Return of Private Foundation or Section 4947(a)(1) Trust Treated as Frivate 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 atest increation.

OMB No. 1545-0047

				ty numbers on this fo 990PF for instruction				Open to Public Inspection		
-		ar year 2022 or tax year beginning		and ending	1	T				
		oundation	y , c	and chang		A Empl	oyer identification num	ber		
3.7	OT77 T	Z DANTIN DOIMDADT	NAT TATO			26	-0177940			
		K FAMILY FOUNDATION of street (or P.O. box number if mail is r		dress) Ro	oom/suite		hone number (see instru	ctions)		
8	000	MADISON ST.			219-769-2481					
		n, state or province, country, and ZIP or ILLVILLE	r foreign postal code IN 46410			C If exe	mption application is pen	ding, check here		
		all that apply: Initial return		rn of a former public ch	narity	D 1. Fo	reign organizations, chec	k here		
		Final return	Amended			2. Fo	reign organizations meet	ing the		
		Address cha	ange Name cha	ange			% test, check here and a			
H	heck t	ype of organization: X Section 50	01(c)(3) exempt private	foundation		E If priv	ate foundation status wa	s terminated under		
	Section	n 4947(a)(1) nonexempt charitable to	rust Other taxab	le private foundation		section	on 507(b)(1)(A), check he	re		
I F	air mar	ket value of all assets at J	Accounting method:	X Cash Acc	rual		foundation is in a 60-mor			
e	nd of ye	ear (from Part II, col. (c),	Other (specify)			under	r section 507(b)(1)(B), ch	eck here		
	ne 16)	\$ 1,083,377 (P				1		(d) Disbursements		
- P	art I	Analysis of Revenue and Exper amounts in columns (b), (c), and (d) r the amounts in column (a) (see instru	nay not necessarily equa	(a) Revenue and expenses per books	(b) Net in inco		(c) Adjusted net income	for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc., receive						(Guoir Dubis Offly)		
	2	Check X if the foundation is not rec								
	3	Interest on savings and temporary	cash investments	28		28	. 28			
ø	4	Dividends and interest from securi	ties	18,423		18,423	18,423			
	5a	Gross rents								
	b	Net rental income or (loss)								
JI.	6a	Net gain or (loss) from sale of assets not on line	10 STMT 1	-1,145						
Revenue	b		632,913			22 256				
α	7	Capital gain net income (from Part				33,256	0			
	8	Net short-term capital gain								
	10a	Gross sales less returns and allowances								
	b	Less: Cost of goods sold								
	С	Gross profit or (loss) (attach sched	dule)							
	11	Other income (attach schedule)								
	12	Total. Add lines 1 through 11		17,306		51,707	18,451			
S	13	Compensation of officers, directors	s, trustees, etc.	0						
ıses	14	Other employee salaries and wage								
bel	15	Pension plans, employee benefits								
X	16a	Legal fees (attach schedule)	STMT 2	2 425				2 425		
\ Ve	b	Accounting fees (attach schedule) Other professional fees (attach schedule)		3,435				3,435		
ati	17	Interest	s)							
str	18	Taxes (attach schedule) (see instruction	ns) STMT 3	1,274				1,274		
=	19	Depreciation (attach schedule) and dep								
늄	20	Occupancy					2 2			
Ϋ́	21	Travel, conferences, and meetings								
anc	22									
g	23		STMT 4	6,165				6,165		
aţi.	24	Total operating and administrat	ive expenses.							
Operating and Administrative Expen				10,874		0	0	10,874		
o	25	Contributions, gifts, grants paid		51,286			_	51,286		
	26	Total expenses and disbursements	. Add lines 24 and 25	62,160		0	0	62,160		
	27	Subtract line 26 from line 12:	nd diahuraamarta	-44,854						
	a	Excess of revenue over expenses a Net investment income (if negat		-14,004		51,707				
	b	Adjusted not income (if negative				3=,,01	18,451			

Form **8879-TE**

IRS e-file Signature Authorization for a Tax Exempt Entity

OMB No. 1545-0047

2022

Department of the Treasury Internal Revenue Service

For calendar year 2022, or fiscal year beginning Do not send to the IRS. Keep for your records. Go to www.irs.gov/Form8879TE for the latest information.

EIN or SSN Name of file NOVAK FAMILY FOUNDATION, INC. 26-0177940 Name and title of officer or person subject to tax WILLIAM LOGOTHETIS PRESIDENT Type of Return and Return Information Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. b Total revenue, if any (Form 990, Part VIII, column (A), line 12) 1a Form 990 check here b Total revenue, if any (Form 990-EZ, line 9) 2a Form 990-EZ check here 3a Form 1120-POL check here b Total tax (Form 1120-POL, line 22) **b** Tax based on investment income (Form 990-PF, Part V, line 5) 4a Form 990-PF check here 5a Form 8868 check here b Balance due (Form 8868, line 3c) 6a Form 990-T check here b Total tax (Form 990-T. Part III, line 4) b Total tax (Form 4720, Part III, line 1) 7a Form 4720 check here b FMV of assets at end of tax year (Form 5227, Item D) 8a Form 5227 check here 9a Form 5330 check here b Tax due (Form 5330, Part II, line 19) 10a Form 8038-CP check here b Amount of credit payment requested (Form 8038-CP, Part III, line 22) Declaration and Signature Authorization of Officer or Person Subject to Tax Under penalties of perjury, I declare that |X| I am an officer of the above entity or I am a person subject to tax with respect to (name , (EIN) and that I have examined a copy of the of entity) 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal. PIN: check one box only BIKOS & ASSOCIATES CPA PC as my signature Enter five numbers, but **ERO firm name** on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen. As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2022 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen. 07/03/23 Signature of officer or person subject to tax Part III **Certification and Authentication** ERO's EFIN/PIN. Enter your six-digit electronic filing identification 35077046410 number (EFIN) followed by your five-digit self-selected PIN. Do not enter all zeros I certify that the above numeric entry is my PIN, which is my signature on the 2022 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Medernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns 07/03/23

ERO Must Retain This Form — See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

Form 990-PF (2022) NOVAK FAMILY FOUNDATION, End of year Beginning of year Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions. (c) Fair Market Value (a) Book Value (b) Book Value 1 Cash - non-interest-bearing 290,421 7,887 290,326 Savings and temporary cash investments 2 3 Accounts receivable Less: allowance for doubtful accounts Pledges receivable Less: allowance for doubtful accounts 5 Grants receivable 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (att. schedule) Less: allowance for doubtful accounts Inventories for sale or use 9 Prepaid expenses and deferred charges Investments – U.S. and state government obligations (attach schedule) 10a 848,727 793,051 SEE 1,176,115 b Investments – corporate stock (attach schedule) Investments – corporate bonds (attach schedule) C 11 Investments – land, buildings, and equipment: basis Less: accumulated depreciation (attach sch.) Investments - mortgage loans 12 13 Investments - other (attach schedule) 14 Land, buildings, and equipment: basis Less: accumulated depreciation (attach sch.) 15 Other assets (describe 16 Total assets (to be completed by all filers - see the 1,139,148 1,184,002 1,083,377 instructions. Also, see page 1, item I) 17 Accounts payable and accrued expenses 18 Grants payable Deferred revenue 19 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other liabilities (describe 0 0 Total liabilities (add lines 17 through 22) 23 Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. Net Assets or Fund Balances Net assets without donor restrictions 24 25 Net assets with donor restrictions Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30. 1,357,593 26 Capital stock, trust principal, or current funds 1,357,593 27 Paid-in or capital surplus, or land, bldg., and equipment fund -173,591 -218,445 28 Retained earnings, accumulated income, endowment, or other funds 1,184,002 1,139,148 29 Total net assets or fund balances (see instructions) 30 Total liabilities and net assets/fund balances (see 1,184,002 1,139,148 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) 1,184,002 2 Enter amount from Part I, line 27a 2 -44,854 3 Other increases not included in line 2 (itemize) 3 1,139,148 4 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 5 6 1,139,148 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29 Form 990-PF (2022)

orm	990-PF (2022) NOVAK F	AMILY FOUNDATION, 1	INC.	20-01/1940			Page 3
Pa	rt IV Capital Gains a	nd Losses for Tax on Investm	nent Income				
	(a) List and describe the 2-story brick ware	e kind(s) of property sold (for example, real house; or common stock, 200 shs. MLC Co	estate, .)	(b) How acquired P – Purchase D – Donation		ate acquired o., day, yr.)	(d) Date sold (mo., day, yr.)
1a	CAPITAL GAIN DI	STRIBUTIONS-RJ					
b							
С							
d							
е							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	107	r other basis ense of sale		(h) Gain ((e) plus (f)	, ,
а	33,256						33,256
b					7		
С							
d							
е	-						
(Complete only for assets showin	g gain in column (h) and owned by the	foundation on 12/31/	69.		(I) Gains (Col.	(h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col. (i) I. (j), if any	col. (k), but not less than -0-) Losses (from col. (h))		
а							33,256
b							
С							
d		r					
е							
_		If gain, also enter	in Part I, line 7				
2 (Capital gain net income or (net c	rapital loss) If (loss), enter -0-			2		33,256
3 1	Net short-term capital gain or (lo	ss) as defined in sections 1222(5) and	(6):				
1	f gain, also enter in Part I, line 8	s, column (c). See instructions. If (loss)	, enter -0- in				
F	Part I, line 8				3		
Pa	art V Excise Tax Bas	ed on Investment Income (Se	ection 4940(a), 4	940(b), or 4948–	-see i	nstruction	is)
1a	Exempt operating foundations	described in section 4940(d)(2), check	here and en	ter "N/A" on line 1.			
	Date of ruling or determination	letter: (attach co	ppy of letter if neces	sary—see instruction	ons)	1	719
b	All other domestic foundations	enter 1.39% (0.0139) of line 27b. Exe	mpt foreign organizat	ions,			
	enter 4% (0.04) of Part I, line 1	12, col. (b)					
2	Tax under section 511 (domes	tic section 4947(a)(1) trusts and taxab	le foundations only; o	thers, enter -0-)		2	0
3	Add lines 1 and 2					3	719
4	Subtitle A (income) tax (domes	stic section 4947(a)(1) trusts and taxab	le foundations only; o	others, enter -0-)		4	0
5	Tax based on investment inc	come. Subtract line 4 from line 3. If zer	o or less, enter -0-			5	719
6	Credits/Payments:						
а	2022 estimated tax payments	and 2021 overpayment credited to 202	2 6	Sa			
b	Exempt foreign organizations -	- tax withheld at source	6	5b			
С	Tax paid with application for ex	xtension of time to file (Form 8868)	6	Sc			
d	Backup withholding erroneous			id			
7	Total credits and payments. A	dd lines 6a through 6d				7	1
8	Enter any penalty for underpa	yment of estimated tax. Check here	If Form 2220 is atta	ached		8	34
9		and 8 is more than line 7, enter amour	at awad			9	753
10	Overpayment. If line 7 is more	e than the total of lines 5 and 8, enter t				10	
11		be: Credited to 2023 estimated tax			d	11	

Pa	rt VI-A Statements Regarding Activities	v		
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 the			
	instructions for the definition	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published 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			
	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 incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
•	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	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 XIV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	NONE			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
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 2022 or the tax year beginning in 2022? See instructions for Part XIII. If "Yes,"			
	complete Part XIII	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		X
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 NOVAKFAMILYFOUNDATION.ORG			. Agricio
14	The books are in care of WILLIAM LOGOTHETIS Telephone no. 219-7	69-	248	31
	8000 MADISON ST.	_		
	Located at MERRILLVILLE IN ZIP+4 4641)		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here			
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2022, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country			1

Pa	art VI-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
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?			X
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified	1a(1)		
	person?	1a(2)		Х
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)		X
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)		X
	(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)?	1a(5)	************	Х
	(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.)	1a(6)		Х
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	1b	0.0000000000000000000000000000000000000	0000000000000
С	Organizations relying on a current notice regarding disaster assistance, check here			
d	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 2022? N/A	1d	00000000000	00000000000
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)):			
а	At the end of tax year 2022, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for			
	tax year(s) beginning before 2022?	2a	0000000000	х
	If "Yes," list the years 20 , 20 , 20 , 20			
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		100000000000
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	3a		X
b	If "Yes," did it have excess business holdings in 2022 as a result of (1) any purchase by the foundation or			
	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 Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2022.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable			
	purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize			
	its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning			
	in 2022?	146		Y

Form **990-PF** (2022)

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O -	u		•	•	7	~	•	

Page

orn	990-PF (2022) NOVAK FAMILY FOUNDATION, INC.	26-0	177940			Pa	age 6	
	ort VI-B Statements Regarding Activities for Which Form 4	720 May Be R	equired (cont	inued)				
5a	During the year did the foundation pay or incur any amount to:					Yes	No	
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4	945(e))?			5a(1)		X	
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or							
	indirectly, any voter registration drive?				5a(2)		<u>X</u>	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?			, ,,, , ,,, , ,,, , , , , , , ,	5a(3)	Х	33033333333	
	(4) Provide a grant to an organization other than a charitable, etc., organization of	described in sectio	n 4945(d)					
	(4)(A)? See instructions		orana w acada w acada w wiene w wiene		5a(4)		X	
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or	educational purpor	ses, or for					
	the prevention of cruelty to children or animals?				5a(5)		<u>X</u>	
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under	r the exceptions d	escribed				х	
	in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions							
C	Organizations relying on a current notice regarding disaster assistance, check he	ere		<u> </u>				
d	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from	m the tax because	it					
	maintained expenditure responsibility for the grant?			N/A	5d			
	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 pa	y premiums on a p	ersonal					
	benefit contract?			ONLY MINER WILLIAM WINDOWS MINER	6a		X	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a per-	sonal benefit contr	act?		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 she	elter transaction?		CHOR IN MODEL IN MORE AS FOR \$18.55	7a		X	
b	If "Yes," did the foundation receive any proceeds or have any net income attribut	able to the transac	tion?	N/A	7b			
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000 tax on payment (s) of more than \$1,000 tax of	000,000 in remune	eration or					
	excess parachute payment(s) during the year?				8		_X_	
P	art VII Information About Officers, Directors, Trustees, Fo	undation Mana	agers, Highly	Paid Employ	ees,			
	and Contractors							
1	List all officers, directors, trustees, and foundation managers and their comp	ensation. See ins	structions.	I	_			
	(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		pense a er allowa		
S	EE STATEMENT 6							
2	Compensation of five highest-paid employees (other than those included o "NONE."	n line 1 – see ins	tructions). If non	e, enter				
	(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		pense a er allowa		
N	DNE							
Tot	I number of other employees paid over \$50,000						0	

Form 990-PF (2022) NOVAK FAMILY FOUNDATION, INC. 26-0177940	Page 7
Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "	NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	
Part VIII-A Summary of Direct Charitable Activities	•
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 SEE STATEMENT 7	
. 511517517	
	40,386
2 GRACE BEYOND BORDERS - SUPPORT FOR EMERGENCY TRANSITIONAL MISSION FOR HOMELESS WOMEN AND CHILDREN	
3 ST. IAKOVOS MAINTENANCE FUND	5,000
3 SI. IAROVOS MAINIENANCE FUND	2,000
4 SOJOURNER TRUTH HOUSE MINISTRY FOR AT-RISK AND HOMELESS WOMEN AND CHILDREN	2,000
	1,000
Part VIII-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 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	

Form **990-PF** (2022)

Total. Add lines 1 through 3

26-0177940 Form 990-PF (2022) NOVAK FAMILY FOUNDATION, INC. Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Part IX see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: 1,174,144 1a Average monthly fair market value of securities 6,679 1b Average of monthly cash balances 1c Fair market value of all other assets (see instructions) 1,180,823 1d d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 0 1e 1c (attach detailed explanation) 2 Acquisition indebtedness applicable to line 1 assets 2 1,180,823 3 Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see 17,712 instructions) 1,163,111 5 Net value of noncharitable-use assets. Subtract line 4 from line 3 58,156 6 Minimum investment return. Enter 5% (0.05) of line 5. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part X and certain foreign organizations, check here and do not complete this part.) 58,156 Minimum investment return from Part IX, line 6 1 1 719 Tax on investment income for 2022 from Part V, line 5 2a 2a b Income tax for 2022. (This does not include the tax from Part V.) 2b Add lines 2a and 2b 2c С 57,437 3 3 Distributable amount before adjustments. Subtract line 2c from line 1 4 4 Recoveries of amounts treated as qualifying distributions 57,437 5 5 Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, 7 57,437 line 1 Part XI Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 1 62,160 1a Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26 1b b Program-related investments - total from Part VIII-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 purposes Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) 3a

> 62,160 Form **990-PF** (2022)

3b 4

Cash distribution test (attach the required schedule)

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4

	990-PF (2022) NOVAK FAMILY FOUNDATION		26-01779	40	Page 9
Pa	rt XII Undistributed Income (see instructions	- W	/h)	(6)	(4)
		(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
1	Distributable amount for 2022 from Part X, line 7				57,437
2	Undistributed income, if any, as of the end of 2022:				
	Enter amount for 2021 only			2,080	
b	Total for prior years: 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2022:				
а	From 2017				
b	From 2018				
С	From 2019				
d	From 2020				
	From 2021				
f	Total of lines 3a through e				
4	Qualifying distributions for 2022 from Part XI,				
	line 4: \$62,160				
	Applied to 2021, but not more than line 2a			2,080	
b	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election				
	required – see instructions)				57,437
	Applied to 2022 distributable amount	2,643			37,437
	Remaining amount distributed out of corpus	2,043			
5	Excess distributions carryover applied to 2022 (If an amount appears in column (d), the same				
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
•	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	2,643			
	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
С	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				
е	Undistributed income for 2021. Subtract line	-			
	4a from line 2a. Taxable amount – see				
٠.	instructions				
f	Undistributed income for 2022. Subtract lines				
	4d and 5 from line 1. This amount must be				0
7	distributed in 2023				0
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)				
8	Excess distributions carryover from 2017 not				
0	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2023.				
	Subtract lines 7 and 8 from line 6a	2,643			
10	Analysis of line 9:				
а	Excess from 2018				
b	Excess from 2019				
С	Excess from 2020				
d	Excess from 2021				
е	Excess from 2022 2,643	3			

organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization

Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)

Information Regarding Foundation Managers:

(4) Gross investment income

- List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)
- List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. N/A
- Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.

- The name, address, and telephone number or email address of the person to whom applications should be addressed: N/A
- The form in which applications should be submitted and information and materials they should include:
- Any submission deadlines:
 - N/A
- Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

N/A

3 Grants and Contributions Paid During		Future Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year ST. IAKOVOS RETREAT CENTE 40 E. BURTON PLACE CHICAGO IL 60610		NC ANNUA:	L SUPPORT	2,000
SS CONSTANTINE & HELEN CA 8000 MADISON ST. MERRILLVILLE IN 46410	BUILDING FUND	NC , 5K RUN, SCHO	LARSHIPS,	40,386
ORTHODOX CHRISTIAN MISSION 220 MASON MANATEE WAY ST. AUGUSTINE FL 32086	CENTER ANNUAL	NC SUPPORT OF M	INISTRIES	1,000
ST. HELEN'S PHILOPTOCHOS S 8000 MADISON ST. MERRILLVILLE IN 46410		NC ETTI DINNER,	MEMORIAL	900
SOJOURNER TRUTH HOUSE 410 W. 13TH AVE. GARY IN 46407		NC HOMELES	s SHELTER	1,000
GRACE BEYOND BORDERS P.O. BOX 927 EAST CHICAGO IN 46312	SUPPORT HOM	ELESS WOMEN &	CHILDREN	5,000
GREEK ORTHODOX METROPOLIS 555 E. BUTTERFIELD RD LOMBARD IL 60148	OF CHICAG	YOUTH MINISTR	Y SUPPORT	1,000
Total	T	T	3a	51,286
b Approved for future payment N/A				
Total				

	022) NOVAK FAMILY FOUNDATIO		26-0	01779	40	Page 12
Part XV-A	Analysis of Income-Producing Act	ivities				
Enter gross am	ounts unless otherwise indicated.	Unrelate	d business income	Excluded	1 by section 512, 513, or 514	(e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
1 Program se	rvice revenue:			-		
a				-		
				-		
				-		
				+		
				_		
f		-		+		
	nd contracts from government agencies			+		
	p dues and assessments			_		28
	savings and temporary cash investments					18,42
	and interest from securities ncome or (loss) from real estate:					10,12
	nanced property					
	ot-financed property					
	ncome or (loss) from personal property					
7 Other inves	s) from sales of assets other than inventory					-1,14
	e or (loss) from special events					
10 Gross profi	t or (loss) from sales of inventory					
11 Other reve	nue: a					
					1	
					:1	-
е						
-	dd columns (b), (d), and (e)			0	0	17,300
	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	<u> </u>			13	17,300
	t in line 13 instructions to verify calculations.)					
Part XV-B	Relationship of Activities to the Ac	ccomplishm	ent of Exempt F	Purpose	es	
Line No.	Explain below how each activity for which income	is reported in c	olumn (e) of Part XV	'-A contrib	uted importantly to the	accomplishment
	of the foundation's exempt purposes (other than be				structions.)	
3	PROVIDES GRANTS FOR PHIL					
4	IT IS THE INTENT TO DIST					
8	DESCRIBED IN THE FOUNDAT	ION'S B	YLAWS EACH	YEAR	•	
					×	
	1					

Form 990-PF (2022) NOVAK FAMILY FOUNDATION, INC. 26-0177940 Page
Part XVI Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt

		O	rganizatio	ns											
1	Did the	organiz	zation directly	v or indi	rectly enga	ge in any o	of the follo	owing with	any other org	ganizati	ion described			Yes	No
									27, relating to						
				11 000110	11 00 1 (0)(0)	organizati	01107 01 11		.,						
	_	zations?													
a	Transfe	ers from	the reporting	g founda	ation to a n	oncharitab	le exemp	t organizat	ion of:						
	(1) Ca	sh							E E E E E E E E E E E E E E E E E E E				1a(1)		_X_
	(2) Oth	her asse	ets										1a(2)		X
b	Other t														
	m. a		ssets to a no	ncharita	hle evemn	t organizat	rion						1b(1)		X
						-									X
	(2) Pu	rcnases	or assets tro	om a no	ncharitable	e exempt o	rganizatio	on					1b(2)		
	(3) Re	ental of f	acilities, equ	ipment,	or other as	sets							1b(3)		X
	(4) Re	imburse	ement arrang	ements									1b(4)		X
	(5) Loa	ans or lo	oan guarante	es									1b(5)		X
	(6) Pe	rforman	ce of service	es or me				ations					16/6)		X
			ilities, equipn										10		X
		-			_						alment about the				
a											always show the				
	value o	of the go	oods, other a	ssets, o	r services	given by th	e reportir	ng foundati	on. If the four	ndation	received less th	ian fair mark	cet		
	value ii	n any tra	ansaction or	sharing	arrangeme	ent, show i	n column	(d) the va	ue of the goo	ods, oth	ner assets, or sei	rvices receiv	ved.		
((a) Line no	D.	(b) Amount inv	olved	(c) Nar	me of nonchar	itable exemp	ot organization		(d) D	escription of transfers	, transactions, a	and sharing arrangeme	ents	
1/2	A														
		-													
		-													
															7
	1- 11- 1					1 20					- t				
Za					-				re tax-exemp	t organ	nizations			77	7
			ection 501(c)			n 501(c)(3)) or in se	ection 527?					Y	es X	. No
b	If "Yes	," comp	lete the follow	wing sch	nedule.										
		(a) N	Name of organiza	ition		(b) Type of o	rganization			(c) Desc	cription of relation	onship		
1	N/A														
	-														
-													Number 11 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
						-									
						-									
											ents, and to the best is any knowledge.	of my knowled	ge and belief, it is tru	e,	
	1 001	reot, and	complete, Decla	ration of p	reparer (other	пап ахраус	oi / is based	on an intorma	don or writer pre	harer 11g	any knowledge.	Ma	y the IRS discuss this	eturn	
Sign	n											wit	h the preparer shown b		_
-ler	1											Se	e instructions.	Yes	No
161	6							1			DDEGIDEN	·			
											PRESIDEN	A.T.			
	Sig	nature of	officer or trustee					Da	te	Ti	tle				
	F	Print/Type	preparer's name					Preparer's	signature				Date	Check	i#
									0					1000	nployed
Paid	P	TT.T. N	4. BIKOS	CP	Δ								07/03/23	1	.,,
rep	arer					COCTA	TEC /	מ גמי	7			T	P0010		1
Jse	Only	Firm's nam			& AS							PTIN			
-		Firm's add			86TH							Firm's EIN			
			M	ERR]	LLVII	LE, I	N 4	6410-	5663			Phone no			
													Form 90	O-PF	(2022)

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Č			How				
	Description		Keceived				
Whom Sold	Date Acquired	Date Sold	Sale Price	Cost	Expense	Depreciation	Net Gain / Loss
28.335 CALAMOS MKT NEUTRAL INCOME FU	EUTRAL INCOM	IE FU	PURCHASE	2			
	1	10/17/22 \$	384 \$	393 \$		₩.	8-
1828.822 CALAMOS MKT NEUTRAL INCOME	NEUTRAL INC	OME	PURCHASE				
5/20/22 10/17/ 62.036 GUGGENHEIM LIMITED DURATION F	5/20/22 10/17/22 MITED DURATION F	0/17/22 ON F	24,781 PURCHASE	25,000			-219
		5/20/22	1,495	1,557			-62
3222.908 GUGGENHEIM LIMITED DURATION	IMITED DURA	NOIL	PURCHASE				
5/25/21 5/20/ 107.775 MSIF GLOBAL OPPORTUNITY PORT	5/25/21 5/20/22 DPPORTUNITY PORT	5/20/22 Port	77,640 PITRCHASE	82,023			-4,383
		5/20/22	2,835	4,481			-1.646
285.321 PIMCO INCOME FUND CL 12 N/L	FUND CL 12	N/L	PURCHASE				
	1(10/17/22	3,938	4,321			-383
2495.010 PUTNAM ULTRA SHORT DURATION	A SHORT DURA	NOIL	PURCHASE				
	5/20/22 5/31/22	5/31/22	25,000	25,000			
30.751 PUTNAM ULTRA SHORT DURATION	SHORT DURATI	NO	PURCHASE				
	1(10/17/22	307	307			
4391.218 PUTNAM ULTRA SHORT DURATION	A SHORT DURA	TION	PURCHASE				
	5/20/22 10/17/22	0/17/22	43,824	44,000			-176
97.048 THORNBURG STRA	STRATEGIC INCOME FU	E FU	PURCHASE				
	10	10/17/22	1,058	1,087			-29
7355.517 THORNBURG STRATEGIC INCOME	RATEGIC INC	OME	PURCHASE				
	5/20/22 10/17/22)/17/22	80,175	84,000			-3,825
20.350 CALAMOS MKT NEUTRAL INCOME FU	UTRAL INCOM	E FU	PURCHASE				
~ 1)T	10/17/22	276	290			-14
5704.225 CALAMOS MKT NEUTRAL INCOME	NEUTRAL INCOME	OME	PURCHASE	0			1
LIOT IN CONTRACT OF THE CONTRA	NCOME TRIPLE	7/ 1/ / 22 CT 1	17, 232 ED KITO CITIC	8T,000			-3,708
1 1100 8 10000 1000 0000	THEORY TO THE PROPERTY OF THE	5/20/22	10 070	700 01			-
4828.696 DODGE & COX INCOME FUND CT,	INCOME FUND	CT,	DIRCHAGE	12,02/			/ СТ , Т -
	5/21/19 5	5/20/22	61.807	056 250			-4 443
44.426 MSIF GLOBAL OPPORTUNITY PORTF	PORTUNITY P	ORTF	PURCHASE				7 - 1 - 1 - 1
	(J	5/20/22	1,168	1,732			-564
1231.689 MSIF GLOBAL OPPORTUNITY POR	OPPORTUNITY	POR	PURCHASE				
	3/02/18 5	5/20/22	32,393	30,272			2,121

NOVA7940 NOVAK FAMILY FOUNDATION, INC. 26-0177940

Federal Statements

FYE: 12/31/2022

Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets (continued)

De	Description		How Received					
Whom Sold	Date Acquired	Date Sold	Sale Price	Cost	Expense	Depreciation	Net Gain / Loss	SSO
856.599 MSIF GLOBAL OPPORTUNITY PORT	OPPORTUNITY	FORT 6	PURCHASE	\$ 000 20		· ·	€	-4.472
2387.511 PIMCO INCOME FUND CL 12 N/L	FUND CL 1		PURCHASE) -		1
	5/21/19	5/20/22	26,000	28,070			ı	-2,070
1473.477 PIMCO INCOME	FUND CL 1	.2 N/L	PURCHASE					
	5/21/19	10/14/22	15,000	17,324			1	-2,324
1319.571 PIMCO INCOME	FUND CL 1	.2 N/L	PURCHASE					
		10/17/22	13,486	15,340			1	-1,854
4207.772 PIMCO INCOME	FUND CL 1	.2 N/L	PURCHASE					
5/21/19 10/17/22	5/21/19	10/17/22	43,003	49,472			1	-6,469
166.514 T. ROWE PRICE BLUE CHIP GROW	3 BLUE CHIP	GROW	PURCHASE					
	5/21/19 5/20/22	5/20/22	20,000	18,826				1,174
40.258 VANGUARD WELLESLEY INCOME FUN	SSLEY INCOM	IE FUN	PURCHASE					
	11/05/13	11/15/22	2,500	2,468				32
159.008 VANGUARD WELLESLEY INCOME FU	LESLEY INCO	ME FU	PURCHASE					
	11/05/13 11/28/22	11/28/22	10,000	9,750				250
148.201 DODGE & COX INCOME FUND CL 1	INCOME FUND) CL 1	PURCHASE					
		5/20/22	1,897	2,068				-171
TOTAL		₩	\$ 759,685	634,058 \$	0	0	\$ -3	-34,401
		II						

Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees

Charitable Purpose	\$ 3,435
Adjusted Net	w w
Net Investment	\$ \$
Total	\$ 3,435
Description	ACCOUNTING FEE TOTAL

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NOVA7940 NOVAK FAMILY FOUNDATION, INC.

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Charitable Purpose	\$ 1,274
Adjusted Net	w w
Net Investment	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Total	\$ 1,274
Description	TAXES TOTAL

Statement 4 - Form 990-PF, Part I, Line 23 - Other Expenses

Charitable Purpose	₹O÷		6,102	63	\$ 6,165
Adjusted Net	₩				w w
Net Investment					0
L	₩				₩.
Total			6,102	63	6,165
	₩				w.
Description		EXPENSES	INVESTMENT FEES	WEBSITE FEE	TOTAL

Statement 5 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments

Fair Market Value	\$ 125,073 44,213 74,909 106,734 68,358 237,093 57,707 78,964	\$ 793,051
Basis of Valuation	COST	
End of Year	848,727	848,727
ļ	₩.	w.
Beginning of Year	1,176,115	1,176,115
ļ	₩.	₩.
Description	SECURITIES HELD IN RAYMOND JAMES A/C 4351.859 AMERICAN BALANCED FUND 1063.826 FEDERATED HERMES KAUFMAN 1168.082 FIDELITY ADVISOR HEALTH 2274.815 PARNASSUS CORE EQUITY 660.401 T. ROWE PRICE BLUE CHIP 4002.238 VANGUARD WELLESLEY INCOME 1435.859 VIRTUS ZEVENBERGEN TECH FUN 1834.670 NEUBERGER BERMAN LARGE CAP	TOTAL

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NOVA7940 NOVAK FAMILY FOUNDATION, INC. Federal Stat

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Statement 6 - Form 990-PF, Part VII, Line 1 - List of Officers, Directors, Trustees, Etc.	Name and Average Average Compensation Benefits Expenses	IETIS PRESIDENT 0.70 0 0 0 PLACE 46307 46307 0 0 0	TA SECRETARY 0.15 0 0 0 0 0 0 VE VE 1 46307	PLACE 0 0.15 0 0 0 0 0 0 146307	T. 146307	OTERES DIRECTOR 0.15 0 0 0 0 0
Statement 6 - Fo	Name and Address	WILLIAM LOGOTHETIS 5246 E. 107TH PLACE CROWN POINT IN 46307	MICHAEL J. BERTA 59 LEVANNO DRIVE CROWN POINT IN 46307	JOHN PANGERE 5898 E. 106TH PLACE CROWN POINT IN 46307	JOANN MASSOW 1722 W. 93RD CT. CROWN POINT IN 46307	FR. THEODORE POTERES 1234 KNIGHTHOOD DRIVE

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NOVA7940 NOVAK FAMILY FOUNDATION, INC. 26-0177940 Federal Statements

FYE: 12/31/2022

Statement 7 - Form 990-PF, Part VIII-A, Line 1 - Summary of Direct Charitable Activities

Description

SS CONSTANTINE & HELEN GREEK ORTHODOX CATHEDRAL BUILDING FUND, 5K RUN/WALK, HARVEST FOR THE HUNGRY/KIDS 4
KIDS, SCHOLARSHIPS, GOYA, FOOD PANTRY, COMPUTER UPGRADE,
FALL FEST SPONSOR, & GREEK SCHOOL APPEAL

FORM 990-PF

Employer identification number

Underpayment of Estimated Tax by Corporations

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

Name

Attach to the corporation's tax return. Go to www.irs.gov/Form2220 for instructions and the latest information.

	NOVAK FAMILY FOUNDATION, II	NC.			26-01//	940
Note	: Generally, the corporation is not required to file Form 22:	20 (se	e Part II below for exce	ptions) because the IF	S will figure any per	nalty
	and bill the corporation. However, the corporation may st		_		he amount from pag	e 2, line
38, o	n the estimated tax penalty line of the corporation's incom	e tax r	eturn, but do not attac	h Form 2220.		
Pa	rt I Required Annual Payment					
	· · · · · · · · · · · · · · · · · · ·					
1	Total tax (see instructions)				1	719
	Personal holding company tax (Schedule PH (Form 1120			2a		
	Look-back interest included on line 1 under section 460(l					
-	contracts or section 167(g) for depreciation under the inc			2b		
c			sicoust motilod	2c		
	Total. Add lines 2a through 2c			20	2d	
3	Subtract line 2d from line 1. If the result is less than \$500	do n	ot complete or file this	form. The corporation		
5	does not owe the penalty), uo i	ot complete of file tills	Tom. The corporation	3	719
4	Enter the tax shown on the corporation's 2021 income tax return		and a store Courtism If the			7 ± 3
-					4	1,254
5	the tax year was for less than 12 months, skip this line and enter Required annual payment. Enter the smaller of line 3 of					1,237
3	the amount from line 3	or line	4. If the corporation is i	required to skip line 4,		719
D.	rt II Reasons for Filing—Check the boxe	00 ho	low that apply If a	ny hoves are che	ked the corner	
ГС	Form 2220 even if it does not owe a				ked, the corpor	ation must me
				15.		
6 7	The corporation is using the adjusted seasonal insta The corporation is using the annualized income insta					
	Annual Control of the			l an tha naise consula tacc		
8	The corporation is a "large corporation" figuring its firm Figuring the Underpayment	st requ	uired installment based	on the prior years tax		
•	riguring the onderpayment				A CONTRACTOR OF THE PROPERTY O	
			(2)	(b)	(c)	(d)
9	Later than the state of the sta		(a)	(b)	(0)	(u)
9	Installment due dates. Enter in columns (a) through (d) the 15th day					
	of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th	9	05/15/22	06/15/22	09/15/22	12/15/22
10	months of the corporation's tax year.	9	03/13/22	00/13/22	09/13/22	12/13/22
10	Required installments. If the box on line 6 and/or line 7 above is					1
	checked, enter the amounts from Schedule A, line 38. If the box on		€			
	line 8 (but not 6 or 7) is checked, see instructions for the amounts to					
	enter. If none of these boxes are checked, enter 25% (0.25) of line 5	40	180	180	18	0 179
11	above in each column	10	100	100	10	1/3
11	Estimated tax paid or credited for each period. For column (a) only,	44				
	enter the amount from line 11 on line 15. See instructions	11				
	Complete lines 12 through 18 of one column before going to the next column.					
42		40				
12	Enter amount, if any, from line 18 of the preceding column	12				
13	Add lines 11 and 12	13		100	26	546
14	Add amounts on lines 16 and 17 of the preceding column	14	0	180	36	
15	Subtract line 14 from line 13. If zero or less, enter -0-	15	0	0		0 0
16	If the amount on line 15 is zero, subtract line 13 from line 14.			100	2.6	
4=	Otherwise, enter -0-	16		180	36	
17	Underpayment. If line 15 is less than or equal to line 10, subtract line					
	15 from line 10. Then go to line 12 of the next column. Otherwise, go		100	100		
	to line 18	17	180	180	18	0 179
18	Overpayment. If line 10 is less than line 15, subtract line 10 from line					
0	15. Then go to line 12 of the next column	18	////			
GO t	Part IV on page 2 to figure the penalty. Do not go to	Part I\	। । there are no entrie	es on line 17—no pen	aity is owed.	

*****	Part IV Figuring the Penalty							
-			(a)	(b)	(c)	(d)	
19	Enter the date of payment or the 15th day of the 4th month after							
	the close of the tax year, whichever is earlier. (C corporations with							
	tax years ending June 30 and S corporations: Use 3rd month							
	instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th							
	month instead of 4th month.) See instructions	19	SEE	WORKSHE	EET			
20	Number of days from due date of installment on line 9 to the date	20						
	shown on line 19	20						
21	Number of days on line 20 after 4/15/2022 and before 7/1/2022	21						
	Number of days on line 21							
22	Underpayment on line 17 x 365 x 4% (0.04)	22	\$		\$	\$	\$	
23	Number of days on line 20 after 6/30/2022 and before 10/1/2022	23		The gallet			V 4 - 29 X 8	
regions	Number of days on line 23		-					
24	Underpayment on line 17 x 365 x 5% (0.05)	24	\$		\$	\$	\$	
25	Number of days on line 20 after 9/30/2022 and before 1/1/2023	25						
26	Number of days on line 25 Underpayment on line 17 x 365 x 6% (0.06)	26	\$		 	\$	\$	
27	Number of days on line 20 after 12/31/2022 and before 4/1/2023	27						
28	Number of days on line 27 Underpayment on line 17 x 365 x 7% (0.07)	28	\$		\$	\$	\$	
29	Number of days on line 20 after 3/31/2023 and before 7/1/2023	29	-					
30	Number of days on line 29 Underpayment on line 17 x 365 x *%	30	\$		\$	\$	\$	
50	Onderpayment on line 17 x 355 x 76	30	Φ		φ	Ψ	Ψ	
31	Number of days on line 20 after 6/30/2023 and before 10/1/2023	31					,	
20	Number of days on line 31							
32	Underpayment on line 17 x 365 x *%	32	\$		\$	\$	\$	
33	Number of days on line 20 after 9/30/2023 and before 1/1/2024	33						
24	Number of days on line 33	24	0		0	C		
34	Underpayment on line 17 x 365 x *%	34	\$		\$	\$	\$	
35	Number of days on line 20 after 12/31/2023 and before 3/16/2024	35				·	4	
36	Number of days on line 35 Underpayment on line 17 x 366 x *%	36	\$		\$	\$	\$	
-	Sinds payment of fine 17 x 300 x %	30	, , , , , , , , , , , , , , , , , , ,		Ψ	Ψ	Ψ	
37	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$		\$	\$	\$	
38	Penalty. Add columns (a) through (d) of line 37. Enter line for other income tay returns	the to	tal here ar	nd on Form 112	20, line 34; or the com	parable	2.4	

*Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at **www.irs.gov.** You can also call 1-800-829-4933 to get interest rate information.

Form **2220** (2022)

Form 2220 Worksheet Form **2220** 2022 For calendar year 2022, or tax year beginning and ending Name Employer Identification Number NOVAK FAMILY FOUNDATION, INC. 26-0177940 1st Quarter 2nd Quarter 3rd Quarter 4th Quarter Due date of estimated payment 05/15/22 06/15/22 09/15/22 12/15/22 Amount of underpayment 180 180 180 179 Prior year overpayment applied 1st Payment 2nd Payment 3rd Payment 4th Payment 5th Payment Date of payment Amount of payment

QTR	FROM	TO	UNDERPAYMENT	#DAYS	RATE	PENALTY	
1	5/15/22	6/30/22	180	46	4.00		1
1	6/30/22	9/30/22	180	92	5.00		2
1	9/30/22	12/31/22	180	92	6.00		3
1	12/31/22	5/15/23	180	135	7.00		5
2	6/15/22	6/30/22	180	15	4.00		0
2	6/30/22	9/30/22	180	92	5.00		2
2	9/30/22	12/31/22	180	92	6.00		3
2	12/31/22	5/15/23	180	135	7.00		5
3	9/15/22	9/30/22	180	15	5.00		0
3	9/30/22	12/31/22	180	92	6.00		3
3	12/31/22	5/15/23	180	135	7.00		5
4	12/15/22	12/31/22	179	16	6.00		0
4	12/31/22	5/15/23	179	135	7.00		5
	TOTAL	PENALTY				3	34
						~	

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NP-20

State Form 51062 (R12 / 8-21)

Indiana Department of Revenue Indiana Nonprofit Organization's Annual Report For the Calendar Year or Fiscal Year

	- 1		
	- 1		
	- 1		
	- 1		

Beginning	01 01	2022 and Endin	g 12 31 2022			
Place "X" in box if: Change of Address Amended Report Final Report: Indicate Date Closed						
Due on the	he 15th day of th	ne 5th month following the	end of the tax year.			
		NO FEE REQUIRED.				
Name of Organization	Telephone Number					
NOVAK FAMILY FOUNDATION	N, INC.					
Address		County	Indiana Taxpayer Identification Number			
8000 MADISON ST.	•					
City	ate	ZIP Code	Federal Employer Identification Number			
MERRILLVILLE	IN	46410	26 0177940			
Printed Name of Person to Contact		8	Contact's Telephone Number			
			219 769 2481			
Internal Revenue Code, you must also current Information 1. Indicate number of years your of the composition of the composition, by description of changes. 3. Attach a schedule, listing the nate the composition of the purpose or research.	rganization hally reported to the ylaws, or other mes, titles and	r-20NP. as been in continuous enthe Department been mainstruments of importa	ade in your governing instruments, nce? If yes, attach a detailed			
	TAHOO . COM ry that I have elete, and corre	examined this return, inc ect.	luding all attachments, and to the best of my			
Signature of Officer or Trustee		PRESIDE				
Signature of Officer or Trustee		Title	Date			
Name of Person(s) to Contact		Daytime T	elephone Number			

NOVA7940 NOVAK FAMILY FOUNDATION, INC.
26-0177940 Indiana Statements

FYE: 12/31/2022

7/3/2023 12:24 PM

Statement 1 - IN Form NP-20, Line 3 - Current Officers

Officer Name	Title		
Address	City	State	Zip Code
WILLIAM LOGOTHETIS 5246 E. 107TH PLACE MICHAEL J. BERTA	PRESIDENT CROWN POINT SECRETARY	IN	46307
59 LEVANNO DRIVE	CROWN POINT	IN	46307