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## Form 990-PF

**Return of Private Foundation** 

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

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

OMB No 1545-0052

Department of the Treasury ▶ Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf. Internal Revenue Service For calendar year 2014 or tax year beginning DEC 18. 2014 , and ending DEC 31. 2014 Name of foundation A Employer identification number RED OAK FOUNDATION, INC. ATTN: C SCHROCK & E SCHROCK 47-2507388 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 195 N HARBOR DR APT 3502 312.526.3882 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here CHICAGO, IL 60601 G Check all that apply: X Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: | X | Cash Accrual If the foundation is in a 60-month termination (from Part II, col (c), line 16) Other (specify) under section 507(b)(1)(B), check here 2,049,012. (Part I, column (d) must be on cash basis) ▶\$ **Analysis of Revenue and Expenses** Part I (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) charitable purposes (cash basis only) expenses per books income income 2,049,012 N/A Contributions, gifts, grants, etc., received Check if the foundation is not required to attach Sch. B. 2 Interest on savings and temporary cash investments 0 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all b assets on line 6a 0 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income Total. Add lines 1 through 11 2,049,012 0 0 0 13 Compensation of officers, directors, trustees, etc Other employee salaries and wages Pension plans, employed SCANNED APR 9.7 16a Legal fees b Accounting fees c Other professiona feesAPR 1 6 2015 17 Interest Taxes 18 Depreciation and depiction DEN, UT 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 0 0 25 Contributions, gifts, grants paid 0 26 Total expenses and disbursements 0 0 Add lines 24 and 25 27 Subtract line 26 from line 12: 2,049,012 & Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) 0

423501 11-24-14 LHA For Paperwork Reduction Act Notice, see instructions.

c Adjusted net income (if negative, enter -0-)

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N/A

RED OAK FOUNDATION, INC. ATTN: C SCHROCK & E SCHROCK

Fo	rm 99	00-PF (2014) ATTN: C SCHROCK & E SCH			2507388 Page 2
F	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	
Ξ			(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing		<del></del>	
	1	Savings and temporary cash investments	_		
	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			
	١,		_		
Assets	1 -	Inventories for sale or use			<del></del>
\ss	1	Prepaid expenses and deferred charges			
_		Investments - U.S. and state government obligations			<u> </u>
	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 STMT 1	0.	2,049,012.	2,049,012.
		Land, buildings, and equipment: basis			
	' '	Less accumulated depreciation			
	15	Other assets (describe )			
	1				
	ם ו	Total assets (to be completed by all filers - see the		0 040 010	0 040 010
_	<del> </del>	instructions. Also, see page 1, item I)	0.	2,049,012.	2,049,012.
		Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
jab	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			
		and complete lines 24 through 26 and lines 30 and 31.			
es	24	Unrestricted			
2	25	Temporarily restricted			
<u>a</u>	1	· · · ·			
Net Assets or Fund Balances	26	Permanently restricted			
5		Foundations that do not follow SFAS 117, check here			
Ä	ŀ	and complete lines 27 through 31.		_	
2	27	Capital stock, trust principal, or current funds	0.	0.	
Se	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	<u> </u>	
¥	29	Retained earnings, accumulated income, endowment, or other funds	0.	2,049,012.	
Š	30	Total net assets or fund balances	0.	2,049,012.	
	31	Total liabilities and net assets/fund balances	0.	2,049,012.	
=					
LF	art	Analysis of Changes in Net Assets or Fund B	aiances		
-	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
•		st agree with end-of-year figure reported on prior year's return)		0	
	-		. 1	0.	
		r amount from Part I, line 27a			2,049,012.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	2,049,012.
		eases not included in line 2 (itemize)		5	0.
<u>6</u>	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30		2,049,012.
					Form <b>990-PF</b> (2014)

RED OAK FOUNDATION, INC.

ATTN: C

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SCHROCK & E SCHROCK Page 3 Capital Gains and Losses for Tax on Investment Income Part IV (b) How acquired P - Purchase (c) Date acquired (d) Date sold (a) List and describe the kind(s) of property sold (e.g., real estate, (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (mo., day, yr.) D - Donation 1a NONE b C d е (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) b d Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 Losses (from col. (h)) as of 12/31/69 over col. (j), if any If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) 2 If (loss), enter -0- in Part I, line 7 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8 Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) N/A If section 4940(d)(2) applies, leave this part blank. □Yes □ No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part Enter the appropriate amount in each column for each year; see the instructions before making any entries. (d)
Distribution ratio
(col. (b) divided by col. (c)) Base period years Calendar year (or tax year beginning in) (b)
Adjusted qualifying distributions Net value of noncharitable-use assets 2013 2012 2011 2010 2009 2 Total of line 1, column (d) 2 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years 3 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5 5 Multiply line 4 by line 3 5 6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 7 8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

47-2507388

RED OAK FOUNDATION, INC. ATTN: C SCHROCK & E SCHROCK 47-2507388 Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions 1a Exempt operating foundations described in section 4940(d)(2), check here \( \bigcup \) 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% 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-) 3 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 6 Credits/Payments: a 2014 estimated tax payments and 2013 overpayment credited to 2014 6a b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6с d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 7 Enter any penalty for underpayment of estimated tax. Check here \_\_\_\_\_ if Form 2220 is attached 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 11 Enter the amount of line 10 to be: Credited to 2015 estimated tax Part VII-A | Statements Regarding Activities No Yes 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? X 1a b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? 1b X If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-POL for this year? X 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. > \$ 0 • (2) On foundation managers. ▶ \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 0. managers. > \$ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? X 2 If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 3 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? X 4a b If "Yes," has it filed a tax return on Form 990-T for this year? N/A 4b 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? X 5 If "Yes," attach the statement required by General Instruction T 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or

By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law

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

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

year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV...

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

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

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

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

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X

X

X

X

6

7

86

10

remain in the governing instrument?

RED OAK FOUNDATION, INC.

	n 990-PF (2014) ATTN: C SCHROCK & E SCHROCK 47-2507  art VII-A   Statements Regarding Activities (continued)	388	F	Page <b>5</b>
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	Г		
•••	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 privileges?			
	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	X	
	Website address ► N/A			
14	The books are in care of ▶ CHARLES SCHROCK Telephone no. ▶ 312.52	6.3	882	
	Located at ▶195 N HARBOR DR APT 3502, CHICAGO, IL ZIP+4 ▶60			34
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		<b></b>	
	and enter the amount of tax-exempt interest received or accrued during the year	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 of the			
	foreign country		l	
Pε	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		l	
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	1		
	for the benefit or use of a disqualified person)?	1	}	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	o If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	]	
	Organizations relying on a current notice regarding disaster assistance check here	!	Ì	
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 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)):		ľ	
а	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			
	before 2014? Yes X No			
	If "Yes," list the years $\blacktriangleright$ ,,,,,			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect	1	1	
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	: If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
	<b>D</b>		1	
За	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		j	
	during the year? Yes X No			
b	olf "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,		- 1	
	Form 4720, to determine if the foundation had excess business holdings in 2014.)	3b	]	
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b	- 1	X

RED OAK FOUNDATION, INC. 47-2507388 Form 990-PF (2014) ATTN: C SCHROCK & E SCHROCK Page 6 Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? 5b Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained \_\_ Yes [ No expenditure responsibility for the grant? N/A If "Yes," attach the statement required by Regulations section 53 4945-5(d). 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on Yes X No a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b Х If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation. (c) Compensation (d) Contributions to employee benefit plans and deferred (b) Title, and average hours per week devoted to position (e) Expense account, other (If not paid, (a) Name and address allowances enter -0-) compensation SEE STATEMENT 3 0. 0. 0. 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Contributions to employee benefit plans and deferred compensation (b) Title, and average (e) Expense account, other (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (c) Compensation allowances NONE

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Total number of other employees paid over \$50,000

RED OAK FOUNDATION, INC.  orm 990-PF (2014) ATTN: C SCHROCK & E SCHROCK	47-2	2507388 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter '	'NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Fotal number of others receiving over \$50,000 for professional services  Part IX-A   Summary of Direct Charitable Activities	<del></del>	<u>▶</u>   0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers product N/A	al information such as the ced, etc.	Expenses
Part IX-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lir	nes 1 and 2.	Amount
N/A		•
		0.

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All other program-related investments. See instructions.

Total. Add lines 1 through 3

RED OAK FOUNDATION, INC. ATTN: C SCHROCK & E SCHROCK

P	Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
	Average monthly fair market value of securities	1a	2,049,012.
Ь	Average of monthly cash balances	1b	
C	Fair market value of all other assets	1c_	
d	Total (add lines 1a, b, and c)	1d	2,049,012.
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	2,049,012.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	30,735.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	2,018,277.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	3,871.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here   in and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	3,871.
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	3,871.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	3,871.
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	3,871.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0.
b	Program-related investments - total from Part IX-B	1b	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	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
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	0.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies for	the section
	4940(e) reduction of tax in those years.		

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ATTN: C SCHROCK & E SCHROCK

Part XIII	Undistributed	Income	(see instructions)
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	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,	Ÿ		·	
line 7				3,871.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years:				
3 Excess distributions carryover, if any, to 2014:		0.		
a From 2009				
<b>b</b> From 2010				
c From 2011				
d From 2012				
e From 2013				
f Total of lines 3a through e	0.			<del></del> -
4 Qualifying distributions for 2014 from				
Part XII, line 4: ► \$ 0.			•	
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				
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount			···· = = -	0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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		0		
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line 4a from line 2a. Taxable amount - see instr.		j	0	
f Undistributed income for 2014. Subtract			0.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				2 071
7 Amounts treated as distributions out of				3,871.
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	0.			
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		}		
423581 11.24-14			<u></u>	Form 000-DE (2014)

RED OAK FOUNDATION, INC.

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Part XIV Private Operating F	oundations (see in	structions and Part VII	-A, question 9)	N/A				
1 a If the foundation has received a ruling of	r determination letter that	it is a private operating						
Youndation, and the ruling is effective fo	r 2014, enter the date of	the ruling	▶					
<b>b</b> Check box to indicate whether the found	dation is a private operatii	ng foundation described i	n section	4942(j)(3) or 4	942(j)(5)			
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years					
income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total			
investment return from Part X for								
each year listed								
<b>b</b> 85% of line 2a					-			
c Qualifying distributions from Part XII,								
line 4 for each year listed								
d Amounts included in line 2c not					<del>"</del>			
used directly for active conduct of								
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				- <u></u>	<del></del> -			
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)								
b "Endowment" alternative test - enter				<del>  -</del>				
2/3 of minimum investment return								
shown in Part X, line 6 for each year listed								
c "Support" alternative test - enter:				<del></del>	<u> </u>			
•••								
<ol> <li>Total support other than gross investment income (interest,</li> </ol>								
dividends, rents, payments on	i							
securities loans (section								
512(a)(5)), or royalties)	<del></del>							
(2) Support from general public and 5 or more exempt								
organizations as provided in								
section 4942(j)(3)(B)(iii)								
(3) Largest amount of support from					•			
an exempt organization	<u> </u>							
(4) Gross investment income					l			
Part XV   Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets			
		uctions.)			<del></del>			
<ol> <li>Information Regarding Foundation</li> <li>List any managers of the foundation wh</li> </ol>	_	than 20/ of the total contr	ributions received by th	a facundation hafara the ala	an of any tay			
year (but only if they have contributed n			inducions received by th	e rouridation before the cid	se of any lax			
SEE STATEMENT 4								
b List any managers of the foundation wh	o own 10% or more of th	e stock of a corporation (	or an equally large nor	on of the ownership of a p	artnership or			
other entity) of which the foundation ha			or all equally large port	ion of the ownership of a p	artifership of			
NONE	•							
2 Information Regarding Contribut	ion Grant Gift Loan	Scholarship etc. Pr	ograme.					
Check here ► X if the foundation of				not accenture objected requ	iests for funds. If			
the foundation makes gifts, grants, etc.								
<del></del>	· · · · · · · · · · · · · · · · · · ·			_ <del></del>	· · · · · · · · · · · · · · · · · · ·			
2	a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:							
b The form in which applications should b	e submitted and informa	tion and materials they sh	iould include:					
				<del></del>				
c Any submission deadlines:								
d Any restrictions or limitations on award	s such as hy geographic	al areas charitable fields	kinds of institutions of	other factors:				
w may resultations of infinitations on award	o, audii aa by ycoyraphiici	يا ما حمى, بالقا القابالة الخاتاني	niius vi ilistitutiviis, 01	OUTET TACIOIS.				

RED OAK FOUNDATION, INC. ATTN: C SCHROCK & E SCHROCK

orm 990-PF (2014) ATTN: C SCHROPART XV Supplementary Information	OCK & E SCHROCK	<u> </u>	47-2507	7388 Page 11
3 Grants and Contributions Paid During the Y				
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
·	or substantial contributor	recipient		
a Paid during the year				
NONE			8	
		:		
		·		
Total			<b>▶</b> 3a	0,
<b>b</b> Approved for future payment				
NONE				
				·
	]			
Total		<u> </u>		

**Analysis of Income-Producing Activities** 

47-2507388 Page 12

Form 990-PF (2014)

Part XVI-A

ATTN: C SCHROCK & E SCHROCK

nter gross amounts unless otherwise indicated.	Unrelated	business income		ided by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a					
b					
c					
d					
е					
f					-
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					
investments					
Dividends and interest from securities					
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					_
Net rental income or (loss) from personal					
property					
7 Other investment income					<u></u>
3 Gain or (loss) from sales of assets other					
than inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a	_				
b	_				
C	_		1		
d	_				
e	_				
2 Subtotal. Add columns (b), (d), and (e)		0	•	0.	
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.				13	0.
Part XVI-B Relationship of Activities  Line No. Explain below how each activity for which in the foundation's exempt purposes (other the	come is reported in	column (e) of Part XVI-			nplishment of
				- <del></del>	
			•		
			_		
				<del> </del>	
		<del></del> -		<u></u>	· · · · · · · · · · · · · · · · · · ·
					<del></del>
			_	· · - · · · · · · · · · · · · · · · · ·	<del> </del>
				<del></del>	

RED OAK FOUNDATION, INC. ATTN: C SCHROCK & E SCHROCK N: C SCHROCK & E SCHROCK 47-2507388

Regarding Transfers To and Transactions and Relationships With Noncharitable

		AK FOUNDA				45.05	05000	
Form 990-PF (2		C SCHROC			and Dalations	47-25		Page 13
Part AVII	intormation Re Exempt Organ	∌garding iran sizatione	sters 10	and Transactions a	and Relations	nips with Noncr	iaritable	
1 Did the ore			of the follows	ng with any other organization	on described in sect	uon 501(c) of		es No
				ng with any other organization 27, relating to political organ		1011 30 1(0) 01		03 110
	from the reporting found				iizatiO1157			
(1) Cash	nom the reporting found	ation to a noncharita	inie exempt oi	yanızanon or.			1a(1)	x
(2) Other	ancata						1a(2)	X
b Other tran					•		10(2)	<u> </u>
		hio exempt organiza	tion				1b(1)	x
• •	of assets to a noncharita nases of assets from a no				-		1b(2)	$-\frac{x}{x}$
` '		•	or yanızanıdı				1b(3)	$\frac{\mathbf{x}}{\mathbf{x}}$
, ,	I of facilities, equipment,						1b(4)	$\frac{\mathbf{x}}{\mathbf{x}}$
, ,	bursement arrangements							X
, ,	s or loan guarantees	ambarahin ar fundrai	ena colinitati	nne.			1b(5) 1b(6)	$\frac{\mathbf{x}}{\mathbf{x}}$
	rmance of services or me f facilities, equipment, ma				•		1c	$\frac{x}{x}$
-		- ·		iployees edule. Column <b>(b)</b> should al <sup>,</sup>	wave chow the fair r	market value of the good		
				red less than fair market vali				ა,
	) the value of the goods,				ue iii airy iiansaciioi	TOT SHALLING ATTAINGUITETT	L SHOW III	
	(b) Amount involved			e exempt organization	(d) Description	n of transfers, transactions, a	nd sharing arrar	
(4) 2.110 110	(b) runount untoltou	(o) name of	N/A	o oxompt organization	(d) besarption	TOTALISIONS, BENESCHOINS, E	TO SHEIRING EVEN	
			N/A					
		†						
		<del>                                     </del>				· · · · · · · · · · · · · · · · · · ·		
		<del> </del>						
	•	<del> </del>						
		<del> </del>						
		<u> </u>						
		1				·		
		†						
		+		· · · · · · · · · · · · · · · · · · ·				
	······································	<del> </del>						
		<del> </del>					· · ·	
		+						
2a le the four	adation directly or indirec	thy affiliated with or	related to one	e or more tax-exempt organ	rations described			
	501(c) of the Code (othe				izations described		Yes	X No
	omplete the following sch	-	)(0)) UI III SEC	MON JZ7 :	•••		163	NO
<u> </u>	(a) Name of org			(b) Type of organization		(c) Description of relation	nship	
	N/A	jumzanon		(s) type of organization	<u> </u>	(0)		
	H/A							
				-				
Under	penalties of perjury, I declare	that I have examined th	is return, includi	ng accompanying schedules and	I statements, and to the	best of my knowledge		
Sign and be	elief, it is true, correct, and cor	mplete Declaration of pr	reparer (other tha	an taxpayer) is based on all inform	mation of which prepare	Thas any knowledge	May the IRS dis return with the p	reparer
Here	Charles a	. Selvar d		104/03/201		DIRECTOR	shown below (se	e instr)?
Sign	nature of officer or trustee	704040		Date	Title	L	163	
1 4.8.	Print/Type preparer's na		Preparet's		Date	Check If PTI	N	
		-	1/1/11	(1)		self- employed		
Paid	WILLIAM O.	EVENSON	Wille	= Lucron	12-7-13	, , ,	000535	68
Preparer	Firm's name ► HAW		CPAS,	LLP		Firm's EIN ▶ 39 -		
Use Only	THE STREET	AUII AUII	J. 110 ,			Tamount P 33	J 1 2 0 0	_
•	Firm's address ▶ 23	60 DUCK (	REEK	PARKWAY	<del></del>	1		
	1	REEN BAY,				Phone no. 920.	336.98	50
					<u>-i-</u>	,	Form <b>990-</b>	
								. ,

## 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.lrs.gov/form990 .

OMB No 1545-0047

Employer identification number

	ED OAK FOUNDATION, INC. TTN: C SCHROCK & E SCHROCK	<b>47-25</b> 07388					
Organization type (check	· <del>_</del> · -						
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						
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling ny one contributor. Complete Parts I and II. See instructions for determining a contributor'						
sections 509(a)(1 any one contribu	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support ) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, tor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amour 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, contributior is checked, enter purpose. Do not	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 if this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
but it <b>must</b> answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule E in Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fo et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

Name of organization

RED OAK FOUNDATION, INC.

ATTN: C SCHROCK & E SCHROCK

Employer identification number

47-2507388

Part I	Contributors (	(see instructions)	Use duplicate co	pies of Part Lif	additional space is needed.
--------	----------------	--------------------	------------------	------------------	-----------------------------

		·	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHARLES AND ELIZABETH SCHROCK  195 N. HARBOR DR., #3502  CHICAGO, IL 60601	\$ <u>2,049,012.</u>	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
		\$	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 Payroli 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 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.)

Name of organization

RED OAK FOUNDATION, INC.

ATTN: C SCHROCK & E SCHROCK

Employer identification number

47-2507388

raitii	Noncash Property (see instructions). Ose duplicate copies of Pa	art ii ii additional Space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_1	SECURITIES		
		\$2,049,012.	VARIOUS
(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
		<b> \$</b>	
(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
3453 11-05		Schedule R (Form 9	90, 990-EZ, or 990-PF) (201

lame of orga	•			Employer identification n	umber
	K FOUNDATION, INC.			47 2507200	
Part III	C SCHROCK & E SCHROCK  Exclusively religious, charitable, etc., cor	tributions to organizations desc	ribed in section	47-2507388 501(c)(7), (8), or (10) that total more than \$	1.000 for
	the year from any one contributor. Complete	columns (a) through (e) and the	e following line er	ITV For organizations	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	completing Part III, enter the total of exclusively religion.  Use duplicate copies of Part III if addition	us, charitable, etc., contributions of \$1 nal space is needed.	,000 or less for the	rear (Enter this into once)	
(a) No.					
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is he	eld
		(e) Transfer	of gift		
	Transferee's name, address, and ZIP + 4		Rela	ationship of transferor to transferee	
-					
-					
-					
(a) No. from				· · · · · · · · · · · · · · · · · · ·	
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is he	eld
]					
	(e) Transfer of gift				
	Transferee's name, address, a	and ZIP + 4	Rela	tionship of transferor to transferee	
-					
-				·	
-			-		
(a) No. from					
Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is he	eld
-			.		
.					
			.		
				<del></del>	
	(e) Transfer of gift				
	Transferee's name, address, a	and 7IP + 4	Rela	tionship of transferor to transferee	
	Transieres s trame, dual ess, a	17	1,0,0	adoliship of d'alisteror to d'alisteree	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is he	ald
Part I	(4), 11, 12, 12, 13, 14	(0, 000 01 g		(-)	
-	<del>- · -</del>				
-					
-			<del></del>   -	<del></del>	
	(e) Transfer of gift				
	(e) transier or girt				
	Transferee's name, address, a	end ZIP + 4	Rela	ntionship of transferor to transferee	
.					
-					

FORM 990-PF	OTHER INVESTMENTS		STATEMENT	1
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKE VALUE	T
BAIRD STATEMENT ON FILE	COST	2,049,012	2,049,0	12.
TOTAL TO FORM 990-PF, PART II	, LINE 13	2,049,012	2,049,0	12.
NAME OF CONTRIBUTOR	ART VII-A, LINE 10  ADDRESS			
CHARLES SCHROCK & ELIZABETH S	CHROCK 195 N HARBOR CHICAGO, IL			
	LIST OF OFFICERS, AND FOUNDATION MAN		STATEMENT	3
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- BI	MPLOYEE EN PLAN EXPEN CONTRIB ACCOU	
CUADI EC CCUDOCV	DDECIDENM/EVE	CIMIUE DIDECMO		

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
CHARLES SCHROCK 195 N HARBOR DR APT 3502 CHICAGO, IL 60601-7534	PRESIDENT/EXECT	UTIVE DIREC	TOR 0.	0.
ELIZABETH SCHROCK 195 N HARBOR DR APT 3502 CHICAGO, IL 60601-7534	VICE PRESIDENT 2.00	0.	0.	0.
KEN SCHROCK 195 N HARBOR DR APT 3502 CHICAGO, IL 60601-7534	SECRETARY 2.00	0.	0.	0.
KAREN SIMRING 195 N HARBOR DR APT 3502 CHICAGO, IL 60601-7534	TREASURER 2.00	0.	0.	0.
CHARLES SCHROCK 195 N HARBOR DR APT 3502 CHICAGO, IL 60601-7534	DIRECTOR 2.00	0.	0.	0.

RED OAK FOUNDATION, IN	C. ATTN: C SCHROCK		47-2	507388
ELIZABETH SCHROCK 195 N HARBOR DR APT 3502 CHICAGO, IL 60601-7534	DIRECTOR 2.00	0.	0.	0.
TOTALS INCLUDED ON 990-P	F, PAGE 6, PART VIII	0.	0.	0.
FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGERS		STATEME	NT 4

NAME OF MANAGER

CHARLES SCHROCK ELIZABETH SCHROCK