

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-P.F**

EXTENDED TO AUGUST 17, 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 <a href="https://www.irs.gov/form990pi

2014

Open to Public Inspection

			n 990-PF and its separate in 1, 2014			DEC 31, 2014	Open to Public Inspection
			1, 2014	, and e	naing		
		foundation ERT M. ZARI FOUNDATION				A Employer identification	number
						46-4833743	
		ASSETTI	ddraen\		Boom/suito		
	umber and street (or P O box number if mail is not delivered to street address) Room/suite 6611 W. NORTH AVE					B Telephone number 708-263-39	70
					L	<u> </u>	
		own, state or province, country, and ZIP or foreign p	ostal code			C If exemption application is p	ending, check here
		PARK, IL 60302					
G C	neck	all that apply: X Initial return	Initial return of a fo	ormer public (charity	D 1 Foreign organization:	s, check here
		Final return	Amended return			2 Foreign organizations me check here and attach co	eeting the 85% test,
		Address change	Name change			check here and attach co	mputation
H C	_	type of organization: X Section 501(c)(3) ex				E If private foundation sta	
<u> </u>			Other taxable private founda		-1	under section 507(b)(1)	• •
		rket value of all assets at end of year J Accounti	-	Accr	uai	F If the foundation is in a	
			her (specify)			under section 507(b)(1)	(B), check here
<u>▶</u>		Analysis of Payanus and Expanses	mn (d) must be on cash b				T (4) 5
<u> ra</u>	rt I	The total of amounts in columns (b) (c) and (d) may not	(a) Revenue and expenses per books		ivestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes
—		necessarily equal the amounts in column (a))				111001110	(cash basis only)
	1	Contributions, gifts, grants, etc., received	500,200.				
- 1	2	Check If the foundation is not required to attach Sch B Interest on savings and temporary cash investments	1.		1.	1.	STATEMENT 1
1	3		±•		1.	1.0	STATEMENT I
	4	Dividends and interest from securities					
i		Gross rents					
		Net rental income or (loss)					
e e		Net gain or (loss) from sale of assets not on line 10 Gross sales price for all					
en en		assets on line 6a			0.	<u> </u>	
Revenue	7	Capital gain net income (from Part IV, line 2)			<u> </u>		
٦	8	Net short-term capital gain					
	9	Income modifications Gross sales less returns					
		and allowances					
		Less Cost of goods sold				<u> </u>	
		Gross profit or (loss)					
		Other income	500,201.		1.	1.	
	12	Total. Add lines 1 through 11	0.		0.	0.	0.
	13	Compensation of officers, directors, trustees, etc	0.		<u> </u>		
	14	Other employee salaries and wages					
S		Pension plans, employee benefits					
1se	168	Legal fees Accounting fees		l			
Expenses	0	Other professional fees		1 R	ECEIV	ED	
Ũ	17	Interest				78	
ative	18	Taxes		(6)	4 5 4	n15 6	
	19	Depreciation and depletion		151 1	<u>UL 13 (</u>		
Administ	20	Occupancy					<u> </u>
Ę	21	Travel, conferences, and meetings		6	7 1 1 1	117	
	21	Printing and publications		. ≈ شمسی			
and	23	Other expenses					
Operating	23 24	Total operating and administrative	-				
era	24	expenses Add lines 13 through 23	0.		0.	0.	0.
ð	25	Contributions, gifts, grants paid	500,000.	<u> </u>			500,000.
		Total expenses and disbursements	300,000.		*-		1 220,000.
	20	Add lines 24 and 25	500,000.		0.	0.	500,000.
—	27	Subtract line 26 from line 12:	300,000.		•	•	1 - 300,000.
			201.				
		Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-)	201.		1.		
		Adjusted net income (if negative, enter -0-)		 		1.	
	Ü	Mujuated net incoine (a negative, enter -0-)	<u></u>			<u> </u>	

듄		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
드	art —	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		100.	
	2	Savings and temporary cash investments		101.	
	3	Accounts receivable -			
		Less: allowance for doubtful accounts			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable	-		
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less; allowance for doubtful accounts			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ÿ	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - 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)	0.	201.	201.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
≅		Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable			
_	22	Other liabilities (describe			
	22	Total liabilities (add lines 17 through 22)	0.	0.	
_	23	Foundations that follow SFAS 117, check here		<u> </u>	
		and complete lines 24 through 26 and lines 30 and 31			
S	24	Unrestricted			
Š	25	Temporarily restricted			
3ala	26	Permanently restricted			
or Fund Balances	-"	Foundations that do not follow SFAS 117, check here			
ğ		and complete lines 27 through 31			
٥	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ass_	29	Retained earnings, accumulated income, endowment, or other funds		201.	
ē	30	Total net assets or fund balances	0.	201.	
_					
	31	Total liabilities and net assets/fund balances	0.	201.	
ГР	art	Analysis of Changes in Net Assets or Fund Ba	lances		
Ξ					
1		I net assets or fund balances at beginning of year - Part II, column (a), line 3	OU		0.
^	•	st agree with end-of-year figure reported on prior year's return)			201.
		r amount from Part I, line 27a r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	201.
		eases not included in line 2 (itemize)		5	0.
-		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	201.
0	ı Uld	The assets of futio sulutions at end of year times a filling of 1 art 11, co	(0), 1110 00		Form 990-PF (2014)

Form 990-PF (2014)		DATION	T			46	5-483	3743	Page 3
	Losses for Tax on In		Income	1 (1)		1			
	ne kind(s) of property sold (e.g. use; or common stock, 200 shs			(b) P D	How acquired - Purchase - Donation	(c) Date a (mo., da	cquired y, yr.)	(d) Date (mo., day	
1a				<u> </u>					
b NONE									
С				<u> </u>					
_d				ļ					
е	<u></u>								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Ga (e) plus	ın or (loss) (f) mınus () [g)	
a									
b									
С									
d									
e									
Complete only for assets showing gai	` ' '				,	(I) Gains (Co			
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any			col. (k), but no Losses (i	from col. (I	h)) 	
a									
b									
С									
d									
е									
2 Capital gain net income or (net capital	loss) { If gain, also enter	n Part I, line In Part I, line	7 17	}	2				_
3 Net short-term capital gain or (loss) as If gain, also enter in Part I, line 8, colui	defined in sections 1222(5) an			J	,		·		
If (loss), enter -0- in Part I, line 8				\Box	3				
Part V Qualification Unde	r Section 4940(e) for	Reduced	Tax on Net	Inve	estment Inc	come			
(For optional use by domestic private foun	dations subject to the section 4	940(a) tax on	net investment inc	come	.)			N/A	
if section 4940(d)(2) applies, leave this pa	rt blank.								
									—
Was the foundation liable for the section 4				lod?				Yes _	No
If "Yes," the foundation does not qualify un 1 Enter the appropriate amount in each of				strinc					
(a)	· 1	ISH UCHOHS DEI	ore making any er	_				(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying dist	tributions	Net value of no	(c) nchai	ritable-use asse	ts (e	Distrib col. (b) div	ution ratio ided by col. (d	:))
2013									
2012									
2011									
2010		-							
2009			1						
2 Total of line 1, column (d)						2	_		
3 Average distribution ratio for the 5-yea	r base period - divide the total c	on line 2 by 5,	or by the number	of ye	ars- —— —	· -			
the foundation has been in existence if	less than 5 years					3			
A. Felerathe and value of manchembers and									
4 Enter the het value of noncharitable-us	for 0014 from Dont V I					4			
	e assets for 2014 from Part X, I	ine 5							
5 Multiply line 4 by line 3	e assets for 2014 from Part X, I	ine 5				5			
Multiply line 4 by line 3Enter 1% of net investment income (19)		ine 5				5			
		ine 5							
6 Enter 1% of net investment income (19	6 of Part I, line 27b)	ine 5				6			

ALBERT M. ZARI FOUNDATION	0000745	
	833743	
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s	ee instru	Ctions)
1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.		
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► ☐ and enter 1%		0.
of Part I, line 27b		
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0.
3 Add lines 1 and 2		0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		0.
6 Credits/Payments:		
a 2014 estimated tax payments and 2013 overpayment credited to 2014		
b Exempt foreign organizations - tax withheld at source 6b		
c Tax paid with application for extension of time to file (Form 8868) 6c		
d Backup withholding erroneously withheld 6d		
7 Total credits and payments. Add lines 6a through 6d		0.
		<u>.</u>
		0.
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		<u></u>
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		
11 Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ Refunded ▶ 11 Part VII-A Statements Regarding Activities		
		Yes No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	<u> </u>	
any political campaign?	<u> 1a</u>	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for 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 or		1 1 1
distributed by the foundation in connection with the activities	<u> </u>	
c Did the foundation file Form 1120-POL for this year?	1c	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		1 1 1
(1) On the foundation. ► \$ (2) On foundation managers. ► \$		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		1
managers. ► \$ 0 .		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	X
If "Yes," attach a detailed description of the activities		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		
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?	'A 4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	Х
If "Yes," attach the statement required by General Instruction T		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		
By language in the governing instrument, or		
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law		
remain in the governing instrument?	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
To but the foundation have at least \$6,000 in assets at any time during the year. If Tes, complete Fart II, coi. (c), and Fart XV		
8a Enter the states to which the foundation reports or with which it is registered (see instructions)		1- - -
IL		
		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G2 If "No." attach explanation	/ A	+ +
or seem the activities by deficial mondedion of it into, attach explanation	'A 8b	+ + -
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	<u> </u>	+ + -
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	X

	ALBERT M. ZARI FOUNDATION		
Form	990-PF (2014)	46-4833743	Page 5
Pa	rt VII-A Statements Regarding Activities (continued)		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory	orivileges?	
	If "Yes," attach statement (see instructions)	12	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х
	Website address ► N/A		
14	The books are in care of ► ROBERT W KRONE Telephone no	▶ 708-263-3	970
	Located at ▶ 6611 WEST NORTH AVE, OAK PARK, IL	ZIP+4 ▶60302	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		ightharpoonup
	and enter the amount of tax-exempt interest received or accrued during the year	- 15 N	/A
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,		Yes No
	securities, or other financial account in a foreign country?	16	x
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name	e of the	
	foreign country		
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes No
1a	During the year did the foundation (either directly or indirectly):		
		res X No	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		
		res X No	
	· · · · · · · · · · · · · · · · · · ·	res X No	
		res X No	
	(5) Transfer any income or assets to a disqualified person (or make any of either available		
		res X No	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		
	If the foundation agreed to make a grant to or to employ the official for a period after		
		res X No	
	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		
٠	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A 1b	
	Organizations relying on a current notice regarding disaster assistance check here		
,	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		
٠	before the first day of the tax year beginning in 2014?	1c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		
_	defined in section 4942(j)(3) or 4942(j)(5)):		
9	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	10	
		res X No	
	If "Yes," list the years ▶		
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	.	
•	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attack		
	statement - see instructions.)	N/A 2b	
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20	
٠	, , ,		
3 2	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		
_	, ,	res_X No_	
	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons a		
U	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to a		
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule		
	•	N/A 3b	
4-	Form 4720, to determine if the foundation had excess business holdings in 2014) Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpos		
L	had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b	X
-	had not been removed from Jeopardy before the mist day of the tax year beginning in 2014.		D-PF (2014)
		101111 000	(2014)

Form 990-PF (2014)			<u>46-483374</u>	43 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be Re	equired _{(contini}	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	4945(e))?	☐ Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955); or				
any voter registration drive?	, , ., ., .		s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes'	7		s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
4945(d)(4)(A)? (see instructions)	1 described in section	□ v _a	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or advectional numbers or fe		180	
	or educational purposes, or it		s X No	
the prevention of cruelty to children or animals?			S A NO	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations	N/A	
section 53.4945 or in a current notice regarding disaster assistance (see instruc	•		. — —	5b
Organizations relying on a current notice regarding disaster assistance check hi			▶□	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		. —		
expenditure responsibility for the grant?	N	「/A	s L No	
If "Yes," attach the statement required by Regulations section 53 4945	-5(d).		İ	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on			
a personal benefit contract?		Ye	s 🗶 No 📙	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			Sb X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b
Part VIII Information About Officers, Directors, Truste		nagers, Highly		
Paid Employees, and Contractors	•			
1 List all officers, directors, trustees, foundation managers and their of	compensation.			
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
JOSEPH G VOKOUN	TRUSTEE	Citter o j	compensation	anomanoos
6611 WEST NORTH AVE.	111001111			
OAK PARK, IL 60302	1.00	0.	0.	0.
	TRUSTEE	-		<u></u>
	LKOSIEE			
6611 WEST NORTH AVE.	1 00	0.	0.	0
OAK PARK, IL 60302	1.00	<u> </u>	0.	0.
	TRUSTEE			
6611 WEST NORTH AVE.	1 00		,	0
OAK PARK, IL 60302	1.00	0.	0.	0.
	TRUSTEE			
6611 WEST NORTH AVE.		_	_	_
OAK PARK, IL 60302	1.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those incl		enter "NONE."	[/al\ 0	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(c) Compensation	and deferred compensation	allowances
NONE				
	1			
	1			
· · · · · · · · · · · · · · · · · · ·		 		
	1	1		
				
	1			
	l	L		
Total number of other employees paid over \$50,000			<u> </u>	0

Total, Add lines 1 through 3

All other program-related investments. See instructions.

Dody 1	40-4033/43 Page
Part X Minimum Investment Return (All domestic foundations must complete	this part Foreign foundations, see instructions)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes	5:
a Average monthly fair market value of securities	1 <u>a</u> 0
b Average of monthly cash balances	1b 201
c Fair market value of all other assets	1c
d Total (add lines 1a, b, and c)	1d 201
e Reduction claimed for blockage or other factors reported on lines 1a and	
1c (attach detailed explanation)	0.
2 Acquisition indebtedness applicable to line 1 assets	2 0
3 Subtract line 2 from line 1d	3 201
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions	3
5 Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5 198
6 Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TAX	
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private	
foreign organizations check here and do not complete this part.)	
1 Minimum investment return from Part X, line 6	1 7
2a Tax on investment income for 2014 from Part VI, line 5	
b Income tax for 2014. (This does not include the tax from Part VI.)	
c Add lines 2a and 2b	2c 0
3 Distributable amount before adjustments. Subtract line 2c from line 1	3 _ 7
4 Recoveries of amounts treated as qualifying distributions	4 0
5 Add lines 3 and 4	5 7
6 Deduction from distributable amount (see instructions)	60
7 Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7
Part XII Qualifying Distributions (see instructions)	
Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	500 000
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a 500,000
b Program-related investments - total from Part IX-B	 10
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purpose	2 2
3 Amounts set aside for specific charitable projects that satisfy the:	
a Suitability test (prior IRS approval required)	3a
b Cash distribution test (attach the required schedule)	3b 500 000
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line	4 500,000
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	
income. Enter 1% of Part I, line 27b	5 0
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6 500,000
Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	whether the foundation qualifies for the section
4940(e) reduction of tax in those years.	

% SASSETTI

Page 9

Part XIII	Undistributed Income	(see instructions
-----------	-----------------------------	-------------------

				
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2013	2013	2014
1 Distributable amount for 2014 from Part XI,				
line 7				7.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009				
b From 2010				
c From 2011				
d From 2012	_			
e From 2013				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: ► \$ 500,000				
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	-			
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				7.
e Remaining amount distributed out of corpus	499,993.			
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:		i		
	499,993.			
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	400,000			
b Prior years' undistributed income. Subtract		0.		
line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of				
deficiency has been issued, or on which				
the section 4942(a) tax has been previously		0.		
assessed				-
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions				
e Undistributed income for 2013. Subtract line			_	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract				
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	0.			
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	499,993.			
10 Analysis of line 9:				
a Excess from 2010	_			
b Excess from 2011	_			
c Excess from 2012				
d Excess from 2013				
e Excess from 2014 499,993	•		<u> </u>	
423581 11-24-14	•			Form 990-PF (2014)

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Page 11

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Ye	ear or Approved for Future Pa	ayment		
Recipient	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year		·		-
COMMUNITY FOUNDATION OF THE FOX RIVER			TO PROVIDE EDUCATIONAL	
VALLEY			SCHOLARSHIPS TO	
127 SOUTH FIRST STREET, SUITE 215			QUALIFYING STUDENTS	
GENEVA, IL 60134			ENTERING COLLEGE OR	
52.2, 12 00101			CERTAIN TRADE SCHOOLS.	500,000.
				· ·
				
				.
Total	,		► 3a	500,000.
b Approved for future payment				
NONE				
NONE				
				
	 			
Total			▶ 3b	0.
			Fori	n 990-PF (2014

•			
	Part XVI-A	Analysis of Income-Producing	Activities

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business	Amount	sion code	Amount	function income
a	-		 		
b			-		
c	1 1		1-		······································
	1 1				
			1		
f	_				
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments]		14	1.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:		•			
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b					
c	_	·····			
d	_		_		
e					
2 Subtotal. Add columns (b), (d), and (e)	<u> </u>	0	•	1.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	1.
See worksheet in line 13 instructions to verify calculations.)				

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).						

Part XVII			and Transportions on	d Relationships With Nonch	
, ,	Exempt Organi		ind Transactions an	With Noncha	aritable
1 Did the o	organization directly or indir	rectly engage in any of the following	ng with any other organization	n described in section 501(c) of	Yes No
the Code	(other than section 501(c))(3) organizations) or in section 52	7, relating to political organiz	zations?	
	•	ation to a noncharitable exempt org			
(1) Casl	· -		y		1a(1) X
(2) Othe					1a(2) X
	insactions:				10(2)
	es of assets to a noncharital	ble exempt organization			1b(1) X
		ncharitable exempt organization			1b(2) X
` '		. •			77
	tal of facilities, equipment,	or other assets			77
	nbursement arrangements				177
	ns or loan guarantees				77
. ,		mbership or fundraising solicitatio			1b(6) X
_		iling lists, other assets, or paid em	• •		1c X
				ays show the fair market value of the good	
			ed less than fair market value	in any transaction or sharing arrangement	, show in
column (other assets, or services received.			
a) Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of transfers, transactions, ar	nd sharing arrangements
		N/A			
					_
			 		
					
				 	
	.,				
	,			1	
2a Is the for	undation directly or indirect	tly affiliated with, or related to, one	or more tax-exempt organization	ations described	
ın sectio	n 501(c) of the Code (other	r than section 501(c)(3)) or in sect	tion 527?		Yes X No
b If "Yes," o	complete the following sch	edule.			
	(a) Name of org		(b) Type of organization	(c) Description of relation	onship
	N/A				
		····			
			1		
			† · · · · · · ·		
Unde	er penalties of perjury, I declare t	that I have examined this return, including	accompanying schedules and sta	tements, and to the best of my knowledge	
		nplete Declaration of preparer (other than			May the IRS discuss this return with the preparer
Here	P4. + 1)	ν .	17/8/16	TRUSTEE	shown below (see instr.)?
	The state of the s	me			X Yes No
SIQ	gnature of officer or trustee		Date	Title Check if PTI	IN
	Print/Type preparer's na	ame Preparer's s	agnature		.IV
D-:-J		- J.	1 1	self- employed	00504500
Paid	THOMAS KRO		1 K		00584732
Preparer	111111111111111111111111111111111111111	SETTI LLC	Firm's EIN ► 36-	2239746	
Use Only					
		11 NORTH AVENUE			
	OA	K PARK, IL 6030	2	Phone no. (708) 386-1433_
					Form 990-PF (2014)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

2014

Name of the organization

ALBERT M. ZARI FOUNDATION % SASSETTI

46-4833743

Organiza	tion type (check or	ne)
Filers of:		Section:
Form 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
	-	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions
General l	Rule	
	•	ifiling Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special F	Rules	
	sections 509(a)(1) a any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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 r, 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, line 1 Complete Parts I and II
	year, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for ruelty to children or animals. Complete Parts I, II, and III
-	year, contributions is checked, enter h purpose Do not co	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., emplete any of the parts unless the General Rule applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year
but it mu	st answer "No" on	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to 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
ALBERT M. ZARI FOUNDATION
% SASSETTI

Employer identification number

46-4833743

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	ALBERT M ZARI IRREVOCABLE TRUST C/O SASSETTI LLC 6611 WEST NORTH AVE OAK PARK, IL 60302	\$ <u>500,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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 Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Ocomplete Part II for noncash contributions)

Name of organization

Employer identification number

ALBERT M. ZARI FOUNDATION

% SASSETTI

46-4833743

art II	Noncash Property (see instructions) Use duplicate copies of Pa	art 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
(a) No.	(b)	(c)	(d)
from Part I	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
- - -		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- - - -		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
- - -		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate)(see instructions)	(d) Date received
·		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	90, 990-EZ, or 990-PF) (20

-	ganization T M. ZARI FOUNDATION		Employer identification number						
& SASS			46-4833743						
Part III		columns (a) through (e) and the followings, charitable, etc., contributions of \$1,000 or les	section 501(c)(7), (8), or (10) that total more than \$1,000 for						
(a) No.	Ose duplicate copies of Part III if addition	lai space is needed							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
-		(e) Transfer of gift							
-	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
	(e) Transfer of gift								
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
			_						
-	(e) Transfer of gift								
	(c) Transier of girt								
	Transferee's name, address, a	and ZIP + 4	Relationship of transferor to transferee						
(a) No.									
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held						
	(e) Transfer of gift								
	Transferee's name, address, a	Relationship of transferor to transferee							

FORM .990-PF	INTEREST	ON	SAVINGS	AND	TEMPORARY	CASH	INVESTMENTS	STATEMENT 1
SOURCE				_	(A) REVENUE ER BOOKS	NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
JPMORGAN CHASE BANK		1.			1.	1.		
TOTAL TO PART I, LINE 3			1. 1.		1.			

Form **8868**

(Rev. January 2014)

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

nternal Reve	nue Service	► Information about Form 886	8 and its i	nstructions is at www irs gov/form	8868 •		
If you a	ire filing for an Auto	omatic 3-Month Extension, complet	e only Par	t I and check this box			▶ X
If you a	re filing for an Add	itional (Not Automatic) 3-Month Ext	ension, c	omplete only Part II (on page 2 of t	this form)		
•	mplete Part II unles	•	•	ic 3-month extension on a previousl		m 8868	
	•	u can electronically file Form 8868 if y		•	•		corporation
	, ,	or an additional (not automatic) 3-mor					
	-	is listed in Part I or Part II with the exc					
		which must be sent to the IRS in pape	•	see instructions). For more details or	n the elect	ronic filing of th	nis form,
		ick on e-file for Charities & Nonprofits			المحاد		
Part I		3-Month Extension of Time					
•	•	Form 990-T and requesting an autom	iatic 6-moi	ntn extension - check this box and c	ompiete		
Part I only	•						
		ing 1120-C filers), partnerships, REMI	Cs, and tru	ists must use Form 7004 to request			
	ome tax returns				Enter file	r's identifying	number
Type or		organization or other filer, see instruc	ctions		Employer	dentification i	number (EIN) or
orint	ALBERT M	. ZARI FOUNDATION					
	% SASSET	TI				46-483	3743
le by the due date for	Number, street,	and room or suite no. If a P.O. box, se	e instruct	ons	Social se	curity number	(SSN)
ling your eturn See	6611 W.	NORTH AVE					
nstructions	City, town or po	st office, state, and ZIP code For a fo	reign addr	ess, see instructions			
	OAK PARK	, IL 60302	J				
	•						
nter the	Return code for the	e return that this application is for (file	a senarati	annication for each return)			0 4
-inter tine	rietarii code ioi tii	e return triat triis application is for the	a separati	s application for each return,			ر ت
\nnlinati			Dotum	Application			Return
Application	on		Return	Application	_		
s For			Code	Is For	Co		
	or Form 990-EZ		01	Form 990-T (corporation)			07
orm 990	-BL		02	Form 1041-A			08
orm 472	0 (ındıvıdual)		03	Form 4720 (other than individual)			09
orm 990	-PF		04	Form 5227			10
orm 990	-T (sec 401(a) or 4	08(a) trust)	05	Form 6069			11
orm 990	-T (trust other than		06	Form 8870			12
		ROBERT W KRONE					
• The bo	ooks are in the care	of ▶ 6611 WEST NORTH	AVE	- OAK PARK, IL 603	02		
Teleph	ione No 🕨 708	-263-3970		Fax No. >			
If the c	organization does n	ot have an office or place of business	ın the Uni	ted States, check this box			
lf this i	s for a Group Retu	rn, enter the organization's four digit (Group Exe	mption Number (GEN) i	f this is fo	the whole gro	up, check this
oox 🕨 [of the group, check this box		ch a list with the names and EINs of		_	
		3-month (6 months for a corporation					
	AUGUST 15		•	tion return for the organization name		The extension	
-			Jigailizai		G GDOVE	THE CALCINGION	
ا الا	or the organization						
₽ [calendar year			11- DEC 31 2014			
►l	X tax year begin	ning APR 1, 2014	, an	d ending <u>DEC 31, 2014</u>		_	
			_	(.			
2 If th	¬ '	in line 1 is for less than 12 months, ch	neck reaso	n X Initial return	Fınal retur	n	
	Change in accor	unting period			1		
3a If th	nis application is fo	Forms 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any	i		
non	refundable credits	See instructions			3a	\$	0.
b If th	nis application is fo	Forms 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and	1 -		
		ts made Include any prior year overpa	•		3b	\$	0.
	•	t line 3b from line 3a Include your pa				•	
		ronic Federal Tax Payment System)			Зс	\$	0.
		make an electronic funds withdrawal				d Form 9970 F	
		make an electronic funds withdrawal	unect det	ny wiat ins roint 6666, see roim 84	+JJ-EU an	u 1-01111 00/9-E	O ioi payment
nstructio	_	 					
_HA F	or Privacy Act and	Paperwork Reduction Act Notice,	see instru	ctions.		Form 886	68 (Rev 1-2014)