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Form 990-PF

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No. 1545-0052 2014

Open to Public Inspection

For	caler	ndar year 2014 or tax year beginning		. 2	014, and en	ding	, 20
		foundation			, , , , , , , , , , , , , , , , , , , ,	,	ntification number
		ST C AND MARION R KA	RRAS			27-153	0381
		and street (or P.O. box number if mail is not deli		-	Room/suite		mber (see instructions)
P		BOX 4942	,				
		own, state or province, country, and ZIP or foreig	n postal code			C If exemption app	plication is pending,
	-	BROOK IL 60522	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			check here	~_
		k all that apply: Initial return	Initial return of a fo	rmer nublic	charity	D 1 Foreign orga	anizations, check here
•	Onea	Final return	Amended return	ATTICL PUBLIC	and ney	2. Foreign orga	anizations meeting the 85% pere and attach computation
		Address change	Name change			E If private founda	• • • • •
H	Chac		(c)(3) exempt private fou	ndation		terminated under 507(b)(1)(A), ch	
$\overline{}$		on 4947(a)(1) nonexempt charitable trust	Other taxable private		Nn.	507(5)(7)(7), 51	
			Accounting method: X		Accrual	F If the foundation	is in a 60-month
		rket value of all assets at end of from Part II, col. (c), line 16)	Other (speafy)	J Casii [_	, Accidai	termination und 507(b)(1)(B), ch	
ye ▶ \$	-	· · · · · · · · · · · · · · · · · · ·	(Part I, column (d) must	he on cash l	hasis)	307(0)(1)(0), 01	L
		Analysis of Revenue and Expenses	(a) Revenue and	00 00 00000		.L	(d) Disbursements
T G	_	(The total of amounts in columns (b), (c),	, ,	1 ''	nvestment	(c) Adjusted r	for chantable
		and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	inco	ome	ın∞me	purposes (cash basis only)
	<u>'</u>	Contributions, gifts, grants, etc., received	50,000.	24 37			
	<u>'</u>	(attach schedule)	30,000.	manda manala di	Charles .	ا" <u>لاقت الما" الا" د.</u> الله الله ا	- 12
	2	Check In attach Schedule B	264.	أعدا المالدة			n er reg
	3	Interest on savings and temporary cash investments Dividends and interest from securities	203.				and the second
	1						The second secon
		Gross rents	> add at a section of	Nr. 1 1 2		' 4	The Control of Services
•	b	or (loss)		Takara		 	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Ž		Gross sales price for			1931 - 1 T		10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
<u>,</u>	b	all assets on line 6a		ستسك والسواح أراطف	<u>. 324</u>		
Revenue	7	Capital gain net income (from Part IV, line 2)		57. Tr.	7 7 7 3	 	to the second se
-	8	Net short-term capital gain		Control Grade	<u> </u>		ع سالگان ماهنده در در در این از ا این از این ا
		Income modifications . Gross sales less re-		Chief Car	1		- 1
	Ь	turns and allowances Less Cost of				· · · · · · · · · · · · · · · · · · ·	a series
	1	goods sold Gross profit or (loss) (attach schedule)		16. 773	<u> </u>	<u> </u>	The same of the sa
	11	Other income (attach schedule)	· · · · · · · · · · · · · · · · · · ·	<u> </u>	Sevent		273. 70.31
	12	Total. Add lines 1 through 11	50,264.				<u> </u>
	13	Compensation of officers, directors,	30,201.				
enses	14	trustees, etc Other employee salanes and wages	_			· · · · · · · · · · · · · · · · · · ·	
ns	15	Pension plans, employee benefits		D=			
ed.	1	Legal fees (attach schedule) .		RECEI	VED		
Ä		Accounting fees (attach schedule)	12/		·EU	 	
9	1	Other professional fees (attach schedule)	8	JUI A 1	70)	
ati	17	Interest	I IL	U.I	2015	1	-
str	18	Taxes (attach schedule) (see instructions)	1 0				
Ë	19	Depreciation (attach schedule) and depletion		PUEN	IIT		S. S. Miller April
Ē	20	Occupancy			×1		
Ą	21	Travel, conferences, and meetings		<u> </u>			
g	22	Printing and publications					
ā	23	Other expenses (attach schedule)	171.	 			
ü	24	Total operating and administrative		1			
76		expenses Add lines 13 through 23	171.				
De	25	Contributions, gifts, grants paid	12,100.	 			12,100.
Ō	26	Total expenses and disbursements. Add lines 24 and 25	12,271.	 			12,100.
	27	Subtract line 26 from line 12	E		- ',		
		Excess of revenue over expenses and disbursements	37,993.	,			
	ь	Net investment income (if negative, enter -0-)					· · · · · · · · · · · · · · · · · · ·
	Į.	Adjusted net income (if negative, enter -0-)	P 1/4 = 000 1	,	•	· ·	
		,		, -			1

SCANNED JUL 07 2018

		Attached schedules and amounts in the	Beginning of year		End o	f year
Lit	art II	Balance Sheets description column should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash - non-interest-bearing	222,974.	251,96		251,967.
	1	Savings and temporary cash investments				
	Į.	Accounts receivable ▶	18 No. 28 18 18 18 18 18 18 18 18 18 18 18 18 18	Mark a Salam	4	
		Less: allowance for doubtful accts. ▶				
	4	Pledges receivable ▶	THE SECTION SECTIONS	Company of the last	4.00	MARKET INCH
		Less: allowance for doubtful accts. ▶				
	5	Grants receivable	-			
						-
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
		Other notes and loans re- ceivable (attach schedule)	2.7988774855K	BETTER THE	. 6	194.475 L. VA. 7.3.3
		Less allowance for doubtful accounts			A PROPERTY OF	CAMPAGE STATES
ž		Inventories for sale or use				
Assets	1	Prepaid expenses and deferred charges				
ð	1	Investments - U.S. and state govt. obligations (attach schedule)				
	1	Investments - corporate stock (attach schedule)	-			
	ł	Investments - corporate bonds (attach schedule)				
		Investments - land, buildings, and equipment. basis	\$ =	हिस्का प्रकार गाउँ एक	2 L ZA	Secretary of the second
		Less accumulated depreciation	ما كالشبية معالك المعالك المساوط المساوط المساور		لكتبحيي	<u>المستخدمة المتحديدة المستخدمة المتحددة المتحددة المتحددة المتحددة المتحددة المتحددة المتحددة المتحددة المتحدد</u>
	12	Investments - mortgage loans				
		Investments - other (attach schedule)				· · · · ·
		,	r : , , , , , , , , , , , , , , , , , ,	700,7-600,000	- Se - Se	THE RESTRICT
		Land, buildings, and equipment basis Less accumulated depreciation (attach schedule)	a a and a a solder a a solder	in the second	كليت شيكة	<u> </u>
		Other assets (describe)				
	į.	Total assets (to be completed by all filers - see the				
		Instructions. Also, see page 1, item I)	222,974.	251,96	7.	251,967.
		Accounts payable and accrued expenses				Silver Line of Contract of the
		Grants payable				
Š	19	Deferred revenue				
≝	20	Loans from officers, directors, trustees, and other disqualified persons				OTTO ACTION AS A
Liabilitles		Mortgages and other notes payable (attach schedule)				
Ë		Other liabilities (describe ▶				
_						
	23	Total liabilities (add lines 17 through 22)				
		Foundations that follow SFAS 117, check here . >				
Ŋ		and complete lines 24 through 26 and lines 30 and 31.				
2	1	Unrestricted				
Balances		Temporarily restricted	1			
Ва	1	Permanently restricted	····			Same Williams
פַ		Foundations that do not follow SFAS 117, ck. here ▶				
or Fund		and complete lines 27 through 31.				A STATE OF THE STA
Ē	1	Capital stock, trust principal, or current funds				The state of the s
S	,	Paid-in or capital surplus, or land, bldg, and equipment fund				
ĕ	1	Retained earnings, accumulated income, endowment, or other funds	222,974.	251,96	7.	No. of the last of
ş	1					
Net Assets	30	Total net assets or fund balances (see instructions)	222,974.	251,96	7.	经是如此的证明
ž	1	Total liabilities and net assets/fund balances (see				
	1	instructions)	222,974.	251,96	7.	The state of the s
Pa	art III	Analysis of Changes in Net Assets or Fund Bal		*****		
		net assets or fund balances at beginning of year - Part II, column		with		
		f-year figure reported on prior year's return)			1	222,974.
2		amount from Part I, line 27a			2	222,974. 37,993.
3	Other	increases not included in line 2 (itemize) ▶			3	
4	Add is	nes 1, 2, and 3			4	260,967.
5	Decre	eases not included in line 2 (itemize)			5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5) -	Part II. column (b), line 3	0 .	6	260,967.

		f property sold (e g , rea mon stock, 200 shs. ML			(b) How acquired P - Purchase D - Donation	1 ' '	ate acquired o , day, yr)	(d) Date sold (mo., day, yr.)
a				,				
b		·-···				ļ		
С						ļ		
d		····						
е			· · · · · · · · · · · · · · · · · · ·			<u> </u>		
(e) Gross sales price	(f) De	preciation allowed (or allowable)		Cost or of				or (loss) f) minus (g)
a b			<u> </u>			-		
С								
d								
е				•				
Complete only for assets sho	wing gain ii	n column (h) and owned	by the fou	ndation or	12/31/69	((I) Gains (Col	l. (h) gain minus
(i) F M.V. as of 12/31/69		Adjusted basis as of 12/31/69		k) Excess over col (j		α	• •	less than -0-) or rom col (h))
а						†		
b		· · · · · · · · · · · · · · · · · · ·	1			1		
c						1		
đ			<u> </u>			 		
e						1		
2 Capital gain net income or (r	net capital lo		also enter II enter -0- II			2		
Net short-term capital gain o	- (laaa) aa d	L '		II Faiti, iii	ie /	-		
		· ·	(5) and (6)		\neg			
If gain, also enter in Part I, Iii		, , ,			>			
If (loss), enter -0- in Part I, Iii Part V Qualification		ection 4940(e) for F	<u> </u>	· · · · · · · · · · · · · · · · · · ·	— <u>—</u>	3	L	
f section 4940(d)(2) applies, lea Was the foundation liable for the f "Yes," the foundation does not	section 494	12 tax on the distributable			•	rıod?		Yes X
Enter the appropriate amour	it in each co	lumn for each year; see	the instruc	ctions befo	re making any e	entnes		
(a) Base penod years Calendar year (or tax year be	a. in) Adj	(b) usted qualifying distribu	tions		(c) let value of itable-use asset	s		(d) ribution ratio ivided by col (c))
2013		-				-	X 2 2 X 2 Z 2	
2012							1	
2011							1	
2010								
2009					48,2	71.		
							_	
2 Total of line 1, column (d) .							2	
3 Average distribution ratio for	-			e 2 by 5, c	or by the number	r		
of years the foundation has	been in exis	tence if less than 5 year	rs .				3	
Enter the net value of nonch	arıtable-use	assets for 2014 from P	art X, line 5	5.			4	236,715
Multiply line 4 by line 3							5	
6 Enter 1% of net investment	ncome (1%	of Part I, line 27b)					6	
7 Add lines 5 and 6					-		7	
B Enter qualifying distributions			•				8	12,100
If line 8 is equal to or greate instructions	r than line 7	, check the box in Part \	VI, line 1b,	and comp	lete that part usi	ng a 1%	% tax rate See	the Part VI

Forr	n'990-PF(2014) ERNEST C AND MARION R KARRAS 27-1530	381	Pag	e 4
. Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruction	ns)		
	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1	1 1	, ,	7. 1
	Date of ruling or determination letter (attach copy of letter if necessary - see instr.)			
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► X 1			
	and enter 1% of Part I, line 27b	,	j. + . ;	
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter			10-
_	4% of Part I, line 12, col (b)		. * }	٠, ٠, ١
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2	ta 25-20	1	
3	Add lines 1 and 2		1	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	(<u></u>	<u> </u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		<u>, </u>	
6			,r,	•
_	Credits/Payments	*	A STATE	%
a	2014 estimated tax payments and 2013 overpayment credited to 2014 . 6a 25.	4 E.		, <u></u>
b	Exempt foreign organizations - tax withheld at source	E	(25)	- 3
c	Tax paid with application for extension of time to file (Form 8868)	.'α!. ε" 		.+
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d		25	·
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		24	4.
	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ 24. Refunded ▶ 11			
	art VII-A Statements Regarding Activities	T		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or	1,5	Yes	No
	Intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for		Ī	
	the definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	F 41 .4		
	or distributed by the foundation in connection with the activities	2		
C	Did the foundation file Form 1120-POL for this year?	1c		<u>X</u>
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.			
	(1) On the foundation \$ (2) On foundation managers \$	7.7	1.5	,
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	5.3	: 21	u z, .`
	on foundation managers \$	الوسادية)
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			,•~ 5 :
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	المناسقة	2000 - 2000 100 - 2000	د ره او بنید. د ما
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		_X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	1,37	10 mg 4	
	By language in the governing instrument, or			*\$**.
	By state legislation that effectively amends the governing instrument so that no mandatory directions	المروعة الما	المتلاث	
	that conflict with the state law remain in the governing instrument?	6		Χ
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	L_
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)▶	1	1 X 1	,
	IL	1	['	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or	33.3	[] .	ľ.,
-	designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	-
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	1	[p ·]	." .
-	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"	ļ	- 4	, ,
	complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		T	
	names and addresses	10	X	

Par	t VII-A	Statements Regarding Activities (continued)				
11	At any time	during the year, did the foundation, directly or indirectly, own a controlled entity				
	within the n	neaning of section 512(b)(13)?				
	If "Yes," att	ach schedule (see instructions)		11		X
12	Did the fou	ndation make a distribution to a donor advised fund over which the foundation or a disqualified				
		advisory privileges? If "Yes," attach statement (see instructions)		12		X
13	Did the fou	ndation comply with the public inspection requirements for its annual returns and exemption application?	·	13	X	
	Website ad					
14	The books	are in care of ► SAME Telephone no. ►				
	Located at					
15		47(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 - Check here	,			•
		he amount of tax-exempt interest received or accrued during the year	<u> </u>			
16	At any time	during calendar year 2014, did the foundation have an interest in or a signature or other authority	,		Yes	No
		k, securities, or other financial account in a foreign country?		16	#7525 Av.	X
	See instructi	ons for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If "Yes," enter the name of the				
	foreign cou			19.		19-10-L
Par		Statements Regarding Activities for Which Form 4720 May Be Required		SR-SSP4		
		4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	•	year did the foundation (either directly or indirectly):	71			
		e in the sale or exchange, or leasing of property with a disqualified person? Yes	∐ No			
	. ,	money from, lend money to, or otherwise extend credit to (or accept it from)	7			
	•	valified person?	⊒ ` ` '	1		A STATE OF
		n goods, services, or facilities to (or accept them from) a disqualified person? Yes Yes Yes	≓			September 1
	. , ,	poi.tot.or.po) or rounzeloo etc expenses on a sequence process.	∐ No			200
		er any income or assets to a disqualified person (or make any of either available benefit or use of a disqualified person)?	7) No.	E		
		bonom or doe or a dioqualmost personny.	∐ No	K.,		1 T.
		to pay money or property to a government official? (Exception. Check "No"				\$36. 315.4
		oundation agreed to make a grant to or to employ the official for a period emination of government service, if terminating within 90 days.) Yes	No No			
_			7 140			1260
b	•	ver is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in is section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		1b	BEADE.	У.
		ons relying on a current notice regarding disaster assistance check here	 T	3	24 g.	
_	•	Indation engage in a prior year in any of the acts described in 1a, other than excepted acts,	_1			, 1
·		not corrected before the first day of the tax year beginning in 2014?		1c	Net AE 3	X
2		allure to distribute income (section 4942) (does not apply for years the foundation was a private				20. 11
-		oundation defined in section 4942(j)(3) or 4942(j)(5)):				,
а		of tax year 2014, did the foundation have any undistributed income (lines 6d		100		5 -
_		art XIII) for tax year(s) beginning before 2014?	X No			
		at the years ▶ 20 , 20 , 20 , 20				5
ь	Are there a	any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		- 4		
		incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)				E Soil
		s listed, answer "No" and attach statement - see the instructions.)		2b	<u></u>	
С	If the provi	sions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.) 7
_	▶ 20	, 20, 20, 20				*
3a	Did the for	undation hold more than a 2% direct or indirect interest in any business	_		144	· .
	•	at any time during the year?	X No	1		· ` '.
þ	If "Yes," di	d it have excess business holdings in 2014 as a result of (1) any purchase by the foundation		W 5	k	
	or disquali	fied persons after May 26, 1969; (2) the lapse of the 5-year penod (or longer penod approved			Sec.	j.
	by the Cor	nmissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3)		10	3.	
	the lapse of	of the 10-, 15-, or 20-year first phase holding penod? (Use Schedule C, Form 4720, to determine			1	
		dation had excess business holdings in 2014.)		3b	<u> </u>	
4a		indation invest during the year any amount in a manner that would jeopardize its chantable purposes? .		4a	-	Х
b		undation make any investment in a prior year (but after December 31, 1969) that could jeopardize its cha	ıntable		-3-1	7'
	purpose th	at had not been removed from jeopardy before the first day of the tax year beginning in 2014?		4b	<u> </u>	X

Part VII-B Statements Regarding Acti	vities for Which F	orm 4720 May Be R	equired (continued	d)
5a During the year did the foundation pay or incur	any amount to:			
(1) Carry on propaganda, or otherwise attemp	t to influence legislation	n (section 4945(e))?	Yes X N	0
(2) Influence the outcome of any specific publ	ic election (see section	4955); or to carry		
on, directly or indirectly, any voter registra	tion drive?		Yes X N	o market
(3) Provide a grant to an individual for travel,	study, or other similar p	urposes?	. Yes X N	0
(4) Provide a grant to an organization other th	an a charitable, etc., or	ganization described		
in section 4945(d)(4)(A)? (see instructions)		. Yes X N	o 13 14 14 14 14 14 14 14 14 14 14 14 14 14
(5) Provide for any purpose other than religiou	ıs, charitable, scientific,	, literary, or		
educational purposes, or for the prevention	n of cruelty to children o	or animals?	Yes X N	o 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
b If any answer is "Yes" to 5a(1)-(5), did any of t			s described in	
Regulations section 53.4945 or in a current no	tice regarding disaster	assistance (see instruction	ns)?	. 5b
Organizations relying on a current notice regains	rding disaster assistanc	e check here	▶□	
c If the answer is "Yes" to question 5a(4), does	the foundation claim ex	emption from the	_	
tax because it maintained expenditure respons	sibility for the grant?		. Yes N	0
If "Yes," attach the statement required by Reg	ulations section 53.494	5-5(d).		
6a Did the foundation, during the year, receive ar		• •		
premiums on a personal benefit contract?	· · · · · · · · · · · · · · · · · · ·		Yes X N	o line
b Did the foundation, during the year, pay premi	ums, directly or indirect	ly, on a personal benefit o	L	. 6b X
If "Yes" to 6b, file Form 8870.	•	•		12 1 1 3 T 5 T
7a At any time during the tax year, was the found	ation a party to a prohit	oited tax shelter transaction	n? Yes X N	ر المالية
b If "Yes," did the foundation receive any proces				7b
Part VIII Information About Officers	·			d Employees,
and Contractors	•	·		• • •
1 List all officers, directors, trustees, foundation	on managers and their	r compensation (see inst	ructions).	
(a) Name and address	(b) Title, and average hours per week		(d) Contributions to employee benefit plans	(e) Expense account,
(a) Name and address	devoted to position	(If not paid, enter -0-)	and deferred comp.	other allowances
ERNEST C KARRAS	CO-TTEE			
75 FOREST GATE CIRCLE	5	0		
MARION R KARRAS	CO TTEE			
75 FOREST GATE CIRCLE	5	0		
2 Compensation of five highest-paid employee	s (other than those in	cluded on line 1 - see in	structions).	
If none, enter "NONE."				
(a) Name and address of each ampleus and	(b) Title, and average		(d) Contributions to employee benefit	(2) [
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	plans and deferred	(e) Expense account other allowances
	devoted to position		compensation	34101 0110110100
NONE				
				<u></u>
Total number of other employees paid over \$50,000)		. .	

Total. Add lines 1 through 3

3 Five highest-paid independent contractors for professional services (see i	instructions), if none, enter "NONE."	,
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(8) 1998 8: 86:1188	(c) compensation
	-	

Total number of others receiving over \$50,000 for professional services		<u> </u>
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Inc	tude relevant statistical info such	T
as the number of organizations and other beneficiaries served, conferences conve		Expenses
as the number of organizations and other beneficialles served, conferences conve	erieu, research papers produceu, etc.	
		1
2		
2		
	Atuational	
Part IX-B Summary of Program-Related Investments (see ins	<u> </u>	
Part IX-B Summary of Program-Related Investments (see instance) Describe the two largest program-related investments made by the foundation of	<u> </u>	Amount
Part IX-B Summary of Program-Related Investments (see instance) Describe the two largest program-related investments made by the foundation of	<u> </u>	Amount
Part IX-B Summary of Program-Related Investments (see instance) Describe the two largest program-related investments made by the foundation of	<u> </u>	Amount
Part IX-B Summary of Program-Related Investments (see instance to be the two largest program-related investments made by the foundation of	<u> </u>	Amount
· · · · · · · · · · · · · · · · · · ·	<u> </u>	Amount
Part IX-B Summary of Program-Related Investments (see instance Describe the two largest program-related investments made by the foundation of	<u> </u>	Amount
Part IX-B Summary of Program-Related Investments (see ins Describe the two largest program-related investments made by the foundation of	<u> </u>	Amount
Part IX-B Summary of Program-Related Investments (see instance Describe the two largest program-related investments made by the foundation of	<u> </u>	Amount

Form 990-PF (2014)

P	art X Minimum Investment Return (All domestic foundations must complete this part. For	reign	foundations,
_	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of secunties	1a	
b	Average of monthly cash balances	1b	240,320.
C	Fair market value of all other assets (see instructions)	1c	
d	I Total (add lines 1a, b, and c)	1d	240,320.
8	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	240,320.
4	Cash deemed held for chantable activities. Enter 1 1/2% of line 3 (for greater amount,		
	see instructions)	4	3,605.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	236,715.
6	Minimum investment return. Enter 5% of line 5	6	11,836.
P	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operation	ting 1	oundations and
	certain foreign organizations check here ▶ ☐ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	11,836.
2 :	a Tax on investment income for 2014 from Part VI, line 5		
1	b Income tax for 2014. (This does not include the tax from Part VI.)		
•	c Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	11,836.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	11,836.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	11,836.
<u> </u>	Part XII Qualifying Distributions (see instructions)		
L	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish chantable, etc., purposes:	4 4 4	
	a Expenses, contributions, gifts, etc -total from Part I, column (d), line 26	1a	12,100.
ı	b Program-related investments-total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific chantable projects that satisfy the:	10.00	
	a Suitability test (prior IRS approval required)	3a	
ı	b Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	12,100.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	12,100.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the fo	oundat	ion
	qualifies for the section 4940(e) reduction of tax in those years.		
			Form 990-PF (2014)

ш	Chaistibatea income (see	i istructions)			
1	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years pnor to 2013	(c) 2013	(d) 2014
	line 7	The rest of the second of the	· 一个	THE WASHINGTON	11,836.
2	Undistributed income, if any, as of the end of 2014:	San	いかにはは機能を	11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	10 A
а	Enter amount for 2013 only				
b	Total for prior years: 20 , 20 , 20	2、 地上的随意,在整约		ATT STORY	THE PARTY OF THE P
3	Excess distributions carryover, if any, to 2014:	公司 中国			
а	From 2009				
b	From 2010				
C	From 2011				
	From 2012				
	From 2013				
f	Total of lines 3a through e	ostuliber We imeest milk see			
,	Qualifying distributions for 2014 from Part XII,	111111111111111111111111111111111111111	1 - 1 - 1 - 1 - 1 - 1 - 2 - 1 - 2 - 2 -	AND	を表現では200mmによっている。 またないようなできた。ことのようと
•	line 4:▶\$ 12,100.	THE COUNTY OF			
_		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	Applied to 2013, but not more than line 2a		K 5- 1, 2 1, 21, 21, 21, 21, 21, 21, 21, 21,	() 1 d	製造機能ではある。 対象の機能ではある。
D	Applied to undistributed income of prior				
	years (Election required - see instructions)	- 45	14 2 2 2		教育 物の意味でありない。
С	Treated as distributions out of corpus				
	(Election required - see instructions) .		4 5 3 7 5 15 15 15 15 15 15 15 15 15 15 15 15 1	1257年至3月18年11日	· · · · · · · · · · · · · · · · · · ·
d	Applied to 2014 distributable amount .	و مراجع المراجع	4 4 4 4 4	S. P. LYNNE PARKET	11,836.
8	Remaining amount distributed out of corpus	264.	Comment of the state of	可多数的吸引的	
5	Excess distributions carryover applied to 2014			は人には、はは強い	
	(If an amount appears in ∞lumn (d), the		· 分加的激化	15.15.19 次 使物	
	same amount must be shown in column (a).)			50 10 10 10 10 10 10 10 10 10 10 10 10 10	Markey Charles
6	Enter the net total of each column as	18	4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	indicated below:	and the second second	1. 化表现的连续		
	Corpus. Add lines 3f, 4c, & 4e. Subtract line 5	264.		的复数经常的	A Street
b	Prior years' undistributed income. Subtract	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	line 4b from line 2b	F. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		THE WELL	经验证。经验
C	Enter the amount of pnor years' undistributed			1000 mar 10	· 建筑设施 (17) 建筑
	income for which a notice of deficiency	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Land of the state	1000 · 1
	has been issued, or on which the section	Land For St. S.		The same of the same of	The state of the s
	4942(a) tax has been previously assessed .			113 12 12 13	Market and a real a
d	Subtract line 6c from line 6b. Taxable	11 21 2 3		MESTERS TO THE SERVE AND	1 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	amount - see instructions	The second of			
е	Undistributed income for 2013. Subtract	+ ht	200		The state of the s
	line 4a from line 2a. Taxable amount -	40 g			
	see instructions	The state of the s		,	
f	Undistributed income for 2014. Subtract	ا ما الارسال ا	* 4 3	Commence of the state of head	h -a. a alf light area
	lines 4d and 5 from line 1. This amount		71 AT . 45 AT .		
	must be distributed in 2015				
7	Amounts treated as distributions out of		2000 - 300	12 13 13 14 15	23
	corpus to satisfy requirements imposed by				The state of
	section 170(b)(1)(F) or 4942(g)(3) (Election		1. 高级性的		The state of the s
	may be required - see instructions)		و ما الما الما الما الما الما الما الما		,
8	Excess distributions carryover from 2009		7		
•	not applied on line 5 or line 7 (see			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	instructions)			Programme and the second	
9	Excess distributions carryover to 2015.			7 7 7	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
-	Subtract lines 7 and 8 from line 6a	264.	1 人 总数 海滨	医阴影器 等華	
10	Analysis of line 9:	204.	100 34 400	1.2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
-	Excess from 2010	,	4	The second second	
		, , ,		1等 2 3 16 16 3	, , , , , , , , , , , , , , , , , , , ,
	Excess from 2011	7	T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	A STATE OF	
	Excess from 2012	-	1, 24, 3	200	1 ,
	Excess from 2013	· ' ·			· ` ` `
в	Excess from 2014 2 6 4 .	· ·	' :		1 .

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: SAME The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, chantable fields, kinds of institutions, or other factors: Form 990-PF (2014)

LUSTCASTER FOUNDATION CANCER RESEARCH HOLY APOSTLES PHILOPTOCHOS WEATERN SPRINGS CHILDRENS THEATER CONSUMER REPORTS FOUNDATION JUVENILE DIABETES FOUNDATION TEMOTHY CHRISTIAN SCHOOL LURIE CHILDRENS HOSPITAL CHICAGO IL Total Total DONATION DONATION 1,00 DONATION 1,00 DONATION 1,00 DONATION 1,00 DONATION 1,00 Total DONATION 1,00	3 Grants and Contributions Paid During the Year or Approved for Future Payment						
a Paid during the year NATL HELLENIC MUSEUM CHICAGO IL LUSTCASTER FOUNDATION CANCER RESEARCH HOLY APOSTLES PHILOPTOCHOS WEATERN SPRINGS CHILDRENS THEATER CONSUMER REPORTS FOUNDATION JUVENILE DIABETES FOUNDATION TEMOTHY CHRISTIAN SCHOOL LURIE CHILDRENS HOSPITAL CHICAGO IL Total Approved for future payment	·	show any relationship to any foundation manager	status of		Amount		
NATI HELLENIC MUSEUM CHICAGO IL LUSTCASTER FOUNDATION CANCER RESEARCH HOLY APOSTLES PHILOPTOCHOS WEATERN SPRINGS CONSUMER REPORTS FOUNDATION JUVENILE DIABETES FOUNDATION TEMOTHY CHRISTIAN SCHOOL LURIE CHILDRENS HOSPITAL CHICAGO IL DONATION Total Approved for future payment DONATION 2,00 DONATION DONATION 1,00 DONATION 1,00 DONATION 1,00 Total DONATION 1,00 Total DONATION 1,00 Total DONATION 1,00 Total DONATION 1,00		or substantial contributor	reapient				
LUSTCASTER FOUNDATION CANCER RESEARCH HOLY APOSTLES PHILOPTOCHOS WEATERN SPRINGS CHILDRENS THEATER CONSUMER REPORTS FOUNDATION JUVENILE DIABETES FOUNDATION TEMOTHY CHRISTIAN SCHOOL LURIE CHILDRENS HOSPITAL CHICAGO IL Total Total DONATION DONATION 1,00 DONATION 1,00 DONATION 1,00 DONATION 1,00 DONATION 1,00 Total DONATION 1,00	NATL HELLENIC MUSEUM						
HOLY APOSTLES PHILOPTOCHOS WEATERN SPRINGS CHILDRENS THEATER CONSUMER REPORTS FOUNDATION JUVENILE DIABETES FOUNDATION TEMOTHY CHRISTIAN SCHOOL LURIE CHILDRENS HOSPITAL CHICAGO IL Total Total Approved for future payment DONATION 1,000 1,000 Total DONATION 1,000 Total Total Total Approved for future payment				DONATION	2,000.		
WEATERN SPRINGS CHILDRENS THEATER CONSUMER REPORTS FOUNDATION JUVENILE DIABETES FOUNDATION TEMOTHY CHRISTIAN SCHOOL LURIE CHILDRENS HOSPITAL CHICAGO IL Total Total Approved for future payment DONATION 1,000 1,				DONATION	200.		
CONSUMER REPORTS FOUNDATION JUVENILE DIABETES FOUNDATION TEMOTHY CHRISTIAN SCHOOL LURIE CHILDRENS HOSPITAL CHICAGO IL Total Approved for future payment DONATION 50 DONATION 1,00 1,00 Total Approved for future payment				DONATION	1,000.		
JUVENILE DIABETES FOUNDATION DONATION TEMOTHY CHRISTIAN SCHOOL DONATION DONATION 1,00 Total DONATION Total DONATION Approved for future payment				DONATION	500.		
TEMOTHY CHRISTIAN SCHOOL LURIE CHILDRENS HOSPITAL CHICAGO IL Total	JUVENILE DIABETES			DONATION	150.		
LURIE CHILDRENS HOSPITAL CHICAGO IL Total	TEMOTHY CHRISTIAN			DONATION	250.		
Total	HOSPITAL			DONATION	1,000.		
b Approved for future payment					1,000.		
					12,100.		
Total							
	Total		<u>. </u>	<u>.</u> . ▶ 3b			

Page 12

Par	t XVI-A Analysis of Income-Producin	a Activiti	es	•		
	gross amounts unless otherwise indicated.	-	ted business income	Evolude	d by section 512, 513, or 514	(e)
Linter	gross amounts amoss outerwise molecules.			(c)		Related or exempt
		(a)	(b)	Exclu-	(d)	function income
		Business	Amount	sion	Amount	(See instructions.)
1	Program service revenue.	∞de		code		
а						
b						
С						
d						
e						
f						
g g	Fees and contracts from government agencies			 		
2	M. I. I. I. Adamson					
	•		264.	14		
3	Interest on savings and temporary cash investments .		204.	1 4		
4	Dividends and interest from securities	A. 1 . 7	Might be a set of the set	129 m. 1 25 Y	Date of an Durington that Inter 10	- Commence of the contract of
5	Net rental income or (loss) from real estate:	***	3 × 1 × 1 × 1 × 1 × 1	W 333	《李马》自己的《李马》	Market State Control
	Debt-financed property			ļ		
ь	Not debt-financed property			ļ		
6	Net rental income or (loss) from personal property	L		<u> </u>		
7	Other investment income			}		
8	Gain or (loss) from sales of assets other than inventory			}		
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue: a			†	<u> </u>	
ъ				<u> </u>		
				ļ		
q c					 	
				 		
8		* * * * * * * * * * * * * * * * * * *	264.	1	<u> </u>	
12	Subtotal. Add columns (b), (d), and (e)	, , ,	204.			264.
13	Total. Add line 12, ∞lumns (b), (d), and (e)			•	. 13	204.
	worksheet in line 13 instructions to verify calculation					
Pa	t XVI-B Relationship of Activities to					
Lir	e No. Explain below how each activity for wh					
	▼ accomplishment of the foundation's ex	empt purpo:	ses (other than by provid	ling fund	s for such purposes). (S	ee instructions)
-						
						······································
			·			
						
		- ,				
						
	_					
						
		-				
						Form 990-PF (2014)

Form, 990-PF (2014) ERNEST C AND MARION R KARRAS 27-1530381 Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described in section No 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? 15. Aug. a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) Х (2) Other assets . . . 1a(2) **b** Other transactions: Χ (1) Sales of assets to a noncharitable exempt organization 1b(1) X (2) Purchases of assets from a nonchantable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets . . . 1b(3) (4) Reimbursement arrangements . . 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations . 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of nonchantable exempt organization (d) Desc. of transfers, transactions, and sharing arrangements Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in Yes X section 501(c) of the Code (other than section 501(c)(3)) or in section 527? If "Yes," complete the following schedule. (a) Name of organization (c) Description of relationship (b) Type of organization Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and Declaration of preparer (other than taxpayer), Sign Here May the IRS discuss this return with the preparer shown below Signature of officer or truste

(see instructions)? X Yes Print/Type preparer's pame Preparet's signature PTIN Date SWARTZ SWARTZ 06/23/2015 BARRY A P00057409 RRY A self-employed ▶SWARTZ & REEDER Firm's EIN ▶47-2378004 Firm's name ▶650 E AZGONOUIN RD STE 404 847-241-5800 Firm's address Phone no SCHAUMBURG IL 60173-

Paid

Preparer

Use Only

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No. 1545-0047

2014

Employer identification number

ERNESI C AND MA.	RION R NARRAS	27-1530381				
Organization type (check one)						
Filers of:	Section:					
Form 990 or 990-EZ	orm 990 or 990-EZ 501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
• •	ered by the General Rule or a Special Rule. 8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule See instructions.				
General Rule						
	form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5 erty) from any one contributor. Complete Parts I and II. See instructions for determinions.					
Special Rules						
regulations under sections 13, 16a, or 16b, and that re	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
contributor, during the year	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
	not covered by the General Rule and/or the Special Rules does not file Schedule B					

Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Employer identification number 27-1530381

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	additional space is neede	d.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ERNEST C KARRAS		Person X Payroll
	75 FOREST GATE CIRCLE OAK BROOK IL 60523-	\$ 50,000.	Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

JS 990	Other Expenses				
	Expenses	Net investment	Adjusted net	Charitable	
Description	per books	ıncome	income	purposes	
STAGE	56.				
NUAL REPORT FEES	115.				
	171.				
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(Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

OMB No. 1545-1709

Information about Form 8868 and its instructions is at www.irs.gov/form8868. 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 previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or 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 filing of this form, visit www irs.gov/efile and click on e-file for Chanties & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-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 file income tax returns. Enter filer's identifying number, see instructions Employer identification number (ENUE SERVICE 27-1530381 Type or Name of exempt organization or other filer, see instructions print ERNEST C AND MARION R KARRAS File by the Number, street, and room or suite no If a P O. box, see instructions. Social security number (SSN) due date for P O BOX 4942 filing your APR 1 4 2015 return See City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions OAK BROOK IL 60522 SCHILLER PARK, II Enter the Return code for the return that this application is for (file a separate application for each return) RECEIVED INTERNAL REVENUE SERV Application Return Application Is For Code Is For Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF Form 5227 10 SCHILLER PARK Form 990-T (sec. 401(a) or 408(a) trust) 05 11 Form 6069 Form 990-T (trust other than above) 12 Form 8870 The books are in the care of ▶ SAME Telephone No ▶ 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) 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 \overline{AUG} $\overline{15}$, 20 $\overline{15}$, to file the exempt organization return for the organization named above. The extension is for the organization's return for. calendar year 2014 or tax year beginning , 20 , and ending 2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable 3a \$ credits. See instructions b If this application is for Form 990-PF or 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments 3b|\$ made. Include any prior year overpayment allowed as a credit c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution. If you are going to make an electronic fund withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

Recipient name and address	If an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
UNIVERSITY OF ILLINOIS SCHOLORSHIP		reopen	Communication	Amount
			DONATION	5,000.
NORTHWESTERN UNIVERSITY EVANSTON IL				
EVANSION IL				
			DONATION	1,000.
				п
				1
				1
 				

US 990PF	Substantial Co	ontributors		2014
Name	Address		d	
RNEST C KARRAS	75 FOREST GATE CIRCLE	(Enter street, zip code, state, and city, in that order) 75 FOREST GATE 60523- IL OAK BROOK		
	CINCIL			