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Fgm 990-PF

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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. Open to Public Inspection

_		e of foundation		722 , 2016						
_	T 70					16	Employer identif	ication number		
-	LА	SER FAMILY FOUNDATION				1	81-3021065			
	Num	ber and street (or P O box number if mail is not delivered	to street address)		Room/suite	E	3 Telephone numb	per (see instructions)		
-		03 ORRINGTON AVENUE, 13TH FLOO					(847) 90	05-4492		
	City	or town, state or province, country, and ZIP or foreign pos								
	EV	ANSTON, IL 60201					If exemption application pending, check here	ation is		
Ō	3 CI	neck all that apply X Initial return	Initial return	of a former p	ublic chari	ty r	1 Foreign organiza	utions check here		
		Final return	Amended re	turn		` -	2 Foreign organiza			
		Address change	Name chang	e			85% test, check			
Ī	H Ch	neck type of organization X Section 501(compatation .			
		Section 4947(a)(1) nonexempt charitable trust	Other taxable pr		tion	١	•	on status was terminated		
ī	Fa		unting method X C		crual	┑.				
			ther (specify)		,, .	'		s in a 60-month termination (a)(1)(B), check here		
		2 122	olumn (d) must be on cas	sh hasis)		-		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
1		Analysis of Revenue and Expenses (The						(d) Disbursements		
•		total of amounts in columns (b), (c), and (d)	(a) Revenue and expenses per	(b) Net inve		(c)	Adjusted net	for charitable		
		may not necessarily equal the amounts in column (a) (see instructions))	books	incon	ne		income	purposes (cash basis only)		
-	1	Contributions, gifts, grants, etc., received (attach schedule)	174,000.					(cash paste shift)		
	2	Charles I if the foundation is not required to						<u> </u>		
N		Interest on savings and temporary cash investments.		-						
2017	4	Dividends and interest from securities								
90		Gross rents	·							
	1 .									
7 8 0	ء اد	Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10								
	<u> </u>	Gross sales price for all	·					<u> </u>		
		Control coup not uncome (from Boot IV (line 2)			0.					
	7 8	Capital gain net income (from Part IV, line 2) .	_							
فيتر	9	Net short-term capital gain								
SCANINED DEC	108	Gross sales less returns								
3	١.	and allowances								
ゔ	[]	Less Cost of goods sold , Gross profit or (loss) (attach schedule)						<u> </u>		
	11	Other income (attach schedule)								
	12	Total. Add lines 1 through 11	174,000.		0.					
-	13	Compensation of officers, directors, trustees, etc	0.							
ď)	Other employee salaries and wages						 		
Š	15	Pension plans, employee benefits		· · · · · · · · · · · · · · · · · · ·						
		Legal fees (attach schedule)								
ŭ	il ,	Legal fees (attach schedule)								
Administrative		Other professional fees (attach-schedule)								
ije.	17									
Ţ,	18									
<u> </u>	19	Taxes (attach schedule) (see instructions) (2). Depreciation (attach schedule) and depletion						 		
<u> </u>	20	Occupancy .								
Ž	21	Occupancy						 		
	21 22	Printing and publications								
8	23	Other expenses (attach schedule) ATCH 1	17.		8.			9		
ŧ	24	Total operating and administrative expenses.								
2		Add lines 13 through 23	17.		8.			, 9		
Č	23 24 25	Contributions, gifts, grants paid	170,275.					170,275		
_	26	Total expenses and disbursements Add lines 24 and 25	170,292.		8.			170,284		
_	27	Subtract line 26 from line 12	, ==							
	ı	Excess of revenue over expenses and disbursements	3,708.							
	1	Net investment income (if negative, enter -0-)			0.					
	1	Adjusted net income (if negative, enter -0-).						 		

Part	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year	nd-of-year		
$\overline{}$	<u> </u>	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bear	ing		2,483.	2,483
2		cash investments			
3	Accounts receivable				
- 1	Less allowance for dou	btful accounts ▶			
4	Pledges receivable ▶				
ĺ	Less allowance for dou	btful accounts ▶			
5	Grants receivable				
6		officers, directors, trustees, and other			
		tach schedule) (see instructions)			
7	Other notes and loans r	eceivable (attach schedule)			
- 1	Less allowance for dou	ine i i i i i i i i i i i i i i i i i i			
रहा है		e			
Assets		eferred charges			
¥ 10a		e government obligations (attach schedule).			
		stock (attach schedule)			
		bonds (attach schedule)			
11	Investments - land, buildings	bonds (attach schedule)			
	and equipment basis Less accumulated deprecia	tion -			
	(attach schedule)				
12 13	Investments - mortgage	loans			— - —
14	Land, buildings, and	ich schedule)			
	equipment basis Less accumulated deprecia	tion >			
1	(attach schedule)	tion			
15	Other assets (describe				
16	Total assets (to be	completed by all filers - see the	_		
 -		age 1, (tem I)	0.	2,483.	2,483
17		ccrued expenses			
18					
19	Deferred revenue				
Liabilities 20 21 22 22	Loans from officers, director	rs, trustees, and other disqualified persons			
윤 21	Mortgages and other no	tes payable (attach schedule) L			
- 22	Other liabilities (describe	· · · · · · · · · · · · · · · · · · ·			
23	Total liabilities (add line	s 17 through 22)	0.	0.	
	Foundations that foll	ow SFAS 117, check here . ▶			
Salances 25	and complete lines 2	24 through 26 and lines 30 and 31.		Į.	
<u>⊆</u> 24	Unrestricted				
rg 25					
Net Assets or Fund 27 28 29 30 31		not follow SFAS 117. ► X			
ᄄ		plete lines 27 through 31.			
ත් ₂₇		apal, or current funds			Í
호 28 고		land, bldg , and equipment fund			ľ
86 29		lated income, endowment, or other funds		2,483.	
Š				2,483.	
9 31	Total liabilities and	halances (see instructions)		2,400.	
~ • • •			0.	2,483.	
Part I	Analysis of Char	nges in Net Assets or Fund Balar	1	2,400.	
1 100	of year frame are set	alances at beginning of year - Part II	i, column (a), line 30 (m	ust agree with	^
end	-or-year rigure reporte	d on prior year's return)		1	3 700
∠ Ente	er amount from Part I,	line 27a		2	3,708
3 Oth	er increases not includ	ed in line 2 (itemize) ▶		3	
4 Add	ines 1, 2, and 3			4	3,708
		line 2 (itemize) ► ATCH 2		5	1,225
ti lota	ar net assets or fund ba	alances at end of year (line 4 minus	line 5) - Part II, column (b)	, line 30 6	2,483

∠-story b	d describe the kind(s) of property sold rick warehouse, or common stock, 20		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr
a					
b			<u> </u>		
<u>c</u>					
<u>d</u>			 		
<u>e</u>			 	<u></u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (los (e) plus (f) minu	
<u>a</u>			_		
<u>b</u>			 		
<u>c</u>		 	 -		
d		+	 -		
Complete only for coasts o	about a column (b) and average	by the foundation on 12/21/60	 		
Complete only for assets s	showing gain in column (h) and owne			Gains (Col (h) ga (k), but not less th	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (ı), ıf any	COI	Losses (from col	
a			 		
b			 		
<u>c</u>					
d			+		
e Capital gain net income		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		
Net short-term capital a	ا تا ain or (loss) as defined in section	•	\ - +-		
		istructions) If (loss), enter -0- in			
	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	2		
or optional use by domesti	c private foundations subject to t	educed Tax on Net Investment he section 4940(a) tax on net inves	tment inco		
or optional use by domestic section 4940(d)(2) applies, as the foundation liable for	c private foundations subject to t leave this part blank NC the section 4942 tax on the distr	he section 4940(a) tax on net invesor AVAILABLE FOR INITIAL ibutable amount of any year in the l	tment inco	ETURNS	Yes
or optional use by domesting or optional use by domesting section 4940(d)(2) applies, as the foundation liable for tyes," the foundation does	c private foundations subject to t leave this part blank NC the section 4942 tax on the distr not qualify under section 4940(e	he section 4940(a) tax on net invesor AVAILABLE FOR INITIAL ibutable amount of any year in the logonometer this part	tment inco	ETURNS	Yes
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or optional use by domestic section 4940(d)(2) applies, as the foundation liable for "Yes," the foundation does Enter the appropriate a (a) Base penod years (alendar year (or tax year beginning in) 2015 2014 2013 2012 2011 Total of line 1, column (Average distribution ration number of years the foundation of the period of of	the section 4942 tax on the district not qualify under section 4940(emount in each column for each y (b) Adjusted qualifying distributions (d)	the section 4940(a) tax on net investor. AVAILABLE FOR INITIAL ibutable amount of any year in the late of the part to the late of the section of the late of the l	YEAR Ribase perior	eTURNS d? htries (d) Distribution re	rtio

Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948- see in	struc	tions)
`1a	Exempt operating foundations described in section 4940(d)(2), check here			
	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			0.
	here ▶ and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			0.
6	Credits/Payments			
а	2016 estimated tax payments and 2015 overpayment credited to 2016 6a			
b				
С	Tax paid with application for extension of time to file (Form 8868)			
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ Refunded ▶ 11			
Pa	rt VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			
	Instructions for the definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	1		
	published or distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ►\$(2) On foundation managers ►\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		ı	
	on foundation managers 🕨 \$			}
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	_2		X
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of	i !		,,
	incorporation, or 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?	4a		<u> </u>
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		<u> </u>
_	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	i		
	By language in the governing instrument, or			-
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		Х	
-	conflict with the state law remain in the governing instrument?	6	X	├──
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ IL,			
			i	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	8b	Х	
٨	(or designate) of each state as required by General Instruction G? If "No," attach explanation	- 50		
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 year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes,"			X
	complete Part XIV	9		+
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	10	Х	
	names and addresses ATCH 3	m 99		(2016)

Pai	t VII-A Statements Regarding Activities (continued)	—т	Vac	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	X
	meaning of 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			х
	person had advisory privileges? If "Yes," attach statement (see instructions)	12	х	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	_^_	
	Website address ► N/A	-705	<u> </u>	
14	Website address ► Triple Dooks are in care of ► CRAIG LABUS The books are in care of ► CRAIG LABUS Telephone no ► 779-333- 60423	703		
	Located at 20940 S. FRANKFORT SQUARE ROAD FRANKFORT, IL 2014			Т
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			لــا
	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority	16		X
	over a bank, securities, or other financial account in a foreign country?	10		
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
_	the foreign country			
Рa	t VILB Statements Regarding Activities for Which Form 4720 May Be Required		Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			
18	During the year did the foundation (either directly or indirectly) (4) Foreign to the code or explosing of property with a disqualified person? Yes X No	1		
	(1) Engage in the sale of 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?		1	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No		Į	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		ļ	
	the benefit or use of a disqualified person)?			
	(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 1
	termination of government service, if terminating within 90 days)	Ì		1
	of f any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	 	X
	Organizations relying on a current notice regarding disaster assistance check here		ŀ	
	. Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		 -	X
	were not corrected before the first day of the tax year beginning in 2016?	1c		
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))			
	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and	ļ	ļ	
	6e, Part XIII) for tax year(s) beginning before 2016?			Ì
	If "Yes," list the years ▶,,,,			
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) to			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	2b	1	
	all years listed, answer "No" and attach statement - see instructions)			
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	The state of the s	l	1	
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
	of f "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or	1	1	
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of		-	-
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	L.		_
	foundation had excess business holdings in 2016)	3b	<u> </u>	
_	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
4	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	<u> </u>		
	observable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		__X
	Parket Parket Indiana Control of the	om 9	90-P	F (2016

rm '	990-PF (2016) LASER FAMIL'	Y FOUNDATION		81-	-3021065	Page 6
Pai	rt VII-B Statements Regarding Activiti	es for Which Form	4720 May Be Red	uired (continued)		
5a	During the year did the foundation pay or incur any	amount to				
	(1) Carry on propaganda, or otherwise attempt to in	nfluence legislation (section	n 4945(e))?	. Yes X N	lo	
	(2) Influence the outcome of any specific public	election (see section 4	955), or to carry o	n,	[]	}
	directly or indirectly, any voter registration drive?	, 		. Yes X	lo	
	(3) Provide a grant to an individual for travel, study,	or other similar purposes?		. Yes X	lo	
	(4) Provide a grant to an organization other than	n a charitable, etc., org	anization described	ın		
	section 4945(d)(4)(A)? (see instructions)			Yes X N	lo	
	(5) Provide for any purpose other than religious					
	purposes, or for the prevention of cruelty to child	lren or animals?		. Yes X	lo	
b	If any answer is "Yes" to 5a(1)-(5), did any of	the transactions fail to	qualify under the	exceptions described	ın	
	Regulations section 53 4945 or in a current notice re	egarding disaster assistan	ce (see instructions)?		5b	X
	Organizations relying on a current notice regarding of	disaster assistance check l	nere	<i>.</i>	· []	
С	If the answer is "Yes" to question 5a(4), does	the foundation claim ex	xemption from the	tax		
	because it maintained expenditure responsibility for	the grant?		. Yes X N	lo	
	If "Yes," attach the statement required by Regulations	s section 53 4945-5(d)			1	
3a	Did the foundation, during the year, receive any	funds, directly or indire	ectly, to pay premiu	ms		
	on a personal benefit contract?			. Yes X	lo	
b	Did the foundation, during the year, pay premiums,	directly or indirectly, on a	personal benefit contri	act?	. 6b	X
	If "Yes" to 6b, file Form 8870				1 1	
7a	At any time during the tax year, was the foundation	a party to a prohibited tax	shelter transaction?	. Yes X	lo	
	If "Yes," did the foundation receive any proceeds or					
aı	Information About Officers, Direct and Contractors	ctors, Trustees, Fou	ndation Manager	s, Highly Paid Em	iployees,	
	List all officers, directors, trustees, foundation					
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expense other allow	account,
		devoted to position	`enter'-0-)	and deferred compensation	Other and	
TC	CH 4		0.			0.
10.	711 4		<u> </u>		 	
						
				 		
						
				 	-	
,	Compensation of five highest-paid employe	es (other than thos	e included on lin	e 1 - see instruct	tions) If no	ne enter
•	"NONE."	es (other than thos	e mciadea on iii	e i - see ilistiuc	cions). Il lioi	ie, eiitei
/a\) Name and address of each employee paid more than \$50,00	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit	(e) Expense	account,
(,	Than and address of sash employee paid more than 400,00	devoted to position	(c) compensation	plans and deferred compensation	other allow	wances
	NONE	_			}	
					1	
		-		}	1	
		<u> </u>		1	1	
						

Form **990-PF** (2016)

LASER FAMILY FOUNDATION

Form 990-PF (2016)		Page
Part VIII Information About Officers, Directors, Trustees, Foundation Nand Contractors (continued)		
3 Five highest-paid independent contractors for professional services (see i	instructions). If none, enter "NONE	. ."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NOVE	-	
NONE		
	-	
		
	-	
		<u> </u>
	-]	

otal number of others receiving over \$50,000 for professional services	······	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist organizations and other beneficianes served, conferences convened, research papers produced, etc.	tical information such as the number of	Expenses
1 N/A		
2		
3		
<u> </u>		
4		
Part IX-B Summary of Program-Related Investments (see instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines	s 1 and 2	Amount
1 NONE		
2		
All other program-related investments See instructions		
3 NONE		
otal. Add lines 1 through 3		

Pari		gn foundation	s,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes	1a	
	Average monthly fair market value of securities	1b	3,683.
	Average of monthly cash balances	16	
C	Fair market value of all other assets (see instructions)	1d	3,683.
	Total (add lines 1a, b, and c)	10	7,003.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation)	2	
2	Acquisition indebtedness applicable to line 1 assets	3	3,683.
3	Subtract line 2 from line 1d	-	3,003.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		55.
	instructions)	5	3,628.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	6	181.
6	Minimum investment return. Enter 5% of line 5	L	
Pari	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found	dations	
	and certain foreign organizations check here ▶ and do not complete this part)	1	181.
1	Minimum investment return from Part X, line 6		
2 a	Tax on investment income for 2016 from Part VI, line 5 2a	-	
þ	Income tax for 2016 (This does not include the tax from Part VI) 2b	!	
С	Add lines 2a and 2b	2c	181.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	101.
4	Recoveries of amounts treated as qualifying distributions	4	181.
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		1.01
	line 1	7	181.
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	170,284.
b	Program-related investments - total from Part IX-B	1b	
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		170,284.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	<u> </u>	
•	Enter 1% of Part I, line 27b (see instructions)	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		170,284.
Ü	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when c		ther the foundation
	qualifies for the section 4940(e) reduction of tax in those years		

LASER FAMILY FOUNDATION

Form 990-PF (2016) Page 9 Undistributed Income (see instructions) Part XIII (b) (c) (d) (a) Years prior to 2015 2015 2016 Corpus 1 Distributable amount for 2016 from Part XI, 181. 2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only b Total for prior years $20 \frac{14}{2000}$, $20 \frac{13}{2000}$, $20 \frac{12}{2000}$ 3 Excess distributions carryover, if any, to 2016 a From 2011 **b** From 2012 c From 2013 **d** From 2014 e From 2015 f Total of lines 3a through e 4 Qualifying distributions for 2016 from Part XII, 170,284. line 4 ▶ \$ a Applied to 2015, but not more than line 2a . . . b Applied to undistributed income of prior years (Election required - see instructions). c Treated as distributions out of corpus (Election 181. d Applied to 2016 distributable amount..... 170,103. e Remaining amount distributed out of corpus. . . 5 Excess distributions carryover applied to 2016. (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 170,103. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b. c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b Taxable amount - see instructions e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount - see f Undistributed income for 2016 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017........ 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2017. 170,103. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2012 . . . b Excess from 2013 . . . c Excess from 2014 . . . d Excess from 2015 . . . 170,103. e Excess from 2016 . . .

Form 990-PF (2016)

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Pa	rt XIV Private Op	erating Foundations	(see instructions a	nd Part VII-A guest	ion 9)	NOT APPLICABLE				
					T T T T T T T T T T T T T T T T T T T					
-	1a 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 v	=	_)(3) or 4942(j)(5)				
_	onoun por la maioata	Tax year	o a private operating	Prior 3 years		\(\frac{1}{1} \)				
2 a	Enter the lesser of the ad-	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total				
	justed net income from Part I or the minimum investment		(6) 2013	(0) 2014	(4) 2013	 				
	return from Part X for each									
	year listed				ļ					
þ	85% of line 2a	<u> </u>			 					
C	Qualifying distributions from Part									
	XII, line 4 for each year listed				 	<u> </u>				
d	Amounts included in line 2c not	1								
	used directly for active conduct of exempt activities									
е	Qualifying distributions made									
	directly for active conduct of									
	exempt activities Subtract line 2d from line 2c									
3	Complete 3a, b, or c for the			-	<u> </u>					
_	alternative test relied upon									
а	"Assets" alternative test - enter									
	(1) Value of all assets(2) Value of assets qualifying				 	 				
	under section									
h	4942(j)(3)(B)(i)	<u> </u>			 					
D	"Endowment" alternative test- enter 2/3 of minimum invest-					1				
	ment return shown in Part X,									
	line 6 for each year listed				ļ	<u> </u>				
С	"Support" alternative test - enter									
	(1) Total support other than									
	gross investment income (interest, dividends, rents,	1								
	payments on secunties									
	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)	<u> </u>			 					
	port from an exempt									
	organization				 	 				
Do	(4) Gross investment income. rt XV Supplement	store Information //	Samulata Abia mart	anly if the founds	tion had \$5 000 a	r more in essets at				
Га		uring the year - see		only if the founda	ition liau \$5,000 0	r more in assets at				
_				· · · · · · · · · · · · · · · · · · ·						
1	Information Regardin	-								
а	before the close of any	the foundation who i	nave contributed mor	e than 2% of the tot	ai contributions recei	ived by the foundation				
	before the close of any	tax year (but only if the	ley have contributed i	note than \$5,000) (C	ce scotton our (a)(2))					
	ATTACHME	NT 5								
b	List any managers of	the foundation who	own 10% or more o	f the stock of a corp	poration (or an equal	ly large portion of the				
	ownership of a partner	rship or other entity) of	f which the foundation	i has a 10% or greate	r interest					
	NONE									
2	Information Regardin	g Contribution, Grant	, Gift, Loan, Scholarsh	nip, etc., Programs:	,					
	Check here ▶ ☐ if t	the foundation only	makes contributions	to preselected char	ritable organizations	and does not accept				
	unsolicited requests for	or funds If the found	ation makes gifts, gra	ants, etc (see instruc	ctions) to individuals	or organizations under				
	other conditions, comp				•	•				
	The name, address, a	nd telephone number	or e-mail address of	the person to whom ar	oplications should be ad	ddressed				
	N/A		0.00							
	The form in which app	lications should be sui	hmitted and information	on and materials they	should include					
~	o rottii ai willon app		omittee and informati	aa matemais tries						
	NI / 7\									
	N/A									
С	Any submission deadli	ines								
	N/A									
d		mitations on awards	, such as by geogr	aphical areas, charit	able fields, kinds of	institutions, or other				
	factors									
_	N/A									
JSA						5 990 PE (2016)				

Form 990-PF (2016) Part XV Supplementary Information	(continued)			Page 11
3 Grants and Contributions Paid Duri	ing the Year or Appr	roved for F	uture Payment	
3 Grants and Contributions Paid During Recipient Name and address (home or business)	If recipient is an individual,	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor			
ATCH 6				
Tabel		<u></u>		170,275.
Total				1707270
b Approved for fatare payment				
				-
<u> Total</u>			▶ 3b	

JSA 6E1491 1 000

Par	t XVI-A Analysis of Income-Prod	ucing Act	ivities			
	gross amounts unless otherwise indicated		ated business income	Excluded by	y section 512, 513, or 514	(e)
	rogram service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
a	•					(See instructions)
b				 		
c						
d						
e		_				
f		_				
g	Fees and contracts from government agencies				_	
_	lembership dues and assessments					
	terest on savings and temporary cash investments					
	ividends and interest from securities					
5 N	et rental income or (loss) from real estate					
а	Debt-financed property					
b	Not debt-financed property	1		ļ		
6 N	et rental income or (loss) from personal property					
7 0	ther investment income					
8 G	ain or (loss) from sales of assets other than inventory			 		
	et income or (loss) from special events	ļ		-		
	ross profit or (loss) from sales of inventory			-		
	ther revenue a		· · · · · · · · · · · · · · · · · · ·	 		
b		<u> </u>		 		
C				+		
d				 -		<u> </u>
12 S	ubtotal Add columns (b), (d), and (e)					
	otal. Add line 12, columns (b), (d), and (e)				13	
(See	worksheet in line 13 instructions to verify calc	ulations)				
	t XVI-B Relationship of Activitie		ccomplishment of Ex	xempt Pur	poses	
Line						
	Explain below flow each activity					
`	accomplishment of the foundation	on's exemp	ot purposes (other than i	by providing	tunas for such purpose	s) (See instructions)
				-		
						
						
				<u>.</u>		
						
			<u> </u>			
						
		<u></u>				
						
						
				-		

Part	XVII	Information Re Exempt Organ		ansfers To and T	ransactio	ns and R	elationship	s With None	harit	able	,
	ın sect	e organization direct	ly or indirectly	engage in any of the section 501(c)(3) or					-	Yes	No
а	Transf	ers from the reportin	g foundation to	a noncharitable exe	mpt organiza	ation of			}		v
									1a(1)		$\frac{x}{x}$
	` '	ner assets transactions	• • • • • • • •						1a(2)		
			ncharitable exe	mpt organization				<i></i>	1b(1)		X
				able exempt organizat					1b(2)		<u>X</u> _
	(3) Re	ntal of facilities, equi	pment, or other	assets		<i>.</i>			1b(3)		_ <u>X</u> _
									1b(4)		- <u>X</u>
				nip or fundraising soli					1b(5)		- <u>X</u>
				ists, other assets, or p						\neg	<u>X</u>
d	If the avalue of value of	answer to any of the	e above is "Ye assets, or serv sharing arran	es," complete the fo ices given by the re gement, show in col	llowing sche porting foun umn (d) the	edule Colu dation If the value of the	mn (b) should ne foundation ne goods, oth	l always show received less	the fa than fa ervices	rece	arket eived
(4) 2.1	-	N/A	(b) Name of	TOTOTION AND CASHIPE OF GA		N/A				3	
						·					
 -								.			
											
							_ 	·			
	describ	ped in section 501(c) " complete the follow	of the Code (c	filiated with, or rela other than section 50	1(c)(3)) or in		7?	L —————		s X	No
		(a) Name of organization	<u> </u>	(b) Type of or	ganization		(c) Des	scription of relations	nıp		
		·- ·-									
	<u> </u>			 		-					
	1						 				
				ined this return, including actaxpayer) is based on all inform				pest of my knowledg	e and be	eller, it	is true,
Sign Here	Sign	nature of officer or trustee	Ser		17	PIZES	SIDENT		discuss eparer s s)? X		
	Ь_	Print/Type preparer's nai	 me	Preparer's signature			ate	Check If F	PTIN		
Paid		CRAIG A LABUS		Chari	a Labo	. 1	1/08/2017	Outpook	. P0097	1243	34
Prep	arer		IEDMAN & H	UEY ASSOC. TLE	- 			s EIN ▶ 36-33			
	Only			KFORT SQUARE F	₹D						
	-		ANKFORT,	IL		60423	Phon	eno 779-33	33-70	50	

Schedule B

or 990-PF) Department of the Treasury Internal Revenue Service

(Form 990, 990-EZ,

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 LASER FAMILY FOUNDATION 81-3021065 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 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, 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 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)

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)

LA73813

Contradic B (1 offit coo, oc	70 LL, 01 000 1 1 / (2010)			_
Name of organization	LASER FAMILY FOUND	ATION	 Eı	nployer identification num

artl	Contributors (See instructions). Use duplicate cop	pies of Part I if additional space is n	eeded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROSS & LORI LASER 70 GLADE ROAD	\$ 174,000.	Person Payroll Noncash (Complete Part II for
	GLENCOE, IL 60022		noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(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 Noncash (Complete Part II for noncash contributions)

Employer identification number

Part II Nonc	ash Property (See instructions). Use duplicate copies	of Part II if additional space is ne	eded.
(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
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	

Part III	Exclusively religious, charitable, etc., c	ontributions to organizati	ons described in section 501(c)(7), (8), or				
	(10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc.,						
	contributions of \$1,000 or less for the y						
	Use duplicate copies of Part III if addition	al space is needed					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gift					
	Transferee's name, address, and a	ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part i	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gift					
	Transferee's name, address, and 2	ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
	(e) Transfer of gift						
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gift					
	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee				

FORM 990PF, PART I - OTHER EXPENSES

DESCRIPTION BANK FEES

REVENUE
AND
EXPENSES
INVI

NET INVESTMENT INCOME 8.

CHARITABLE PURPOSES 9.

9

œ

TOTALS

ATTACHMENT 1 PAGE 18

2016 FORM 990-PF LASER FAMILY FOUNDATION

81-3021065

ATTACHMENT 2

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

<u>DESCRIPTION</u>

AMOUNT

ADJUSTMENT FOR QUID PRO QUO (NOT DEDUCTED ON 990-PF, PAGE 1) 1,225.

TOTAL

1,225.

FORM 990PF, PART VII-A, LINE 10 - SUBSTANTIAL CONTRIBUTORS

ATTACHMENT 3

NAME AND ADDRESS

ROSS & LORI LASER 70 GLADE ROAD GLENCOE, IL 60022

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES	CERS, DIRECTORS, AND TRUSTEES		ATTACHMENT	MENT 4
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
LORI LASER 1603 ORRINGTON AVENUE, 13TH FLOOR EVANSTON, IL 60201	PRESIDENT	Ö	.0	.0
ROSS S. LASER 1603 ORRINGTON AVENUE, 13TH FLOOR EVANSTON, IL 60201	VICE PRES./SECRETARY/TREASURER		ó	· o
MICHAEL LASER 1603 ORRINGTON AVENUE, 13TH FLOOR EVANSTON, IL 60201	DIRECTOR	·	Ö	.0
JACOB LASER 1603 ORRINGTON AVENUE, 13TH FLOOR EVANSTON, IL 60201	DIRECTOR	.0	.0	Ö

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GRAND TOTALS

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DIRECTOR

1603 ORRINGTON AVENUE, 13TH FLOOR EVANSTON, IL 60201

DAVID LASER

2016 FORM 990-PF LASER FAMILY FOUNDATION

81-3021065

ATTACHMENT 5

FORM 990PF, PART XV - INFORMATION REGARDING FOUNDATION MANAGERS

ROSS S. LASER LORI LASER

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 6

PURPOSE OF GRANT OR CONTRIBUTION	GENERAL OPERATING PURPOSES	GENERAL OPERATING PURPOSES	GENERAL OPERATING PURPOSES	GENERAL OPERATING PURPOSES 9,925	GENERAL OPERATING PURPOSES 115,000.	GENERAL OPERATING PURPOSES 8,850.
PURPOSE OF G	GENERAL OPER	GENERAL OPER	GENERAL OPER	GENERAL OPER	GENERAL OPER	GENERAL OPER
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE PC	NONE PC	NONE PC	NONE PC	NONE PC	NONE PC
RECIPIENT NAME AND ADDRESS	JEWISH UNITED FUND OF METROPOLITAN CHICAGO 30 SOUTH WELLS STREET CHICAGO, IL 60606-5056	CHICAGO CARES 2 N RIVERSIDE PLAZA SUITE 1800 CHICAGO, IL 60606	NATIONAL ALLIANCE ON MENTAL ILLNESS 3803 N FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22203-1701	ERIKSON INSTITUTE 451 NORTH LASALLE STREET CHICAGO, IL, 60654-4510	USC TENNIS FUND THE UNIVERSITY OF SOUTHERN CALIFORNIA 3501 WATT WAY LOS ANGELES, CA 90089-4017	UNITED STATES HOLOCAUST MEMORIAL MUSEUM 100 RAOUL WALLENBERG PLACE

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	VIION
	FAMILY

2016 FORM 990-PF

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FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

PURPOSE OF GRANT OR CONTRIBUTION GENERAL OPERATING PURPOSES GENERAL OPERATING PURPOSES RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR FOUNDATION STATUS OF RECIPIENT NONE NONE PC THE UNIVERSITY OF SOUTHERN CALIFORNIA RECIPIENT NAME AND ADDRESS LOS ANGELES, CA 90089-4017 USC PROFESSIONAL TENNIS VERNON HILLS, IL 60061 700 FOREST EDGE DRIVE CASA OF LAKE COUNTY 3501 WATT WAY

10,000.

AMOUNT

ATTACHMENT 6 (CONT'D)

200

TOTAL CONTRIBUTIONS PAID

170,275.

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