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Form. **990-PF** Department of the Treasury Internal Revenue Service

For calendar year 2014 or tax year beginning

# EXTENDED TO NOVEMBER 16, 2015 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. , and ending

OMB No 1545-0052

Name of foundation			A Employer identification number	
SACKS FAMILY FOUNDATION			36-4053778	
Number and street (or P O box number if mail is not delivered to stre	et address)	Room/suite	B Telephone number	
C/O MICHAEL SACKS 1850 2N	•		312-506-6501	
City or town, state or province, country, and ZIP or foreign	postal code		C If exemption application is pending, check here	
HIGHLAND PARK, IL 60035	<u> </u>		4	_
G Check all that apply Initial return		rmer public charity	D 1 Foreign organizations, check here	▶∟
Final return	Amended return		2 Foreign organizations meeting the 85% test, check here and attach computation	_
H Check type of organization: X Section 501(c)(3)	Name change exempt private foundation	<del></del>	1	▶∟_
Section 4947(a)(1) nonexempt charitable trust	Other taxable private founda	tion	If private foundation status was terminated under section 507(b)(1)(A), check here	
	iting method: X Cash	Accrual	F If the foundation is in a 60-month terminati	100
l <del></del> -	Other (specify)		under section 507(b)(1)(B), check here	
▶\$ 1,937,490. (Part I, co.		pasis)	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net (d) Disburseme for charitable purp	
necessarily equal the amounts in column (a) )	expenses per books	income	(cash basis on	
1 Contributions, gifts, grants, etc , received	459,148.	···	N/A	
2 Check In the foundation is not required to attach Sch. B. Interest on savings and temporary	531.	531.	STATEMEN'	<del>т 1</del>
4 Dividends and interest from securities	331.	331.	DIATEMEN	<u> </u>
5a Gross rents			<del> </del>	
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	4,861,307.			
b Gross sales price for all 5, 170, 455.  7 Capital gain neighbor through the sales in the life by the life by the sales in the life by the			r	
7 Capital gain net income (from Part IV, line 2)		4,861,307.	N	1
8 Net Snort-term capital gain				
9 Income modifications Gross sales less returns			357 7 7 7 7 7	
10a and allowances		·····		
b Less Cost of goods sold c Gross profit or (loss)				
11 Other income			-	
12 Total Add lines 1 through 11	5,320,986.	4,861,838.		
13 Compensation of officers, directors, trustees, etc	0.	0.		0
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
5 16a Legal fees STMT 2	320.	320.		0
b Accounting fees STMT 3 c Other professional fees	2,250.	2,250.		0 .
		<del></del>		
17 Interest 18 Taxes STMT 4 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings	25.	0.		0
19 Depreciation and depletion				<u> </u>
E 20 Occupancy				
22 Printing and publications				
23 Other expenses				
One Contribution of the co	0.505	0 570		_
expenses Add lines 13 through 23	2,595.	2,570.	F 522	0
25 Contributions, gifts, grants paid 26 Total expenses and disbursements	5,522,951.	<del></del>	5,522,	931
Add lines 24 and 25	5,525,546.	2,570.	5,522,	951
27 Subtract line 26 from line 12:	- 3,323,320.	2,3,0.	3,322,	<u> </u>
8 Excess of revenue over expenses and disbursements	-204,560.			
b Net investment income (if negative, enter -0-)		4,859,268.		
b rect my connecting mogative; once to-)				
c Adjusted net income (if negative, enter -0-)  423501 11-24-14 LHA For Paperwork Reduction Act Notice, se			N/A Form 990-PI	

1,937,490. Form **990-PF** (2014)

For	m 99	00-PF(2014) SACKS FAMILY FOUNDATION			053778 Page
F	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	<u> </u>
느		column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing	1,619,275.	452,062.	452,062.
		Savings and temporary cash investments	522,775.	1,485,428.	1,485,428.
	3	Accounts receivable >			
		Less, allowance for doubtful accounts			
	4	Pledges receivable >			
	i	Less allowance for doubtful accounts			
		Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	l	disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	l b	Investments - corporate stock			
	c	Investments - corporate bonds			
	11	tovestments land, buildings and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers - see the			
		instructions Also, see page 1, item I)	2,142,050.	1,937,490.	1,937,490.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ap	21	Mortgages and other notes payable			
_	22	Other liabilities (describe )			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
s		and complete lines 24 through 26 and lines 30 and 31.			
ĕ		Unrestricted			
alar		Temporarily restricted	<u> </u>		
Net Assets or Fund Balances	26	Permanently restricted			
Š		Foundations that do not follow SFAS 117, check here			
ř.		and complete lines 27 through 31.			
ţ	27	Capital stock, trust principal, or current funds	0.	0.	
SSe	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
Ä	29	Retained earnings, accumulated income, endowment, or other funds	2,142,050.	1,937,490.	
ž	30	Total net assets or fund balances	2,142,050.	1,937,490.	
_	31	Total liabilities and net assets/fund balances	2,142,050.	1,937,490.	
P	art	III Analysis of Changes in Net Assets or Fund B	alances		
<del>-</del>	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30	<del></del>	
•			30	1.1	2 1/2 050
9	•	st agree with end-of-year figure reported on prior year's return) r amount from Part I, line 27a		1	2,142,050. -204,560.
		r increases not included in line 2 (itemize)		2	<del></del>
		lines 1, 2, and 3		3 4	0. 1,937,490.
		eases not included in line 2 (itemize)		5	1,337,430.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumo (b), line 30	6	1,937,490.
Ť	. 5.0	101 2000 of folia balancoo at one of your finite 4 finities mile of 11 at 11, of	(b), inio 00	1	<del></del>

36-4053778

SACKS FAMILY FOUNDATION

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)			( <b>6)</b> I	low acquired - Purchase - Donation	(c)	Date acquired mo., day, yr.)	(d) Date sold (mo., day, yr.)		
1a									1
b SEE ATTACHED	STATE	EMENT					1		
C									
d									
е									
(e) Gross sales price		preciation allowed or allowable)		st or other basis expense of sale			(	(h) Gain or (lo: e) plus (f) minu	
a									
b									
С							<u>.</u>		·
d				200 11					1 061 005
e 5,170,455.		41)	<u></u>	309,14	8.				4,861,307
Complete only for assets showing								uns (Col. (h) ga ), but not less th	
(i) F M.V as of 12/31/69		Adjusted basis s of 12/31/69		cess of col. (1) col. (j), if any			L L	osses (from co	l. (h))
a									<u></u>
b									
C .									
d									4 0 61 207
е			<u> </u>						4,861,307
? Capital gain net income or (net cap	oital loss)	If gain, also enter If (loss), enter -0-			}	2			4,861,307
Net short-term capital gain or (loss	s) as define	d in sections 1222(5) an	ıd (6).		_				
If gain, also enter in Part I, line 8, c If (loss), enter -0- in Part I, line 8			, ,		$\left\  \cdot \right\ $	3		N/	A
Part V   Qualification Ur	nder Se	ction 4940(e) for	Reduced	Tax on Net	Inv	estment	ncor	ne	-
section 4940(d)(2) applies, leave thi Vas the foundation liable for the section 'Yes," the foundation does not qualif	on 4942 tax fy under sec	on the distributable am	mplete this pa	rt.					Yes X No
Enter the appropriate amount in ea	ach column	for each year; see the ir	istructions be	fore making any e	ntries				
(a) Base period years Calendar year (or tax year beginnin	g ın)	(b) Adjusted qualifying dis		Net value of no	(c) nchar	itable-use ass		Dist (col (b)	(d) ribution ratio divided by col (c))
2013			9,513.			575,13			9.54505
2012			5,873.			663,7			7.46670
2011			2,000.	<u>-</u>	<u>T</u>	,183,7			3.75241
2010			4,427.			916,3			3.99902
2009		3,69	9,006.			411,09	90.		8.99804
? Total of line 1, column (d)								2	33.76123
3 Average distribution ratio for the 5 the foundation has been in existen-	•		וות 2 by 5,	or by the number	of ye	ars		3	6.75224
4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5					l	4	3,994,477		
5 Multiply line 4 by line 3					5	26,971,695			
6 Enter 1% of net investment income (1% of Part I, line 27b)					6	48,593			
Add lines 5 and 6		·					Î	7	27,020,288
3 Enter qualifying distributions from	Part XII. lin	e 4						8	5,522,951
If line 8 is equal to or greater than See the Part VI instructions.	-		1b, and comp	lete that part usin	g a 19	% tax rate.	l		
23521 11-24-14		<del></del>		<del></del> -					Form <b>990-PF</b> (201

	990-PF (2014) SACKS FAMILY FOUNDATION 36-405 rt VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - sec			Page 4
	Exempt operating foundations described in section 4940(d)(2), check here \( \bigcup \) and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	9	7,1	85.
•	of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Add lines 1 and 2	9	7,1	85.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
	Tax based on investment income Subtract line 4 from line 3 If zero or less, enter -0-	9	7,1	85.
	Credits/Payments			
	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 220.			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)  6c 100,000.			
	Backup withholding erroneously withheld 6d			
	Total credits and payments. Add lines 6a through 6d	10	0.2	20.
	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached			74.
	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		8	61.
	Enter the amount of line 10 to be Credited to 2015 estimated tax   861. Refunded  11		<u>_</u>	0.
	rt VII-A   Statements Regarding Activities			
_	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a	100	X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b	<b></b> -	X
·	If the answer is "Yes" to 18 or 16, attach a detailed description of the activities and copies of any materials published or	<u>                                   </u>		<del></del>
	distributed by the foundation in connection with the activities			
c	Did the foundation file Form 1120-POL for this year?	1c		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	<u>  '''</u>		<del>                                     </del>
·	(1) On the foundation. ► \$ 0 • (2) On foundation managers. ► \$ 0 •			
۵	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			ŀ
٠	managers > \$ 0.	-		
,	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	ł	X
•	If "Yes," attach a detailed description of the activities	<u> </u>	├	<del></del>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			ļ
٠	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	1	х
49	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	<b>-</b>	X
	If "Yes," has it filed a tax return on Form 990-T for this year?  N/A	4b	<b></b>	<del></del>
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<del>                                     </del>	X
Ů	If "Yes," attach the statement required by General Instruction T	<u> </u>		<del></del>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	l		
·	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	x	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	_
•	on the foundation have at least 60,000 in assets at any time during the year. It is complete it are it, cor (c), and it are it.	<u> </u>	<del> </del>	$\vdash$
Яa	Enter the states to which the foundation reports or with which it is registered (see instructions)			
Ju	IL	-		
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	-		
•	of each state as required by General Instruction G? If "No," attach explanation	86	х	1
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	"	<del>                                     </del>	<del> </del>
•	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		x
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses	10	$\vdash$	X
		orm <b>99</b> 0	-PF	

X

had not been removed from jeopardy before the first day of the tax year beginning in 2014?

Form 990-PF (2014) SACKS FAMILY FOUNDATION			36-40537	778	Page 6
Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)	-	
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Yo	es X No	- 1	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire			- 1	1
any voter registration drive?			es 🗶 No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	;?	Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section				
4945(d)(4)(A)? (see instructions)		Y	es X No	i i	1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	, or educational purposes, or f			İ	1
the prevention of cruelty to children or animals?		•	es X No	- 1	
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify un	•	n Regulations	/-		
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h				- 1	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f			[]		
expenditure responsibility for the grant?		/A Y	es No		
If "Yes," attach the statement required by Regulations section 53 494	* *				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		es X No		
a personal benefit contract?	acceptable and the contract?	¥(	ES LAL NO	6Ь	x
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p If "Yes" to 6b. file Form 8870	Jersonai Denenii Contract?		F	00	+^
7a At any time during the tax year, was the foundation a party to a prohibited tax s	chalter transaction?		es X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribute.			N/A	7b	+-
Part VIII Information About Officers, Directors, Trust		nagers, Highly		<i>,,</i> ,	—
Paid Employees, and Contractors	ooo, roundation ma		,		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
A Maria and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) E	xpense nt, other
(a) Name and address	to position	enter -0-)	employee benefit plans and deferred compensation	allov	vances
A. LEE SACKS	DIRECTOR PART	-TIME			
1850 2ND STREET, SUITE 201				ĺ	
HIGHLAND PARK, IL 60035	0.00	0.	0.		<u> </u>
KENNETH SACKS	SECRETARY PAR	T-TIME			
900 NORTH MICHIGAN AVE., SUITE 1500	1				•
CHICAGO, IL 60611	0.00	0.	0.		<u>0.</u>
MICHAEL SACKS	PRES/TREAS PA	RT-TIME			
1850 2ND STREET, SUITE 201	1 , ,,	_	,		0
HIGHLAND PARK, IL 60035	0.00	0.	0.	·	0.
	-				
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."	<u> </u>	1	
<u> </u>	(b) Title, and average	<u> </u>	(d) Contributions to employee benefit plans	(e) Ē	xpense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation		nt, other vances
NONE			compensation	<del> </del>	
				1	
	<u> </u>				
		L			
				<u> </u>	
				<u> </u>	
				}	
	<u> </u>	l	L	<u></u>	
Total number of other employees paid over \$50,000			<b>&gt;</b>		0

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Part VIII Information About Officers, Directors, Trustees, Four Paid Employees, and Contractors (continued)	ndation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, e	nter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant s number of organizations and other beneficiaries served, conferences convened, research papers	latistical information such as the produced, etc	Expenses
1 N/A		
2		
3		
4		·
Part IX-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax yea	on lines 1 and 2	Amount
1 NONE		
		0.
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<b></b>	0.
Total Find mics Find agric		

	1990-PF (2014) SACKS FAMILIT FOUNDATION	30-40.	13/10	rayeo
P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, see in	structions)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
а	Average monthly fair market value of securities	1a		0.
b	Average of monthly cash balances	1b	4,055,	,307.
C	Fair market value of all other assets	1c		
d	Total (add lines 1a, b, and c)	1d	4,055,	,307.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation) 1e 0.			
2	Acquisition indebtedness applicable to line 1 assets	2		0.
3	Subtract line 2 from line 1d	3	4,055,	307.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	60	,830.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,994,	
6	Minimum investment return Enter 5% of line 5	6		724.
Pi	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certain		
	foreign organizations check here   and do not complete this part.)			
1	Minimum investment return from Part X, line 6	1	199	,724.
2a	Tax on investment income for 2014 from Part VI, line 5 2a 97, 185.			
ь	Income tax for 2014. (This does not include the tax from Part VI.)	1		
C	Add lines 2a and 2b	2c	97.	.185.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	102	,185. ,539.
4	Recoveries of amounts treated as qualifying distributions	4		0.
5	Add lines 3 and 4	5	102.	,539.
6	Deduction from distributable amount (see instructions)	6		0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	102.	,539.
P	art XIII	<u> </u>		
	Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	5,522,	951.
	Program-related investments - total from Part IX-B	1b	5,522,	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2		-
3	Amounts set aside for specific charitable projects that satisfy the.			
а	Suitability test (prior IRS approval required)	3a		
	Cash distribution test (attach the required schedule)	3b		
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	5,522,	951.
	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	-	,_,,	
	income Enter 1% of Part I, line 27b	5		0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	5,522,	
-	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of			
	4940(e) reduction of tax in those years.			

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	( <b>d)</b> 2014
1 Distributable amount for 2014 from Part XI, line 7				102,539.
2 Undistributed income, if any, as of the end of 2014				102,333.
a Enter amount for 2013 only			0.	
b Total for prior years:	<u> </u>	<del></del>		
		0.		
3 Excess distributions carryover, if any, to 2014.				<u> </u>
aFrom 2009   3,678,451.				
b From 2010 3,618,610.				
c From 2011 4,382,811.				
dFrom 2012 4,922,686.				
eFrom 2013 5,460,757.				
f Total of lines 3a through e	22,063,315.			
4 Qualifying distributions for 2014 from				<del></del>
Part XII, line 4: ►\$ 5,522,951.				
a Applied to 2013, but not more than line 2a			· 0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		<u> </u>		<del></del>
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount	•			102,539.
e Remaining amount distributed out of corpus	5,420,412.		<u> </u>	102/3331
5 Excess distributions carryover applied to 2014	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:				
3 Corpus Add lines 3f, 4c, and 4e Subtract line 5	27,483,727.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				· · · · · · · · · · · · · · · · · · ·
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014 Subtract			<u> </u>	
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	3,678,451.			
9 Excess distributions carryover to 2015	-			
Subtract lines 7 and 8 from line 6a	23,805,276.		}	
O Analysis of line 9:				
a Excess from 2010 3,618,610.				
b Excess from 2011 4,382,811.				
c Excess from 2012 4,922,686.				
d Excess from 2013 5, 460, 757.				
e Excess from 2014 5, 420, 412.				
2358 T 1-24-14				Form 990-PF (2014)

Porm 990-PF (2014) SACKS F	AMILY FOUND		I A guartier O		053778 Page
<u>-</u>			I-A, question 9)	N/A	<del></del>
1 a If the foundation has received a ruling o		,			
foundation, and the ruling is effective fo	•	· ·		404043403	1040(3)(5)
b Check box to indicate whether the found	<del></del>	ing toundation described		4942(j)(3) or4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(6) 2012	Prior 3 years	(4) 2011	- (a) Tatal
income from Part I or the minimum	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed				<u> </u>	
d Amounts included in line 2c not					
used directly for active conduct of		İ			
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter		1			
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public		-			
and 5 or more exempt				<u> </u>	
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV   Supplementary Info	rmation (Comple	ete this part only	if the foundation	had \$5,000 or m	ore in assets
at any time during t				, , , , , , , , , , , , , , , , , , ,	
1 Information Regarding Foundation	n Managers:	·			
a List any managers of the foundation wh	<b>~</b>	than 2% of the total con-	tributions received by the	e foundation before the cl	ose of any tax
year (but only if they have contributed in			,		out or any tank
MICHAEL SACKS					
b List any managers of the foundation wh	o own 10% or more of t	he stock of a corporation	(or an equally large port	on of the ownership of a	partnership or
other entity) of which the foundation ha			(or an oquany large por a	on or mo ownering or a	partitor omp or
NONE					
2 Information Regarding Contribute	ion Grant Gift Loar	Scholarshin etc. P	rograms,		
Check here ► ☐ If the foundation of				not accept unsolicited rec	wests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	<del> </del>	. <del></del>	**	<del></del>	
2 12	or or o man accross or	the person to thiom app.			
SEE STATEMENT 5					
b The form in which applications should b	e submitted and inform	ation and materials they s	hould include:	<del></del>	<del></del>
e Any authorizand desdisses					
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographic	cal areas, charitable fields	, kinds of institutions, or	other factors	
•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•		

423601 11-24-14

Form **990-PF** (2014)

Form **990-PF** (2014)

423621 11-24-14

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

	_				
Enter gross amounts unless otherwise indicated.	Unrelated (a) Business	(b)	(C) Exclu- sion	(d)	(e) Related or exempt
1 Program service revenue	code	Amount	code	Amount	function income
8		·	$\perp$		
b			$\perp$		
					<u>-</u>
d					
e	<u> </u>				
1	.				
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	531.	
4 Dividends and interest from securities			$\perp$		
5 Net rental income or (loss) from real estate:			$\perp$		
a Debt-financed property					
b Not debt-financed property				<u> </u>	
6 Net rental income or (loss) from personal	i i				
property					
7 Other investment income			_ll		
8 Gain or (loss) from sales of assets other		· · · · · · · · · · · · · · · · · · ·			
than inventory			18	4,861,307.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory		·			·
11 Other revenue					•
a	. [				
b					
c		_			
d					
e		•			
12 Subtotal Add columns (b), (d), and (e)		0	$\cdot$	4,861,838.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	4,861,838.
(See worksheet in line 13 instructions to verify calculations )					
Part XVI-B Relationship of Activities	to the Acco	mplishment of F	xempt	Purnoses	
· · · · · · · · · · · · · · · · · · ·					
Line No Explain below how each activity for which inco			A contribu	ited importantly to the accom	plishment of
the foundation's exempt purposes (other than	by providing fun	ds for such purposes)			_
NOT APPLICABLE					
				·	

orm 99	D-PF (2014) SACKS	FAMILY F	OUNDAT	ION		36-40	53778	Pa	ige <b>13</b>
Part	XVII Information Re Exempt Organ		sfers To a	and Transactions a	and Relation	ships With Nonch	naritable		
1 Dic	the organization directly or indi	rectly engage in any	of the followin	g with any other organization	on described in se	ction 501(c) of		Yes	No
	Code (other than section 501(c								
a Tra	nsfers from the reporting found	ation to a noncharita	ble exempt orç	ganization of:					1
	Cash						1a(1)		X
(2)	Other assets						1a(2)		Х
<b>b</b> Oth	er transactions:						1 1		_
	Sales of assets to a noncharita						1b(1)		X
	Purchases of assets from a no	•	organization				16(2)		Х
	Rental of facilities, equipment,						1b(3)		X
	Reimbursement arrangements	}					1b(4)		X
	Loans or loan guarantees						1b(5)		X
	Performance of services or me	-	•				1b(6)		X
	aring of facilities, equipment, ma ne answer to any of the above is				wave about the for	market value of the good	10	oto	
	services given by the reporting f	· · · · · ·	-	• •	•		· -	615,	
	umn (d) the value of the goods,			o ioss than fall market vale	so in any transaction	on or sharing arrangemen	t, 311011 III		
(a)Line n				exempt organization	(d) Descripti	on of transfers, transactions, a	nd sharing arr	angeme	nts
			N/A						
				·					
				· <u>·</u>					
				<del> </del>	<del> </del>				
					<del>                                      </del>				
				<del></del>					
					<del>                                     </del>				
		<u> </u>						-	
ın s	he foundation directly or indirected section 501(c) of the Code (othe	r than section 501(c			zations described		Yes	X	] No
b If "	es," complete the following sch (a) Name of org			(b) Type of organization	1	(e) Description of roletin	nehin		
	N/A	Janization		(b) Type of organization		(c) Description of relation	monp.		
	14/A								
						•			
							· · · · · ·		
	Under penalties of perfury, I declare	that I have examined th	is return, includin	g accompanying schedules and	statements, and to ti	ne best of my knowledge	May the IRS o	iscuss	this
Sign	and belief, it is true, correct, and cor	mpiete Declaration of pr	reparer (other than	n taxpayer) is based on all inform		DENT TREAS	return with the shown below	e prepar (see ins	rer
Here				10/3/11/5	URER		X Yes		□No
	Signature of officer or trustee			Date	Title				
	Print/Type preparer's na	ame	Preparer's si	gnature	Date	Check if PTI	N		

Phone no. 312-634-3400 Form **990-PF** (2014)

P01412973

Paid

Preparer Use Only MARK HARVEY

Firm's address ▶ 1 S. WACKER DRIVE, STE 800 CHICAGO, IL 60606

#### 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

SACKS FAMILY FOUNDATION

**Employer identification number** 

S	ACKS FAMILY FOUNDATION	36-4053778						
Organization type (check	one)							
Filers of:	Section:							
Form 990 or 990-EZ 501(c)( ) (enter number) organization								
	4947(a)(1) nonexempt charitable trust <b>not</b> 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							
	is covered by the <b>General Rule</b> or a <b>Special Rule</b> . c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule See instructions						
General Rule								
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling yone contributor. Complete Parts I and II. See instructions for determining a contributor							
Special Rules								
sections 509(a)(1 any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% supports) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a for, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amou Z, line 1 Complete Parts I and II	, or 16b, and that received from						
year, total contrib	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, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III							
year, contribution is checked, enter purpose Do not o	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from as exclusively for religious, charitable, etc., purposes, but no such contributions totaled in here the total contributions that were received during the year for an exclusively religious complete any of the parts unless the <b>General Rule</b> applies to this organization because alle, etc., contributions totaling \$5,000 or more during the year	nore than \$1,000 If this box s, charitable, etc ,						
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule in Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Feat the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization

Employer identification number

# SACKS FAMILY FOUNDATION

Dort I			7-4033770	
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1	BARRY & JODI MALKIN  442 W. WELLINGTON, APT. 10 E  CHICAGO, IL 60657	\$150,000.	Person X Payroll (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
2	CARI B. SACKS  1850 2ND STREET, SUITE 201  HIGHLAND PARK, IL 60035	\$1,308,346.	Person Payroll Noncash X (Complete Part II for noncash contributions)	
(a)	(b)	(c)	(d)	
	Name, address, and ZIP + 4 MICHAEL J SACKS EXEMPT 2004 GIFT TRUST U/A/D 9/30/12  1850 2ND STREET, SUITE 201 HIGHLAND PARK, IL 60035	\$ 605,965.	Person Payroll (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
4	MICHAEL J SACKS NONEXEMPT 2004 GIFT TRUST U/A/D 9/30/12  1850 2ND STREET, SUITE 201  HIGHLAND PARK, IL 60035	\$2,483,646.	Person Payroll Noncash X (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
5	MICHAEL J. SACKS  1850 2ND STREET, SUITE 201  HIGHLAND PARK, IL 60035	\$ 297,636.	Person Payroll Noncash X (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
6	MICHAEL J. SACKS DESCENDANTS TRUST U/A/D 9/20/95  1850 2ND STREET, SUITE 201  HIGHLAND PARK, IL 60035	\$82,330.	Person Payroll Noncash X  (Complete Part II for noncash contributions)	
423452 11-0	5-14	Schedule B (Form	990, 990-EZ, or 990-PF) (2014)	

Name of organization

Employer identification number

# SACKS FAMILY FOUNDATION

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
7	MJ SACKS FAMILY DESCENDANTS TRUST U/A/D 9/20/95  1850 2ND STREET, SUITE 201  HIGHLAND PARK, IL 60035	\$44,142.	Person Payroll Noncash X (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
8	MJS CHILDRENS TRUST FOR BEN U/A/S 11/30/97  1850 2ND STREET, SUITE 201  HIGHLAND PARK, IL 60035	\$ 23,243.	Person Payroll Noncash X (Complete Part II for noncash contributions)		
(a) No.	(b)	(c)	(d)		
9	Mame, address, and ZIP + 4  MJS CHILDRENS TRUST FOR MATTHEW U/A/D 9/20/95  1850 2ND STREET, SUITE 201  HIGHLAND PARK, IL 60035	s 49,616.	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
10	MJS CHILDRENS TRUST FOR RACHEL U/A/D 9/20/95  1850 2ND STREET, SUITE 201  HIGHLAND PARK, IL 60035	\$\$8,247.	Person Payroll Noncash  (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
11	WINCHESTER MANAGERS, LLC  1850 2ND STREET, SUITE 201  HIGHLAND PARK, IL 60035	\$128,379.	Person Payroll Oncash X (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
423452 11-0	5-14	\$Schedule B (Form	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2014)		

#### SACKS FAMILY FOUNDATION

Part II	Noncash Property (see instructions) Use duplicate copies of F	Part II if additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	3855 SHARES OF ENSTAR		
		\$ 482,568.	02/28/14
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	1710 SHARES OF TESLA		
		\$\$	02/28/14
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	4377 SHARES OF VERIZON		<del></del> ·
		\$\\$\$	02/28/14
(a) No. from	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	5577 SHARES OF WISDOM TREE		
		s86,890.	02/28/14
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	3037 SHARES OF ZULILY		
		s112,005.	11/03/14
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	1786 SHARES OF ENSTAR		
453 11-05		\$\$\$\$	02/28/14 990, 990-EZ, or 990-PF) (20

# SACKS FAMILY FOUNDATION

(a)			
No.	(b)	(c)	(d)
om	Description of noncash property given	FMV (or estimate)	Date received
art I	, , , , ,	(see instructions)	
	792 SHARES OF TESLA		
3			
		\$193,890.	02/28/14
a)		(c)	
lo.	(b)	FMV (or estimate)	(d)
om	Description of noncash property given	(see instructions)	Date received
art I	2007 GUADRE OF WEDTEON	, , , , , , , , , , , , , , , , , , ,	
3	2027 SHARES OF VERIZON		
		<del></del>	
		s 96,445.	02/28/14
		\$   445.	02/20/14
(a)			
No.	(b)	(c)	(d)
om	Description of noncash property given	FMV (or estimate)	Date received
art I		(see instructions)	
	2583 SHARES OF WISDOM TREE		
3			
		\$ 40,243.	02/28/14
(a) No.	(6.)	(c)	
rom	(b)	FMV (or estimate)	(d)
art I	Description of noncash property given	(see instructions)	Date received
	1405 SHARES OF ZULILY	-	
3	1103 DIMENDO OF BODIES	<del></del>	
<u> </u>		<del></del>	
		s 51,816.	11/03/14
			<del></del>
(a)		(-)	
No.	(b)	(c) FMV (or estimate)	(d)
om	Description of noncash property given	(see instructions)	Date received
art I	7310 gy ppg of pyg	(222	
,	7319 SHARES OF ENSTAR		
_4			
			02/20/14
		\$916,192.	02/28/14
(a)			
No.	(b)	(c)	(d)
om	Description of noncash property given	FMV (or estimate)	(d) Date received
art I	2 2 2 2 . Priori or nonocon property given	(see instructions)	Date received
	3246 SHARES OF TESLA	<u> </u>	· <del>.</del>
4		<del></del>	
		\$ 794,653.	02/28/14

#### SACKS FAMILY FOUNDATION

(a) No.	(b)	(c) FMV (or estimate)	(d)
rom Part I	Description of noncash property given	(see instructions)	Date received
	8308 SHARES OF VERIZON		
_4			
		s 395,295.	02/28/14
(a) No.	(b)	(c)	(d)
rom	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
art I	10586 SHARES OF WISDOM TREE	(656 11.52 25.61.5)	
4	10300 SHARES OF WISDOM TREE	<del></del> [	
_			00/00/14
		\\$164,930.	02/28/14
(a)		(c)	
No. rom	(b)  Description of noncash property given	FMV (or estimate)	(d) Date received
art I		(see instructions)	Date received
A	5764 SHARES OF ZULILY		
_4		<u> </u>	
		s212,576.	11/03/14
<i>(</i> -)			
(a) No.	(b)	(c)	(d)
rom	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
Part I	745 SHARES OF ENSTAR		
5			
		93,260.	02/28/14
		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	02/20/14
(a)		(c)	
No. from	(b)  Description of noncash property given	FMV (or estimate)	(d) Date received
Part I		(see instructions)	
	330 SHARES OF TESLA		
5			
		\$\\$\\$\	02/28/14
(a)			
No.	(b)	(c) FMV (or estimate)	(d)
rom Part I	Description of noncash property given	(see instructions)	Date received
ai t I	845 SHARES OF VERIZON		
5			
			02/28/14
	5-14	`	90, 990-EZ, or 990-PF) (

#### SACKS FAMILY FOUNDATION

art II	Noncash Property (see instructions) Use duplicate copies of F	Part II if additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
5	1077 SHARES OF WISDOM TREE		
		\$16,779.	02/28/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
5	1806 SHARES OF ZULILY		
		\$\$	11/03/14
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
6	242 SHARES OF ENSTAR		
		\$ 30,293.	02/28/14
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
6	108 SHARES OF TESLA		
		\$ 26,439.	02/28/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
6	275 SHARES OF VERIZON		
		\$\\$\\$\	02/28/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
6	351 SHARES OF WISDOM TREE		
		 s 5,469.	02/28/14

# SACKS FAMILY FOUNDATION

art II	Noncash Property (see instructions) Use duplicate copies of F	Part II if additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	191 SHARES OF ZULILY		
6			
		\$\$ 7,044.	11/03/14
(a) No. from Part I	, (b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
7	130 SHARES OF ENSTAR		
		\$s16,274.	02/28/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
7	58 SHARES OF TESLA		
-		\$\\$14,199 <b>.</b>	02/28/14
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	147 SHARES OF VERIZON		
		\$6,994.	02/28/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
7	187 SHARES OF WISDOM TREE		
		s2,913.	02/28/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
7	102 SHARES OF ZULILY		
		<sub>\$</sub> 3,762.	11/03/14

# SACKS FAMILY FOUNDATION

art II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
8	69 SHARES OF ENSTAR				
		\$ 8,638.	02/28/14		
(a) No. rom art l	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
	30 SHARES OF TESLA				
8					
	,	s7,344.	02/28/14		
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
	78 SHARES OF VERIZON		· · · · · · · · · · · · · · · · · · ·		
8		<del></del>			
		\$\\$\	02/28/14		
(a) No. om art I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
arti	100 SHARES OF WISDOM TREE				
_8					
		\$1,558.	02/28/14		
(a) No. rom art I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
	54 SHARES OF ZULILY				
_8		<del></del>			
		\$1,992.	11/03/14		
(a) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
9	146 SHARES OF ENSTAR				
		\$ 18,276.	02/28/14 90, 990-EZ, or 990-PF) (3		

# SACKS FAMILY FOUNDATION

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
9	65 SHARES OF TESLA				
		s15,913.	02/28/14		
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
9	166 SHARES OF VERIZON				
		s7,898.	02/28/14		
(a) No. rom	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
9	211 SHARES OF WISDOM TREE				
;		\$\$	02/28/14		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
9	115 SHARES OF ZULILY				
		ss	11/03/14		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
10	142 SHARES OF ENSTAR				
		sss	02/28/14		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
10	63 SHARES OF TESLA	_			
		s15,423.	02/28/14 990, 990-EZ, or 990-PF) (2)		

# SACKS FAMILY FOUNDATION

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
10	162 SHARES OF VERIZON			
	· · · · · · · · · · · · · · · · · · ·	<del></del>		
		\$ 7,708.	02/28/14	
(a) No.	(b)	(c)	(d)	
from	Description of noncash property given	FMV (or estimate) (see instructions)	Date received	
Part I	206 SHARES OF WISDOM TREE	(coo maa donono)		
10	200 BIAKES OF WISSON TREE	—		
-			02/20/14	
		\$ 3,209.	02/28/14	
(a) No.	(b)	(c)	(d)	
from	Description of noncash property given	FMV (or estimate) (see instructions)	Date received	
Part I	112 SHARES OF ZULILY	(see mad denotis)		
10	112 SHARES OF ZOLILI	<del></del>		
		\$	11/03/14	
(a)		(c)		
No. from	(b)  Description of noncash property given	FMV (or estimate)	(d) Date received	
Part I		(see instructions)		
11	411 SHARES OF ENSTAR			
<del></del>		<del></del>		
		\$ 51,449.	02/28/14	
(a)				
No.	(b)	(c) FMV (or estimate)	(d)	
from   Part I	Description of noncash property given	(see instructions)	Date received	
	182 SHARES OF TESLA			
11				
		— s 44,555.	02/28/14	
			02/20/11	
(a)		(c)		
No. from	(b)  Description of noncash property given	FMV (or estimate)	(d) Date received	
Part I		(see instructions)		
1,	467 SHARES OF VERIZON			
11		<u> </u>		
		s 22,220.	02/28/14	

#### SACKS FAMILY FOUNDATION

art II	II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
11	595 SHARES OF WISDOM TREE				
		\$\$.	02/28/14		
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
11	24 SHARES OF ZULILY				
		ss	11/03/14		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
<del></del>					
		\$	<del> </del>		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
•					
		s			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		

Name of orga	anization		Employer identification number		
SACKS	FAMILY FOUNDATION			36-4053778	
Part III	Exclusively religious, charitable, etc., contribute year from any one contributor. Complete co	ibutions to organizations described plumns (a) through (e) and the follo	in section 501(c)(7), (8), or wing line entry For organization	r (10) that total more than \$1,000 for	
	completing Part III, enter the total of exclusively religious. Use duplicate copies of Part III if additiona	, charitable, etc., contributions of \$1,000 or	r less for the year (Enter this info onc	<b>▶</b> \$	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held	
-		(e) Transfer of gif			
-	Transferee's name, address, an	d ZIP + 4	Relationship of tra	nsferor to transferee	
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held	
Part I					
	(e) Transfer of gift				
-	Transferee's name, address, and	d ZIP + 4	Relationship of tra	nsferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held	
-		(e) Transfer of gif	<u> </u>		
	Transferee's name, address, and			nsferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held	
		(e) Transfer of gift			
	Transferee's name, address, and			nsferor to transferee	

Part IV Capital dams and Lo	3363 IOI TAX OII IIIVESIIIIEIII IIICUIIIE				
• (a) List and	describe the kind(s) of property sol rick warehouse; or common stock, 2	d, e.g., real estate,	(b) How acquired P - Purchase	(c) Date acquired (mo , day, yr )	(d) Date sold (mo., day, yr.)
	•			02/06/14	03/06/14
1a 21,473 SHARES			D	03/06/14	
b 16,852 SHARES			D	03/06/14	
c 6,584 SHARES O			D	03/06/14	
	OF ENSTAR GROUP		D	03/06/14	
	F ENSTAR GROUP L		D	03/06/14	
12,610 SHARES	OF ZULILY INC, C	LASS A	D	11/03/14	11/04/14
g	•				
h					
1					
1		· •			
k					
1					
m					
n					
0					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		) Gain or (loss) lus (f) minus (g)	
a 341,463.	<u> </u>	41,791.			299,672.
b 798,548.		22,846.			775,702.
c 1,660,595.		19,818.		1	$\frac{773,702}{640,777}$
d 1,477,436.		171,015.			306,421.
447 100		51,660.			395,462.
e 447,122. f 445,291.		2,018.			$\frac{333,402}{443,273}$
<del></del>		2,010.			443,273.
g h					
		· · · · · · · · · · · · · · · · · · ·			<del></del>
1					
J				<del></del>	
<u>k</u>				<del></del>	
<del></del>					
<u>m</u>					
0					
	ng gain in column (h) and owned by	the foundation on 12/31/69	//\ \ os	sses (from col. (h))	
Complete only for assets shown	(j) Adjusted basis	(k) Excess of col (i)		of col. (h) gain over	col. (k).
(i) F.M V. as of 12/31/69	as of 12/31/69	over col (j), if any	but n	ot less than "-0-")	,
_		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			299,672.
a b					775,702.
<del></del>		· · · · · · · · · · · · · · · · · · ·			$\frac{773,702}{640,777}$
c d		<del></del>			306,421.
-					395,462.
f					443,273.
		<del>-</del>			443,273.
9	<del></del>				
<u>h</u>					
1					
k		<del></del>			<del> </del>
					<del></del>
<u> </u>				<del></del>	
<u>m</u>			· · · · ·	<del></del>	
<u>n</u>				· · · · · · · · · · · · · · · · · · ·	
0	L				
2 Capital gain net income or (net ca	ontal loss) / If gain, also enter	r in Part I, line 7 )-" in Part I, line 7	2	A	861,307.
	·	<u> </u>	-	<del></del>	001,307.
3 Net short-term capital gain or (los		nd (6):			
If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line 8		Ĵ	3	N/A	

FORM 990-PF INTEREST ON SAVI	INGS AND TEM	PORARY (	CASH I	NVESTMENTS	STATEMENT 1		
SOURCE	(A REVE PER B	NUE		(B) NVESTMENT NCOME	(C) ADJUSTED NET INCOME		
JP MORGAN CHASE BANK #8004	·	271.		271.			
JP MORGAN CHASE BANK (SAVINGS #8259	> <i>)</i>	260.		260.			
TOTAL TO PART I, LINE 3		531.		531.			
FORM 990-PF	LEGAL	FEES			STATEMENT 2		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INV MENT IN	/EST-	(C) ADJUSTED NET INCOM			
KATTEN MUCHIN ROSENMAN LLP	320.		320.		0.		
TO FM 990-PF, PG 1, LN 16A	320.		320.		0.		
FORM 990-PF	ACCOUNTI	NG FEES			STATEMENT 3		
DESCRIPTION	(A) EXPENSES PER BOOKS		/EST-	(C) ADJUSTED NET INCOM			
MCGLADREY LLP	2,250.	-	2,250.	•	0.		
TO FORM 990-PF, PG 1, LN 16B	2,250.	:	2,250.		0.		
FORM 990-PF	TAX	ES		· · · · · · · · · · · · · · · · · · ·	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INV MENT II	VEST-	(C) ADJUSTED NET INCOM			
ILLINOIS CHARITY BUREAU FUND SECRETARY OF STATE	15. 10.		0.		0.		
TO FORM 990-PF, PG 1, LN 18	25.		0.	•	0.		
=							

36-4053778

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

5

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

MICHAEL SACKS 1850 SECOND STREET, SUITE 201 HIGHLAND PARK, IL 60035

TELEPHONE NUMBER

312-506-6501

#### FORM AND CONTENT OF APPLICATIONS

LETTERS SHOULD INCLUDE NAME OF THE ORGANIZATION, MISSION STATEMENT, AMOUNT REQUESTED AND CONTACT INFORMATION.

#### ANY SUBMISSION DEADLINES

NONE

#### RESTRICTIONS AND LIMITATIONS ON AWARDS

PETITIONS WILL BE REVIEWED ON AN INDIVIDUAL BASIS.

# Sacks Family Foundation Charitable Contributions 12/31/2014

# Prepared by McGladrey Tax

Recipient	Amounts
AIEF	75,000
Am Shalom	19,000
American Jewish Committee	10,000
American Society for Yad Vashem, The	25,000
Angles	500
Art Center, The	2,000
Art Institute of Chicago, The	300,000
Aspen Art Museum	112,000
Barack Obama Foundation, The	333,333
Beacon Therapeutic School Inc.	250
Better Government Association	50,000
Birthright Israel Foundation	225,000
Boys and Girls Club of Lake County	2,700
CASA Lake County	9,250
CCF - Maggie C. Daley Park, The	166,666
CEJP	33,333
Center for Enriched Living, The	15,000
Chicago Children's Museum	25,000
Chicago Community Foundation, The	100,000
Chicago Council on Global Affairs	25,000
Chicago Dancing Festival NFP	5,500
Chicago High School for the Arts, The	25,000
Chicago White Sox Charites	500
Christopher House	25,000
CJE Senior Life	10,000
Colon Cancer Alliance, The	1,000
Community Partners for Affordable Housing	1,000
CURE	25,000
Cystic Fibrosis Foundation	500
District 113 Education Foundation	1,000
Erikson Institute	270,000
Fabretto Children's Foundation	5,000
Field Museum, The	150,000
Focus on the Arts	7,500
Food Allergy Research and Education	38,000
Foundation Fighting Blindness, The	2,500
Friends of Elnet	35,000
Fun(d) Run & Walk	1,000
Glory Baptist Church	2,500
Goodman Theatre, The	500
Highland Park Community Foundation	5,000
Hillel Foundation University of Wisconsin	25,000
Holocaust Educational Foundation NW Univ.	20,000
JCC Women's Auxiliary	1,200
ATTACHMENT	

# Sacks Family Foundation Charitable Contributions 12/31/2014 Prepared by McGladrey Tax

Recipient	Amounts
Jewish Council for Youth Services	10,000
Jewish Federation of Metropolitan Chicago	5,000
Jewish National Fund	10,000
Jewish United Fund	366,667
Jewish Women's Fdn of Metro Chicago, The	4,000
John F Kennedy Ctr for the Performng Arts	100,000
Juvenile Diabetes Research Foundation	6,000
Juvenile Diabetes Research Fund- Illinois	100
L'Chiam Center	20,000
Lurie Children's Foundation	75,000
Make A Better Place	15,000
Marwen	5,000
Metropolitan Planning Council	15,000
Michael Rolfe Pancreatic Cancer Fdn	10,000
Museum of Contemporary Art	415,000
Museum of Science and Industry	125,000
National Fragile X Foundation, The	5,000
NJDC	25,000
Northwestern Memorial Foundation	200,000
Northwestern University	795,000
Northwestern University School of Music	100,000
Open Studio Project, Inc.	25,000
Ounce of Prevention Fund	50,000
Patrons of the Arts	1,000
Planned Parenthood of Illinois	5,000
Ravinia Festival Association	25,000
Rebuild Foundation, The	300
Response Center	20,000
SCOPE Midwest	1,000
Silicon Valley Community Foundation	25,000
Student Athlete Teamwork Foundation	10,000
Tipitina's Foundation, Inc.	10,000
Tourette Syndrome Association	25,000
Trustees of the Universty of Pennsylvania	300,000
Tulane Hillel	10,000
Tulane University	250,000
United Way of Metropolitan Chicago	19,602
UW Chabad	1,800
Vinceremos Therapeutic Riding Center	500
Whitney Museum of American Art	250,000
Will Rogers PTA	250
Grand Total	5,522,951

# **ATTACHMENT**

#### Form **8868**

(Rev January 2014)

Department of the Treasury Internal Revenue Service

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

► File a separate application for each return.

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

OMB No 1545 1709

• If yo	u are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box		<b>•</b>	X	
• If yo	u are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of	this form)			
Do no	complete Part II unless you have already been granted a	an automa	atic 3-month extension on a previous	ly filed For	rm 8868		
	onic filing <sub>(e-file)</sub> . You can electronically file Form 8868 if y					oration	
require	ed to file Form 990-T), or an additional (not automatic) 3-mol	nth extens	sion of time. You can electronically f	le Form 88	368 to request an e	xtension	
of time	to file any of the forms listed in Part I or Part II with the exc	ception of	Form 8870, Information Return for	Transfers A	Associated With Ce	rtaın	
Persor	nal Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions) For more details of	on the elec	tronic filing of this f	orm,	
visit W	ww irs gov/efile and click on e-file for Charities & Nonprofits						
Part	I Automatic 3-Month Extension of Time	Only s	submit original (no copies nee	eded).			
A corp	oration required to file Form 990-T and requesting an autor	natic 6-mo	onth extension - check this box and	complete			
Part I	only				<b>&gt;</b>		
All oth	er corporations (including 1120-C filers), partnerships, REM	ICs, and t	rusts must use Form 7004 to reques	t an exten	sion of time		
to file i	ncome tax returns			Enter file	r's identifying nun	nber	
Туре	Name of exempt organization or other filer, see instru	ctions		Employer	Employer identification number (EIN) or		
print							
<b></b>	SACKS FAMILY FOUNDATION			36-4053778			
File by the		ee instruc	tions	Social security number (SSI		)	
filing you return S		ST.,	STE.201		•	-	
instruction		reign add	lress, see instructions				
	HIGHLAND PARK, IL 60035	_					
Enter t	he Return code for the return that this application is for (file	a separa	te application for each return)			0 4	
Applic	ation	Return	Application	Return			
Is For		Code	Is For				
	990 or Form 990-EZ	01	Form 990-T (corporation)				
Form 9		02	Form 1041-A		07		
	720 (individual)	03	Form 4720 (other than individual)	al)			
Form 9		04	Form 5227			10	
	90-T (sec 401(a) or 408(a) trust)	05	Form 6069				
	190-T (trust other than above)	06	Form 8870				
. 0	MICHAEL SACKS	- 00	1 0 m 00 7 0	<del></del>		12	
• The	books are in the care of > 1850 2ND STREET	r. ST	E. 201 - HIGHLAND	PARK,	IL 60035		
	ephone No ► (312)506-6501	· -	Fax No ▶	<del>`</del>			
	e organization does not have an office or place of business	s in the Ur					
	is is for a Group Return, enter the organization's four digit			f this is for	the whole group, o	heck this	
box >							
	request an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time	until			
	AUGUST 15, 2015 , to file the exempt organization return for the organization named above. The extension is for the organization's return for						
,	► X calendar year 2014 or						
ļ	tax year beginning	an	d ending				
,	tax year beginning		d chang		<del>-</del>		
2	f the tax year entered in line 1 is for less than 12 months, c	heck reas	on Initial return	Fınal retun	า		
3a (	Change in accounting period	o = 0000	and and the Armadus Armadus Armadus	<del></del>			
. , , ,					5.		
b If this application is for Forms 990-PF, 990-T, 4720, or 6069			· I I			220.	
-	estimated tax payments made Include any prior year overpayment allowed as a credit  3b \$						
	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.				¢	0.	
				3c	\$		
Cautio	n. If you are going to make an electronic funds withdrawal	(uirect de	with this Form 8868, see Form 8	⊭ວວ∙⊵ບ ar	iu rorm 88/9:EU 10	r payment	

instructions

Form 8868 (Rev 1-2014)					Page 2	
If you are filing for an Additional (Not Automatic) 3-Month I	Extension, o	complete only Part II and check this	box		▶ X	
Note. Only complete Part II if you have already been granted a	n automatic	3-month extension on a previously fil	ed Form	8868		
If you are filing for an Automatic 3-Month Extension, comp						
Part II Additional (Not Automatic) 3-Month	Extensio	n of Time. Only file the origina	al (no c	opies ne	eded).	
		Enter filer's	identifyiı	ng numbe	r, see instructions	
Type or Name of exempt organization or other filer, see inst	pe or Name of exempt organization or other filer, see instructions Employer identification number					
print						
SACKS FAMILY FOUNDATION					053778	
Number, street, and room or suite no. If a P.O. box, see instructions  C/O MICHAEL SACKS 1850 2ND ST., STE.201			Social se	ocial security number (SSN)		
City, town or post office, state, and ZIP code For a HIGHLAND PARK, IL 60035	foreign add	lress, see instructions				
Enter the Return code for the return that this application is for (	file a separa	te application for each return)			0 4	
Application	Return	Application			Return	
Is For	Code	Is For				
Form 990 or Form 990-EZ	01					
Form 990-BL	02	Form 1041-A			08	
Form 4720 (individual)	03	Form 4720 (other than individual)			09	
Form 990-PF	04	Form 5227		10		
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069				
Form 990-T (trust other than above)	06	Form 8870 12				
STOP! Do not complete Part II if you were not already grant	ed an autor	natic 3-month extension on a previ	ously file	d Form 8	868.	
MICHAEL SACKS					0025	
• The books are in the care of   1850 2ND STRE	ET, ST		PARK,	_тг р	0035	
Telephone No ► (312)506-6501		Fax No -				
If the organization does not have an office or place of business.		•			<b>&gt;</b>	
If this is for a Group Return, enter the organization's four dig		· · · · · · · · · · · · · · · · · · ·			•	
box If it is for part of the group, check this box		ch a list with the names and EINs of BER 15, 2015	all memb	ers the ex	tension is for	
<ul> <li>1 request an additional 3-month extension of time until</li> <li>For calendar year 2014, or other tax year beginning</li> </ul>	NOVER					
6 If the tax year entered in line 5 is for less than 12 months	ahaak raaa	on Initial return	Final r		·	
Change in accounting period	, check reas	on initial return	ا rinai i	etum		
7 State in detail why you need the extension INFORMATION NECESSARY TO FILE	E A CO	MPLETE AND ACCURATI	RET	URN I	S NOT YET	
AVAILABLE.						
					<del></del>	
8a If this application is for Forms 990-BL, 990-PF, 990-T, 472 nonrefundable credits. See instructions.	20, or 6069,	enter the tentative tax, less any	8a	s	100,220.	
b If this application is for Forms 990-PF, 990-T, 4720, or 60	60 enter an	v refundable credits and estimated	- loa	<del></del>	100,2201	
tax payments made Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868 8b \$ 100					100,220.	
C Balance due. Subtract line 8b from line 8a Include your payment with this form, if required, by using						
					0.	
		st be completed for Part II o				
Under penalties of perjury, I declare that I have examined this form, inclining true, correct, and complete, and that I am authorized to prepare this	uding accomp	•	•	f my knowl	edge and belief,	
• •	CPA		Date			
TILIO P			Date			