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1 Form

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

▶ Information about Form 990 and its instructions is at www.irs.gov/form990

2013 Open to Public Inspection

OMB No 1545-0047

<u>A_</u>	For the	\pm 2013 calendar year, or tax year beginning $10/01/13$, and ending $10/30/13$	14		
В	Check if ap	plicable C Name of organization		D Employe	r identification number
	Address ch	Pange FAIRVIEW FOUNDATION			
	Name char	Doing Business As		36-3	3632069
		Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephon	
	Initial return	210 VILLAGE DRIVE		630-	-769 <u>-6000</u>
	Terminated	City or town state or province, country, and ZIP or foreign postal code			
1	Amended r	etum DOWNERS GROVE IL 60516		G Gross receip	302,346
- 1		F Name and address of principal officer			
٤.,	Application	DAVID HALL	H(a) Is this a g	roup return for subc	ordinates? Yes X No
		210 VILLAGE DRIVE	H(b) Are all su	ubordinates includ	ed? Yes No
		DOWNERS GROVE IL 60516	If "No	o," attach a list (se	ee instructions)
$\overline{}$	Tax-exem		7		
<u>-</u>	Website	. 17017	H(c) Group ex	cemption number	•
<u>. </u>				1000	State of legal domicile IL
	Form of or		real of formation .	<u> </u>	State of legal conflictie
	Part I	Summary			
	1 1 5	Briefly describe the organization's mission or most significant activities			
æ	1	SEE SCHEDULE O			
2	1				
2					
ē		r. ¬			
્રે	2 0	Check this box $lacktriangle$ $lacktriangle$ if the organization discontinued its operations or disposed of more than 25%	% of its net asse	ts	
⊛ ⊗5	3 N	lumber of voting members of the governing body (Part VI, line 1a)		3	7
Se	4 1	lumber of independent voting members of the governing body (Part VI, line 1b)		4	7
į		otal number of individuals employed in calendar year 2013 (Part V, line 2a)		5	0
Activities & Governance	1	otal number of volunteers (estimate if necessary)		6	0
ď	1	· · · · · · · · · · · · · · · · · · ·		7a	0
)	/a :	otal unrelated business revenue from Part VIII, columnr(G)-line-12			0
	P V	let unrelated business taxable income from Form 990-T, line 3RECFIVED	Prior Y	7b	Current Year
)	١	Contributions and greats (Part VIII Inc. 1b)		59,777	216,569
, e		Contributions and grants (Part VIII, line 1h) Program service revenue (Part VIII, line 2g) INVESTMENT INCOME (Part VIII, column (A), lines 3, 4, and 7d)		,,,,,	210,309
Revenue		Program service revenue (Part VIII, line 2g)		1 042	
ě	10 li	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	14	21,042	85,777
ч.	11 0	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 10 EN 117			0
_	12 T	otal revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12).	29	90,819	302,346
	13 🤄	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		1,459	50
	14 E	Benefits paid to or for members (Part IX, column (A), line 4)			0
s	15 5	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	3	37,958	37,103
penses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)			Ō
Je.	b.T	Total fundraising expenses (Part IX, column (D), line 25) ► 37,103			· · · · · · · · · · · · · · · · · · ·
Ä	1	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	-	6,826	5,164
	4			16,243	42,317
	1	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		14,576	260,029
	19 F	Revenue less expenses Subtract line 18 from line 12	Beginning of Ci		End of Year
Net Assets or	<u> </u>	Tabel accords (Don't V. lone 4C)		57,538	1,423,091
Sset	20 I	fotal assets (Part X, line 16)			
A Z	21 T	otal liabilities (Part X, line 26)		3,414	488,938
		Net assets or fund balances Subtract line 21 from line 20	6	74,124	934,153
_ <u>F</u>	Part II	Signature Block			
U	Jnder pen	alties of perjury, I declare that I have examined this return, including accompanying schedules and statement	s, and to the best	of my knowledg	e and belief, it is
tr	ue, corre	ct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has	any knowledge		
			·		
Sig	an	Signature of officer		Date	, /
	_	The Post of the Po		1-	2/0/14
He	er e				-17/7
		Type or print name and title			-1 Lorus
_		Print/Type preparer's name Preparer's signature	Date	Check	T of PTIN
Pai	id	MICHAEL J. PLAHM, CPA	11/1	8/14 self-empl	
Pre	eparer	Firm's name HANSEN, PLAHM & COMPANY		Firm's EIN ▶	36-3849301
Us	e Only	8180 S. CASS AVE.			
		Firm's address DARIEN, IL 60561-5013		Phone no	630-968-8897
Ma	y the IR	S discuss this return with the preparer shown above? (see instructions)			X Yes No

Form **990** (2013)

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36-3632069

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Form 990 (2013)

4e Total program service expenses ▶

BOANINE ION BY 2117

Form 990 (2013) FAIRVIEW FOUNDATION

Form 990 (2013) FAIRVIEW FOUNDATION
Part IV Checklist of Required Schedules

1 s the torgamization described in section 501(x)) or 4947(a)(1) (other than a private levulation?! If Yes, complete Schedule S. Schedule G. Schedule of Contributors (see instructions?) 2 to the organization regioner of ordinary of the state of the organization regioner of ordinary of the organization regioner of individuals in the organization regioner of individuals in the organization of the organization of the organization of the organization and the organization of the organization asserts of 10(4), 501(5)(6) of 10(4)), 60 (10(4)), 60				Yes	No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 In the organization range in direct or indirect polarization calcingsing activates on behalf of or in opposition to condidates for public office? If "Yes," complete Schedule C, Part II 3 Is Ractine 90 (15), organizations but the organization is publication of the public office? If "Yes," complete Schedule C, Part II 4 Is the organization is section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dius; assessments, or similar amounts as defined in Revenue Procedure 86-192 ("Yes," complete Schedule C, Part II 5 Is the organization maintain any donor advised funds or any similar funds or accounts for which donors have the night to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the night to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the night to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the night to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the night to provide advise on the distribution or investment of amounts in such funds or accounts for which donors have the night to provide advise on the distribution or investment of amounts and such funds or accounts for which donors have the night to provide advised on the distribution or investment of amounts and such funds or accounts for which donors have the night to provide advised on the distribution of the such funds or accounts for which donors have the night to provide advised on the distribution of the such funds or accounts for the such funds fun	1		1	x	
3 Dut the organization engage in direct or indirect political carmaginy activates on behalf of or in opposition to candidates for public office? If you should consider the problem of the property of the pro	2	F The state of the	-		
canadiates for public office? If "Yes," complete Schedule C, Part I Section 80 (1974) organizations. Dot the cognazion engage in ribbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part III I bit the organization a section 501(c)(4), 501 (c)(6), or 501 (c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Receive Procedule SPIP If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts" If "Yes," complete Schedule D, Part II Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts" If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets "If "Yes," complete Schedule D, Part II Did the organization amounts not isseld in Part X, in revolute 21, for escrive or custodial account liability, serve as a custodiant for amounts not isseld in Part X, or provide conditions of the organization orecety or through a related organization of part V, or the organization orecety or through a related organization of part V, or the organization orecety or through a related organization of part V, viv. VIV. VIV. VIV. VIV. VIV. VIV. VIV. VI					
selection in effect during the tax year? If Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(6), or 501(c)(6) organization that receives membership dues, sizesesiments, or similar amounts as defined in Revenue Procedure 98-197 If Yes," complete Schedule C, Part II Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If Yes," complete Schedule D, Part II To the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If Yes," complete Schedule D, Part II To the organization maintain collections of works of art, historical treasures, or other similar assess? If Yes," complete Schedule D, Part II By Did the organization maintain collections of works of art, historical treasures, or other similar assess? If Yes," define flagotation, services? If Yes," complete Schedule D, Part II Did the organization report an amount in Part X, line 21, for escrive or custodial account hability, serve as a custodian for amounts in or listent in Part X, provide credit counseling, doth transagement, credit repair, or debit negotation, services? If Yes," complete Schedule D, Part IV Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If Yes," complete Schedule D, Part VI VII, VII, IV, IV, X x as a splicated a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If Yes," complete Schedule D, Part VI VII, VII, VII, VII, X x X as plicated a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If Yes," complete Schedule D, Part VI VII, VII, VII, VII, X x X bas plicated b Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If Yes," complete Schedule D, Part X Did the organization			3		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-179 if "Yes," complete Schedule C, Part II 7'ves," complete Schedule D, Part II 8 8 X 2'ves, some season of the environment, historic land areas, or historic structures 7'if "Yes," complete Schedule D, Part II 8 8 X 2'ves, some season of the environment, historic land areas, or historic structures 7'if "Yes," complete Schedule D, Part II 8 8 X 2'ves, some season of the seaso	4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III 5		election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Pes," complete Schedule D, Part II Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III Jo Historic Particulation in the part of the structure of the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part III Jo Historic Particulation area and the part X, Ine 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negativation services? If If "es," complete Schedule D, Part V Did the organization received in Part X, or provide credit counseling, debt management, credit repair, or debt negativation services? If If "es," complete Schedule D, Part V Did the organization received in Part X, or provide credit counseling, debt management, credit repair, or debt negativation services? If If "es," complete Schedule D, Part V Did the organization received in a related organization, hold assets in temporarity restricted endowments, or quasi-endowments? If "res," complete Schedule D, Part V Did the organization report an amount for interventments? If "res," complete Schedule D, Part VI Did the organization report an amount for interventments—other securities in Part X, line 10? If "res," complete Schedule D, Part VI Did the organization report an amount for other liabilities in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 18? If "res," complete Schedule D, Part VII Did the organization report an amount for other liabilities in Part X, line 19. If "res," complete Schedule D, Part X II Did the organization report an amount for other liabilities in Part X,	5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
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Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 14b	4.0	, i i			
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b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		r de la companya de			
			$\overline{}$		<u> </u>
	D	it res to line zua, did the organization attach a copy of its audited financial statements to this return?	∠Ub		(2012

Pa	art IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			
	on Part IX, column (A), line 2º If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
•	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
b	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
20	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, complete Schedule L, Part II	26	1	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	1	†	
21	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		1	
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
-	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	}	x
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete		1	
U	Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)		1	
C	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	ļ	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		·	
30	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,		†	
٥.	Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
JL	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		<u> </u>	
75	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,			
34	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a		†	
J	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	550	1	<u> </u>
50	related organization? If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	30	1	<u> - </u>
Ji	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,		1	1
		37		x
38	Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	57	+	
J-0	19? Note . All Form 990 filers are required to complete Schedule O	38		x
	10 110 to 17 m. 1 of 111 ob o micro dre required to complete contention o			-

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V				
	•			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a		,	,
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and				
	reportable gaming (gambling) winnings to prize winners?		1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
	Statements, filed for the calendar year ending with or within the year covered by this return	2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b		
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		١.		v
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	. a.a.b.:	3b_		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authorized forces of control of the calendar year, did the organization have an interest in, or a signature or other authorized forces.	· ·			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	aaı	40		X
b	account)? If "Yes," enter the name of the foreign country ▶		4a		
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Acc	counts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	, our no	5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	19	5b	–	X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	-	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				
	organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	or			
	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goo	ds			
	and services provided to the payor?		7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		_		
	required to file Form 8282?	l = . I	7c		-
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	- I		
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contribute or a personal benefit contributed the organization divises the contribute of the property of the personal benefit contributed to the property of the personal benefit contributed to the personal benefit con		7e 7f		
g	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form		7g		
9 h	If the organization received a contribution of qualified intellectual property, and the organization like including the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7 <u>9</u> 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	7 mc a 7 cm 7 cc c			
•	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring				
	organization, have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations.Enter				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations.Enter	l l			
a	Gross income from members or shareholders	11a	1		
b	Gross income from other sources (Do not net amounts due or paid to other sources	445			
12a	against amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1	11b	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	126	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	[12V]	1		
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
-	Note. See the instructions for additional information the organization must report on Schedule O		134		
b	Enter the amount of reserves the organization is required to maintain by the states in which		'		
	the organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c]		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		14b		

Form 990 (2013) FAIRVIEW FOUNDATION

Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and	for a "	Vo"									
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S.	ee instr	uction									
	Check if Schedule O contains a response or note to any line in this Part VI			X								
Sec	tion A. Governing Body and Management											
	•		Yes	No								
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 7	_										
	If there are material differences in voting rights among members of the governing body, or											
	if the governing body delegated broad authority to an executive committee or similar											
	committee, explain in Schedule O											
b	Enter the number of voting members included in line 1a, above, who are independent 1b 7											
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with											
	any other officer, director, trustee, or key employee?	2	i	X								
3	Did the organization delegate control over management duties customarily performed by or under the direct											
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X								
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X								
5 Did the organization become aware during the year of a significant diversion of the organization's assets?												
and the second s												
7a												
, a	one or more members of the governing body?	7a		X								
h	Are any governance decisions of the organization reserved to (or subject to approval by) members,											
Ь	stockholders, or persons other than the governing body?	7b		x								
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	'5	-									
8		8a	x									
a	The governing body?	8b	x									
b	Each committee with authority to act on behalf of the governing body?	80										
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O											
500	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co	9 40		<u>X</u>								
Sec	tion B. Foncies (This Section B requests information about policies not required by the internal Nevenue Co.	ue /	Yes	No								
40-	Did the organization have local chapters, branches, or affiliates?	10a	-103	X								
10a	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	100										
b		10b										
44-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	11a		<u>x</u>								
11a		110										
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	420	x									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	X									
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	120										
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	425		x								
	describe in Schedule O how this was done	12c	X									
13	Did the organization have a written whistleblower policy?	13	X									
14	Did the organization have a written document retention and destruction policy?	14										
15	Did the process for determining compensation of the following persons include a review and approval by											
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	4-		v								
а	The organization's CEO, Executive Director, or top management official	15a		X								
b	Other officers or key employees of the organization	15b	<u> </u>	X								
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	ļ										
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			7.7								
	with a taxable entity during the year?	16a		X								
þ	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			,								
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the											
	organization's exempt status with respect to such arrangements?	16b		L								
	tion C. Disclosure											
17	List the states with which a copy of this Form 990 is required to be filed IL											
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)											
	available for public inspection. Indicate how you made these available. Check all that apply											
	Own website Another's website Upon request Other (explain in Schedule O)											
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and											
	financial statements available to the public during the tax year											
20	State the name, physical address, and telephone number of the person who possesses the books and records of the											
	organization ▶ DAVID HALL 210 VILLAGE DRIVE											
D	OWNERS GROVE IL 60516											

01111 330 (201	o,		_
Part VII	Compensation of Officers, Directors	s, Trustees, Key Employees, Highest Compensated Employees, and	
	Independent Contractors		

Check if Schedule O contains a response or note to any line in this Part VII

Section A.	Officers	, Directors,	Trustees, Ke	y Employees	, and Highest (compensated Employee	<u>s</u>
							41.

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours per week (list any	bo	x, uni	Pos check less po and a c	erson	than o is both or/truste	an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(VV-2) (USS-WIGC)	organization and related organizations
(1) DOUGLAS WALTON										
	0.00								_	_
CHAIRMAN	0.00	X		<u> </u>				0	0	0
(2) RICHARD BLOOM										
	0.00								_	_
VICE-CHAIRMAN	0.00	X		<u> </u>				0	0	0
(3) VICTOR BOTH						1 1				
	0.00							_	_	
SECRETARY/TREASURER	0.00	X						0	0	0
(4) GREGORY CARLSON										
	0.00							_		
	0.00	X		ļ	_	\sqcup		0	0	0
(5) DEBRA FREDRICKS										
	0.00									
	0.00	X		-	ļ	$\downarrow \downarrow \downarrow$		0_	0	0
(6) RODNEY DAHLIN					1					
	0.00									_
	0.00	X	<u> </u>	<u> </u>	<u> </u>	1		0	0	0
(7) JAMES WHITMAN										
	0.00	1	1							_
	0.00	X	<u> </u>	 	<u> </u>	+		0	0	0
(8) DAVID HALL	00.00				-	1				
	20.00			,,				27 102		o
PRESIDENT	0.00	┼	├	X	├			37,103	0	<u> </u>
(9)	ļ ,									
(10)										
(11)				-						
										000

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36-3632069

Par	(A) Name and title	(B) (C) Average Position (do not check more than on box, unless person is both a officer and a director/trustee organizations below dotted) (B) (C) Position (do not check more than on box, unless person is both a officer and a director/trustee or Individual organizations below dotted)							(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	Estin amoi oth compe from organ	ant of ner nsation	
		below dotted	dual trustee ector	nstitutional trustee	, T	Key employee	Highest compensated employee	er				zations	
(12)							-						
(13)													
(14)					_								
(15)													
(16)													
(17)													
(18)													
(19)													
1b c d	Sub-total Total from continuation she Total (add lines 1b and 1c)	ets to Part VII,	Sect	ion A	A	1	1	> > >	37,103 37,103				
<u>2</u>	Total number of individuals (increportable compensation from	-		to th	ose	liste	d abo	ve)	who received more than \$1	00,000 in		Yes	No
3 4	Did the organization list any for employee on line 1a? If "Yes," For any individual listed on line	complete Schedue 1a, is the sum o	ile J f rep	for s ortab	uch i	ndiv ompe	idual ensat	ion a	and other compensation froi		3		х
5	organization and related organ individual Did any person listed on line 1	a receive or accr	je co	mpe	ensat	ion f	rom a	any	unrelated organization or inc	dividual	4		x
	for services rendered to the orgon B. Independent Contractor	ors								2400.000 /	5		
1	Complete this table for your fiv	e highest compe zation Report co (A) I business address	nper	ed ind	aepe on fo	naer r the	cale	ntrac nda	r year ending with or within t	the organization's tax year (B) Iton of services		(C) compensa	
	nume one	1 000111033 0001033							5556.12	ion or connect			
						···· .			· · · · · · · · · · · · · · · · · · ·				
								-					
					_								
DAA	Total number of independent of received more than \$100,000								listed above) who	0	-	orm 99	0 (2013

		Check ı	f Schedule C) conta	ains a r	esponse or i	note to any line in			
		•					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
हे है	1a	Federated camp	paigns	1a						
턀딂		Membership du	•	1b						
آڅري اڅري		Fundraising eve		1c						
흹	d	Related organiz	ations	1d						
S,E	е	Government grants (c	ontributions)	1e						
	f	All other contributions	, gifts, grants,							
ᇐ횖		and similar amounts n	ot included above	1f		216,569				
Contributions, Giffs, Grants and Other Similar Amounts	g	Noncash contributions	included in lines 1a-	1f \$;					
3 ಕ	h	Total. Add lines	1a–1f			>	216,569			
Program Service Revenue						Busn Code				
Ye	2a									
8.	b									
2	С								-	
Ser	d									
ЩЩ	е									·
ğ	f	All other progra	m service rever	nue		L				
٩	9	Total Add lines				<u> </u>				
	3	Investment inco		ividend	s, interes	t,	05 555	05 888		
		and other simila	•				85,777	85,777		
	4	Income from inv	estment of tax-	exempt	bond pro	oceeds 🕨 📙				
	5	Royalties				<u> </u>			····	
			(ı) Real		(11)	Personal				
	6a	- F								
	b	Less rental exps								
	С.	Rental inc or (loss)		1.						
	d 7a	Net rental incom	ne or (loss) (i) Securities		/11) Other		-		
		sales of assets	(i) Securities		- (11	Other				
		other than inventory								
	b	Less cost or other								
		basis & sales exps Gain or (loss)								
	_	Net gain or (los	<u></u>							
	b es	Gross income from		nte [
ī	Qa	(not including \$	ii iunoraising ever	"3						
Ver		of contributions re	norted on line 1c)							
æ		See Part IV, line 1		a						
Other Revenue	h	Less direct exp		ь						
ŏ		Net income or (events	•				
		Gross income from								
		See Part IV, line 1	-	а						
	b	Less direct exp		b						
		Net income or (ng activ	rities	•				
		Gross sales of		ſ						
		returns and allo	wances	а						
	b	Less cost of go	ods sold	b[
	C	Net income or (loss) from sales	of inve	ntory	•				
		Misc	ellaneous Revenue			Busn Code				
	11a									
	b									
	С									
	d	All other revenu								
	е	Total. Add lines				> _				
	12	Total revenue	 See instruction 	ns .		•	302,346	85,777	0	1 0

Part IX Statement of Functional Expenses

Secti	on 501(c)(3) and 501(c)(4) organizations must confidence of Schedule O contains a response			ete column (A)	
Do n	ot include amounts reported on lines 6b,	(A) Total expenses	(B)	(C)	
	b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21	50	50		
2	Grants and other assistance to individuals in	}			
	the U.S. See Part IV, line 22			· · · · · · · · · · · · · · · · · ·	
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members	 	·		
5	Compensation of current officers, directors,				
c	trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	37,103			37,103
8	Pension plan accruals and contributions (include	3.7200			
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				···
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal				
C	Accounting	950		950	
d	Lobbying				
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O)	4,214		4,214	
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy Travel				
17 18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	· · · · ·			
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O)				
а					
b					
C					
d	All others are a second	 			
e 25	All other expenses	42,317	50	5,164	37,103
25 26	Total functional expenses Add lines 1 through 24e Joint costs. Complete this line only if the	42,311		3,104	31,103
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here ▶				
	following SOP 98-2 (ASC 958-720)				
DAA					Form 990 (2013)

Form 990 (2013)

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 59,325 59,583 Cash---non-interest bearing 1,108,213 1,363,508 2 2 Savings and temporary cash investments 3 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors. trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 10b 10c b Less accumulated depreciation 11 Investments-publicly traded securities 11 12 Investments—other securities See Part IV, line 11 12 13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 1,167,538 1,423,091 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 17 Accounts payable and accrued expenses 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X. 493,414 488,938 of Schedule D 493,414 488,938 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here and Balances complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets 27 Temporarily restricted net assets 28 Net Assets or Fund 29 Permanently restricted net assets X Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 674,124 934,153 32 Retained earnings, endowment, accumulated income, or other funds 674,124 934,153 33 Total net assets or fund balances 33 1,423,091 Total liabilities and net assets/fund balances 1,167,538

Form	990 (2013) FAIRVIEW FOUNDATION	36-3632069			Page 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in t	hıs Part Xi			
1	Total revenue (must equal Part VIII, column (A), line 12)		1		2,346
2	Total expenses (must equal Part IX, column (A), line 25)		2		2,317
3	Revenue less expenses Subtract line 2 from line 1		3		0,029
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column	(A))	4	67	4,124
5	Net unrealized gains (losses) on investments		5		
6	Donated services and use of facilities		6		
7	Investment expenses		7		
8	Prior period adjustments		8		
9	Other changes in net assets or fund balances (explain in Schedule O)		9		
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal P	art X, line			
	33, column (B))		10	93	4,153
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in t	his Part XII			
					'es No
1	Accounting method used to prepare the Form 990 X Cash Accrual	Other		_	
	If the organization changed its method of accounting from a prior year or checked "Or	ther," explain in			
	Schedule O				ĺ
2a	Were the organization's financial statements compiled or reviewed by an independen	t accountant?		2a	X_
	If "Yes," check a box below to indicate whether the financial statements for the year v	vere compiled or			
	reviewed on a separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and sep	parate basis			
ь	Were the organization's financial statements audited by an independent accountant?			2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year v	vere audited on a			
	separate basis, consolidated basis, or both				
	Separate basis Consolidated basis Both consolidated and sep	parate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes response				
	of the audit, review, or compilation of its financial statements and selection of an inde			2c	
	If the organization changed either its oversight process or selection process during th				
	Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or a	udits as set forth in			
	the Single Audit Act and OMB Circular A-133?			3a	x
b	If "Yes," did the organization undergo the required audit or audits? If the organization	did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to u			3b	
				Form	990 (2013)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public Inspection.

Department of the Treasury Internal Revenue Service Name of the organization

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

FAIRVIEW FOUNDATION

Employer identification number 36-3632069

The organization is not a private foundation because it is. (For lines 1 through 11, check only one box.) 1. A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).					
· ~					
A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A best tall or a cooperative hospital seques organization described in section 170(b)(1)(A)(iii)					
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).					
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's n	name,				
city, and state					
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in					
section 170(b)(1)(A)(iv). (Complete Part II)					
A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).					
7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public					
described in section 170(b)(1)(A)(vi).(Complete Part II)					
8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)					
9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross					
receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its					
support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses					
acquired by the organization after June 30, 1975 See section 509(a)(2) (Complete Part III)					
10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).					
An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the					
purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section					
509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h					
a Type I b Type II c Type III-Functionally integrated d Type III-Non-functionally	, integrate	ed			
e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons					
other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1)					
or section 509(a)(2)					
f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting					
organization, check this box					
g Since August 17, 2006, has the organization accepted any gift or contribution from any of the					
following persons?	,				
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and		Yes	No		
(III) below, the governing body of the supported organization?	11g(ı)				
(ii) A family member of a person described in (i) above?	11g(ii)				
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	11g(in)				
h Provide the following information about the supported organization(s)					
(i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Did you notify (vi) Is the	II) Amount o		у		
(i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization (v) Did you notify organization (described on lines 1–9 in col (i) listed in your the organization in col (ii) listed in your the organization in col (iii) listed in your the organization in col (iiii) listed	n) Amount o		у		
(i) Name of supported organization organizat	-		у		
(ii) Name of supported organization organiza	-		у		
(i) Name of supported organization organizat	-		у		
(ii) Name of supported organization (iii) EIN (iii) Type of organization (described on lines 1–9 above or IRC section (see instructions) (iv) Is the organization in col (i) listed in your governing document? Yes No Yes No Yes No (v) Did you notify the organization in col (i) organization in col (i) organization in the U.S.? Yes No Yes No	-		у		
(ii) Name of supported organization (iii) EIN (iii) Type of organization (described on lines 1–9 above or IRC section (see instructions) (iv) Is the organization in col (i) listed in your governing document? Yes No Yes No Yes No (v) Did you notify the organization in col (i) organization in col (i) organization in the U.S.? Yes No Yes No	-		у		
(ii) Name of supported organization (described on lines 1–9 above or IRC section (see instructions) (A) (II) EIN (III) Type of organization (described on lines 1–9 above or IRC section (see instructions) (IV) Is the organization (in col (i) listed in your governing document? Yes No Yes No Yes No (A) (B)	-		у		
(ii) Name of supported organization organiza	-		у		
(ii) Name of supported organization (iii) EIN (iii) Type of organization (described on lines 1–9 above or IRC section (see instructions) (A) (B) (iii) Type of organization (described on lines 1–9 above or IRC section (see instructions) (iv) Is the organization in col (i) listed in your governing document? Yes No Yes No Yes No (A) (B)	-		у		
(ii) Name of supported organization (iii) EIN (iii) Type of organization (described on lines 1–9 above or IRC section (see instructions) (A) (B) (II) EIN (III) Type of organization (described on lines 1–9 above or IRC section (see instructions) (IV) Is the organization in col (i) of your support? Yes No Yes No Yes No (C) (D)	-		у		
(ii) Name of supported organization (described on lines 1–9 above or IRC section (see instructions) (A) (II) EIN (III) Type of organization (described on lines 1–9 above or IRC section (see instructions) (IV) Is the organization (in col (i) listed in your governing document? Per No Yes No Ye	-		у		

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

	tion A. Public Support		· · · · · · · · · · · · · · · · · · ·				
Caler	dar year (or fiscal year beginning in)▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	449,346	134,368	44,725	178,997	216,569	1,024,005
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	449,346	134,368	44,725	178,997	216,569	1,024,005
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)			·			
6	Public support. Subtract line 5 from line 4						1,024,005
	tion B. Total Support						
Caler	dar year (or fiscal year beginning in)▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	449,346	134,368	44,725	178,997	216,569	1,024,005
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	27,112	13,200	160,248	121,042	85,777	407,379
9	Net income from unrelated business activities, whether or not the business is regularly carried on						· · · · · · · · · · · · · · · · · · ·
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11	Total support. Add lines 7 through 10		······				1,431,384
12	Gross receipts from related activities, etc. (s	see instructions)				12	85,777
13	First five years. If the Form 990 is for the o	organization's first, s	econd, third, fourth	, or fifth tax year as	s a section 501(c)(3	3)	
	organization, check this box and stop here						<u> </u>
Sec	tion C. Computation of Public Su	port Percenta	ge				
14	Public support percentage for 2013 (line 6,	column (f) divided b	y line 11, column (1))		14	71.54%
15	Public support percentage from 2012 Scheo	dule A, Part II, line 1	4			15	92.55%
16a	33 1/3% support test—2013. If the organization qualif				/3% or more, chec	k this	► X
b	33 1/3% support test—2012. If the organic	zation did not check	a box on line 13 or	16a, and line 15 is	33 1/3% or more,		_
	check this box and stop here. The organization	ation qualifies as a p	oublicly supported of	organization			▶ [
17a	10%-facts-and-circumstances test-201	3. If the organization	n did not check a b	ox on line 13, 16a,	or 16b, and line 14	IS	
	10% or more, and if the organization meets	the "facts-and-circu	ımstances" test, ch	eck this box and st	t op here . Explain ir	ו	
	Part IV how the organization meets the "fac	ts-and-circumstance	es" test. The organ	zation qualifies as	a publicly supporte	d	
	organization						▶ [
b	10%-facts-and-circumstances test—201	2. If the organization	n did not check a b	ox on line 13, 16a,	16b, or 17a, and lin	ne	
	15 is 10% or more, and if the organization r	neets the "facts-and	-cırcumstances" te	st, check this box a	and stop here.		
	Explain in Part IV how the organization mee	ets the "facts-and-cir	cumstances" test	The organization q	ualifies as a publici	у	_
	supported organization						▶ [
18	Private foundation. If the organization did	not check a box on	line 13, 16a, 16b, 1	7a, or 17b, check	this box and see		_
	Instructions						▶ [

Part III Support Schedule for Organizations Described in Section 509(a)(2)

1 - 1	_	, , , ,	
(Complete only if	you checked the bo	x on line 9 of Part I or if the organization failed to qualify under Part I	11
		er the tests listed below, please complete Part II.)	

<u>Seç</u>	tion A. Public Support							
Caler	ndar year (or fiscal year beginning in)▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")							
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5							
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
с 8	Add lines 7a and 7b Public support (Subtract line 7c from line 6)							
Sec	tion B. Total Support	!	<u> </u>	<u></u>	L	<u> </u>		
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	T	(f) Total
9	Amounts from line 6	(0, 2000	(0, -0.1	\-\(\(\frac{1}{2}\)	3=7==-	(4)		
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
С	Add lines 10a and 10b					ļ		
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)							
13	Total support. (Add lines 9, 10c, 11,							
14	and 12) First five years. If the Form 990 is for the 6	organization's first	second third four	h or fifth tay year a	e a section 501(c)	J		
17	organization, check this box and stop here	_	accoriu, triiru, touri	ii, oi iiitii tax yeaf a	35 a 5000011 30 1(C)	(<i>\\</i>)		▶ [7]
Sec	tion C. Computation of Public Su		age					
15	Public support percentage for 2013 (line 8,			(f))			15	%
16	Public support percentage from 2012 Sche	* *	•	. , ,			16	%
Sec	tion D. Computation of Investmer							
17	Investment income percentage for 2013 (lir			column (f))			17	%
18	Investment income percentage from 2012						18	%
19a	33 1/3% support tests—2013. If the organ	nization did not che	ck the box on line	14, and line 15 is m	ore than 33 1/3%,	and line		
	17 is not more than 33 1/3%, check this box	x and stop here . T	he organization qu	alifies as a publicly	supported organiz	ation		▶ []
þ	33 1/3% support tests—2012.If the organ							·
	line 18 is not more than 33 1/3%, check this	•	=					
20	Private foundation. If the organization did	not check a box or	n line 14, 19a, or 19	Bb, check this box a	and see instruction	S		<u> </u>

Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12 Also complete this part for any additional information (See instructions)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

▶ Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

2013
Open to Public Inspection

Employer identification number Name of the organization 36-3632069 FAIRVIEW FOUNDATION Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or education) Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a Total number of conservation easements 2b **b** Total acreage restricted by conservation easements 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Yes No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) Yes No (i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a See Form 990, Part X, line 10

Description of property

(a) Cost or other basis
(investment)

(other)

1a Land
b Buildings
c Leasehold improvements
d Equipment
e Other

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Part VII	Investments—Other Securities. Complete if the organization answered "Yes" to	Form 990 Part IV line 1	1b. See Form 990. Part X. line 12
•	(a) Description of security or category	(b) Book value	(c) Method of valuation
	(including name of security)		Cost or end-of-year market value
(1) Financial of	derivatives		
(2) Closely-he	eld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D)			·····
(E)			
(F)			
(G)			
(H)			
	n (b) must equal Form 990, Part X, col (B) line 12)		
Part VIII	Investments—Program Related.	Form 000 Doct IV line 1	10 Son Form 990 Part Y June 13
	Complete if the organization answered "Yes" to	(b) Book value	(c) Method of valuation
	(a) Description of investment	(b) Book Value	Cost or end-of-year market value
<u></u>			.,
(1)			
(2)			
(3)			
(5)			
(6)			
(7)			
(8)			
(9)			
	n (b) must equal Form 990, Part X, col. (B) line 13) ▶		
Part IX	Other Assets.		
	Complete if the organization answered "Yes" to	Form 990, Part IV, line 1	1d See Form 990, Part X, line 15
	(a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)		· - ·	
(5)			
(6)			
(7)			
(8)			
(9)			
	n (b) must equal Form 990, Part X, col. (B) line 15.)		>
Part X	Other Liabilities.		
	Complete if the organization answered "Yes" to	o Form 990, Part IV, line 1	l1e or 11f See Form 990, Part X,
	line 25		
1.	(a) Description of liability	(b) Book value	
	income taxes	400 030	
	RRED ANNUITY PAYMENTS	488,938	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total (Colum	n (b) must equal Form 990, Part X, col (B) line 25)	488,938	

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Part XIII Supplemental Information

4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Subtract line 2e from line 1

b Other (Describe in Part XIII)

c Add lines 4a and 4b

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line

2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

3

4c

5

Part XIII Supplemental Information (continued)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

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OMB No 1545-0047

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Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number

FAIRVIEW FOUNDATION

36-3632069

FORM 990 - ORGANIZATION'S MISSION

TO FOSTER, PROMOTE, DEVELOP, ENCOURAGE AND ACCEPT FUNDS FOR THE CONSTRUCTION, BUILDING, REMODELING, SUPPORT, ADMINISTRATION, STAFFING AND ANY OTHER LEGITIMATE PURPOSE OR FUNCTION OF ORGANIZATION UNDER IRS 501(C)(3).

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 NO REVIEW WAS OR WILL BE CONDUCTED.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION NO DOCUMENTS AVAILABLE TO THE PUBLIC