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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

2016
Open to Public Inspection

Department of the Treasury internal Revenue Service ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf

For ca	lend	ar year 2016 or tax year beginning		, and ending		
		oundation			A Employer identification	number
		RT M. ZARI FOUNDATION				
_ક	SA	SSETTI			46-4833743	
		d street (or P O box number if mail is not delivered to street a	ddress)	Room/suite	B Telephone number	
66	11	W. NORTH AVE			708-263-39	70
City	or to	wn, state or province, country, and ZIP or foreign po	ostal code		C If exemption application is pe	nding, check here
OA	K	PARK, IL 60302				
G C h	eck a	all that apply: Initial return	initial return of a fo	ormer public charity	D 1. Foreign organizations	, check here
20ľ.		Final return	Amended return			
7		Address change	Name change		Foreign organizations med check here and attach cor	nputation
H Ch	eck 1	type of organization: X Section 501(c)(3) ex	empt private foundation		E If private foundation stat	us was terminated
	Sec	tion 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ntion	under section 507(b)(1)	(A), check here $ ightharpoonup$
I≪Fair		ket value of all assets at end of year J Accounting	ng method: X Cash	Accrual	F If the foundation is in a 6	60-month termination
≥ <u>S</u>		· · · · · · · · · · · · · · · · · · ·	her (specify)		under section 507(b)(1)	
		6,079,110. (Part I, colu	mn (d) must be on cash b	oasis.)		
Pai		Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
爲		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received	560,547.	,		
SCAL		Check I if the foundation is not required to attach Sch. B	, _	-		
S	_	interest on savings and temporary cash investments	463.	463.		STATEMENT 1
		Dividends and interest from securities	143,861.	143,861.		STATEMENT 2
	-	Gross rents				•
1		Net rental income or (loss)				
	_	Net gain or (loss) from sale of assets not on line 10	-72,118.	د		
잌		Gross sales price for all 1 / Q Q Q 1 ∩	, , , , , , , , , , , , , , , , , , , ,			
Bevenue	-	assets on line 6a		0.		
Be	-	Net short-term capital gain				
		Income modifications	***			
		Gross sales less returns		t = -	13	·
		and allowances Less Cost of goods sold	1 5-40- e			
		Gross profit or (loss)	221			
		Other income	4	क्यां के अर हरें		
		Total. Add lines 1 through 11	632,753.	144,324.	0.	-
	12 13	Compensation of officers, directors, trustees, etc	0.4	My 14 - 0.	0.	0.
- 1		Other employee salaries and wages	1			
		Pension plans, employee benefits				
ø		Legal fees				
nse		Accounting fees STMT 3	2,175.	2,175.	2,175.	0.
Expense		Other professional fees				
ũ		Interest				
Administrative		Taxes			<u> </u>	
itra		Depreciation and depletion				· -
ij		Occupancy				
틥		Travel, conferences, and meetings				
		Printing and publications				1
Ö	22		42,880.	42,880.	42,880.	0.
2		Other expenses STMT 4 Total operating and administrative	=2,000	12,000.		1
rat	24	expenses Add lines 13 through 23	45,055.	45,055.	45,055.	0.
ğ	O.E.	•	250,000.		1 22,000	250,000.
		Contributions, gifts, grants paid	230,000		<u> </u>	
	26	Total expenses and disbursements	295,055.	45,055	45,055.	250,000.
		Add lines 24 and 25	233,033.	=3,033	25,055.	
		Subtract line 26 from line 12:	337,698.	 		
		Excess of revenue over expenses and disbursements	337,030.	99,269.		
		Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)		75,205	0.	
		ADDITION DELIBERATE (IL DAGRIVA ANIAL -()-)	Ī	1	,	· ¹

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions

921

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30			
(must agree with end-of-year figure reported on prior year's return)		1	5,725,858.
2 Enter amount from Part I, line 27a		2	337,698.
3 Other increases not included in line 2 (itemize) ▶ LIFE INSURANCE PROCEEDS	5	3	28,995.
4 Add lines 1, 2, and 3		4	6,092,551.
5 Decreases not included in line 2 (itemize) ► SEE	STATEMENT 5	5	13,441.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30		6	6,079,110.

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.		ASSETTI		-			4	<u>6-483</u>	3743	Page 3
14 JPMORGAN INVESTMENTS (N24545-00-1) 1 JPMORGAN INVESTMENTS (N24545-00-1) 1 JPMORGAN INVESTMENTS (N24542-00-8) 2 JPMORGAN INVESTMENTS (N24542-00-8) 2 JPMORGAN INVESTMENTS (N24542-00-8) (e) Gross sales price (f) Depreciation allowed (g) Cost or other basis (h) Can or (loss) 2 L145,710, 1.129,733, -4,642, 129,373, -4,642, 156,543,34, 695,176, -49,842, 122,373, -4,642, 156,541, 5585,477, -224,935, 122,935, 122,1936, 122,1936, 122,1936, 122,1936, 122,1936, 122,1936, 122,1936, 122,1936, 122,1936, 122,1936, 122,1936, 122,1936, 122,1936, 122,1936, 123,1936, 12	Part IV Capital Gains a	and Losses for Tax on In	vestment	Income	1-2-5		,			
14 JPMORGAN INVESTMENTS (N24545-00-1)	(a) List and desci 2-story brick wa	(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) How acquired P - Purchase (c) Date acquired (mo., day, yr.) (mo., day, yr.)								
JPMORGAN INVSSTMENTS (N24545-00-1)	12 JPMORGAN INVEST	TMENTS (N24545-00	0-1)							
CAPTIFAL GAINS INVESTMENTS (N24542-00-8)										
CAPITAL GANN INVESTMENTS (N24542-00-8) CAPITAL GANNS DIVIDENDS (1) Coars of the basis (1) Canno (ress) (1) Coars of the basis (1) Canno (ress) (1) Coars of the basis (1) Canno (ress) (1)								_		
(a) Gross sales price (f) Dispercations allowed (g) Cost or other hans: plus expense of sale (h) Gam or (loss) 1 145, 710					-			<u> </u>	_	
(a) Gross sales proce (b) Grain or loose) (c) at 145, 710, 1			0-07		<u> </u>		<u> </u>			
1.24		(f) Depreciation allowed								
1.24	a 145,710.			161,00	2.				-15	,292.
6	104 831			129,37	3.					
Section 1940 Sect	CAE 224									
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (h) Earns (fol. (h) pain music (h) pain music (h) (h) Fig. (h)	ECO E41		 							
(i) F.M.V. as of 12/31/69 (ii) Adjusted bases (iv) Excess of co.(iii) co.((iii) p.m.m. muss co.((iv) p.m.m. p.m. co.((iv) p.m. muss co.((iv) p.m. p.m. p.m. p.m. p.m. p.m. p.m. p.m	22 F04		1.							
(i) F.M.V. as of 12/31/69 (i) Adjusted basis over col. (i), if any conclusion (ii), but not less than 0-b or Losses (from col. (iii)) a col. (iii) (ii), but not less than 0-b or Losses (from col. (iii)) a col. (iii) (iii) and (iiii) (iii) a col. (iii) (iii		a gain in column (b) and award by	the foundation	on 12/21/60			(I) O (Oal (b) assa		, 3344
Cases (from col. (h)	Complete unity for assets shown	T	K			(
-4,642.c -4,9842.c -2,24,936.c -2,24,936.c -2,2594.c -2,22,594.c -3,22,594.c -3,	(i) F.M.V. as of 12/31/69						Losses	(from col. (h))	
e	_a		ļ							
Capital gam net income or (net capital loss)	<u>b</u>									
c Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 3 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 gain, also enter in Part I, line 8, column (c). If gain, also enter in Part I, line 8, column (c). If gain, also enter in Part I, line 8, column (c). If gain, also enter in Part I, line 8, column (c). If gain, also enter in Part I, line 8, column (c). If gain, also enter in Part I, line 8, column (c). If gain, also enter in Part I, line 8 Part V: Qualification Under Section 4940(d) of the Reduced Tax on Net Investment Income. If section 4940(d)(2) applies, leave this part blank. Was the foundation able for the section 4942 tax on the distributable amount of any year in the base period? Yes X No If Yes, The foundation does not qualify under section 4940(e). Do not complete this part. 1 Enter the appropriate amount in each column for each year; see the instructions before making any entries. (c) Calendar year (of tax year beginning in) Adjusted qualifying distributions Net value of noncharitable-use assets (col. (b) divided by col. (c)) 2015 2015 2016 2012 2011 2 Total of line 1, column (d) 3 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 4 Einter the net value of noncharitable-use assets for 2016 from Part X, line 5 5 Multiply line 4 by line 3 6 Einter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 8 Einter 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.	_C									
e 22,594. 2 Capital gain net income or (net capital loss)	d								-24	,936.
2 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 If (loss), enter -0 - in Part I, line 8, column (c). If loss), enter -0 - in Part I, line 8 If gain, also enter in Part I, line 7 If (loss), enter -0 - in Part I, line 7 If (loss), enter -0 - in Part I, line 7 If (loss), enter -0 - in Part I, line 7 If (loss), enter -0 - in Part I, line 7 If (loss), enter -0 - in Part I, line 7 If (loss), enter -0 - in Part I, line 7 If (loss), enter -0 - in Part I, line 7 If (loss), enter -0 - in Part I, line 7 If (loss), enter -0 - in Part I, line 7 If (loss), enter -0 - in Part I, line 7 If (loss), enter -0 - in Part I, line 7 If (loss), enter -0 - in Part I, line 8 If gain, also enter in Part I, line 8 If gain, also enter in Part I, line 8 If gain, also enter in Part I, line 10 If (loss), enter -0 - in Part I, line 10 If (loss), enter -0 - in Part I, line 10 If (loss), enter -0 - in Part I, line 10 If (loss), enter -0 - in Part I, line 10 If (loss), enter -0 - in Part I, line 10 If (loss), enter -0 - in Part I, line 10 If (loss), enter -0 - in Part I, line 10 If (loss), enter -0 - in Part I, line 10 If (loss), enter -0 - in Part I, line 10 If (loss), enter -0 - in Par									22	,594.
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2015	(a)	(b)			(c)				(d)	
2015	Base period years Calendar year (or tax year beginni	Adjusted qualifying dis	stributions	Net value of no	nchar	itable-use asse	ts			(c))
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6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 7 7,030,350,743. 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.	4 Enter the net value of noncharmat	ole-use assets for 2016 from Part X,	line 5				4	 	3,300	,037.
6 Enter 1% of net investment income (1% of Part I, line 27b) 7 Add lines 5 and 6 7 7,030,350,743. 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.										550
7 Add lines 5 and 6 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.	5 Multiply line 4 by line 3						5	7,03	0,349	<u>,750.</u>
7 Add lines 5 and 6 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.							1			
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.	6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)					6			993.
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.										
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.	7 Add lines 5 and 6						7	7,03	0,350	,743.
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.										
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.	8 Enter qualifying distributions from	m Part XII, line 4					_ 8		<u>25</u> 0	<u>,000.</u>
See the Part VI instructions.	• • •		e 1b. and comm	olete that part usin	ng a 19	% tax rate.				
5 000 DE (00.10)			- 15, and 00111							

ALBERT M. ZARI FOUNDATION

orπ	1 990-PF (2016)	3374	3	Page 4
Pa	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	e instr	uction	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		1,9	85.
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3	Add lines 1 and 2		1,9	85.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		1,9	85.
6	Credits/Payments:		-	1
	2016 estimated tax payments and 2015 overpayment credited to 2016 6a 760.	-		ļ
	Exempt foreign organizations - tax withheld at source	-		1
	Tax paid with application for extension of time to file (Form 8868)			1
	Backup withholding erroneously withheld Table and the second sec		-	
	Total credits and payments. Add lines 6a through 6d			<u>8.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		1,2	
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1,2	33.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be: Credited to 2017 estimated tax			
	Enter the amount of line 10 to be: Credited to 2017 estimated tax ► Refunded ► 11 Int VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	18		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	11		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	<u> </u>	1	
	distributed by the foundation in connection with the activities	j	}))
C	Did the foundation file Form 1120-POL for this year?	10	;	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. \blacktriangleright \$ 0 . (2) On foundation managers. \blacktriangleright \$ 0 .	•		1
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	- 1		1
	managers. > \$0.	L		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.	į į	Ì	ľ (
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	ļ		
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	48	Ч	X
	If "Yes," has it filed a tax return on Form 990-T for this year?			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
^	If "Yes," attach the statement required by General Instruction T	}		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	- }		
	By language in the governing instrument, or Provided logicalistic that effectively empede the governing instrument on that an empedetory discretizes that coefficient with the state law.	- }]
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	<u> </u>	+	X
7	remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7		<u> </u>
•	bid the foundation have at least \$5,000 in assets at any time during the year if Tyes, Complete Part II, col. (c), and Part XV	<u> </u>	+	\vdash
82	Enter the states to which the foundation reports or with which it is registered (see instructions)			
Ju	IL			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	-		
•	of each state as required by General Instruction G? If *No,* attach explanation	81	X	1
9	is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	<u> </u>	7	
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	1	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	\neg	X
		Form 9	90-PF	(2016)

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."				
	ALBERT M. ZARI FOUNDATION	22742		
Form	990-PF (2016)	33743		Page 5
Pe	art VII-A Statements Regarding Activities (continued)		Yes	No
	At the state of th		res	NO
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of]	x
40	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	40		х
40	If "Yes," attach statement (see instructions)	12 13	X	
13		13	1 21	<u> </u>
4.4	Website address ► N/A The books are in care of ► ROBERT W KRONE Telephone no. ► 708 –	263-3	970	
14		60302		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	00000		
19	and enter the amount of tax-exempt interest received or accrued during the year	N	I/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
10	securities, or other financial account in a foreign country?	16	1.00	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	1.0		
	foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
L	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	a 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?	٥		
	(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?	o		Ì
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	0		1
	(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)?	0		Ĩ.
	(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	5	7	٠ -
	termination of government service, if terminating within 90 days.)	0		
t	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	ļ	<u> </u>	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	<u>1b</u>	<u> </u>	L
	Organizations relying on a current notice regarding disaster assistance check here] -		
(Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		<u> </u>	
	before the first day of the tax year beginning in 2016?	10	 	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)):	ł		
i	a 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	ì		
	before 2016? Yes X N	o	İ	
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,		1	
-	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect	ĺ	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.)	\ 	 	ļJ
		2b		\vdash
(If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	ľ		
	during the year? Yes X N	0		
ı	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		1	
	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>	 	ļ
	Form 4720, to determine if the foundation had excess business holdings in 2016)	3 <u>b</u>	_	L
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	↓	X
1	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 2016?	4b Form 99	<u> </u>	X
		r 00	# 1_ D C	/201C1

Form 990-PF (2016) % SASSETTI	-		46-48337	43 Page 6
PartVII B Statements Regarding Activities for Which F	orm 4720 May Be R			1 490 0
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Y€	s X No	
(2) Influence the outcome of any specific public election (see section 4955); or		ectly,		
any voter registration drive?	•	Y€	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes'	?	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				
4945(d)(4)(A)? (see instructions)		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo	or		
the prevention of cruelty to children or animals?	. , ,		s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations	ļ	
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 hi	•			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ned		
expenditure responsibility for the grant?		I/A Ty	s No	.
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			·	
a personal benefit contract?	> F	☐ Ye	s X No	_
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.			1	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	☐ Ye	s 🗶 No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Information About Officers, Directors, Truste		nagers, Highly		
Paid Employees, and Contractors	•			
1 List all officers, directors, trustees, foundation managers and their of	compensation.			
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allowances
MARK SHEA	TRUSTEE			
6611 WEST NORTH AVE.				
OAK_PARK, IL 60302	1.00	0.	0.	0.
PATRICIA BRENNAN STEWART	TRUSTEE			
6611 WEST NORTH AVE.	_			1
OAK PARK, IL 60302	1.00	0.	0.	0.
PATRICIA M STEWART	TRUSTEE			
6611 WEST NORTH AVE.				l
OAK PARK, IL 60302	1.00	0.	0.	0.
ROBERT W KRONE	TRUSTEE			
6611 WEST NORTH AVE.				
OAK PARK, IL 60302	1.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those incl		enter "NONE."	(4)	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
	devoted to position	(6) componential	and deferred compensation	allowances
NONE				
		 		
	-			
			ļ	
	1			
Total number of other employees paid over \$50,000	<u> </u>	<u> </u>		0

Total, Add lines 1 through 3

Form 990-PF (2016) **% SASSETT**I

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	5,469,955.
	Average of monthly cash balances	1b	182,874.
	Fair market value of all other assets	1c	
_	Total (add lines 1a, b, and c)	1d	5,652,829.
	Reduction claimed for blockage or other factors reported on lines 1a and		<u></u>
•	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	5,652,829.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	84,792.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	5,568,037.
6	Minimum investment return. Enter 5% of line 5	6	278,402.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here	d certain	
1	Minimum investment return from Part X, line 6	1	278,402.
	Tax on investment income for 2016 from Part VI, line 5		·
b	Income tax for 2016. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1,985.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,985. 276,417.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	276,417.
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	276,417.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	250,000.
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	250,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	1 1	_
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	250,000.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	jualifies for	the section

Part XIII Undistributed		(a)	(b)	(c)	(d)
		Corpus	Years prior to 2015	2015	2016
Distributable amount for 2016 fro	om Part XI,				276,417.
line 7	<u> </u>				
Undistributed income, if any, as of the e	end of 2016			0.	
a Enter amount for 2015 only	ļ				
b Total for prior years:	ļ.		0.		-
Excess distributions carryover, if	any, to 2016:				
a From 2011					
b From 2012			-	-	
c From 2013					
d From 2014 3	97,954.				
e From 2015		205 054		,	
f Total of lines 3a through e	ļ	397,954.			-
Qualifying distributions for 2016	from			-	
Part XII, line 4: ► \$2	50,000.			0.	
a Applied to 2015, but not more th					
b Applied to undistributed income			0.		
years (Election required - see in:					
c Treated as distributions out of c		0.			-
(Election required - see instructi					250,000
d Applied to 2016 distributable an	nount	0.			
e Remaining amount distributed of		26,417.			26,417
Excess distributions carryover applied (If an amount appears in column (d), the must be shown in column (a))	d to 2016 ne same amount	20,417.			
6 Enter the net total of each colu	ımn as			-	
indicated below.	<u> </u>	371,537.			
2 Corpus Add lines 3f, 4c, and 4e Subf		3/1,33/.			
b Prior years' undistributed incon	ne. Subtract		0.		
line 4b from line 2b	. –				
c Enter the amount of prior years undistributed income for which deficiency has been issued, or the section 4942(a) tax has been assessed	n a notice of on which		0.		
d Subtract line 6c from line 6b. T	axable		_		
amount - see instructions			0.	•	
e Undistributed income for 2015	. Subtract line		•	0.	
4a from line 2a. Taxable amoui				<u> </u>	•
f Undistributed income for 2016	6. Subtract	;			1
lines 4d and 5 from line 1. This	s amount must) c
be distributed in 2017	<u></u>				
7 Amounts treated as distributio	ns out of				
corpus to satisfy requirements			Ì		
section 170(b)(1)(F) or 4942(g		0			
may be required - see instruct		0.			
8 Excess distributions carryover	from 2011	0.	1		
not applied on line 5 or line 7	_	<u> </u>			
9 Excess distributions carryove		201 520			
Subtract lines 7 and 8 from lin	ne 6a	371,537.	 		
10 Analysis of line 9:					
a Excess from 2012					
b Excess from 2013	271 527				
	371,537.				
d Excess from 2015			1	1	1

e Excess from 2016

Part XIV Private Operating Fo	oundations (see in:	structions and Part VII-	A, question 9)	N/A				
1 a If the foundation has received a ruling or	determination letter that	it is a private operating						
foundation, and the ruling is effective for 2016, enter the date of the ruling								
b Check box to indicate whether the found	ation is a private operation	ig foundation described in	section	4942(j)(3) or 49	42(j)(5)			
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	1				
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total			
investment return from Part X for								
each year listed								
b 85% of line 2a								
c Qualifying distributions from Part XII,								
line 4 for each year listed	· · · · · · · · · · · · · · · · · · ·							
d Amounts included in line 2c not	İ							
used directly for active conduct of	I							
exempt activities								
e Qualifying distributions made directly								
for active conduct of exempt activities.			.11					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets								
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)								
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed			· · · · · · · · · · · · · · · · · · ·					
c "Support" alternative test - enter:								
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)								
(2) Support from general public and 5 or more exempt 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	mation (Complet	te this part only if	the foundation h	nad \$5,000 or mor	e in assets			
at any time during the	ne year-see instri	uctions.)						
Information Regarding Foundation a List any managers of the foundation who year (but only if they have contributed m	o have contributed more t		butions received by the f	oundation before the closi	e of any tax			
NONE								
b List any managers of the foundation who other entity) of which the foundation has			or an equally large portion	n of the ownership of a pa	rtnership or			
NONE								
2 Information Regarding Contribution Check here ► X if the foundation of the foundation makes gifts, grants, etc. (nly makes contributions t	to preselected charitable (organizations and does no					
a The name, address, and telephone numb	er or e-mail address of the	he person to whom applic	ations should be address	ed:				
b The form in which applications should be	e submitted and informat	tion and materials they sh	ould include:					
c Any submission deadlines:								
d Any restrictions or limitations on awards	, such as by geographica	al areas, charitable fields,	kinds of institutions, or o	ther factors:				
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Supplementary Information			·	
3 Grants and Contributions Paid During the Ye	ar or Approved for Future F	Payment		
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 recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	Toolploit		 _
COMMUNITY FOUNDATION OF THE FOX RIVER VALLEY			TO PROVIDE EDUCATIONAL SCHOLARSHIPS TO	
127 SOUTH FIRST STREET, SUITE 215 GENEVA, IL 60134			QUALIFYING STUDENTS ENTERING COLLEGE OR CERTAIN TRADE SCHOOLS.	250,000.
			DAMENTA TRANSPORTED STATES	230,000.
	<u> </u>	<u> </u>		
Total	,	r	<u>▶ 3a</u>	250,000.
b Approved for future payment				
NONE				
Total				0 . rm 990-PF (2016)

Part XVI-A	Analysis of Income-Producing Activities	
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Enter gross amounts unless otherwise indicated.	Unrelat	ed business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	Code	Amount	sion	Amount	function income
a				<u> </u>	
b			\top		
c		,	\top		
d			1		
e					
f	·				 -
g Fees and contracts from government agencies					- ·
2 Membership dues and assessments		 	T		 · ·
3 Interest on savings and temporary cash					
Investments	j		14	463.	
4 Dividends and interest from securities			14		
5 Net rental income or (loss) from real estate:		· 建建筑 "这些说。"	"麦茶"。	在原外 建二次中華 傳	· (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
a Debt-financed property				· · · · · · · · · · · · · · · · · · ·	
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					·
than inventory			14	-72,118.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:			T		
a					
b					
С	ł.				
d					
e	,				
12 Subtotal. Add columns (b), (d), and (e)	47.	0.	- 45	72,206.	
13 Total. Add line 12, columns (b), (d), and (e)				13	72,206.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	o the Acco	omplishment of Ex	empt	Purposes	·
Line No. Explain below how each activity for which inc	ome is reported	ın column (e) of Part XVI-	A contril	outed importantly to the accon	plishment of

ine No. ▼	the foundation's exempt purposes (other than by providing funds for such purposes).	
		
+		
3621 11-23-	16 Form 990-	PF (20

(6) Performance of services or membership or fundraising solicitations

(3) Rental of facilities, equipment, or other assets

(4) Reimbursement arrangements

(5) Loans or loan guarantees

1b(3)

1b(4)

1b(5)

1b(6)

X

X

X

X

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of Yes No the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: X (1) Cash 1a(1) (2) Other assets 1a(2) X **b** Other transactions: X 1b(1) (1) Sales of assets to a noncharitable exempt organization X (2) Purchases of assets from a noncharitable exempt organization 1b(2) X

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		N/A	

2a	Is the foundation directly or indirectly affiliated with, or rela	ated to, one or more tax-exempt organizations de	escribed	
	in section 501(c) of the Code (other than section 501(c)(3))) or in section 527?	Yes	X No
b	If "Yes," complete the following schedule.			
	(a) Name of organization	(b) Type of organization	(c) Description of relationship	
	N/A			
Sig	Under penalties of perjury, I declare that I have examined this ret and belief, it is true, correct, and complete Declaration of prepar			preparer

Here	What W Kin	15/2/17	TRUSTE	3E	shown below (see instr.)? X Yes No
	Signature of officer or trustee	Date	Title		<u> </u>
	Print/Type preparer's name	Preparer's signature	Date	Check if	PTIN
]	_	}	self- employed	
Paid	THOMAS KROSS	2~1	05/01/17		P00584732
Prepai Use O				Firm's EIN ► 3	6-2239746
	Firm's address ▶ 6611 NORTH A	AVENUE			
	OAK PARK, II	L 60302		Phone no. (70	08) 386-1433
					Form 990-PF (2016)

623622 11-23-16

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

2016

Name of the organization

Organization type (check one).

ALBERT M. ZARI FOUNDATION % SASSETTI Employer identification number

46-4833743

Section: Filers of: 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 Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box

Name of organization
ALBERT M. ZARI FOUNDATION

Employer identification number

% SASSETTI 46-4833743

Parl	Contributors (See instructions) Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ALBERT M ZARI IRREVOCABLE TRUST C/O SASSETTI LLC 6611 WEST NORTH AVE OAK PARK, IL 60302	\$ 560,547.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash 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.)

Name of organization

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ALBERT M. ZARI FOUNDATION

% SASSETTI

Employer identification number

46-4833743

art III Nonca	ash Property (See instructions) Use duplicate copies of Pa	art II if additional space is needed	
(a) No. rom 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	(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
			990, 990-EZ, or 990-PF) (2

Name of organization

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ΑI	BERT	М.	ZARI	FOUNDATION
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4(5 –	4	R	3	3	7	4	3
-3 (J —	*	v	J	J	,	*	J

Employer identification number

	the year from any one contributor. Complete completing Part III, enter the total of exclusively religious,	columns (a) through (e) and the follow	n section 501(c)(7), (8), or (10) that total more than \$1,000 for wing line entry. For organizations
	Use duplicate copies of Part III if additiona	al space is needed	less for the year (Little this line vince)
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_ _			
		(e) Transfer of gif	t
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, ar	(e) Transfer of gif	t Relationship of transferor to transferee
_	Transieree's Hairie, address, ai		Treatments of Burnster to Burnster to
No. om ort I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gif	*
	Transferee's name, address, at		Relationship of transferor to transferee
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_ _			
		(e) Transfer of gr	ft
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
ı			

)9270501 707170 6578

FORM 990-PF INTER	ST ON SAVI	NGS AND TEM	IPORAR	Y CASH I	NVESTMENTS	STATEMENT	1
SOURCE		(A REVE PER E	NUE		(B) NVESTMENT NCOME	(C) ADJUSTED NET INCOM	
JPMORGAN CHASE BANK	ζ		463	•	463.	4	63.
TOTAL TO PART I, L	INE 3		463	•	463.	4	63.
FORM 990-PF	DIVIDENDS	S AND INTER	REST F	ROM SECU	RITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAI GAINS DIVIDENI]	(A) REVENUE ER BOOKS	(B) NET INVES MENT INCO		
JP MORGAN CHASE BANK	166,455	. 22,59	94.	143,861	. 143,86	51. 143,8	61.
TO PART I, LINE 4	166,455	. 22,59	94.	143,861	. 143,86	51. 143,8	61.
					,		
FORM 990-PF		ACCOUNT	NG FE	ES ————		STATEMENT	<u> </u>
DESCRIPTION		(A) EXPENSES PER BOOKS	NET	(B) INVEST- INCOME	(C) ADJUSTED NET INCOM		
ACCOUNTING AND TAX FEES	PREP	2,175	,	2,175.	2,17	75.	0.
TO FORM 990-PF, PG	1, LN 16B	2,175		2,175.	2,17	75.	0.
FORM 990-PF		OTHER E	XPENS	ES		STATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS	NET	(B) INVEST- INCOME	(C) ADJUSTEI NET INCOM		
BROKER AND BANKING INSURANCE	FEES	37,538 5,342		37,538. 5,342.			0.
TO FORM 990-PF, PG	1, LN 23	42,880	•	42,880.	42,88	30.	0.
	=		= ====		-		

FORM 990-PF OTHER DECREASES IN NET AS	SETS OR FUND BALANCES STATEMENT 5
DESCRIPTION	AMOUNT
CHANGE ON FLUCTUATION OF MARKET VALUE FOREIGN TAXES PAID FEDERAL EXCISE TAXES	11,399. 1,267. 775.
TOTAL TO FORM 990-PF, PART III, LINE 5	13,441.
FORM 990-PF CORPORAT	S STOCK STATEMENT 6
DESCRIPTION	FAIR MARKET BOOK VALUE VALUE
EQUITIES	2,555,429. 2,555,429.
TOTAL TO FORM 990-PF, PART II, LINE 10B	2,555,429.
FORM 990-PF CORPORAT	BONDS STATEMENT 7
DESCRIPTION	FAIR MARKET BOOK VALUE VALUE
FIXED INCOME	2,591,084. 2,591,084.
TOTAL TO FORM 990-PF, PART II, LINE 10C	2,591,084. 2,591,084.
FORM 990-PF OTHER IN	STATEMENT 8
	LUATION FAIR MARKET ETHOD BOOK VALUE VALUE
CASH AND SWEEP FUNDS ALTERNATIVE ASSETS	FMV 309,703. 309,703. FMV 438,528. 438,528.

SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 9 FORM 990-PF

ACTIVITY ONE

DONATION TO FOX RIVER VALLEY COMMUNITY FOUNDATION. THIS ENTITY SERVES AS THE ORGANIZATIONS LIASON TO FIND QUALIFIED STUDENT CANDIDATES FOR PROVIDING COLLEGE SCHOLARSHIPS

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 1

250,000.