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.
 ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

For c	calendar year 2019 or tax year deginning		, and ending		
	me of foundation  LBERT M. ZARI FOUNDATION		A Employer identification	number	
_	O_SASSETTI LLC			46-4833743	,
	nber and street (or P O box number if mail is not delivered to street add	B Telephone number			
6	611 W. NORTH AVE	708-263-39	70		
· City	y or town, state or province, country, and ZIP or foreign po	stal code		C If exemption application is pe	nding, check here
<u> </u>	AK PARK, IL 60302				
G C	Check all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	, check here
	Final return	Amended return		2 5	oting the 0504 toot
	Address change	Name change		Foreign organizations med check here and attach cor	mputation
H C	Check type of organization; X Section 501(c)(3) exe		CY	E If private foundation stat	_ []
		Other taxable private founda		under section 507(b)(1)	(A), check here
	air market value of all assets at end of year J Accounting	•	Accrual	F If the foundation is in a	
•		ner (specify)	<u>e \</u>	under section 507(b)(1)	(B), check here
				(a) Adjusted not	(d) Disbursements
11-76	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
/	1 Contributions, gifts, grants, etc., received	1,128,553.		STAFF CRAMPING POL	
V	2 Check I if the foundation is not required to attach Sch. B				
Y^ :	Interest on savings and temporary cash investments	2,233.	2,233.		STATEMENT 1
`	4 Dividends and interest from securities	190,090.	190,090.		STATEMENT 2
-	5a Gross rents				
	b Net rental income or (loss)				
<u>o</u>	6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 2 002 122	184,444.			THAT CAREE TO SEE THE SEE
evenu	b assets on line 6a 3,083,122.		184,444.		
Be	7 Capital gain net income (from Part IV, line 2)  8 Net short-term capital gain		104,444		
	9 Income modifications				
	Gross sales less returns 10a and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss)				
2021	11 Other income	· · · · · · · · · · · · · · · · · · ·			
,	12 Total Add lines 1 through 11	1,505,320.	376,767.	0.	
3 (	13 Compensation of officers, directors, trustees, etc	10,000.	10,000.	10,000.	0.
PR	14 Other employee salaries and wages		<del></del>		
AP.	15 Pension plans, employee benefits				
See	16a Legal fees STMT 3	1,890.	1,890.	. 1,890.	0.
ANNED rative Expens	b Accounting fees STMT 3 c Other professional fees	1,090.	RECEIVE	. 1,050.	
	17 Interest		4 VECEIVE	<u> </u>	
A.P.	18 Taxes	•	5 IIIN 1 5 20	20 SO	
7. 7 +4	l.,		TOM 1 2 50	20 8	-v "cir" serele intelle pro Triance ALTE: V Serele intelle serele intelle
S.C. minis	20 Occupancy		OGDEN, U	-1 <u>E</u>	
Ad					
and	22 Printing and publications			22 122	
perating and	23 Other expenses STMT 4	39,439.	39,439.	39,439.	0.
rati	24 Total operating and administrative	E1 220	E1 220	E1 220	<b>^</b>
Ope		51,329. 325,000.	51,329.	51,329.	<u>325,000.</u>
	25 Contributions, gifts, grants paid 26 Total expenses and disbursements.	323,000.	T.L. L. C.		323,000.
	Add lines 24 and 25	376,329.	51,329.	51,329.	325,000.
	27 Subtract line 26 from line 12:	5.5,525.			
	a Excess of revenue over expenses and disbursements	1,128,991.			
	b Net investment income (if negative, enter -0-)		325,438.		
	C Adjusted net income (if negative, enter -0-)			0.	

$\sim$	/^	SASSETTI	TT
	<i>,</i> 0	SASSETTI	

46-4833743 Page 2

۵		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	of year
3.4	diir:	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	104,519.	43,929.	43,929.
	3	Accounts receivable >			
		Less: allowance for doubtful accounts			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts			
	- 5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			,
		disqualified persons			Carlot Constitution of the Carlot Constitution
	7	Other notes and loans receivable			And the second s
		Less: allowance for doubtful accounts			
ţ	8	Inventories for sale or use			0.400
Assets	9	Prepaid expenses and deferred charges	3,480.	2,423.	2,423.
ď		Investments - U.S. and state government obligations			2 707 722
		Investments - corporate stock STMT 7	2,709,275.	3,727,733.	3,727,733. 3,377,143.
	C	Investments - corporate bonds STMT 8	2,735,671.	3,3//,143.	3,3//,143.
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
i	12	Investments - mortgage loans	540.000	CAT 21A	CA7 21A
	13	Investments - other STMT 9	549,990.	647,314.	647,314.
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the	6,102,935.	7,798,542.	7,798,542.
_	17	Instructions. Also, see page 1, item I)	0,102,333.	7,750,542.	
	17 18	Accounts payable and accrued expenses			
	19	Grants payable Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Ē	21	Mortgages and other notes payable			
Ë	22	Other liabilities (describe )			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow FASB ASC 958, check here			
s		and complete lines 24, 25, 29, and 30			
ဥ	24	Net assets without donor restrictions	6,102,935.	7,798,542.	
alar	25	Net assets with donor restrictions			
or Fund Balances		Foundations that do not follow FASB ASC 958, check here			
Ë		and complete lines 26 through 30			
P	26	Capital stock, trust principal, or current funds			
	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
Net Assets	28	Retained earnings, accumulated income, endowment, or other funds			
et /	29	Total net assets or fund balances	6,102,935.	7,798,542.	
Ž					
_	30	Total liabilities and net assets/fund balances	6,102,935.	7,798,542.	The state of the s
P	art.	Analysis of Changes in Net Assets or Fund B	alances		•
=	Toto	Last seeds or find belonger at horizons of year. Part II column (a) line	20		
		I net assets or fund balances at beginning of year - Part II, column (a), line	23	] 1	6,102,935.
	•	st agree with end-of-year figure reported on prior year's return)		1 2	1,128,991.
		r amount from Part I, line 27a	SEE ST	TATEMENT 5 $\frac{2}{3}$	569,566.
3 Other increases not included in line 2 (itemize) SEE STATEMENT 5 4 Add lines 1, 2, and 3					
		eases not included in line 2 (itemize)	PATEMENT 6 5	7,801,492.	
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c		6	7,798,542.
<u>~</u>	, via	Taring access of forth bullations at one of year (line 4 fillings line of 1 art in, o	S.S. M. (O) MINO EO		Form <b>990-PF</b> (2019)

	SASSETTI LLC					4	0-403.	743	raye 3
Part IV Capital Gains ar	nd Losses for Tax on Inv	vestment	Income						
	e kind(s) of property sold (for exan chouse; or common stock, 200 shs.		te,	( <b>b)</b> How a P - Pur D - Dor	icquired chase nation	(c) Date a (mo., da	acquired ay, yr.)	( <b>d)</b> Dat (mo., da	
1a JP MORGAN INVES	TMENTS -32836								
b JP MORGAN INVES	TMENTS -32836								
c JP MORGAN INVES	TMENTS -32837								
d JP MORGAN INVES									
e CAPITAL GAINS D	IVIDENDS			L , .					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				ain or (loss) s (f) minus (		
a 607,283.			587,52						,759.
ь 1,593,962.			1,429,57						,388.
c 173,031.			164,97						,056.
d 689,593.			716,60	5.					,012.
e 19,253.								19	,253.
Complete only for assets showing	gain in column (h) and owned by t	he foundation	on 12/31/69.		(I)	Gains (C	ol. (h) gain i	minus	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any		COL		not less than (from col. (f	1))	
a									,759.
b									,388.
С									,056.
<u>d</u>								-27	,012.
_e					T			19	,253.
2 Capital gain net income or (net capi	tal loss) $\begin{cases} \text{If gain, also enter} \\ \text{If (loss), enter } -0 \end{cases}$	n Part I, line In Part I, line	7 7	} 2				184	,444.
3 Net short-term capital gain or (loss)	•								
If gain, also enter in Part I, line 8, co		<b>u</b> (0).		<i>]</i>					
If (loss) enter -0- in Part I line 8	• •			3	<u> </u>		N/A		
Rart V Qualification Un	der Section 4940(e) for	Reduced	Tax on Net	investm	ent Inco	me			
(For optional use by domestic private f	oundations subject to the section 4	940(a) tax on	net investment inc	come.)					
If section 4940(d)(2) applies, leave this	s nart hlank								
Was the foundation liable for the section	-		•	iod?				Yes	X No
If "Yes," the foundation doesn't qualify	<del></del>								
1 Enter the appropriate amount in ea	ch column for each year; see the in	istructions bef	ore making any er			<del></del>		(4)	
(a) Base period years	(b) Adjusted qualifying dist	tributione	Net value of no	(C)	Luca accate		Distrib	(d) ution ratio	(-))
Calendar year (or tax year beginning	<u> </u>		Net value of flo		25,680.		(col. (b) divi		(c)) 48188
2018		0,000.			13,880. 13,797.		<del></del>		79192
2017		0,000.							44899
2016	25	0,000.			8,037. 55,198.				00000
2015	50	0.000.		2,0	198		2	525.2	
2014	50	0,000.	L		196.	<u>,                                    </u>	<u> </u>	343.4	32323
O Taket of loss of sections (d)						,	່າ	525.4	24804
2 Total of line 1, column (d)		b O b 5 (	2 b db.ab.	6		2	۷,	J	24004
3 Average distribution ratio for the 5-		on line 2 by 5.0	J, or by the number	er of years				505.0	9/061
the foundation has been in existence	e it less than 5 years					3		202.0	04901
4 Enter the net value of noncharitable	u-use assets for 2019 from Part X, I	ine 5				4		6,500	,831.
5 Multiply line 4 by line 3			5	3,28	3,471	,972.			
						,254.			
6 Enter 1% of net investment income	(176 UI Mart I, IINE 270)					6			
7 Add lines 5 and 6						7	3,28	3,475	,226.
8 Enter qualifying distributions from l	,					8		325	,000.
If line 8 is equal to or greater than I See the Part VI instructions.	ine 7, check the box in Part VI, line	1b, and comp	olete that part usin	g a 1% tax	rate.				

12540528 707170 6578

10

IL

8a Enter the states to which the foundation reports or with which it is registered. See instructions.

year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV

of each state as required by General Instruction G2 If "No," attach explanation

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)

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

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

ĮΡε	art VII-A* Statements Regarding Activities (continued)		
		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of		
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?		
	If "Yes," attach statement. See instructions	12	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13 X	
	Website address ► N/A		
14	The books are in care of ► ROBERT W KRONE  Telephone no. ► 708-20	53-3970	
	Located at ▶6611 WEST NORTH AVE, OAK PARK, IL ZIP+4 ▶6	0302	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	<b>•</b>	•
	and enter the amount of tax-exempt interest received or accrued during the year	N/A	
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,	Yes	No
	securities, or other financial account in a foreign country?	16	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	18.3 T.	4
_	foreign country		
Pa	rt:VII-B Statements Regarding Activities for Which Form 4720 May Be Required	T	T
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Yes	No
1a	During the year, did the foundation (either directly or indirectly):		,
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	15 - A	7
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		. A
	a disqualified person?	1	. ;
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	-	· ]
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No		1.1.
	(5) Transfer any income or assets to a disqualified person (or make any of either available		4.7
	for the benefit or use of a disqualified person)?	8 8 2 3	77.72
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	1 1 1 3	41
	If the foundation agreed to make a grant to or to employ the official for a period after	\$ P = 4	3
	termination of government service, if terminating within 90 days.)  Yes X No		ائر ان ا
Ç	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions  N/A	46	<u>  1 - 3 - 2  </u>
	(-,	1b	
	Organizations relying on a current notice regarding disaster assistance, check here		200
·	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?	10	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	175 230	300
-	defined in section 4942(j)(3) or 4942(j)(5)):	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	美樓
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines		
	6d and 6e) for tax year(s) beginning before 2019?	1888 N. 175	Ĭ.Ţ
	If "Yes," list the years ▶ , , , ,		
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect	3	
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	9 . Sq	1
	statement - see instructions.) N/A	2b	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	25 A C - 32	
	<b>&gt;</b>		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		
	during the year?		
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after	1000	
	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	TALE A	
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,	<b>高级型设置</b>	(0) T
	Schedule C, to determine if the foundation had excess business holdings in 2019.)	3b	<del> </del>
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
ħ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that		100
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b DE	<u> </u>
	F F	orm <b>990-PF</b>	(2019)

ALDERM M. GART HOURIDANION	T				
ALBERT M. ZARI FOUNDATION	N		46-48337	13	Page 6
orm 990-PF (2019) C/O SASSETTI LLC Part VII-B; Statements Regarding Activities for Which F	orm 4720 May Re Re	ani ilaa al		7.7	Page 6
	orm 4720 may be no	equirea (continu	iea)	Yes	No
5a During the year, did the foundation pay or incur any amount to:	4045(0)\9	□ <b>v</b> ₀	s X No	-1:55	1
(1) Carry'on propaganda, or otherwise attempt to influence legislation (section		· · · · · · · · · · · · · · · · · · ·	5 11 110		
(2) Influence the outcome of any specific public election (see section 4955); or any voter registration drive?	to carry on, unectily or mulie	City,	s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	)	Ye			
(4) Provide a grant to an individual for travel, study, or other similar purposes:		10	. (	·	
4945(d)(4)(A)? See instructions	i described in section	□ Ve	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses, or fo	· <del></del>		, , <sub></sub> ,	
the prevention of cruelty to children or animals?	or readult on a parpago, or re		s X No -	25 A	,
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc	der the exceptions described in	· <del></del>		57	
section 53.4945 or in a current notice regarding disaster assistance? See instru			N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check h			▶□ □		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ned			
expenditure responsibility for the grant?	N	/A Ye	s 🔲 No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			l'	- \$\bar{\pmu}_{\pmu}\rightarrow\r	. '
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on		.		
a personal benefit contract?		Ye	s X No _		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	s X No	<u> </u>	, 12, 1
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration or				₽.
excess parachute payment(s) during the year?  Part VIII   Information About Officers, Directors, Truste	Faundation Mon		s X No	٠ ا ا	
Part VIII Information About Officers, Directors, Truster Paid Employees, and Contractors	es, roungation Man	lagers, riigniy			
1 List all officers, directors, trustees, and foundation managers and the	eir compensation.				
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Ex	pense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	account allowa	t, other
MARK SHEA	TRUSTEE	Cinci o j	compensation		
5611 WEST NORTH AVE.					
DAK PARK, IL 60302	1.00	2,500.	0.		0.
	TRUSTEE				-
611 WEST NORTH AVE.					
DAK PARK, IL 60302	1.00	2,500.	0.		0.
ROBERT W KRONE	TRUSTEE				-
5611 WEST NORTH AVE.					
DAK PARK, IL 60302	1.00	2,500.	0.		0.
	TRUSTEE				
6611 WEST NORTH AVE.					
DAK PARK, IL 60302	1.00	2,500.	0.		0.
2 Compensation of five highest-paid employees (other than those incl		enter "NONE."	(d) Contributions to	/ \ C	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deterred compensation	(e) Ex account allowa	t, other
NONE					
				[	

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

		<del> </del>
		ļ
Total number of others receiving over \$50,000 for professional services  Part X X Summary of Direct Charitable Activities		0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	h as the	Expenses
1		
SEE STATEMENT 10		325,000.
2		
3		
4		
Describe the two largest program related investments made by the foundation during the tax year on lines 1 and 2.		Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		
		<del> </del>
Total. Add lines 1 through 3	<u> </u>	0 . orm <b>990-PF</b> (2019)

C/O SASSETTI LLC Form 990-PF (2019) Partix Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 6,571,588. 1a a Average monthly fair market value of securities 28,240. 1b Average of monthly cash balances c Fair market value of all other assets 1c 6,599,828. 1d d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1e 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 6,599,828. 3 Subtract line 2 from line 1d 3 98,997. 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 6,500,831. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 5 325,042 6 Minimum investment return Enter 5% of line 5 | PartXI | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here 
and do not complete this part.) 325,042. Minimum investment return from Part X, line 6 1 6,509. Tax on investment income for 2019 from Part VI, line 5 b Income tax for 2019. (This does not include the tax from Part VI.) 2b 6,509. 2c c Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1 3 4 Recoveries of amounts treated as qualifying distributions 318,533 5 Add lines 3 and 4 5 0. 6 6 Deduction from distributable amount (see instructions) 318, 533 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 PartXIII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 1 325,000. 1a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1b b Program-related investments - total from Part IX-B 2 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: 3 3a Suitability test (prior IRS approval required) **b** Cash distribution test (attach the required schedule) 3b 325,000. Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

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325,000.

6

Adjusted qualifying distributions Subtract line 5 from line 4

4940(e) reduction of tax in those years.

## ALBERT M. ZARI FOUNDATION

Form 990-PF (2019)

C/O SASSETTI LLC

Part XIII Undistributed Income (see in	nstructions)			
•	(a) Corpus	(b) Years prior to 2018	(c) 2018	( <b>d</b> ) 2019
Distributable amount for 2019 from Part XI, line 7				318,533.
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only			0.	
b Total for prior years:				
3 Excess distributions carryover, if any, to 2019:		0.		
a From 2014 361, 310.				
b From 2015	:			
c From 2016				
d From 2017 187,760.				
e From 2018				
f Total of lines 3a through e	549,070.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: ► \$ 325,000.				
a Applied to 2018, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2019 distributable amount				318,533.
e Remaining amount distributed out of corpus	6,467.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as				
indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	555,537.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract				
lines 4d and 5 from line 1. This amount must				0
be distributed in 2020				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by			ľ	
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)	U •			
8 Excess distributions carryover from 2014	261 210			
not applied on line 5 or line 7	361,310.			<del>~.</del>
9 Excess distributions carryover to 2020.	194,227.			
Subtract lines 7 and 8 from line 6a	134,441.			
10 Analysis of line 9:				
a Excess from 2015 b Excess from 2016				
c Excess from 2017 187,760.				
d Excess from 2017				
e Excess from 2019 6 . 467 .		Ì		

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Form **990-PF** (2019)

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

Form 990-PF (2019) C/O SASSETTI	LLC		46-4833	743 Page 11
Part XV' Supplementary Information				
3 Grants and Contributions Paid During the Ye	ear or Approved for Future P If recipient is an individual,	ayment		
Name and address (home or business)	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 sussiance contributes			
COMMUNITY FOUNDATION OF THE FOX RIVER VALLEY 127 SOUTH FIRST STREET, SUITE 215 GENEVA, IL 60134			TO PROVIDE EDUCATIONAL SCHOLARSHIPS TO QUALIFYING STUDENTS ENTERING COLLEGE OR	
			CERTAIN TRADE SCHOOLS.	325,000.
Total			<b>▶</b> 3a	325,000.
<b>b</b> Approved for future payment				
NONE				
Total		-	<b>▶</b> 3b	0.

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256 54
376,76
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923621 12-17-19

# Rart XVIII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?  1 Transfers from the reporting foundation to a noncharitable exempt organization of:  1 Cash  2 Other assets  3 Other transactions:  1 Sales of assets to a noncharitable exempt organization  2 Purchases of assets from a noncharitable exempt organization  3 Rental of facilities, equipment, or other assets  4 Reimbursement arrangements  5 Loans or loan guarantees  6 Performance of services or membership or fundraising solicitations  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 or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, column (d) the value of the goods, other assets, or services received.							
(a) L	on eni	(b) Amount involved		able exempt organization	(d) Description	of transfers, transactions, an	d sharing arrangements
<u>,-,-</u>		127 / 11100111 111701700	N/A		(-) 3333 (33)		<u> </u>
			IN/A	<u> </u>	<del> </del>		
					+		
			<u> </u>		<del> </del>		
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		·					
					+		
			<u> </u>		<u></u>		
2a	Is the four	ndation directly or indirec	tly affiliated with, or related to,	one or more tax-exempt organiza	ations described		
	ın section	501(c) (other than sectio	on 501(c)(3)) or in section 527?				Yes X No
<u>b</u>	If "Yes," co	omplete the following sch		· · · · · · · · · · · · · · · · · · ·			<del>- ,-</del>
	· · · _ · · ·	(a) Name of org	ganization	(b) Type of organization	(	c) Description of relatio	nship
		N/A					
		·					
						<del> </del>	· ·
Sig	gn ere		nplete Declaration of preparer (other	ding accompanying schedules and state than taxpayer) is based on all information by the control of the control		s any knowledge	May the IRS discuss this return with the preparer shown below? See instr
	Joigi	Print/Type preparer's na			Date	Check If PTI	
		Fillio Type preparer S na			Date	self- employed	11
Pa	nid	THOMAS KBO	1		05/28/20	· • I	00584732
	eparer	THOMAS KRO		GGUNN GE	03/20/20	Firm's EIN ► 36-	
	se Only	Firm's name SAS	SETTI LLC			FIRM SEIN > 30-	4433140
J	o Only	Fremio addises & Com	11 100000 3110		<del></del>	<del>                                     </del>	· <del></del>
			11 NORTH AVENU			/700	\ 20 <i>E</i> 1422
		l OA	K PARK, IL 603	302		Phone no. (708	) 386-1433
							Form <b>990-PF</b> (2019)

### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

**Employer identification number** 

ALBERT M. ZARI FOUNDATION 46-4833743 C/O SASSETTI LLC Organization type (check one): Filers of: Section: Form 990 or 990-F7 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 X 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

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, chantable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

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,

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

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).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

or (ii) Form 990-EZ, line 1 Complete Parts I and II.

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization

ALBERT M. ZARI FOUNDATION

C/O SASSETTI LLC

Employer identification number

46-4833743

Part 1	Contributors (see instructions) Use duplicate copies of Part I if additional	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CAROLE MACK TRUST  C/O SASSETTI LLC 6611 WEST NORTH AVE  OAK PARK, IL 60302	\$ <u>1,128,553</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll 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
<u> </u>		\$	Person Payroll Omnicash Complete Part II for noncash contributions )

Name of organization

ALBERT M. ZARI FOUNDATION

C/O.SASSETTI LLC

Employer identification number

46-4833743

Part III	Noncash Property (see instructions) Use duplicate copies of Part II r	f additional space is needed	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions )	(d) Date received
		- - - - - - - - - - - - - - - - -	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		  \$	

Name of organization

Employer identification number

ALBERT M. ZARI FOUNDATION

C.	0	.SA	SSI	${f TT}$	Ί	LLC
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C/O.SA	SSETTI LLC		46-4833743					
Part III	from any one contributor. Complete columns (a)	through (e) and the following line entry	tion 501(c)(7), (8), or (10) that total more than \$1,000 for the year					
	completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 or le	ss for the year (Enter this info once) > \$					
(a) No.	Use duplicate copies of Part III if additional	space is needed						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
		(e) Transfer of gift						
	Transferee's name, address, ar	nd 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							
	B. A. A. B. A. B. A. B.							
-	Transferee's name, address, ar	10 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						
	Tunnafaurala nama addusas as	-J 7ID . 4	Relationship of transferor to transferee					
<b> </b>	Transferee's name, address, ar	10 ZIP + 4	netationship of transferor to transferee					
(a) No. from								
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Ĺ								
	(e) Transfer of gift							
	Transferee's name, address, and ZIP + 4 Relationship of transferor to tra							

FORM 990-PF INTERE	EST ON SAVII	NGS AND TEM	PORARY CA	SH IN	VESTMENTS	STATEMENT 1	
SOURCE		(A REVEI PER BO	NUE N	ET IN	(B) VESTMENT COME	(C) ADJUSTED NET INCOME	
JPMORGAN CHASE BANK	ζ		2,233.	2,233.		2,233.	
TOTAL TO PART I, L	INE 3		2,233.		2,233.	2,233.	
FORM 990-PF	DIVIDEND	S AND INTER	FST FROM	SECUR	TTTES	STATEMENT 2	
	DI VIDEND,	S AND INIER.	ESI FROM	BECOK			
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	(A REVE S PER E	ENUE	(B) NET INVES MENT INCO		
JP MORGAN CHASE BANK	209,343	. 19,25	3. 190	0,090.	190,09	0. 190,090.	
TO PART I, LINE 4	209,343	. 19,25	3. 190	,090.	190,09	0. 190,090.	
FORM 990-PF		ACCOUNTI	NG FEES (B) NET INVE	a C m	(C) ADJUSTED	STATEMENT 3  (D)  CHARITABLE	
DESCRIPTION	_	PER BOOKS	MENT INC		NET INCOM		
ACCOUNTING AND TAX FEES	PREP	1,890.	1,	,890.	1,89	0. 0.	
TO FORM 990-PF, PG	1, LN 16B	1,890.	1,890. 1		1,89	0. 0.	
FORM 990-PF	<del> </del>	OTHER E	XPENSES		<del> </del>	STATEMENT 4	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
FILING FEES BROKER AND BANKING OTHER FEES	FEES	15. 39,006. 418.	39,	15. ,006. 418.	39,00	5. 0. 6. 0. 8. 0.	
TO FORM 990-PF, PG	1, LN 23	39,439.	39,	,439.	39,43	9. 0.	
	=					=::::::::::::::::::::::::::::::::::::::	

FORM 990-PF OTHER INCREASES IN NET ASSETS OR	FUND BALANCES	STATEMENT 5
DESCRIPTION		AMOUNT
CHANGE ON FLUCTUATION OF MARKET VALUE		569,566.
TOTAL TO FORM 990-PF, PART III, LINE 3		569,566.
FORM 990-PF OTHER DECREASES IN NET ASSETS OF	R FUND BALANCES	STATEMENT 6
DESCRIPTION		AMOUNT
FOREIGN TAXES PAID FEDERAL EXCISE TAX		1,893. 1,057.
TOTAL TO FORM 990-PF, PART III, LINE 5		2,950.
FORM 990-PF CORPORATE STOCE	K	STATEMENT 7
	K BOOK VALUE	STATEMENT 7 FAIR MARKET VALUE
DESCRIPTION		FAIR MARKET
FORM 990-PF CORPORATE STOCE  DESCRIPTION  EQUITIES  TOTAL TO FORM 990-PF, PART II, LINE 10B	BOOK VALUE	FAIR MARKET VALUE
DESCRIPTION EQUITIES	BOOK VALUE  3,727,733.  3,727,733.	FAIR MARKET VALUE
DESCRIPTION  EQUITIES  TOTAL TO FORM 990-PF, PART II, LINE 10B	BOOK VALUE  3,727,733.  3,727,733.	FAIR MARKET VALUE  3,727,733.  3,727,733.
DESCRIPTION  EQUITIES  TOTAL TO FORM 990-PF, PART II, LINE 10B  FORM 990-PF CORPORATE BONDS	BOOK VALUE  3,727,733.  3,727,733.	FAIR MARKET VALUE  3,727,733.  3,727,733.  STATEMENT 8  FAIR MARKET

FORM 990-PF	OTHER INVESTMENTS		STATEMENT 9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
CASH AND SWEEP FUNDS ALTERNATIVE ASSETS	FMV FMV	90,276. 557,038.	90,276. 557,038.
TOTAL TO FORM 990-PF, PART II,	LINE 13	647,314.	647,314.

FORM 990-PF	SUMMARY OF	FDIRECT	CHARITABLE ACTIVITIES	STATEMENT 10

### 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	 325,000.