# Form 990-PF 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.

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

OMB No 1545-0047

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For	cale	ndar year 2019 or tax year beginning AUC	8 8, 2 <u>0</u> 19	, and ending	<u>DEC 31, 2019</u>	<del>)</del>
Na	me o	of foundation			A Employer identificatio	n number
_(	OB	B FOUNDATION			84-2769642	2
Nu	nber	and street (or P O box number if mail is not delivered to stree	t address)	Room/suite	B Telephone number	
_{	08	BITTERSWEET DR			847-272-92	270
		town, state or province, country, and ZIP or foreign p	oostal code		C If exemption application is	pending, check here
1	<u>IOR</u>	THBROOK, IL 60062				
G	Chec	k all that apply: X Initial return	Initial return of a fe	ormer public charity	D 1 Foreign organization	s, check here
		Final return	Amended return		2 Foreign organizations m	eating the 85% test
		Address change	Name change	77	2 Foreign organizations m check here and attach c	omputation
H	_	k type of organization: X Section 501(c)(3) e:			E If private foundation sta	
			Other taxable private found		under section 507(b)(1	)(A), check here
		arket value of all assets at end of year J Account	•	Accrual	F If the foundation is in a	
•	rom i • \$	Part II, col. (c), line 16) 0 38,004. (Part I, colur	ther (specify)	ue )	under section 507(b)(1	)(B), check here
	art l		<u> </u>			(d) Disbursements
	<u> </u>	(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	62,187.	<del></del>	N/A	(Cash basis uniy)
	2	Check If the foundation is not required to attach Sch. B	02,107.		IV/A	
	3	Interest on savings and temporary cash investments	1.	1		STATEMENT 1
	4	Dividends and interest from securities			<u> </u>	DITTI LITTURE I
	5a	Gross rents			<del></del>	
		Net rental income or (loss)				
	-	Net gain or (loss) from sale of assets not on line 10	<203.	>		
nue	Ь	Gross sales price for all assets on line 6a 44,109.				
evenue	7	Capital gain net income (from Part IV, line 2)		0	•	
œ	8	Net short-term capital gain				
707	9	Income modifications				
4.	10a	Gross sales less returns and allowances				
-		Less Cost of goods sold				
×	C	Gross profit or (loss)				
AFF	11	Other income		RI		<u> </u>
<u> </u>	12	Total Add lines 1 through 11	61,985.			ļ <u></u>
ANNEL.	13	Compensation of officers, directors, trustees, etc	0.		117 12 / 21 21	0.
É	14	Other employee salaries and wages		ĬŎ WI		
₹ °	15	Pension plans, employee benefits	1 000		12	F04
ر ا ا	16a	Legal fees STMT 2	1,008.	5/0/4	DEN, UT	504.
うしょ and Administrative Expenses	D	Accounting fees Other professional fees				<del>                                     </del>
e	17	Interest			<del> </del>	<u> </u>
aţ	17 18	Taxes		<u> </u>	<del></del>	
str	19	Depreciation and depletion			<del></del>	<del> </del>
Ē	20	Occupancy				
Adr	21	Travel, conferences, and meetings				
ď	22	Printing and publications		·		<del></del>
	23	Other expenses				
Operating		Total operating and administrative				
Jer:	ļ - ·	expenses. Add lines 13 through 23	1,008.	504		504.
Õ	25	Contributions, gifts, grants paid	22,973.			504. 22,973.
	26	Total expenses and disbursements				
		Add lines 24 and 25	23,981.	504		23,477.
	27	Subtract line 26 from line 12:				
		Excess of revenue over expenses and disbursements	38,004.		<u> </u>	
	b	Net investment income (if negative, enter -0-)		0 .		
	C	Adjusted net income (if negative, enter -0-)			N/A	

84-2769642 Form 990-PF (2019) COBB FOUNDATION Balance Sheets Attached schedules and amounts in the description End of year Beginning of year Part II column should be for end-of-year amounts only (c) Fair Market Value (a) Book Value (b) Book Value 38,004 38,004. 1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Accounts receivable ▶ Less: allowance for doubtful accounts 4 Pledges receivable ▶ Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 13 Investments - other 14 Land, buildings, and equipment: basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 38,004. 38,004. instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe > 23 Total liabilities (add lines 17 through 22) Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30 Net Assets or Fund Balances 24 Net assets without donor restrictions 25 Net assets with donor restrictions Foundations that do not follow FASB ASC 958, check here ▶ 🔀 and complete lines 26 through 30 26 Capital stock, trust principal, or current funds 0. 0. 27 Paid-in or capital surplus, or land, bldg., and equipment fund 38,004 0. 28 Retained earnings, accumulated income, endowment, or other funds 38,004 29 Total net assets or fund balances 0. 38,004 30 Total liabilities and net assets/fund balances

## Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 29		
'	(must agree with end-of-year figure reported on prior year's return)	1	0.
2	Enter amount from Part I, line 27a	2	38,004.
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	38,004.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	38,004.

Form 990-PF (2019)

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.

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7

8

7 Add lines 5 and 6

Enter qualifying distributions from Part XII, line 4

12030427 758396 00618000054

The Exempt operating foundations described in section 4940(g)(2), sheek here ▶ □ and enter **Not* on line 1.  Clate of unling or determination letter: (static boys of letter if necessary-see instructions) Domicals foundations that must the caction 4940(g) requirements in Part V, clack here ▶ □ and enter **Not* of line 1.  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(q)1) ruists and stable foundations only, others, enter -0-)  3 O.  3 O.  4 Add lines 1 and 12x (domestic section 4947(q)1) ruists and stable foundations only, others, enter -0-)  5 Tax based on investment income Subtract line 4 from line 3.1 zero or less, enter -0-)  6 CredistPayments:  2 O19 estimated tax payments and 2016 overpayment credided to 2019  8 a O.  6 Exempt foreign organizations: Lax withheld at source  7 Tax pad with application for exteriors on of time to life (Form 8868)  8 b Exempt foreign organizations: Lax withheld at source  7 Tax pad with application for exteriors on of time to life (Form 8868)  8 de O.  8 Exempt foreign organizations: Lax withheld at source  7 Tax pad with application for exteriors on of time to life (Form 8868)  8 de O.  8 Exempt foreign organizations: Lax withheld at Source  9 Tax dee. If the total of lines 5 and 8 is more than line 7, retiral amount ower and of the total of lines 5 and 8 is more than line 7, retiral amount ower and 1.  10 Extent the amount of the 10 to be Credited to 2020 estimated tax P  10 Overpayment little? 7 is more than less 7 is a final than total clines as a de, either the amount overpaid  11 Exite the amount of the 10 to be Credited to 2020 estimated tax P  10 The foundation in connection with the activities  10 Daring the faury-sec, did the foundation attempt to influence any network organization of dud it participate or intervene in any political campaging?  10 Did it spend more than \$100 during the year (either directly or indicately) for political expendit		1 990-PF (2019) COBB_FOUNDATION 84-27 Int VI   Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	69642 e instr	uctio	Page 4 ns)
b Democite Guandations and most the cootion 4940(c) requirements in Part V, check here	ь			-	
b Democite Guandations and most the cootion 4940(c) requirements in Part V, check here		Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			,
a All other damestic foundations enter 2% of the 27b Exempt foreign organizations, enter 4% of Part I, line 12, cot (b)  2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)  3 Add lines 1 and 2  4 Subtitute A (incomity lax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)  5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-  6 Circletide*Pyments*  2 2019 estimated tax psyments and 2018 overpayment credied to 2019  6 Exempt foreign organizations - tax withheld at source  7 a 2019 estimated tax psyments and 2018 overpayment credied to 2019  6 Exempt foreign organizations - tax withheld at source  7 a 2019 estimated any periments and 2018 overpayment credied to 2019  6 Exempt foreign organizations - tax withheld at source  7 Total credits and psyments Add lines 5 and the (grom 8868)  6 Exiter any penalty for underpayment of estimated tax. Check here of 1 form 2220 is attached  8 Enter any penalty for underpayment of estimated tax. Check here of 1 form 2220 is attached  9 0.  1 Total credits and psyments Add lines 5 and 16 is more than him 7, white amount over a 1 form 2220 is attached  1 Total credits and psyments Add lines 5 and 16 is more than him 7, white amount over a 1 form 2220 is attached  1 Total credits and psyments Add lines 5 and 5 is more than him 2, white amount over a 1 form 2220 is attached  1 Total credits and psyments Add lines 5 and 5 is more than him 2, white amount over a 1 form 2220 is attached  1 Total credits and psyments Add lines 5 and 5 is more than him 2, white amount over a 1 form 2220 is attached  1 Total credits and psyments Add lines 5 and 5 is more than him 2, white amount over a 1 form 2220 is attached  1 Total credits and psyments Add lines 5 and 5 is more than him 2, white a mount over a 1 form 2220 is attached 1 form 2220 is attache	b			_	0.
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11 Enter the amount of line 10 to be: Credited to 2020 estimated tax	9				<u> </u>
Part VII-A   Statements Regarding Activities		The state of the s			
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year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV  10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses  STMT 3  9  X  10  X			8b	X	L /
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STMT 3 10 X	9			-	
TO DIG CITY POTOCHO DODGIA MAR CONTINUE		· · · · · · · · · · · · · · · · · · ·		<u> </u>	<del>  x</del> ()
	10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses STMT 3		•	(2019)

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P	Part VII-A   Statements Regarding Activities (continued)			
			Yes	No
11	1 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	2 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		Х
13	3 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	4 The books are in care of ► MARTIN COBB Telephone no ►847-2	72-0	343	
	Located at ▶808 BITTERSWEET DRIVE, NORTHBROOK, IL ZIP+4 ▶6	<u>0062</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		<b>&gt;</b>	
	and enter the amount of tax-exempt interest received or accrued during the year	Ŋ	/A	,
16	6 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank,		Yes	
	securities, or other financial account in a foreign country?	16	ļ	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
_	foreign country		L	L
P	Part VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1	1a During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		· • ·	١٠,
	(1) Pay compensation to, or pay or reimburso the exponses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			·
	for the benefit or use of a disqualified person)?			ĺ
	(6) Agree to pay money or property to a government official? (Exception Check "No"	/		' '
	if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)  Yes X No			
	b If 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  N/A	45		-
		1b		<b></b>
	Organizations relying on a current notice regarding disaster assistance, check here  c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			<b>'</b>
	before the first day of the tax year beginning in 2019?	1c	-	X
9	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	10		
-	defined in section 4942(j)(3) or 4942(j)(5)):			
	a 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?			
	If "Yes," list the years  ,,,,,,,,,			
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
	u If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<b>&gt;</b>			
3	3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year? Yes X No			
	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			į I
	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 Form 4720,			
	Schedule C, to determine if the foundation had excess business holdings in 2019 ) $N/A$	3b		<u> </u>
	4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u> </u>
	b Did the foundation make any investment in a prior year (but after December 31, 1989) that could jeopardize its charitable purpose that			- 1
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X
	F.	orm <b>990</b>	)-PF (	(2019)

Form 990-PF (2019) COBB FOUNDATION	F 4700 M D - 1	7	84-2/696	142	Page 6
Part VII-B   Statements Regarding Activities for Which	Form 4/20 May Be	Required (contin	ued)		
5a During the year, did the foundation pay or incur any amount to:				Y	es No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es 🗓 No	ŀ	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir				İ
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	3?	Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section				
4945(d)(4)(A)? See instructions		Y	es 🗶 No 📗		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or				
the prevention of cruelty to children or animals?		Y	es 🗶 No		
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify un		ın Regulations		-	-
section 53 4945 or in a current notice regarding disaster assistance? See instr	ructions		N/A	5b	
Organizations relying on a current notice regarding disaster assistance, check	here				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f					
expenditure responsibility for the grant?	ľ	1/A	es L No		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).					
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Y	es 🗓 No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal 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	shelter transaction?	Y	es 🗶 No 📙		
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attribu	utable to the transaction?		N/A L	7b	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than S	\$1,000,000 in remuneration o				- 1
excess parachute payment(s) during the year?	<u> </u>		es X No		
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highl	y		•
Paid Employees, and Contractors					
1 List all officers, directors, trustees, and foundation managers and t		(a) Companyation	(d) Contributions to		Evenence
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	acco allo	Expense ount, other owances
MARTIN COBB	DIRECTOR	<u> </u>			
808 BITTERSWEET		}	ļ		
NORTHBROOK, IL 60062	1.00	0.	o.		0.
	DIRECTOR			1	<del></del>
808 BITTERSWEET					
NORTHBROOK, IL 60062	1.00	0.	٥.		0.
	DIRECTOR			<u> </u>	
46 MONTEREY DRIVE					
VERNON HILLS, IL 60061	1.00	0.	٥.		0.
VERTICAL MEDIES   22 00002					
	1				
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1). If none,	enter "NONE."			
(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 deferred compensation	accou	Expense unt, other owances
NONE	COTOLOG TO POSITION		vo inperiousum	1	
HOND	-			ł	
		<u> </u>	-	<b> </b>	
	1				
		<u> </u>	-		
	1				
		<u> </u>		<u> </u>	
	1				
		<del>                                     </del>		<del>                                     </del>	
	1				
Total number of other employees paid over \$50,000	<u> </u>	·			0
Total number of other employees paid over \$50,000			Form	990-F	<b>PF</b> (2019)
			1 01111	•	\-0.0/

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Total, Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ındatıons, se	e 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	0.
b		1b	29,301.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	29,301.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	,}	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	29,301.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	440.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	28,861.
6_	Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	577.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations a foreign organizations, check here ▶ ☐ and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	577.
2a	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.)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	577.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	577.
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	577.
P	art XII Qualifying Distributions (see instructions)	<del> </del>	
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	23,477.
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:		
	Suitability test (prior IRS approval required)	3a	<del></del>
	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	23,477.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	Income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	<u>23,477.</u>
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for th	e section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,				
line 7			,	577.
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only			0.	
b Total for prior years:		_		
		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014			,	
<b>b</b> From 2015				
c From 2016				
d From 2017				
e From 2018				
f Total of lines 3a through e	0.	·		
4 Qualifying distributions for 2019 from				
Part XII, line 4. ► \$ 23, 477.			0.	
a Applied to 2018, but not more than line 2a				-
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		<u> </u>		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)				577.
d Applied to 2019 distributable amount	22 000			5//•
e Remaining amount distributed out of corpus	22,900.			
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:			ĺ	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	22,900.			<del> </del>
<b>b</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.		<del></del>
e Undistributed income for 2018 Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract	J			
lines 4d and 5 from line 1. This amount must				0
be distributed in 2020		· · · · · · · · · · · · · · · · · · ·		0.
7 Amounts treated as distributions out of	1			•
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)				
8 Excess distributions carryover from 2014	0.			
not applied on line 5 or line 7  9 Excess distributions carryover to 2020	0.			·
Subtract lines 7 and 8 from line 6a	22,900.			
IO Analysis of line 9:	44,300.			
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				,
d Excess from 2018				
e Excess from 2019 22,900.			_	

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Form **990-PF** (2019)

Form 990-PF (2019) COBB_FO	UNDATION			84-27	69642 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VII	A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	t it is a private operating			
foundation, and the ruling is effective fo			<b>▶</b>		
b Check box to indicate whether the found	dation is a private operation	ng foundation described i		4942(j)(3) or 49	342(j)(5)
2 a Enter the lesser of the adjusted het	Tax year		Prior 3 years	<b></b>	
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(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					
used directly for active conduct of					
exempt activities			•		
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the		\ \ \			
alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets	· -				
(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)					<del>\</del>
(2) Support from general public and 5 or more exempt					
organizations as provided in		,			
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income			2.11	1 45 000	
Part XV Supplementary Info			it the foundation	nad \$5,000 or mo	ore in assets
at any time during t	<del></del>	ructions.)			
1 Information Regarding Foundatio	_				
a List any managers of the foundation who			ibutions received by the	foundation before the clos	se of any tax
year (but only if they have contributed m	iore man \$5,000) (See S	ection 507 (u)(z) )			
NONE					<u> </u>
b List any managers of the foundation who other entity) of which the foundation has			or an equally large portion	on of the ownership of a pa	artnership or
• • • • • • • • • • • • • • • • • • • •	sa 1070 of greater interes	).			
NONE				<u>.</u>	
2 Information Regarding Contributi					
Check here ► X if the foundation o					ests for funds. If
the foundation makes gifts, grants, etc.,					
a The name, address, and telephone numl	ber or email address of th	e person to whom applic	ations should be address	sed:	
			- 14 1. 4		
<b>b</b> The form in which applications should b	ie submiπed and informat	tion and materials they sh	oula include:		
c Any submission deadlines:					
				Abor fortage	
d Any restrictions or limitations on awards	s, such as by geographica	ai areas, charitable fields,	KINGS OT INSTITUTIONS, OF O	other factors.	
200001 10 17 10					Form <b>990-PF</b> (2019)
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٥.

**▶** 3b

Total

	investments			14	
4	Dividends and interest from securities				
5	Net rental income or (loss) from real estate:				 _
	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			18	
9	Net income or (loss) from special events				 _
10	Gross profit or (loss) from sales of inventory				
11	Other revenue:	•			
	a				

 0.	<202.	> 0
	 10	-202

<203.

14

13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations)

12 Subtotal Add columns (b), (d), and (e)

#### Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

Form **990-PF** (2019)

		Exempt Organi	izations				<u> </u>			
1	Did the or	ganization directly or indir	ectly engage in any	of the followin	ng with any othor organizati	on doscribod in s	ection 501(c)		Yes	No
					g to political organizations?					
а	Transfers	from the reporting founda	ation to a noncharital	ble exempt or	ganization of:					
	(1) Cash							1a(1)		Х
	(2) Other	assets						1a(2)		Х
ь	Other tran									
_		of assets to a noncharital	ble exempt organizat	tion				1b(1)		Х
	• •	nases of assets from a nor						1b(2)		X
	` '	il of facilities, equipment, i	•					1b(3)		Х
	• •	bursement arrangements						1b(4)		Х
	• •	s or loan guarantees						1b(5)		Х
	` '	rmance of services or mei	mhershin or fundrais	sina solicitatio	ons			1b(6)		Х
c	• •	f facilities, equipment, mai	-	-				1c		Х
	_		-		edule. Column (b) should al	wavs show the fa	ur market value of the o		ets.	
_		•		_	od lose than fair market vali	-			•	
		) the value of the goods, o				•		•		
1)L		(b) Amount involved			e exempt organization	(d) Descrip	otion of transfers, transaction	ns, and sharing ar	rangeme	nts
			, ,	N/A						
				<u> </u>						
				-						
					"					
_										
										_
	-									
					, <u></u>					
			• ••							
							•			
					<del>= "</del>					
	in section If "Yes," co	ndation directly or indirect 501(c) (other than section omplete the following sche (a) Name of orgi	n 501(c)(3)) or in se edule.		or more tax-exempt organic		d (c) Description of rel	Yes	X	] No
		N/A						· ·		
Sig He	gn and be				ig accompanying schedules and in taxpayer) is based on all inform 30 APRIL 202	nation of which prep	arer has any knowledge	May the IRS of return with the shown below:  X Yes	? Se <u>e ins</u>	his er str No
	l ciâi	Print/Type preparer's na	me	Preparer's si		Date	Check If	PTIN		
							self- employed			
o <sub>a</sub>	iid	GARY A. RU	DENREDC					P00029	441	
	eparer	Firm's name ► WAR		TC T.T.D		1	Firm's EIN ► 36	5-21706	U 2	
	e Only	THE SHALL WAR	EDI & DWA	דם חחג			THIN S CHV P 3	, 21/00	V 2	
_	<b>,</b>	Firm's address > 1 7	17 DEFPET	מש מוא	SUITE 300S				•	
			ERFIELD,				Phone no (84	17)267-	960	0
		ייים בייייייייייייייייייייייייייייייייי	, VILLETA	<u> </u>	±-J	<del> </del>	(Thone no 105	Form <b>99</b> (		

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84-2769642<sup>.</sup>

COBB FOUNDATION

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient COHN'S & COLITIS FOUNDATION NONE CHARITABLE 733 THIRD AVE STE 510 NEW YORK, NY 10017 2,500. DON GARLITS MUSEUM NONE CHARITABLE 13700 SW 16TH AVE OSCALA, FL 34473 2,500. STUDEBAKER MUSEUM CHARITABLE NONE 201 CHAPIN STREET SOUTH BEND IN 46601 1,000. MODEL T MUSEUM NONE CHARITABLE 309 N. 8TH STREET RICHMOND, IN 47374 1,000, SOUTH EAST EVANSTON PARENTS NONE CHARITABLE ASSOCIATION 31 W WELLINGTON #2 MUNDELEIN, IL 60060 2,000. CHICAGO PUBLIC MEDIA NONE CHARITABLE CHARITABLE 848 E. GRAND, NAVY PIER CHICAGO IL 60611 5,000. Total from continuation sheets 14 000.

## 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

Employer identification number

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

COBE	B FOUNDATION	84-2769642
Organization type (check one)		
Filers of: Se	ection:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation	
	527 political organization	
Form 990-PF 2	Form 990-PF X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
L	501(c)(3) taxable private foundation	
Note: Only a section 501(c)(7), ( General Rule	vered by the <b>General Rule</b> or a <b>Special Rule</b> .  (8), or (10) organization can check boxes for both the General Rule and a Special Rule	
	ng Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling to contributor. Complete Parts I and II. See instructions for determining a contributor's	
Special Rules		
sections 509(a)(1) and any one contributor, du	scribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, curing the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount 1 Complete Parts I and II.	or 16b, and that received from
year, total contribution	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from all s of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educal children or animals. Complete Parts I, II, and III	
year, contributions <i>exc</i> is checked, enter here purpose Don't comple	scribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from an lusively for religious, charitable, etc., purposes, but no such contributions totaled mon the total contributions that were received during the year for an exclusively religious, te any of the parts unless the <b>General Rule</b> applies to this organization because it re c., contributions totaling \$5,000 or more during the year	re than \$1,000 If this box charitable, etc,
but it must answer "No" on Part	in't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fo t IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its For ling 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.

Name of organization

Employer identification number

#### COBB FOUNDATION

84-2769642

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed				
(a) <u>N</u> o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	MARTIN COBB  808 BITTERSWEET DRIVE  NORTHBROOK, IL 60062	\$62,187. 	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
			Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
			Person Payroll Oncash Complete Part II for noncash contributions )		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
			Person Payroll Oncash Occash (Complete Part II for noncash contributions )		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Complete Part II for noncash contributions.)		

Name of organization

Employer identification number

#### COBB FOUNDATION

84-2769642

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

Employer identification number

Part III E	JNDATION sclusively religious, charitable, etc., contribut	tions to organizations described in se	84-2769642 ection 501(c)(7), (8), or (10) that total more than \$1,000 for the			
fre	om any one contributor. Complete columns (a	) through (e) and the following line enti	ry For organizations			
U:	mpleting Part III, enter the total of exclusively religious, se duplicate copies of Part III if additional	charitable, etc., contributions of \$1,000 of 1	ess for the year (Enter this hind diree)			
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
_						
—   <u>-</u>						
		(e) Transfer of 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			
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						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
_						
-		(a) Transfer of -th				
	(e) Transfer of gift					
İ	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			

FORM 990-PF INTEREST ON SAV	INGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT 1	
SOURCE	(A REVE PER B	NUE NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME	
CHARLES SCHWAB		1.	1.		
TOTAL TO PART I, LINE 3		1.	1.		
FORM 990-PF	LEGAL	FEES		STATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS		(C) - ADJUSTEI E NET INCOM		
LEVUN GOODMAN	1,008.	50	4.	504.	
TO FM 990-PF, PG 1, LN 16A	1,008.	50	4.	504.	
	F SUBSTANTIA PART VII-A,		ORS	STATEMENT 3	
NAME OF CONTRIBUTOR	ADDR	ESS			
MARTIN COBB		808 BITTERSWEET DRIVE NORTHBROOK, IL 60062			