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# Form **990-PF**Department of the Treasury

### 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 www.irs.gov/form990pf.

OMB No. 1545-0052

2013

Open to Public Inspection

For calendar year 2013 or tax year beginning and ending Name of foundation A Employer identification number JOY FOUNDATION C/O LEAH JOY ZELL 36-4410533 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 209 E. LAKE SHORE DRIVE, #12E 847-413-6577 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here · CHICAGO, IL 60611 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check here and attach computation Name change Address change H Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here X Cash I Fair market value of all assets at end of year | J | Accounting method: Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 5,909,940. (Part I, column (d) must be on cash basis) ▶\$ Analysis of Revenue and Expenses Part I (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) charitable purposes (cash basis only) expenses per books income income 0 N/A Contributions, gifts, grants, etc., received Check X If the foundation is not required to attach Sch. B 2 Interest on savings and temporary cash investments 44,655. 44,646. STATEMENT 3 4 Dividends and interest from securities 62,444. 62,444. STATEMENT 5a Gross rents b Net rental income or (loss) 296,484 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 309,304. 296,484 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 23,468. 23,468 11 Other income STATEMENT 12 Total. Add lines 1 through 11 427,051 427,042. 0 0 0. 13 Compensation of officers, directors, trustees etc 14 Other employee salaries and wages ~ ठु Pension plans, employee benefits AllG 1 2014 16a Legal fees κ'n 4,482. STMT 4 8,964. 0. **b** Accounting fees OGĐĔ c Other professional fees 6,628. 6,628. 0. 17 Interest STMT 5 12,552. 5,037. 18 Taxes 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 6 27,825. 27,824. 0. 24 Total operating and administrative 43,971 expenses Add lines 13 through 23 55,969 0. 251,000 <u>251,000.</u> Contributions, gifts, grants paid 26 Total expenses and disbursements 306,969. 43,971 251,000. Add lines 24 and 25 27 Subtract line 26 from line 12: 120,082 8 Excess of revenue over expenses and disbursements 383,071. b Net investment income (if negative enter -0-) N/A C Adjusted net income (if negative enter -0-)

JOY FOUNDATION Form 990-PF (2013) C/O LEAH JOY ZELL

_		00-PF (2013) C/O LEAH JOY ZELL	<del></del>		4410533 Page 2
Р	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	<del></del>
_	μ,		(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	1	Savings and temporary cash investments	824,036.	600,270.	600,270.
	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			
ets	8	inventories for sale or use			
ssets	1	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 8	62,895.	77,367.	77,367.
	C	Investments - corporate bonds			
	11	Investments land, buildings, and equipment basis			
		Less accumulated depreciation			····
	12	Investments - mortgage loans			
	13	Investments - other STMT 9	4,374,350.	5,232,303.	5,232,303.
	14	Land, buildings, and equipment basis ▶	ŀ		
		Less accumulated depreciation		-	
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers - see the			
_	<u> </u>	instructions. Also, see page 1, item 1)	5,261,281.	5,909,940.	<u>5,909,940.</u>
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
abilitie	20	Loans from officers directors, trustees and other disqualified persons			
ab.	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			
Ŋ		and complete lines 24 through 26 and lines 30 and 31.			
ည	24	Unrestricted			
or Fund Balances	25	Temporarily restricted			
d B	26	Permanently restricted			
Ë		Foundations that do not follow SFAS 117, check here			
ě		and complete lines 27 through 31	6 422 466	6 400 466	
	27	Capital stock, trust principal, or current funds	6,423,466.	6,423,466.	
Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
¥.	29	Retained earnings, accumulated income, endowment, or other funds	-1,162,185.	-513,526.	
Net	30	Total net assets or fund balances	5,261,281.	5,909,940.	
		*	F 261 201	F 000 040	
_	[31	Total liabilities and net assets/fund balances	5,261,281.	5,909,940.	
F	art	Analysis of Changes in Net Assets or Fund Ba	alances		
_	Tota	I not posses or fund halanges at heavening of year. Part II column (a) line	20		
'		I net assets or fund balances at beginning of year - Part II, column (a), line : st agree with end-of-year figure reported on prior year's return)	30		E 261 201
2		r amount from Part I, line 27a		1	5,261,281.
		er increases not included in line 2 (itemize)	מים מישא	TEMENT 7	120,082.
3		lines 1, 2, and 3	SEE STA		528,577.
4		eases not included in line 2 (itemize)		4	5,909,940.
5 6		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	dump (h) lipo 20	5	5 909 940
<u>6</u>	ruid	ring assets of futio valatices at end of year (little 4 fillings little 5) - Part II, Co	numin (D), line SU	6	5,909,940. Form <b>990-PF</b> (2013)
					rum <b>330-rr</b> (2013)

_										0-441	0533	raye 3
Р	Part IV Capital Gains	and Lo	sses for Tax on In	vestment	Income	,						
						( <b>b)</b>     D	low ac - Purcl - Dona	quired hase ation	(c) Date a (mo., d		( <b>d)</b> Dat (mo., da	
1a	K-1 - LIZARD I	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLCCo.)  — LIZARD INTERNATIONAL FUND LLC  — AG SUPER FUND, L.P. — AG SUPER FUND, L.P.  TAL GAINS DIVIDENDS  oss sales price  (f) Depreciation allowed (or allowable)  (g) Cost or other basis plus expense of sale  (g) Cost or other basis plus expense of sale  12,820.  243,745.  19,618.  13,670.  32,271.  ronly for assets showing gain in column (h) and owned by the foundation on 12/31/69  W. as of 12/31/69  (g) Adjusted basis as of 12/31/69  (g) Adjusted basis as of 12/31/69  (g) Excess of col. (i) over col. (j), if any  term capital gain or (loss) as defined in sections 1222(5) and (6). or enter in Part I, line 7 if (loss), enter -0- in Part I, line 8. column (c) inter-0- in Part I, line 8.  Qualification Under Section 4940(e) for Reduced Tax on Net Investment I use by domestic private foundations subject to the section 4940(a) tax on net investment income )  O(d)(2) applies, leave this part blank dation hable for the section 4940(e). Do not complete this part.  appropriate amount in each column for each year; see the instructions before making any entries.  (a) Base period years are foundation of a day year in the base period?  2012 99,260. 4,970,44  2011 674,159. 5,249,8  2010 440,974. 4,755,3  2009 440,974. 4,755,3  2009 440,974. 4,755,3  2008 1997 Col. 7,175,3			P	VARI	ous	12/3	1/13			
									VARI		12/3	
С	K-1 - AG SUPER	FUNI	D, L.P.					P	VARI	OUS	12/3	1/13
								P	VARI	OUS	12/3	1/13
											·	
	(e) Gross sales price		Depreciation allowed							ain or (loss s (f) minus		
a					12,82	0.					-12	,820.
b					•							,745.
С												,618.
d												,670.
е												,271.
		ng gain in i	column (h) and owned by t	he foundation	on 12/31/69			(1)	Gains (C	ol. (h) gain		,
	(i) F.M.V. as of 12/31/69	(							(k), but r	not less that (from col. (	n -0-) <b>or</b>	
а											-12	,820.
b												,745.
С												,618.
d												,670.
е												,271.
		ioital loss)	If gain, also enter	in Part I, line	7	}	2					,484.
	Net short-term capital gain or (los	ss) as defi	ned in sections 1222(5) and		,		_					, 1011
		column (d	c)			•				BT / B		
_		nder S	action 4940(a) for	Reduced	Tay on Net	Inv	3 octm	ont Inc	ome	N/A		
	l							ient inc	OIIIE			
(FC	or optional use by domestic private	e roundatio	ons subject to the section 4	940(a) tax on	net investment in	come	: )					
lf s	ection 4940(d)(2) applies, leave the	his part bla	ank									
		4040				- 10						X No
						100 /					Yes	LA IVO
						ntrine						<del> </del>
-		each colui		Structions be	iore making any e		•				(4)	<del></del>
	Base periód years			ributions	Net value of no		ıtable-	uca accate		Distrib	(d) oution ratio	(-\\\
		ng in)			Net value of fio					(cor (b) aiv	ided by col	
	· · · · · · · · · · · · · · · · · · ·											19970
	··· <del>·</del>											28416
												80058
						4	, /5	5,388	•			92731
	2008	1	49	3,500.		-7	,17	<u>5,312</u>	•		.0	<u> 68777</u>
	Total of line 1, column (d)								2		. 3	<u>89952</u>
3	*	-	•	on line 2 by 5,	or by the number	of ye	ars		3		.0	77990
4	Enter the net value of noncharitat	ole-use as:	sets for 2013 from Part X, I	ıne 5					4		5,512	,010.
5	Multiply line 4 by line 3								5		429	,882.
6	Enter 1% of net investment incom	ne (1% of	Part I line 27b)						6			,831.
		( 170 01	· a.t is mile Et of									
	Add lines 5 and 6								7			,713.
8	. , •			1h and come	alete that nart usin	ი a 1º	% tav :	rate	8		251	,000.
	See the Part VI instructions	Sas sales price  (f) Depreciation allowed (or allowable)  (g) Cost or other basis plus expense of sale  12,820.  243,745.  19,618.  13,670.  32,271.  Sonly for assets showing gain in column (h) and owned by the foundation on 12/31/69  (i) Adjusted basis as of 12/31/69  (ii) Adjusted basis (ii) Excess of col. (i) over col. (i), if any  net income or (net capital loss)  (ii) Adjusted basis (ii) Excess of col. (ii) over col. (ii), if any  net income or (net capital loss)  (iii) Gain, also enter in Part I, line 7  If (loss), enter -0- in Part I, line 7  If (loss), enter in Pa		310								

JOY FOUNDATION C/O LEAH JOY ZELL Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here | and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% 7,661. 1 of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-Credits/Payments: a 2013 estimated tax payments and 2012 overpayment credited to 2013 6,381. b Exempt foreign organizations - tax withheld at source 6b 10,000 c Tax paid with application for extension of time to file (Form 8868) 6с d Backup withholding erroneously withheld 6d 16,381. 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here \_\_\_\_\_ if Form 2220 is attached 8 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 8,720. 10 Enter the amount of line 10 to be. Credited to 2014 estimated tax 11 Part VII-A | Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? X 1a b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b Х If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? Х 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year-0 . (2) On foundation managers ▶ \$ (1) On the foundation. ► \$ e 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? Х 2 If "Yes," attach a detailed description of the activities 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes Х 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a Х b If "Yes," has it filed a tax return on Form 990-T for this year? N/A 4b X 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 If "Yes," attach the statement required by General Instruction T 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either. By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 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 Х 7

> 10 X Form **990-PF** (2013)

8b

X

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

of each state as required by General Instruction G? If "No." attach explanation

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

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

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

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

36-4410	533
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Page 5

Part VII-A   Statements Regarding Activities (continued)	,,,,,		ugo c
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
If "Yes," attach statement (see instructions)	12		Х
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
Website address ► N/A			-
14 The books are in care of ► LEAH JOY ZELL Telephone no. ► 847-47	13-6	577	
Located at ► 209 E. EAKE SHORE DRIVE, #12E, CHICAGO, IL ZIP+4 ►60			
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	
and enter the amount of tax-exempt interest received or accrued during the year	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,		Yes	No
securities, or other financial account in a foreign country?	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			
country			
Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Required		,	
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a During the year did the foundation (either directly or indirectly):			
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
a disqualified person?			
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
(5) Transfer any income or assets to a disqualified person (or make any of either available			
for the benefit or use of a disqualified person)?			
(6) Agree to pay money or property to a government official? (Exception Check "No"			
If the foundation agreed to make a grant to or to employ the official for a period after			
termination of government service, if terminating within 90 days )			
b If any answer is "Yes" to 1a(1)-(6), did any 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)?	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?	1c		Х
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)):		:	
a 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?			
before 2013?	1		
If "Yes,* list the years ▶,,,			
If "Yes," list the years ▶			
If "Yes," list the years \( \) , , , , , , , , \( \) Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach			
If "Yes," list the years \( \) , , , , , , , , , , , , , , , , , ,	_2b		
If "Yes," list the years ▶	_2b		
If "Yes," list the years \( \) , , , , , , , , , , , , , , , , , ,	2b		
If "Yes," list the years \( \)	_ 2b		
If "Yes," list the years \( \)	2b		
If "Yes," list the years \( \)	2b		
If "Yes," list the years \( \) , , , , , , , , , , , , , , , , , ,	_2b		
If "Yes," list the years \( \) , , , , , , , , , , , , , , , , , ,	3b		
b Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement - see instructions)  In /A  If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  In /A  Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  In 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 dispose 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, Form 4720, to determine if the foundation had excess business holdings in 2013)  N/A  In /A  In /A  In /A  In /A  In /A  In /A			X
If "Yes," list the years \( \) , , , , , , , , , , , , , , , , , ,	3b		X

JOY FOUNDATION C/O LEAH JOY ZELL 36-4410533 ' Form 990-PF (2013) Page 6' Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? N/A 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to guestion 5a(4), does the foundation claim exemption from the tax because it maintained Yes No N/A expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945-5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? X b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b If "Yes" to 6b, file Form 8870 Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average hours per week devoted (c) Compensation (e) Expense account, other (If not paid, enter -0-) (a) Name and address to position allowances LEAH JOY ZELL PRESIDENT #12E 209 E. LAKE SHORE DRIVE CHICAGO, IL 60611 1.00 0 0 0. VICE PRESIDENT/SECRETARY JENNY WANGER #12E 209 E. LAKE SHORE DRIVE CHICAGO, IL 60611 1.00 0. 0. ELISE WANGER ZELL VICE PRESIDENT/TREASURER #12E 209 E. LAKE SHORE DRIVE CHICAGO, IL 60611 1.00 0. 0. 0.

				]	<u> </u>
<u>2</u>	Compensation of five highest-paid employees (other than those in	ncluded on line 1). If none	, enter "NONE."	,	
	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
	NONE				
		_			
					_
		1			
		_		}	
_	stat number of other employees hard over \$50,000		1		L

Form 990-PF (2013)

JOY FOUNDATION	26 441	,
Part VIII   Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	36-441 n Managers, Highly	L0533 Page 7
3 Five highest-paid independent contractors for professional services. If none, enter "NO	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
The Lawrence of others recovered over \$50,000 for analogous lawrence		<b>&gt;</b>
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities	_	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced		Expenses
1 N/A		
2		
3		
4		
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.

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 $\blacktriangleright$ 

Amount

1 N/A

All other program-related investments. See instructions

Total. Add lines 1 through 3

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

income Enter 1% of Part I, line 27b

Adjusted qualifying distributions Subtract line 5 from line 4

4940(e) reduction of tax in those years.

36-4410533 Page 8 C/O LEAH JOY ZELL Form 990-PF (2013) Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions ) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 4,855,966. Average monthly fair market value of securities 1a 739,983. Average of monthly cash balances 1b 1¢ Fair market value of all other assets 5,595,949. 1d d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 3 595 949. Subtract line 2 from line 1d 83,939. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 5,512,010. Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4 5 275.601. Minimum investment return Enter 5% of line 5 6 Part XI | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here 

and do not complete this part.) 275,601. Minimum investment return from Part X, line 6 7,661. Tax on investment income for 2013 from Part VI, line 5 2a Income tax for 2013. (This does not include the tax from Part VI.) 2b 7,661. Add lines 2a and 2b 2с 267.940. 3 Distributable amount before adjustments. Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 4 0. 267 940. Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 Λ. Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 267 940. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 251,000. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a Program-related investments - total from Part IX-B 1h Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 2 Amounts set aside for specific charitable projects that satisfy the: 3 a Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3Ъ 251,000. Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4

Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form **990-PF** (2013)

## Form 990-PF (2013)

JOY FOUNDATION C/O LEAH JOY ZELL

Page 9 Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) Corpus Years prior to 2012 2012 2013 1 Distributable amount for 2013 from Part XI, 267,940. line 7 2 Undistributed income, if any, as of the end of 2013 0. a Enter amount for 2012 only **b** Total for prior years: 0 3 Excess distributions carryover, if any, to 2013: a From 2008 197,488. **b** From 2009 165,591. c From 2010 419,004 d From 2011 e From 2012 782,083 f Total of lines 3a through e 4 Qualifying distributions for 2013 from 251,000. Part XII, line 4: ► \$ a Applied to 2012, but not more than line 2a 0 **b** Applied to undistributed income of prior 0. years (Election required - see instructions) c Treated as distributions out of corpus 0. (Election required - see instructions) 251,000. d Applied to 2013 distributable amount 0. e Remaining amount distributed out of corpus 16,940. 16,940. 5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a)) 6 Enter the net total of each column as indicated below 765,143. a Corpus Add lines 3f 4c and 4e Subtract line 5 b Prior years' undistributed income Subtract 0 line 4b from line 2b 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 0 assessed d Subtract line 6c from line 6b Taxable 0. amount - see instructions e Undistributed income for 2012. Subtract line 0 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2013. Subtract lines 4d and 5 from line 1. This amount must 0. be distributed in 2014 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by 0. section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2008 0. not applied on line 5 or line 7 9 Excess distributions carryover to 2014 765,143. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 180,548. a Excess from 2009 165,591 b Excess from 2010 419,004 c Excess from 2011

d Excess from 2012 e Excess from 2013

	JOY ZELL				10533 Page 10
Part XIV   Private Operating Fo			I-A, question 9)	N/A	
1 a If the foundation has received a ruling or			į		
foundation, and the ruling is effective for			▶	1	
<b>b</b> Check box to indicate whether the foundation		ng foundation described		4942(j)(3) or 4942(j)(3)	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(b) 2012	Prior 3 years	(4) 2010	(a) Total
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for					
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					<del> </del>
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the		<del></del>			<del> </del>
alternative test relied upon;					
a "Assets" alternative test - enter					
(1) Value of all assets		<del> </del>			
(2) Value of assets qualifying		+			
under section 4942(j)(3)(B)(i)		<u> </u>			
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed		<del> </del>	<del> </del>		<del></del>
c "Support" alternative test - enter					
(1) Total support other than gross					<u> </u>
investment income (interest, dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)			<u> </u>		
(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		<u> </u>			
Part XV Supplementary Infor			if the foundation	n had \$5,000 or m	ore in assets
at any time during th	ie year-see inst	ructions.)			···
1 Information Regarding Foundation	-				
a List any managers of the foundation who			tributions received by the	e foundation before the clo	se of any tax
year (but only if they have contributed m	ore man \$5,000). (See s	section 507(a)(2))			
LEAH JOY ZELL					
<ul> <li>b List any managers of the foundation who other entity) of which the foundation has</li> </ul>			(or an equally large port	ion of the ownership of a p	artnership or
**	a 10% or greater intere	SI.			
NONE		<del></del>	-	<del></del>	
2 Information Regarding Contribution					
Check here X if the foundation or					
the foundation makes gifts, grants, etc. (					0 0
a The name, address, and telephone numb	er or e-mail address of	the person to whom app	lications should be addre	essed.	
<b>b</b> The form in which applications should be	e submitted and informa	ation and materials they s	should include.		
c Any submission deadlines					
				- the feet	
d Any restrictions or limitations on awards	. such as by deodraphic	ai areas, charitable fields	i, xinas of institutions, or	other factors	

C/O LEAH JOY ZELL

36-4410533 Page 11

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or Foundation show any relationship to contribution Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year CAMP FOR ALL US KIDS NONE PUBLIC CHARITY GENERAL SUPPORT P.O. BOX 50194 ST. LOUIS MO 63105 3,000. PUBLIC CHARITY GENERAL SUPPORT ECOWORKS INTERNATIONAL NONE 333 ARAGON AVENUE, SUITE 506 CORAL GABLES FL 33134 18,000. PUBLIC CHARITY GENERAL SUPPORT FRIENDS OF TILONIA (JOHN BISSELL NONE SCHOLARS FUND) 134 LINCOLN PLACE BROOKLYN NY 11217 1,000. CHABAD JEWISH COMMUNITY CENTER NONE PUBLIC CHARITY GENERAL SUPPORT 435 W. MAIN STREET ASPEN, CO 81611 6,000. MERIT SCHOOL OF MUSIC NONE PUBLIC CHARITY GENERAL SUPPORT 38 SOUTH PEORIA STREET CHICAGO IL 60607 2,500. SEE CONTINUATION SHEET(S) <u>Total</u> ➤ 3a 251 000. b Approved for future payment NONE Total

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

JOY FOUNDATION

C/O LEAH JOY ZELL

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income		by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue.	code		Code		
a	-		<del>                                     </del>		
b	_				
c					<u>-</u>
d	_				
e	_				
f	_				
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	44,655. 62,444.	
4 Dividends and interest from securities			14	62,444.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			14	23,468.	
8 Gain or (loss) from sales of assets other					
than inventory			18	296,484.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue.					
a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0.		427,051.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	427,051.
(See worksheet in line 13 instructions to verify calculations.	)				
Part XVI-B Relationship of Activities	to the Acc	omnlishment of F	vemnt F	urnoses	
rait AVI-B   Nelationship of Activities	s to the Acc		xempt i	urposes	
Line No Explain below how each activity for which in	come is reported	ın column (e) of Part XVI-	A contribute	d importantly to the accomp	olishment of
the foundation's exempt purposes (other th	an by providing fi	unds for such purposes).			
			-		
					-
					· · · · · · · · · · · · · · · · · · ·
				<del></del>	
				<u> </u>	
				<del> </del>	<del>.</del> -

Part				and Transactions a	nd Relations		410533 charitable		age 13
1 Did	the organization directly or indi		of the followin	a with any other ereanization	n decembed in each	100 501(c) of	···	Yes	No
	: Code (other than section 501(c					3011 30 1(0) 01			
	insfers from the reporting found				izations,				
	Cash	alion to a nonchanic	ine exempt on	yanızanon or.			12/11		v
	Other assets						1a(1) 1a(2)		X
	ner transactions:						14(2)		
_	Sales of assets to a noncharita	ible evernt organiza	ition				16(1)		X
	Purchases of assets from a no	• =					1b(1)		X
	Rental of facilities, equipment,		or garnzation				1b(2)		X
	Reimbursement arrangements						1b(4)		X
	Loans or loan guarantees						1b(5)		X
	Performance of services or me	embership or fundra	ısına salıcıtatır	ากร			1b(6)		X
	aring of facilities, equipment, ma						10		X
	he answer to any of the above is	•	• •		vavs show the fair i	market value of the go		sets	
or s	services given by the reporting f umn (d) the value of the goods,	oundation. If the fou	indation receiv					50.0,	
(a) Line n				e exempt organization	(d) Description	n of transfers, transactions	, and sharing a	rangeme	ents
			N/A						
ın s	the foundation directly or indirect section 501(c) of the Code (othe	r than section 501(c			zations described		Yes	X	] No
b  1 "	Yes," complete the following sch (a) Name of or			(b) Type of organization	Γ	(c) Description of rela	tionchia		
	<del></del>	garrization		(b) Type of Organization		(c) Description of rela	понятр		
	<u>N/A</u>	-	· · · · · · · · · · · · · · · · · · ·						
	<del> </del>			=		• •			
	Under penalties of perjury, I declare	that I have examined th	ns return, includir	ng accompanying schedules and	statements and to the	best of my knowledge			
Sign Here	and belief it is true, correct and co	mplete Declaration of p		in taxpayer) is based on all inform	PRESI	r has any knowledge	May the IRS return with the shown below	e prepar (see ins	rer
	Signature of officer or truster  Print/Type preparer's n	<del></del>	Preparer's s	Date	Title Date	Check If P	TIN		
	Filliotype preparer Sin	anıc	riepatei S	y griature	Date	self- employed	1 111		
Paid	FRED M. BF		1	y	7/4/14		P01045		
Preparent	1	RRISON & 1	MORRÍSC /	M, LTD.	,	Firm's EIN ► 36	-31431	.86	

Phone no 312-346-2141 Form **990-PF** (2013)

Firm's address ▶ 19 SOUTH LASALLE ST., SUITE 1100

CHICAGO, IL 60603

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	oom badon	
MILTON ACADEMY 170 CENTRE STREET	NONE	PUBLIC CHARITY	GENERAL SUPPORT	
MILTON, MA 02186				2,000.
MUSEUM OF CONTEMPORARY ART 220 E. CHICAGO AVENUE CHICAGO, LA 60611	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,000.
NATURAL RESOURCES DEFENSE COUNCIL 40 WEST 20TH STREET NEW YORK, NY 10011	NONE	PUBLIC CHARITY	GENERAL SUPPORT	5,000.
PITZER COLLEGE 1050 NORTH MILLS AVENUE CLAREMONT, CA 91711	NONE	PUBLIC CHARITY	GENERAL SUPPORT	3,000.
SCHOOL YEAR ABROAD 120 WATER STREET, SUITE 310 NORTH ANDOVER, MA 01845	NONE	PUBLIC CHARITY	GENERAL SUPPORT	5,000.
SHARE OUR STRENGTH 1730 M STREET NW, SUITE 700 WASHINGTON, DC 20036	NONE	PUBLIC CHARITY	GENERAL SUPPORT	3,000.
THE CHICAGO COUNCIL ON GLOBAL AFFAIRS 332 SOUTH MICHIGAN AVENUE, SUITE 1100 CHICAGO, IL 60604	NONE	PUBLIC CHARITY	GENERAL SUPPORT	200,000,
THE INTERNATIONAL RESCUE COMMITTEE 122 E 42ND STREET NEW YORK, NY 10168	NONE	PUBLIC CHARITY	GENERAL SUPPORT	1,500.
Total from continuation sheets				220,500.

FORM ,990-PF INTERES	T ON SAVING	S AND T	EMPOR	ARY	CASH 1	NVESTMENTS	S	PATEMENT	1
SOURCE		REVEN				(B) INVESTMENT INCOME		(C) ADJUSTED NET INCOME	
GOLDMAN, SACHS & CO. K-1 - AG SUPER FUND, K-1 - LIZARD INTERNA FUND LLC THE NORTHERN TRUST C	L.P. TIONAL		<b>44,</b> 52	9. 28. 17.		9. 44,519. 117. 1.			
TOTAL TO PART I, LIN	IE 3		44,6	55 <b>.</b>		44,646.			
FORM 990-PF	DIVIDENDS	AND INT	EREST	FRO	M SECU	JRITIES	S	FATEMENT	2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	S	RE	(A) VENUE BOOKS	(B) NET INVE: MENT INC		(C) ADJUSTE NET INCO	
K-1 - AG SUPER FUND, L.P. K-1 - LIZARD	17,535.		0.		17,535	5. 17,5	35.		
INTERNATIONAL FUND LLC PERSHING LLC PERSHING LLC	26,870. 17,964. 32,271.	32,	0. 0. 271.		26,870 17,964 (				
THE NORTHERN TRUST CO.	75.		0.		75	5.	75.		
TO PART I, LINE 4 =	94,715.	32,	271.		62,444	62,4	44.		—
FORM 990-PF		OTHER	INCO	ME			S'	PATEMENT	3
DESCRIPTION			RE	(A) VENU BOO		(B) NET INVEST MENT INCOM		(C) ADJUSTEI NET INCOM	
K-1 - LIZARD INTERNA K-1 - AG SUPER FUND		O LLC			,132. ,336.	21,13			
TOTAL TO FORM 990-PH	F, PART I, I	LINE 11		23	,468.	23,46	8.		

FORM .990-PF	ACCOUNTI	NG FEES	STATEMENT			
DESCRIPTION		(B) NET INVEST- MENT INCOME				
ACCOUNTING FEES	8,964.	4,482.			0.	
TO FORM 990-PF, PG 1, LN 16B	8,964.	4,482.			0.	
FORM 990-PF	TAX	ES	S'	PATEMENT	 5	
DESCRIPTION		(B) NET INVEST- MENT INCOME				
FEDERAL TAXES PAID STATE TAXES PAID	7,500. 15.				0.	
FOREIGN TAXES PAID - CONIFER FOREIGN TAXES PAID - K-1 -	338.				0.	
LIZARD INTERNATIONAL FUND LLC	3,944.	3,944.			0.	
FOREIGN TAXES PAID - K-1 - AG SUPER FUND, L.P.	755.	755.			0.	
TO FORM 990-PF, PG 1, LN 18	12,552.	5,037.			0.	
FORM 990-PF	OTHER E	XPENSES	S'	TATEMENT	6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE		
K-1 - LIZARD INTERNATIONAL FUND LLC K-1 - AG SUPER FUND. L.P.	4,472. 23,353.				0.	
TO FORM 990-PF, PG 1, LN 23	27,825.	27,824.			0.	
	<del></del>	· <del></del>	<del></del>	<del></del>		

FORM 990-PF OTHER INCREASES I	N NET	ASSETS O	R FUND	BALANCES	STATEMENT	7		
DESCRIPTION					AMOUNT			
UNREALIZED LOSS/GAIN ON INVESTM	ENTS				528,577.			
TOTAL TO FORM 990-PF, PART III,	LINE	3			528,57	77.		
FORM 990-PF	CORPO	DRATE STO	CK		STATEMENT	8		
DESCRIPTION			]	BOOK VALUE	FAIR MARKET	r		
BERKSHIRE HATHAWAY INC CL B FAIRFAX FINANCIAL HOLDINGS				47,424. 29,943.	47,424. 29,943.			
TOTAL TO FORM 990-PF, PART II,	LINE 3	10в		77,367.	77,36	67.		
FORM 990-PF	OTHER	INVESTME	NTS		STATEMENT	9		
DESCRIPTION		VALUATI METHOD	-	BOOK VALUE	FAIR MARKET	г		
AG SUPER FUND, L.P. BLACKROCK EQUITY DIVIDEND FUND FPA CRESCENT PORTFOLIO FUND GOLDMAN SACHS INVESTMENT PARTNERS		FMV FMV FMV		1,617,733. 234,698. 259,920.	1,617,73 234,69 259,92	98.		
OFFSHORE, L.P. JENSEN QUALITY GROWTH FUND LIZARD INTERNATIONAL FUND LLC	<b>-</b>	FMV FMV FMV		202,572. 248,434. 2,263,956. 20,002. 220,731.	202,5° 248,4° 2,263,9° 20,00	34. 56. 02.		
MARKET VECTORS ETF ROYCE TOTAL RETURN FUND		FMV		4.40 . / 31 .	220,73	31.		

Form 8868 (Rev January 2014) Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Fire by the due date for Human See Instructions   C/O LEAH JOY ZELL   Social security number (SSN)		of the Treasury mue Service	▶ Information about Form 886	88 and its	instructions is at www.irs.gov/fori	n8868.			
** If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)  Do not complete Part II unless you have already been granted an automatic 3-month extension on a prewously filed Form 8868 Electronic filing (e-/lile), You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (iii month). On an additional front automatic) 3-month extension of time 7 of the roll file for the file in Part of Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the detection filing of this form, were view view view fleely filed and cited on elle file for Charles's Alwaportists.  [Part II Automatic 3-Month Extension of Time. Only submit original (no copies needed).  A copporation regiverly and cited on elle file for Charles's Alwaportists.  [Part II Automatic 3-Month Extension of Time. Only submit original (no copies needed).  A copporation regiverly and cited on elle file for Charles's Alwaportists.  [Part II Automatic 3-Month Extension of Time. Only submit original (no copies needed).  A copporation regiver dend file form 9901 and requesting an automatic 6-month extension - check this box and complete Part I only  All other corporations (including 1120-C kless), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time of kills including 1120-C kless), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time file; is dentifying number.  Type or Time 120 (Automatic 1120-C kless), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time file; is dentifying number.  Enter file*s identifying number.  Type or Time 120 (Automatic 1120-C kless), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time file in the complet of the file in the complet of the file in the complet of the fil	• If you a	re filing for an Aut	omatic 3-Month Extension, comple	te only Pa	art I and check this box			► X	
Do not complete Part if unless you have already been granted an automatic 3-month extension on a previously filed Form 8808 Electronic hilling 6 reld). You can electronically life Form 890 T), or an additional (not automatic) 3-month extension of time to the any of the forms isted in Part 1 or Part II with the exception of Form 8970, information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the fills in paper format (see instructions). For more details on the electronic filing of this form, yest www in gov/lefile and click on e-rife for Charlete's & Nosprottis.  Part 1 only Automatic 3-Month Extension of Time. Only submit original (no copies needed).  A coporation required to file Form 990 T and requesting an automatic E-month extension, check this box and complete Part 1 only.  All other copporations (including 1120-C Mers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time for the increment size returns.  Figure 1 only Ye FOUNDATION C/O LEAH JOY ZELL  Number, street, and toom or south on it a PO box, see instructions  COV LEAH JOY ZELL  Number, street, and toom or south on it a PO box, see instructions  COV JEAH JOY ZELL  Number, street, and toom or south on it a PO box, see instructions  COV JEAH JOY ZELL  First the Return code for the return that this application is for (file a separate application).  For Covider 1 on the contract of the return that this application is for (file a separate application for each return).  O 1 on 320 on Form 950 E. LARS SHORE DRIVE \$12 B.  The promise of the contract of the return that this application is for (file a separate application for each return).  O 2 on 32 form 1011 on 1012 on 1012 on 1018 on 1	-	_				this form)	•		
required to file Form 990.1, or an additional (not automatic) 3-month extension of time to file any of the forms listed in Part to Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic fling of this form, wast www vir goverlete and click on e-file for Charlins 8 Nonprofits.    Part I   Automatic 3-Month Extension of Time. Only submit original (no copies needed).	-	<del>-</del>			- · · · · · · · · · · · · · · · · · · ·		rm 8868		
et time to tile any of the forms lated in Part to Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper forms (see instructions). For more details on the electronic fling of this form, wast wow in government of the for Charles a Nonpardis.    Part I	Electronic	c filing (e-file). Yo	u can electronically file Form 8868 if y	you need a	a 3 month automatic extension of tin	ne to file (6	i months for a cc	rporation	
Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit wow' vis gov/fel/s and clack on e. file for Charles & Nonprofits.  Part I   Automatic 3-Month Extension of Time. Only submit original (no copies needed).  A copporation required to file Form 990 T and requesting an automatic 5-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to the income tax returns  Type or I   Name of exempt organization or other filer, see instructions	required to	o file Form 990-T),	or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically fi	le Form 88	368 to request ar	extension	
yest waw as govietile and clock one the for Chantles & Nonpontiss    Part 1	of time to	file any of the form	ns listed in Part I or Part II with the ex-	ception of	Form 8870, Information Return for 1	Fransfers A	Associated With	Certain	
Part	Personal E	Benefit Contracts,	which must be sent to the IRS in pap	er format	(see instructions). For more details of	n the elec	tronic filing of th	is form,	
A Cooparation required to file Form 990 T and requesting an automatic 6-month extension - check this box and complete    Part   only   Part	visit www	irs govletile and cl	ick on e-file for Charities & Nonprofits				•		
All other corporations (including 1120-C filors), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time for file in corne lax returns   Name of exempt organization or other filer, see instructions	Part I	Automatic	3-Month Extension of Time	e. Only s	submit original (no copies ne	eded).			
All other corporations (including 1120-C lilers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time for the more tax rotums  Type or print to do file more than 200 per the print of the t	A corpora	tion required to file	Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and	complete			
to file income tex returns    Name of exempt organization or other filer, see instructions   See instructio	Part I only	,						<b>&gt;</b>	
Name of exempt organization or other feer, see instructions JOY FOUNDATION CO LEAH JOY ZELL  Number, street, and room or suite no. If a PO box, see instructions 20 P. LAKE SHORE DRIVE #12E  Social security number (ISN)  20 P. LAKE SHORE DRIVE #12E  Enter the Return code for the return that this application is for (file a separate application for each return)  Plication For Code Is For Code Is For Serm 1041-A  plication Form 990 or Form 990 EZ  O1 Form 990 T (corporation)  Form 990 SE  O2 Form 1041-A  O3 Form 14720 (individual)  Porm 990 T (see: 401(a) or 408(a) trust)  O5 Form 990 T (see: 401(a) or 408(a) trust)  O6 Form 990 T (see: 401(a) or 408(a) trust)  Telephone No № 847-413-6577  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If the tax year entered in line 1 is for less than 12 months, check reason  If this application is for Forms 990 Revented that period on the street of the organization return for the organization named above The extension is for concentration of the organization of the county, check this box  If the tax year entered in line 1 is for less than 12 months, check reason  If the tax year entered in line 1 is for less than 12 months, check reason  If this application is for Forms 990 Revented that period on the street of the county check this box  If this application is for Forms 990 Revented in line 1 is for less than 12 months, check reason  If this application is for Forms 990 Revented in line 1 is for less than 12 months, check reason  If this application is for Forms 990 Revented in line 1 is for less than 12 months, check reason  If this application is for Forms 990 Revented in line 1 is for less than 12 months, check reason  If this application is for Forms 990 Revented in line 1 is for less than 12 months, check reason  If this application is for Forms 990 Revented in line 1 is for less than 12 months, check reason  If this applic	All other c	orporations (includ	ing 1120-C filers), partnerships, REM	ICs, and t	rusts must use Form 7004 to reques	t an exten	sion of time		
Print	to file inco	ome tax returns				Enter filer's identifying number			
C/O LEAH JOY ZELL  Number, street, and room or suite no. If a PO box, see instructions  Social security number (SSN)  Mumber, street, and room or suite no. If a PO box, see instructions  CHICAGO, IL 60611  Enter the Return code for the return that this application is for (file a separate application for each return)  O	Type or	Name of exemp	t organization or other filer, see instru	ctions					
Number, street, and room or sulte no if a P O box, see instructions 2 09 E. LAKE SHORE DRIVE #12E  City, town or post office, state, and ZIP code For a foreign address, see instructions CHICAGO, IL 60611  Enter the Return code for the return that this application is for (file a separate application for each return)  O 4  **Polication**  For Code Is Form 990 or Form 990 EZ  O1 Form 990 or Form 990 EZ  O2 Form 1041.A  O3 Form 4720 (individual)  O3 Form 4720 (other than individual)  O3 Form 990 PF  O4 Form 5927  O6 Form 990 T (trust other than above)  • The books are in the care of ▶ 209 E. LAKE SHORE DRIVE #12E - CHICAGO, IL 60611  Telephone No ▶ 847 - 413 - 6577  • If the organization does not have an office or place of business in the United States, check this box  ■ If it is for part of the group, check this box ▶ If it is for part of the group, check this box  ■ If it is for part of the group, check this box ▶ In and attach a list with the names and ElNs of all members the extension is for the organization's return for ▶ X calendar year 20.13 or ▶ It the sapplication is for Forms 990 Pt, 990 T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  ■ If this sapplication is for Forms 990 Pt, 990 T, 4720, or 6069, enter any refundable credits and estimated tax payments made include any pron year overpayment with this forum. If required, by yusing EFTPS (Electronic Federal 1ax Payment System) See instructions  Social security in the sections.  Social security number (SSN)   O4 1 Porm 520 T.  Pax No → Lax year entered in line 1 is for less than 12 months, check reason Initial return Initial ret	print	JOY FOUN	DATION						
Number, street, and room or suite no if a P O box, see instructions		C/O LEAH	JOY ZELL				36-4410533		
Enter the Return code for the return that this application is for (file a separate application for each return)    Possible   Chicago   Tile   Code   For a foreign address, see instructions	File by the due date for	Number, street,	and room or suite no. If a P.O. box, s	ee instruc	tions	Social security number (SSN)			
City, town or post office, state, and ZIP code. For a foreign address, see instructions  CHICAGO, IL 60611  Enter the Return code for the return that this application is for (file a separate application for each return)  Pilication  Return For Code SFOrm 990 or Form 990 EZ  O1 Form 990 T (corporation)  O2 Form 990-BL  O2 Form 1041-A  O3 Form 4720 (other than individual)  O3 Form 4720 (other than individual)  O4 Form 990 T (see 401(a) or 408(a) trust)  O5 Form 990 T (see 401(a) or 408(a) trust)  O6 Form 990 T (trust other than above)  O6 Form 8870  11  Telephone No ► 847 − 413 − 6577  Fax No ►  O1 If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for part of the group, check this box  If the organization does not a month (6 months for a corporation return for the organization named above. The extension is for the organization's return for Lax year entered in line 1 is for less than 12 months, check reason  If the a year entered in line 1 is for less than 12 months, check reason  If this application is for Forms 990 EL, 990 PF, 990 T, 4720, or 6069, enter the tentative tax, less any nonreturnable credits. See instructions  If this application is for Forms 990 PF, 990 T, 4720, or 6069, enter the tentative tax, less any nonreturnable credits. See instructions  If this application is for Forms 990 PF, 990 T, 4720, or 6069, enter any refundable credits and estimated tax payments made include any prior year overpayment allowed as a credit  Balance due. Subtract line 35 from line 31 include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions  So the program of the group of the substract line 35 from line 31 include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions	filing your	209 E. L	AKE SHORE DRIVE #1	12E					
Pilication   Return   Application   Return   Application   Return   Code   Is For   Code   Code   Is For   Code   Is For   Code   Code   Code   Is For   Code	instructions	City, town or pos	st office, state, and ZIP code. For a fo	oreign add	lress, see instructions				
Plication For Code   SFor   SFOR   SPO   Corporation   O7   SFORM 990 T (corporation)   O7   SFORM 990 T (corporation)   O8   SFORM 4720 ((individual)   O3   SFORM 4720 ((individual)   O4   SFORM 5227   O4   SFORM 5227   O5   SFORM 5069   O5   SFORM 506		CHICAGO,	IL 60611			10.1			
Plication For Code   SFor   SFOR   SPO   Corporation   O7   SFORM 990 T (corporation)   O7   SFORM 990 T (corporation)   O8   SFORM 4720 ((individual)   O3   SFORM 4720 ((individual)   O4   SFORM 5227   O4   SFORM 5227   O5   SFORM 5069   O5   SFORM 506									
For P90 or Form 990 EZ	Enter the i	Return code for the	e return that this application is for (file	e a separa	te application for each return)			0 4	
Form 990 or Form 990 EZ Form 990 BL Form 990 T (corporation) Form 990 EB Form 990 FB Form 4720 (individual) Form 990 FF Form 990 T (sec 401(a) or 408(a) trust) Form 990 T (sec 401(a) or 408(a) trust) Form 990 T (sec 401(a) or 408(a) trust) Form 990 T (trust other than above)  ■ LEAH JOY ZELL ■ The books are in the care of ▶ 209 E. LAKE SHORE DRIVE #12E - CHICAGO, IL 60611  ■ Telephone No ▶ 847-413-6577 ■ If the organization does not have an office or place of business in the United States, check this box ■ If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ■ If this is for part of the group, check this box ■ If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ■ If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ■ If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ■ If this is for a Broup Return, enter the organization's four digit Group Exemption Number (GEN) ■ If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ■ If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ■ If this is for part of the group, check this box ■ If this is for part of the group, check this box ■ If this is for part of the group, check this box ■ If the organization's return for the organization of time until ■ AUGUST 15, 2014 ■ It has part of the group, check this box ■ If the organization's return for the organization named above The extension is for the organization is for form 990 FB, 990 T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions  ■ If this application is for Forms 990 FB, 990 T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions  ■ If this application is for Forms 990 FB, 990 T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment	plication	on		Return	Application		Return		
Form 990-BL Form 990-BL Form 7220 (Individual)  03 Form 1720 (other than individual)  09 Form 990 PF  04 Form 5227  10 Form 990 T (sec 401(a) or 408(a) trust)  05 Form 8870  12  LEAH JOY ZELL  Telephone No Mary 1720 (other than above)  16 Form 8870  17  Telephone No Mary 1720 (other than above)  17 Telephone No Mary 1730 (or 408)  18 If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for the whole group, check this box  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for the whole group, check this box  If this is for part of the group, check this box  If the organization of time until  AUGUST 15, 2014  It of let the exempt organization return for the organization named above The extension is for the organization's return for  X calendar year 2013 or  X calendar	_For			Code	Is For		Code		
Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990 PF 04 Form 5927 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  LEAH JOY ZELL  The books are in the care of > 209 E. LAKE SHORE DRIVE #12E - CHICAGO, IL 60611 Telephone No > 847 - 413 - 6577 Fax No >  If the organization does not have an office or place of business in the United States, check this box If it is for part of the group, check this box If it is for part of the group, check this box In request an automatic 3 month (6 months for a corporation required to file Form 990 T) extension of time until AUGUST 15, 2014 In offile the exempt organization return for the organization named above The extension is for the organization's return for X calendar year 2013 or It is for the organization is for Forms 990-BL, 990-PF, 990 T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 13 in this application is for Forms 990-PF, 990 T, 4720, or 6069, enter any refundable credits and estimated tax payments made Include any prior year overpayment allowed as a credit she seems 10,000.  Balance due. Subtract line 35 from line 3 a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions 3ce Instructions 3c	Form 990 or Form 990 EZ			01	Form 990 T (corporation)	rm 990 T (corporation)			
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Form 990 T (sec 401(a) or 408(a) trust)  D5 Form 6069  11  LEAH JOY ZELL  The books are in the care of ▶ 209 E. LAKE SHORE DRIVE #12E ~ CHICAGO, IL 60611  Telephone No ▶ 847~413~6577  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box  If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for lirequest an automatic 3 month (6 months for a corporation required to file Form 990 T) extension of time until  AUGUST 15, 2014 It offile the exempt organization return for the organization named above The extension is for the organization's return for box  and ending  If the axy year beginning and ending and ending Initial return Initial retur	Form 4720	orm 4720 (individual) 03 Form 4720 (other than individual						09	
EACH JOY ZELL    The books are in the care of   209 E. LAKE SHORE DRIVE   #12E - CHICAGO, IL 60611   Telephone No   847-413-6577   Fax No	Form 990	PF		04 Form 5227			10		
LEAH JOY ZELL  The books are in the care of ▶ 209 E. LAKE SHORE DRIVE #12E - CHICAGO, IL 60611  Telephone No ▶ 847-413-6577 Fax No ▶  If the organization does not have an office or place of business in the United States, check this box ▶ □  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ▶ □ If it is for part of the group, check this box ▶ □ and attach a list with the names and EINs of all members the extension is for 1 request an automatic 3 month (6 months for a corporation required to file Form 990 T) extension of time until AUGUST 15, 2014	Form 990 T (sec 401(a) or 408(a) trust)							11	
The books are in the care of ▶ 209 E. LAKE SHORE DRIVE #12E - CHICAGO, IL 60611  Telephone No ▶ 847-413-6577 Fax No ▶  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box  If it is for part of the group, check this box ▶ and attach a list with the names and EINs of all members the extension is for  I request an automatic 3 month (6 months for a corporation required to file Form 990 T) extension of time until  AUGUST 15, 2014 to file the exempt organization return for the organization named above The extension is for the organization's return for  X calendar year 2013 or  X calendar year 2013 or  Change in accounting period  If this application is for Forms 990 BL, 990 PF, 990 T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  If this application is for Forms 990 PF, 990 T, 4720, or 6069, enter the tentative tax, less and estimated tax payments made. Include any prior year overpayment allowed as a credit.  Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using £FTPS (Electronic Federal Tax Payment System). See instructions  3a. \$ 10,000.	Form 990	T (trust other than		06	Form 8870		····	12	
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