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Form **990-PF**

EXTENDED TO NOVEMBER 15, 2017 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.

For catendary year 2016 or taxyyear beginning Rome of foundation PRANK AND KAREN PTAK FAMILY FOUNDATION PRANK AND KAREN PTAK FAMILY FOUNDATION 1415 WAVFRLY ROAD City or burn, state or provides, country, and ZiP or threagn postal code HIGHLAND PARK, ILL 500.35 - 3.46.2 G Check all that apply. Flat father state Actives schools and the state of the state of several actives of the state	Departme	ent of the Treasury evenue Service Do not enter Information about For	social security numbers on rm 990-PF and its separate	this form as it may be ma instructions is at <i>www.ir</i> s	ade public. s.gov/form990pf.	Open to Public Inspection			
PRANK AND KAREN PTAK FAMILY FOUNDATION 26-4190675 1415 WARVERLY ROAD 1415 WARVERLY ROAD 1415 WARVERLY ROAD 1415 WARVERLY ROAD 1416 WARVERLY RO									
Number of PC Date industry (PC Date industry) Number of PC Date industry	Name of foundation A Employer identification number								
Number of PC Date industry (PC Date industry) Number of PC Date industry	FRA	ANK AND KAREN PTAK FAMII	Y FOUNDATION		26-4190675				
14 15 WAVERLY ROAD City from state or promoting, country, and 2th or foreign postal cade HIGHLAND PARK, IL 60035-3462 G Check all final spply:				Room/suite		47-681-962			
## Check with that apply: Introduction		· · · · · · · · · · · · · · · · · · ·			l -:	59			
Final return					C if exemption application is p	ending, check here			
Address change Name change 2 Percent grands alone necessary and address change 2 Percent grands an	G Chec	k all that apply: Initial return	Initial return of a fo	ormer public charity	D 1 Foreign organizations	, check here			
H. Check type of organization: Section 4947(a)(1) nonexempt chariable trust: Other taxable private foundation Fair market value of all assets a end of year Accounting method:		Final return	Amended return		2 Foreign organizations ma	ating the 85% test			
Section 4947(a)(1) nonexempt charable trust Other tabable private foundation of the section 507(b)(1)(a), cleck here (income and the section 50					check here and attach co	mputation			
Farm market value of all assets at end of year J Accounting method: X Cash Accrual (from Part II, col (c), line 16) 1 321, 454 J (colt (c), line 16) J (colt (c), line 16									
Part					1				
National 1		·	=	Accidal					
Part II Analysis of Revenue and Expenses (a) Revenue and expenses per books (b) Net investment (c) Adjusted net (d) Consumer (a) (d) and (d) may not measure to a mount an endering (b) (a) Revenue and expenses per books (b) Net investment (c) Adjusted net (d) Consumer (e) Adjusted net (e) Consumer	•	1,321,454. (Part I, cold	ımn (d) must be on cash i	basis)		(D), 01100K 11010			
1 Contributions, gifts, grants, etc., received 2 Creek		Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment		for charitable purposes			
Continue	1		500,000.		N/A				
1	T	Check If the foundation is not required to attach Sch. B							
Sa Gross rents Post rental income or (less) Ga Net game (pess) from sale of assets not on line 10 Gross sales price for all 175,000. TO Capital gain ret income (from Part N. line 2) Sa Net short-term capital gain Income modifications	3	Interest on savings and temporary cash investments							
D Not rental mome or (loss) A Not gain or (loss) from sale of assets not on line 10 D Gross sales proces for all 175,000 TKL / IVFD Seasots on line 80 Not some form Part IV. Line 2 Not Short-torm capital gain 175,000 Not seasots on line 80 Not Short-torm capital gain Not Short-torm	4	Dividends and interest from securities	18,051.	18,051.		STATEMENT 2			
Same territor of floors from sale of assets not on time 10 175,000. 175	5	a Gross rents							
D conse sales price for all 175,000. D consessates price for all 175,000. Ref. C-IVED Consessates been all through an an analysis of the sales and the sal			_50			7 d			
8 Net snort-term capital gain 9 Income modifications 10a and allowances b Less Cost of goods sold c Gross poils in Gross sales less returns b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 518,004. 18,054. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees C Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 4 3,432. 3,407. 25. 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 18 2,307. 3,407. 173,900. 26 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (friegative, enter-0-) c Adjusted net income (friegative, enter-0-)	9 6	Gross sales price for all 175 000			R	-1 -1 VED 2000			
8 Net snort-term capital gain 9 Income modifications 10a and allowances b Less Cost of goods sold c Gross poils in Gross sales less returns b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total. Add lines 1 through 11 518,004. 18,054. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees C Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses STMT 4 3,432. 3,407. 25. 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 18 2,307. 3,407. 173,900. 26 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (friegative, enter-0-) c Adjusted net income (friegative, enter-0-)	9 7	23323 011 1110 02		0.	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
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10 20 20 20 20 20 20 20	9	Income modifications		()		子が変数が入っ			
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11 Other income 12 Total Add lines 1 through 11 518,004. 18,054. 18,054. 18,054. 18,054. 18,054. 18,054. 18,054. 18,054. 18,054. 18,054. 18,054. 19,056. 19,056. 19,000.			•		1 00	MEN IN THE			
12 Total Add lines 1 through 11 518,004.		• • •		1.7 p. 22 p. 1		à delle			
13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees Cother professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions; girts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)			518 004	18 054					
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16a Legal fees b Accounting fees STMT 3 1,875. 0. 1,875.		Pension plans, employee benefits							
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26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) N/A	ber	•	1,875.	0.		1,875.			
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) N/A	<u>آ</u>								
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26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) N/A	10 str								
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) N/A	Ē 20	·							
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26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) N/A	E 22								
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) N/A	<u>E</u> 23	,	3,432.	3,407.		25.			
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) N/A	te 24		10 207	2 407		1 000			
26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) N/A	호	,	10,30/. 172-000-	3,40/.		<u> </u>			
Add lines 24 and 25 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) N/A	l		1,2,000.			1,2,000.			
27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) N/A	10	•	182,307.	3,407.		173,900.			
b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) N/A	27								
c Adjusted net income (if negative enter -0-)		8 Excess of revenue over expenses and disbursements	335,697.						
	I			14,647.	\				
					N/A_	5 000 DE (0010)			



_		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	r year
P	art	column should be for end-of year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
\neg	1	Cash - non-interest-bearing	286,826.		
i		Savings and temporary cash investments	34,048.	706,259.	706,127.
		Accounts receivable		,	
	J	Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	-	Grants receivable			
1	6	Receivables due from officers, directors, trustees, and other			
1		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
σ.	8	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
As		Investments - U.S. and state government obligations			
		Investments - corporate stock	-		
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			645 005
	13	Investments - other STMT 5	661,898.	612,210.	615,327.
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	15	Other assets (describe ►			
		Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	982,772.	1,318,469.	1,321,454.
_	17	Accounts payable and accrued expenses			
		·			
	18	Grants payable			.**
es	19	Deferred revenue			$N_{\rm p}(E)$
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			2.
jab	21	Mortgages and other notes payable			Y
_	22	Other liabilities (describe)	<u> </u>		
			_		, ',
	23	Total liabilities (add lines 17 through 22)	0.	0.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		Foundations that follow SFAS 117, check here			1.0%
		and complete lines 24 through 26 and lines 30 and 31.			-
es	24	Unrestricted	İ		
lances		Temporarily restricted			
	26	Permanently restricted		• • •	
Fund Ba	20	Foundations that do not follow SFAS 117, check here			1
5		, , , , , , , , , , , , , , , , , , , ,	i		
<u></u>		and complete lines 27 through 31	0.	0.	[
ţ	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund		• •	
Ę	29	Retained earnings, accumulated income, endowment, or other funds	982,772.	1,318,469.	
Š	30	Total net assets or fund balances	982,772.	1,318,469.	
_	31	Total liabilities and net assets/fund balances	982,772.	1,318,469.	
一		III Analysis of Changes in Net Assets or Fund B	lalances		
	arı	III Analysis of Changes in Not Associate of Fana 2			
1	Tota	I 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) —		— — — — — 1	<u> </u>
	•	r amount from Part I, line 27a		2	335,697.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	1,318,469.
		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	olumn (h) line 30	6	1,318,469.
<u>-</u>	iota	THE CASSES OF TURIO DATABLES AT END OF YEAR (THE 4 THINDS THE 3) - PAIL II, C	olumni (0 <i>)</i> , iiile 50		Form 990-PF (2016)
					1 UIIII 33U-F F (20 10)

Part IV Capital Gains	and Los	sses for Tax on Ir	<u> ivestmen</u>	t Income						
(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) F	low a - Purc - Don	cquired chase ation	(c) Date a (mo., da		(d) Date sold (mo., day, yr)
1a PUBLICLY TRADE	D SEC	URITIES						VARI	ous	12/31/16
b		_			L					
<u>c</u>	_									
<u>d</u>					.					
<u>e</u>	(6) D	epreciation allowed	(a) Co.	st or other basis	┸┯			/h\G	ain or (loss	1
(e) Gross sales price		(or allowable)		expense of sale					(f) minus	
a 175,000.				175,05	0 -		-			
<u>b</u>									_	
d										
e										
Complete only for assets shown	ig gain in ci	olumn (h) and owned by	the foundation	on 12/31/69			(1)	Gains (C	ol. (h) gain	minus
<u> </u>) Adjusted basis		cess of col. (I)				(k), but n	ot less tha	n -0-) or
(i) F.M.V. as of 12/31/69		as of 12/31/69		col. (j), if any	ŀ			Losses	(from col.	(n))
a										-50.
b										
С										-
d										
e			<u> </u>							
2 Capital gain net income or (net ca	ipital loss)	{ If gain, also enter of the lift (loss), en	r in Part I, line - in Part I, line	7 7	}	2				-50.
3 Net short-term capital gain or (los	ss) as defin	•								
If gain, also enter in Part I, line 8,			(0).		ال					
If (loss), enter -0- in Part I, line 8					Л	3	<u> </u>		N/A	<u> </u>
Part V Qualification U	Inder Se	ection 4940(e) for	Reduced	I Tax on Net	Inv	estn	nent Inc	ome		
(For optional use by domestic private	e foundation	ns subject to the section 4	4940(a) tax or	net investment in	icome	-)				
If section 4940(d)(2) applies, leave the	his part blai	nk.								
, , , , , ,	•									Yes X No
Was the foundation liable for the sec				•	logy					Yes A No
If "Yes," the foundation does not qual 1 Enter the appropriate amount in					ntries				•	
• • •	Cacir Colum	(b)	isti dettoris be	Toro making any c	(c)			1		(d) bution ratio
(a) Base period years Calendar year (or tax year beginni	na in)	Adjusted qualifying dis	tributions	Net value of no			-use assets		Distril Col. (b) dr	bútión ratio vided by col. (c))
2015	y,	16	0,000.		1	. 01	0,476		(00:1 (0) 0:	.158341
2014			3,916.	-			2,165			.134375
2013			7,949.				4,128			.143120
2012			4,998.				8,857			.128225
2011		9	9,990.				5,556			.114202
							-			
2 Total of line 1, column (d)								2		.678263
3 Average distribution ratio for the	5-year base	period - divide the total (on line 2 by 5,	or by the number	of yea	ars				
the foundation has been in existe	nce if less t	han 5 years						3		.135653
4 Enter the net value of noncharitat	le-use asse	ets for 2016 from Part X,	line 5					4		1,027,460.
								1 1		
5 Multiply line 4 by line 3								5		139,378.
6 Enter 1% of net investment incon	ne (1% of P	'art I, line 27b)				_		6 -		<u> </u>
										400 =0:
7 Add lines 5 and 6								7		139,524.
8 Enter qualifying distributions from	n Part XII, li	ne 4						8		173,900.
If line 8 is equal to or greater than			1b. and comr	lete that part usin	o a 19	% tax	rate.			<u> </u>
See the Part VI instructions.	, 0110			part don't		,				

Dr	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	40	1190	, , ,		Page 4	
		48 -	see ir	ıstrı	ICTIO	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here ► and enter "N/A" on line 1.	ŀ					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				_	46.	
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%							
	of Part I, line 27b						
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	ł				0.	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)							
3	Add lines 1 and 2	3			1	46.	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.	
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5			1	<u>46.</u>	
6	Credits/Payments:	l					
	2016 estimated tax payments and 2015 overpayment credited to 2016	1					
	Exempt foreign organizations - tax withheld at source						
	Tax paid with application for extension of time to file (Form 8868)						
	Backup withholding erroneously withheld 6d 6d		-	-		_	
	Total credits and payments. Add lines 6a through 6d	7				0.	
	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			1	<u>46.</u>	
		10					
		11					
						- KI	
ıa	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in				Yes		
	any political campaign?		-	<u>1a</u>		X	
0	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	d or					
_	distributed by the foundation in connection with the activities		1				
	Did the foundation file Form 1120-POL for this year?		}	<u>1c</u>		<u>X</u>	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		į				
	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.		i				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation						
2	managers. > \$0.			_			
	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		-	2		<u>X</u>	
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or						
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				-	v	
12	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			3		X	
	If "Yes," has it filed a tax return on Form 990-T for this year?	N/	, ₇ }	4a 4h			
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	14/	^ }	5		X	
	If "Yes," attach the statement required by General Instruction T		-	<u> </u>			
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:						
٠	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 la 	14/	i				
	remain in the governing instrument?	. * *		6	Х		
	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		<u> </u>	7	X	•••	
•	The transfer of the transfer o		F	'	- 41		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			,			
	IL		— <u> </u>				
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 G? If "No," attach explanation		ľ	8b	х		
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendary	ar	-				
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	<u> </u>		- ₉		- x -	
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10	x		

FRANK AND KAREN PTAK FAMILY FOUNDATION

Pa	rt VII-A Statements Regarding Activities (continued)			
			Yes	No
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 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		450	
14	The books are in care of ► FRANK PTAK Telephone no. ► 312-84			
	Located at ► 1415 WAVERLY ROAD, HIGHLAND PARK, IL ZIP+4 ►60	035		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		. , . ▶	· []
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2016, 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. If "Yes," enter the name of the			
	foreign country	L		
Pε	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		1	
	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)			
	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?	•		1
	(5) Transfer any income or assets to a disqualified person (or make any of either available	•		
	for the benefit or use of a disqualified person)?	ŀ		
	(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		1	
	termination of government service, if terminating within 90 days.)		7 1	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	<u></u> -	<u></u>	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	1	X
	Organizations relying on a current notice regarding disaster assistance check here			1 1
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	10		
•	before the first day of the tax year beginning in 2016? Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	۳.		
_	defined in section 4942(j)(3) or 4942(j)(5)):			,
	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		1	
	before 2016? Yes X No	1		
	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 attach			
	statement - see instructions.) N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	•			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after	l		
	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,	<u></u>		
	Form 4720, to determine if the foundation had excess business holdings in 2016) N/A	3b		
48	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
ī	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			=1
	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		X

orm 990-PF (2016) FRANK AND KAREN PTAK FAM Part VII-B Statements Regarding Activities for Which F			26-41906	75 Page 6
	orm 4/20 Iviay be i	required (contin	uea)	
5a During the year did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section)			es X No	
 (2) Influence the outcome of any specific public election (see section 4955); o any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes' 	Ye	es X No		
(4) Provide a grant to an individual for travel, study, or other similar purposes			:S [A] NO	
4945(d)(4)(A)? (see instructions)		Ye	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?	or educational purposes, or f		es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	er the exceptions described			
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	ere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr				.
expenditure responsibility for the grant?	N	I/A L Ye	es L No	7
If "Yes," attach the statement required by Regulations section 53 4945	• •			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	oay premiums on		7,	1 1/2 1
a personal benefit contract?		Ye	es 🗶 No 📙	<u> `</u> _
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		-	6b 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	Ye	3 LAE 110 L	*	
b If 'Yes," did the foundation receive any proceeds or have any net income attribu			,1	7b
Part VIII Information About Officers, Directors, Trustone Paid Employees, and Contractors	es, Foundation Ma	inagers, Highly	y	
List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to	(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
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
	hours per week devoted to position	enter'-0-)		allowances
(a) Name and address SEE STATEMENT 7	hours per week devoted to position	(If not paid, enter -0-)	employee denant plans and deferred compensation	aècount, other allowances
	hours per week devoted to position	enter'-0-)		allowances
	hours per week devoted to position	enter'-0-)		allowances
	hours per week devoted to position	enter'-0-)		allowances
	hours per week devoted to position	enter'-0-)		allowances
	hours per week devoted to position	enter'-0-)		allowances
	hours per week devoted to position	enter-0-)		allowances
	hours per week devoted to position	enter-0-)		allowances
	hours per week devoted to position	enter-0-)		allowances
	to position	5,000.	0.	allowances 0.
SEE STATEMENT 7	to position Iuded on line 1). If none, (b) Title, and average hours per week	5,000.	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other
SEE STATEMENT 7 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	to position tuded on line 1). If none, (b) Title, and average	5 , 000 •		allowances 0.
SEE STATEMENT 7 2 Compensation of five highest-paid employees (other than those inc	to position Iuded on line 1). If none, (b) Title, and average hours per week	5 , 000 •	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other
SEE STATEMENT 7 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	to position Iuded on line 1). If none, (b) Title, and average hours per week	5 , 000 •	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other
SEE STATEMENT 7 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	to position Iuded on line 1). If none, (b) Title, and average hours per week	5 , 000 •	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other
SEE STATEMENT 7 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	to position Iuded on line 1). If none, (b) Title, and average hours per week	5 , 000 •	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other
SEE STATEMENT 7 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	to position Iuded on line 1). If none, (b) Title, and average hours per week	5 , 000 •	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other
SEE STATEMENT 7 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	to position Iuded on line 1). If none, (b) Title, and average hours per week	5 , 000 •	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other
SEE STATEMENT 7 2 Compensation of five highest-paid employees (other than those inc. (a) Name and address of each employee paid more than \$50,000	to position Iuded on line 1). If none, (b) Title, and average hours per week	5 , 000 •	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other

Form **990-PF** (2016)

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

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		130673 Page 7
3 Five highest-paid independent contractors for professional services. If none, enter "N	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
N/A- UNDER 50,000		
		0.
		
		
Total number of others receiving over \$50,000 for professional services		▶ 0
PartiX:A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produced		Expenses
1 N/A		
2		
3		
·		
4		
Dort IV PR C.		
Part IX:B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2.	Amount
1 N/A		
2		
All ables are related in restaurate. Con antiquition		
All other program-related investments. See instructions. 3		
<u> </u>		
<u> </u>		
Total. Add lines 1 through 3	▶	0.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 747,913. a Average monthly fair market value of securities 1a 295,194. 1b b Average of monthly cash balances 1c c Fair market value of all other assets 1,043,107. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1e 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 1.043.107. 3 Subtract line 2 from line 1d 4 15.647. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 027,460. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 51,373. Minimum investment return. Enter 5% of line 5 PartXII Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here
and do not complete this part.) 51,373. Minimum investment return from Part X, line 6 146. Tax on investment income for 2016 from Part VI, line 5 2a b Income tax for 2016. (This does not include the tax from Part VI.) 2b 146. c Add lines 2a and 2b 2c Distributable amount before adjustments. Subtract line 2c from line 1 3 51,227. 4 Recoveries of amounts treated as qualifying distributions Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 51,227. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 PartixIII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 173,900. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 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 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 173,900. 4 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 6 Adjusted qualifying distributions. Subtract line 5 from line 4 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.

Form **990-PF** (2016)

Part XIII Undistributed Income (s	ee instructions)			
	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,		·		
line 7				51,227.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011 56,232.				
b From 2012 64,059.				
c From 2013 76 , 745 .				
dFrom 2014 77,810.				
eFrom 2015 109,476.	204 222			
f Total of lines 3a through e	384,322.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ►\$ 173,900.			0.	
a Applied to 2015, but not more than line 2a			· · · · · · · · · · · · · · · · · · ·	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		· · · · · · · · · · · · · · · · · · ·		
c Treated as distributions out of corpus	0.			
(Election required - see instructions) d Applied to 2016 distributable amount				51,227.
e Remaining amount distributed out of corpus	122,673.			31,121,0
5 Excess distributions carryover applied to 2016	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;				•
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	506,995.			
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 2015. Subtract line			0	
4a from line 2a. Taxable amount - see instr.		 	0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must be distributed in 2017				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	, i			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	56,232.			
9 Excess distributions carryover to 2017.				-14 - 2 - 2 - 2
Subtract lines 7 and 8 from line 6a	4 ⁻ 50 ⁻ , 7 ⁻ 63 ⁻ .	-		
10 Analysis of line 9:				
a Excess from 2012 64,059.	ļ			
b Excess from 2013 76,745.				
c Excess from 2014 77,810.	ļ			
d Excess from 2015 109,476.				
e Excess from 2016 122,673.				

Part XIV Private Operating F	oundations (see ins	structions and Part VII-	A, question 9)	N/A	
1 a If the foundation has received a ruling of	determination letter that	it is a private operating			
foundation, and the ruling is effective for	2016, enter the date of t	he ruling	>		
b Check box to indicate whether the found	ation is a private operation	ig foundation described in	section	4942(j)(3) or4	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) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for				T	
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
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				1	
3 Complete 3a, b, or c for the				1	
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)				1	
b "Endowment" alternative test - enter					
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed				1	
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,				Í	
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(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					
(4) Gross investment income	-			 	
Part XV Supplementary Info	rmation (Comple	te this part only	f the foundation	had \$5,000 or m	ore in assets
at any time during t				, , , , , , , , , , , , , , , , , , ,	
1 Information Regarding Foundatio					
a List any managers of the foundation who	······································	than 2% of the total contr	butions received by the	foundation before the clo	se of any tax
year (but only if they have contributed m					,
SEE STATEMENT 8					
b List any managers of the foundation whi	o own 10% or more of th	e stock of a corporation (or an equally large porti	on of the ownership of a p	partnership or
other entity) of which the foundation has			, , , , , ,	,,	•
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pre	ograms:		
Check here if the foundation o			_	not accept unsolicited req	uests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone number	per or e-mail address of t	he person to whom applic	cations should be addre	ssed:	
SEE STATEMENT 9					
b The form in which applications should b	e submitted and informat	and materials they sh	onlg include.		
c Any submission deadlines:					
d Any restrictions or limitations on awards	, such as by geographica	il areas, charitable fields,	kınds of institutions, or	other factors:	

Form 990-PF (2016) FRANK AND KAREN PTAK FAMILY FOUNDATION

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Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient a Paid during the year SEE ATTACHED STATEMENT THE PURPOSE OF THE GIFT IS TO PROVIDE SUPPORT FOR CHARITABLE, 172,000. SCIENTIFIC, OR EDUCATION ACTIVITES AND PROJECTS OF THE FOUNDATION ▶ 3a 172,000. Total b Approved for future payment NONE Total

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

Enter gross amounts unless otherwise indicated.	Unrelate	d business income	Exclu	ded by section 512, 513, or 514	(e)		
and a manual and a	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt		
1 Program service revenue:	code	Amount	code	Amount	function income		
a							
b							
C	·						
d							
e	·						
1	·						
g Fees and contracts from government agencies	·		 	_ <u></u>			
2 Membership dues and assessments				·			
3 Interest on savings and temporary cash							
			14	3.			
Investments			$\frac{14}{14}$	18,051.			
4 Dividends and interest from securities	9655,232A 4856 08				139750948995287 / - 75 \ 1		
5 Net rental income or (loss) from real estate:	98 × X × 48 99						
a Debt-financed property							
b Not debt-financed property							
6 Net rental income or (loss) from personal							
property			<u> </u>				
7 Other investment income							
8 Gain or (loss) from sales of assets other							
than inventory			18	-50.			
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory							
11 Other revenue:							
a							
b	·						
C		•					
1							
е	·						
12 Subtotal. Add columns (b), (d), and (e)		0.	1971	18,004.	0.		
13 Total. Add line 12, columns (b), (d), and (e)	BANK V. W. SHINGS			13	18,004.		
(See worksheet in line 13 instructions to verify calculations.)				··· <u> </u>			
Relationship of Activities	to the Acco	omplishment of Ex	emp	t Purposes			
Line No. Explain below how each activity for which income	ome is reported i	n column (e) of Part XVI-A	contrib	outed importantly to the accor	nnlishment of		
the foundation's exempt purposes (other than			COMMI	dica importantly to the accor	inpliatinioni of		
	, p						
		_					
					 		
							
							
	·			· 			
= = - = = = = = = = = = = = = = = = = =							
				· · ·			
		 -					

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did the or	ganızatıon dırectly or ındı	rectly engage in any of the followir	ng with any other organization	described in section 501(c) of	Yes No
	the Code ((other than section 501(c))(3) organizations) or in section 52	27, relating to political organization	ations?	
а	Transfers	from the reporting founda	ation to a noncharitable exempt or	ganization of:		
	(1) Cash					1a(1) X
	(2) Other	assets				1a(2) X
b	Other tran	sactions:				
	(1) Sales	of assets to a noncharita	ble exempt organization			1b(1) X
	(2) Purch	nases of assets from a no	ncharitable exempt organization			1b(2) X
	• •	al of facilities, equipment,	· -			1b(3) X
		bursement arrangements				1b(4) X
	• •	s or loan guarantees				1b(5) X
		=	embership or fundraising solicitation	ons	,	1b(6) X
c			uling lists, other assets, or paid em			1c X
			•	• •	ays show the fair market value of the goods,	
Ī		-			in any transaction or sharing arrangement, s	
			other assets, or services received.		many transaction of chairing arrangement,	
(a)ı	ine no	(b) Amount involved	(c) Name of noncharitable		(d) Description of transfers, transactions, and	sharing arrangements
14/-		(B)/Allount livolved	N/A	- Oxompt organization	(V) Description of dansiers, dansactions, and	37amg arrangements
			N/A			
			 			
		- ·		<u> </u>		
_	$-\!\!\!\!\!+\!\!\!\!\!-$		l — — — — — — — — — — — — — — — — — — —			
					<u></u>	
					<u> </u>	
				· · ·		
		- 				
	_					
2a	Is the four	ndation directly or indirect	tly affiliated with, or related to, one	or more tax-exempt organiza	itions described	
			r than section 501(c)(3)) or in sec			Yes X No
h		omplete the following sch		uon 327 ·		103
	11 165, 00	(a) Name of org		(b) Type of organization	(c) Description of relations	:hin
		N/A		(B) Type of organization	(c) Becomplien of Guateria	
				-		 _
				 		
	1			<u> </u>		
٠.	and be				tatements, and to the best of my knowledge tion of which preparer has any knowledge	ly the IRS discuss this urn with the preparer
Sig	gn	6 10	14 / 01	ra la	sh:	own below (see instr)?
He	re L	1-w. F	1 JRUSTER OFF	m 4/12/11		X Yes No
	Sign	nature of officer or trustee		Date	Title DIRECTEL	
		Print/Type preparer's na	ame Preparer's s	signature C	Date Check I if PTIN	_
		1		$T_{i}(x)(x)$	self- employed	
Pa	id	KATY WILLI		4 WWW	. , , , , , , , , , , , , , , , , , , ,	0038470
	eparer	Firm's name ► RSM	US LLP		Firm's EIN ► 42-0	714325
Us	e Only		•	-		
	-	Firm's address ▶ 1	S. WACKER DRIVE	, STE 800		
			ICAGO, IL 60606		Phone no. 312-6	34-3400
					1.7/0/10/10. 3 2 2 3	200 05

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

Name of the organization

Employer identification number

	FRA	ANK	AND	KAREN	PTAK_	FAMILY	FOUNDA	TION	26-4190675
Organiza	tion type (check on	ie)		_					
Filers of:		Sectio	n:						
Form 990	or 990-EZ	□ 5	501(c)() (enter	number) o	rganization			
			1947(a)(1) nonexem	npt charitat	ole trust not t	reated as a pr	vate foundation	
		□ 5	527 polit	ical organi	zation				
Form 990-PF X 501(c)(3) exempt private foundation									
			1947(a)(1) nonexen	npt chantat	ole trust treat	ed as a private	foundation	
		□ s	501(c)(3)	taxable pr	rivate found	dation			
	our organization is y a section 501(c)(7						th the Genera	Rule and a Special R	ule See instructions
General F	Rule								
	-	_						r, contributions totalin termining a contributor	g \$5,000 or more (in money or 's total contributions
Special F	lules								
\$ 6	sections 509(a)(1) a	ind 170(r, during	(b)(1)(A)(g the yea	(vı), that ch ar, total cor	ecked Scho ntributions	edule A (Forn	n 990 or 990-E	Z), Part II, line 13, 16a	t test of the regulations under i, or 16b, and that received from int on (i) Form 990, Part VIII, line 1h,
3	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								
))	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 Don't 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 mus	•	Part IV,	line 2, o	f its Form 9	990, or che	ck the box or	line H of its F	orm 990-EZ or on its F	Form 990, 990·EZ, or 990·PF), Form 990·PF, Part I, line 2, to

Name of organization

Employer identification number

FRANK AND KAREN PTAK FAMILY FOUNDATION

26-4190675

Part I	Contributors (See instructions) Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	FRANK PTAK 1415 WAVERLY ROAD HIGHLAND PARK, IL 60035	\$\$	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
2	KAREN PTAK 1415 WAVERLY ROAD HIGHLAND PARK, IL 60035	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)
(<u>a)</u> _	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
623452 10-1		. \$	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2016)

Employer identification number

FRANK AND KAREN PTAK FAMILY FOUNDATION

26-4190675

Part 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. 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
		s	
(a) No. from Part I	(b) Description of noncash property given	FMV (or estimate) (See instructions)	Date received
623453 10-18-		\$ Schedule B (Form 6	990, 990-EZ, or 990-PF) (2016)

Employer identification number

	AND KAREN PTAK FAMILY	FOUNDATION	26-4190675 in section 501(c)(7), (8), or (10) that total more than \$1,000 f
art III	the year from any one contributor. Complete	columns (a) through (e) and the follow	WING line entry. For groundations
	completing Part III, enter the total of exclusively religiou Use duplicate copies of Part III if addition	s, charitable, etc , contributions of \$1,000 or al space is needed	r less for the year (Enter this info once)
) No.		-	(d) Description of how gift is held
rom art I	(b) Purpose of gift	(c) Use of gift	(a) Description of now girt is field
		 	
-			
		(e) Transfer of gift	t
<u> </u>	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
-			
a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I			
'			
_			
		(e) Transfer of gif	t
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
1.			
a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<u> </u>			
		(e) Transfer of gif	Tt .
İ			
F	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
-) No			
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
arti			
1			
		(e) Transfer of gif	<u></u>
		(e) transier of gir	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee

FORM 990-PF INTERES	ST ON SAVIN	IGS AND TEM	PORARY	CASH IN	VESTMENTS	STATEMENT 1
SOURCE		(A REVEI PER BO	NUE		(B) VESTMENT COME	(C) ADJUSTED NET INCOME
NORTHERN TRUST COMPA	ANY		3.		3.	
TOTAL TO PART I, LI	NE 3		3.		3.	
FORM 990-PF	DIVIDENDS	S AND INTER	EST FR	OM SECUR	ITIES	STATEMENT / 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	R	(A) EVENUE R BOOKS	(B) NET INVEST MENT INCOM	
NORTHERN TRUST COMPANY NORTHERN TRUST COMPANY	345. 17,706.		0. 0.	345. 17,706.		
TO PART I, LINE 4	18,051	,	0.	18,051.	18,05	1.
FORM 990-PF	· · · · · · · · · · · · · · · · · · ·	ACCOUNTI	NG FEE	S		STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTED NET INCOM	
ACCOUNTING FEES		1,875.		0.	- -	1,875.
TO FORM 990-PF, PG	 1, LN 16B	1,875.		0.		1,875.

FORM 990-PF	OTHER E	XPENSES			STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS		ST-	(C) ADJUSTED NET INCOM		
INVESTMENT MANAGEMENT FEES AGENCY FEES IL CHARITY BUREAU FUND	2,920. 487. 25.					0. 0. 25.
TO FORM 990-PF, PG 1, LN 23	3,432.	3,	407.			25.
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	 5
DESCRIPTION		LUATION ETHOD	вос	OK VALUE	FAIR MARKE	T
MUNICIPAL ISSUES		COST		612,210.	615,3	27.
TOTAL TO FORM 990-PF, PART II	I, LINE 13	:	· · · · · · ·	612,210.	615,3	27.
	F SUBSTANTIA PART VII-A,		UTORS	5	STATEMENT	6
NAME OF CONTRIBUTOR	ADDR	ESS				
FRANK PTAK		WAVERLY : LAND PARK		60035		
KAREN PTAK		WAVERLY : LAND PARK		60035		

	JIST OF OFFICERS, DI		STATI	EMENT 7
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
JEFFREY B PTAK 2767 SHERIDAN RD EVANSTON, IL 60201	PRES, DIRECTOR 0.00	0.	0.	0.
JACQUELYN F. MORRIS 2132 TANGLEWOOD COURT HIGHLAND PARK, IL 60035	VP, DIRECTOR 10.00	5,000.	0.	0.
RUSSELL E. PTAK 1250 NORTH LASALLE STREET CHICAGO, IL 60610	TR, DIRECTOR 5.00	0.	0.	0.
FRANK S. PTAK 1415 WAVERLY ROAD HIGHLAND PARK, IL 60035	DIRECTOR 0.00	0.	0.	0.
KAREN M. PTAK 1415 WAVERLY ROAD HIGHLAND PARK, IL 60035	DIRECTOR 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	E 6, PART VIII =	5,000.	0.	0.
	ART XV - LINE 1A F FOUNDATION MANAGER	RS	STAT	EMENT 8

NAME OF MANAGER

FRANK S. PTAK KAREN M. PTAK

FORM 990-PF

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

STATEMENT

9

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

FRANK PTAK 1415 WAVERLY ROAD HIGHLAND PARK, IL 60035

TELEPHONE NUMBER

8476819626

FORM AND CONTENT OF APPLICATIONS

THERE IS NO STANDARD APPLICATION FORM. A LETTER REQUESTING A CONTRIBUTION IS SUFFICIENT.

ANY SUBMISSION DEADLINES

THERE ARE NO SUBMISSION DEADLINES.

RESTRICTIONS AND LIMITATIONS ON AWARDS

ORGANIZATIONS MUST BE EDUCATIONAL, RELIGIOUS OR CHARITABLE AS DEFINED BY IRC SECTION 170(C).

Charitable Contributions		
Charitable Organization	Amount	Address
Iraq & Afghanistan Veterans of America	\$ 2,000 00	2,000 00 119 West 40th Street - 19th Floor, New York, NY 10018
Kohl Children's Museum	\$ 12,000 00	\$ 12,000 00 2100 Patriot Blvd , Glenview, IL 60026
Foundation For Homan Square	\$ 15,000.00	15,000.00 3517 West Arthington, Chicago, IL 60624
Jewish United Fund of Metropolitan Chicago	\$ 20,000.00	20,000.00 30 South Wells Street, Chicago, IL 60606-5056
Misericordia Heart of Mercy Center	\$ 12,000.00	12,000.00 6300 North Ridge, Chicago, IL 60660-1017
Chicago Cares, Inc.	\$ 5,000.00	5,000.00 2 N. Riverside Plaza, Suite 1800, Chicago, IL 60606
Lincoln Park Zoological Society	\$ 10,000.00	10,000.00 PO Box 14903 Cannon Drive at Fullerton Parkway, Chicago, IL 60614
The Art Institute of Chicago, Sustaining Fellows	\$ 12,000.00	12,000.00 111 S. Michigan Ave., Chicago, IL 60603
Rehabilitation Institute of Chicago	\$ 15,000 00	15,000 00 345 East Superior Street, Suite 0-814, Chicago, IL 60611
Chicago Youth Centers	\$ 8,000.00	8,000.00 218 South Wabash Avenue, Suite 600, Chicago, IL 60604
Lurie Children's Memorial Hospital	\$ 15,000.00	15,000.00 225 East Chicago Avenue, Chicago, IL 60611-2991
Junior Achievement Chicago	\$ 18,000.00	18,000.00 651 West Washington Boulevard #404, Chicago, IL 60661
PAWS Chicago	\$ 4,000.00	4,000.00 1997 N Clybourn Avenue, Chicago, IL 60614
Depaul University, College of Commerce	\$ 18,000.00	18,000.00 1 E. Jackson Blvd., Chicago, IL 60604-2287
Writers Theatre	\$ 2,000.00	2,000.00 321 Park Avenue, Glencoe, IL 60022
United Service Organizations	\$ 2,000.00	2,000.00 PO Box 96860, Washington, DC 20077-7677
McGraw YMCA	\$ 2,000 00	2,000 00 1000 Grove Street, Evanston, IL 60201
 Total Contributions	\$ 172,000.00	



Account Statement

December 1, 2016 - December 31, 2016

Account Number 23-23611
PTAK FAMILY FOUNDATION-LAD MUN

Portfolio Details

		Market Price	Par Value/ Raiing	Market Value	Cost	Unrealized Gain/(Loss)	Accrual	Estimated Annual Income	Yield/ YTM	% of Assets
Fixed Income	Fixed Income Securities - Municipal Issues									
2017 CALIFORNIA E DUE 07-01-2017	2017 CALIFORNIA EÅRTHQUAKE AUTH REV 1 824% DUE 07-01-2017 BEO TAXABLE	\$100 107	50,000 00 A3	\$50,053 50	\$50,000 00	\$53.50	\$456 00	\$912 00	1 8%	8 2%
2018 MONMOUTH C BEO TAXABLE	2018 MONMOUTH CNIY N J 4 15% DUE 11-01-2018 BEO TAXABLE	104 579	60,000 00 Aaa	62,747 40	66,098 40	(3,351 00)	415 00	2,490 00	4 0% 1 6%	10 3%
TENNESSEE ST SCH BD AUI	FENNESSEE ST SCH BD AUTH 1 691% DUE 11-01-2018 BEQ TAXABLE	100 434	20,000 00 Aa l	20,086 80	20,050 00	36 80	56 36	338 20	1 7%	3 3%
2019 FREDERICK CN BEO TAXABLE	2019 FREDERICK CNIY MD 1 54% DUE 08-01-2019 BEO TAXABLE	99 575	75,000 00 NR	74,681 25	76,059 75	(1,378 50)	481 25	1,155 00	1 5%	12 2%
NEW YORK N Y REV 3 75% DUE OID3 8	NEW YORK N Ý CITY TRANSITIONAL FIN AUTH REV 3 75% DUE 11-01-2019 BEO TAXABLE OID3 8	105 063	50,000 00 Aa 1	52,531 50	53,884 50	(1,353 00)	312 50	1,875 00	3 6%	8 6%
SOUTH CAROU	SOUTH CAROUNA ST 1 05% DUE 12-01-2019 BEO TAXABLE 1	98 338	50,000 00 NR	49,169 00	49,302 00	(133 00)	43 75	525 00	1 1%	8 0%
2021 UNIVERSITY CALIF REVS 3 05-15-2021 BEO TAXABLE	2021 UNIVERSITY CALIF REVS 3 154% DUE 05-15-2021 BEO TAXABLE	104 058	55,000 00 NR	57,231 90	56,815 55	41635	221 65	1,734 70	3 0% 2 2%	9 4%
2024 HAWAII ST 3 10 TAXABLE	2024 HAWAII ST 3 107% DUE 08-01-2024 BEO FAXABLE	101 007	50,000 00 NR	50,503 50	20,000 00	503 50	647 29	1,553 50	3 1% 3 0%	8 3%
OREGON'ST 31: TAXABLE	OREGON \$1 3/34% DUE 08-01-2024 BEO TAXABLE	102 580	65,000 00 NR	96,677 00	65,000 00	1,677 00	904 58	2,171 00	3 3%	10 9%

Continued on next page

Northern Trust

-Page 23-of-30-



Account Statement

December 1, 2016 - December 31,.2016

Account Number 23-23611
PTAK FAMILY FOUNDATION-LAD MUN

Portfolio Details (continued)

		Market Price	Par Value/ Rafing	Market Value	Cost	Unrealized Gain/(Loss)	Accrual	Estimated Annual Income	Yield/ YTM	% of Assets
2025 WINSTON-SALI 06-01-2025 /06	2025 WINSTON-SALEM N C LTD OBLIG 3 67% DUE 06-01-2025 /06-01-2024 BEO TAXABLE	101 477	75,000 00 NR	76,107 75	75,000 00	1,107 75	229 37	2,752 50	3 6% 3 5%	12 4%
2026 MICHIGAN ST 3 59% DUE 1 /12-01-2022 BEO TAXABLE	2026 MICHIGAN ST 3 59% DUE 12-01-2026 /12-01-2022 BEO TAXABLE	103 240	50,000 00 NR	51,620 00	90,000,00	1,620 00	149 58	1,795 00	3.5% 3.2%	8 4%
Total Municipal Issues	ipal Issues			\$611,409.60	\$612,210.20	(\$800.60)	\$3,917 33	\$17,301.90	2 8%	100 0%
Total Fixed Ir	Total Fixed income Securities			\$611,409.60	\$612,210.20	(\$800.60)	\$3,917.33	\$17,301.90	2 8%	100.0%
		Market Price		Market Value	Cost	Unrealized Gain/(Loss)	Accrual	Estimated Annual Income	Yield/ YTM	% of Assets
Cash and Sh	Cash and Short Term Investments - Cash									
Available Co	Available cash balances are invested daily in MFB NORTHERN FUNDS US GOVERNMENT MONEY MARKET FUND I	B NORTHERN	FUNDS US GOVE	ERNMENT MONEY	MARKET FUND I					
PRINCIPAL CASH	4SH	\$1 000	551,043 83	\$551,043 83	\$551,043 83	00 0\$				
Total Cash				\$551,043.83	\$551,043.83	\$0.00	\$64 55	\$1,086.14	0 2%	
Total Cash a	Total Cash and Short Term Investments			\$551,043.83	\$551,043 83	\$0.00	\$64.55	\$1,086.14	0.2%	
Total Portfolio				\$1,162,453.43	\$1,163,254.03	(\$800.60)	\$3,981.88	\$18,388.04	1 6%	
Total Accrual Total Value				\$3,981.88 \$1,166,435.31						

