies neede	ed)	
		Enter filer's	identifyi	ng number, se	e instructions	
Type or Name of exempt organization or other filer, see in	structions.		Employe	r identification i	number (EIN) or	
print						
This by the JACK & ROBIN HAKE FOUNDATION 27-1417162						
filing your Number, street, and room or suite no. If a P.O. box, see instructions.						
return See Instructions City town 27 201 21 201 201 201 201 201 201 201 201					<del></del>	
City, town or post office, state, and ZIP code. Fo ST. LOUIS, MO 63102	r a toreign add	ress, see instructions.				
<b>D1.</b> 10013, MO 03102						
Enter the Poture and for the return that this application is for	. <i>(</i> 5)	As a series that a series are the series and the series are the se			04	
Enter the Return code for the return that this application is fo	r (nie a separa	tte application for each return)			[0]4]	
Application	Return	Application	_		Return	
is For	Code	Is For			Code	
Form 990 or Form 990-EZ	01	10.0			Jour	
Form 990-BL	02	Form 1041-A			08	
Form 4720 (ındividual)	03	Form 4720 (other than individual)			09	
Form 990-PF	04	Form 5227			10	
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 990-T (trust other than above)	06	Form 8870			12	
STOP! Do not complete Part II if you were not already gra	nted an auton	natic 3-month extension on a previ	ously file	ed Form 8868.		
MRS. ROBIN G						
<ul> <li>The books are in the care of ► 2224 N 10TH</li> </ul>	ST - ST	. LOUIS, MO 63102				
Telephone No. ► 314-422-7437	_	Fax No			<u></u>	
<ul> <li>If the organization does not have an office or place of business.</li> </ul>						
If this is for a Group Return, enter the organization's four organization four organization for the four organization four organization four organization for the four organization four organization for the four organization four organization for the four organization						
box . If it is for part of the group, check this box			all memb	ers the extensi	on is for.	
4 I request an additional 3-month extension of time until		BER 17, 2014				
5 For calendar year 2013, or other tax year beginning		, and ending			<u></u>	
6 If the tax year entered in line 5 is for less than 12 month	ns, check reas	on: L Initial return L_	Final r	etum		
Change in accounting period						
7 State in detail why you need the extension AN ATTEMPT TO OBTAIN INFORM	A MIT ONT INT	ECECCADY FOR ETITM	7 7 7	EGITON M	N. C.	
REQUESTED IN A TIMELY FASHIO						
SUFFICIENT TIME TO PERMIT T					SUED IN	
8a If this application is for Forms 990-BL, 990-PF, 990-T, 4			310114	· -		
nonrefundable credits. See instructions.	720, 01 0000,	enter the terrative tax, less arry	8a	\$	15,546.	
b If this application is for Forms 990-PF, 990-T, 4720, or 6	6069, enter an	v refundable credits and estimated			13/3101	
tax payments made. Include any prior year overpaymen		•				
previously with Form 8868.			8b	\$	15,546.	
C Balance due. Subtract line 8b from line 8a. Include you	r payment wit	h this form, if required, by using				
EFTPS (Electronic Federal Tax Payment System). See in			8c	\$	0.	
		st be completed for Part II o				
Under penalties of perjury, I declare that I have examined this form, in it is true, correct, and complete, and that I am authorized to prepare the	icluding accomp	anying schedules and statements, and to	the best o	f my knowledge	and belief,	
Signature Title	► PRESII	DENT	Date	<b>•</b>		

Form **8868** (Rev. 1-2014)