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Form **990-PF**

Return of Private Foundatios or section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

		dar year 2012 or tax year beginning		, and ending		
		foundation			A Employer identification	number
C	HIC	ÇAGO BOARD OF TRADE FOU	NDATION		36-3348469	
		nd street (or P O. box number if mail is not delivered to street		Room/sulte	B Telephone number	
1	41	WEST JACKSON BOULEVARD			312 341-30	00
		own, state, and ZIP code			C if exemption application is p	ending, check here
		CAGO, IL 60604				
G C	heck	all that apply: Initial return	hd	rmer public charity	D 1. Foreign organizations	s, cneck nere
		Final return	Amended return Name change		Foreign organizations me check here and attach co	eting the 85% test,
и с	hook	Address change type of organization;			1	• • • • • • • • • • • • • • • • • • • •
\vdash		· · · · · · · · · · · · · · · · · · ·	Other taxable private founda	ition	E If private foundation sta	(A), check here
l Fa		irket value of all assets at end of year J Accounti		X Accrual	F If the foundation is in a	• •
		·	ther (specify)			(B), check here
	\$	3,728,162. (Part I, colu	mn (d) must be on cash t	basis.)		
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received			N/A	1
	2	Check # If the foundation is not required to attach Sch B				
	3	Check X If the foundation is not required to attach Sch 8 Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	92,124.	92,124.		STATEMENT 1
		Gross rents				
l	b	Net rental income or (loss)	02 522			
ě	Ва	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 92,533.	92,533.			,
Revenue	70	assets on line 6a 92, 333 •		92,533		, ,
Be .	8	Capital gain net income (from Part IV, line 2)		22,333	REAT	7 -
	9	Income modifications			- CE1	VES
	_	Gross sales less returns and allowances			MAY 20	
		Less Cost of goods sold			ACCOU.	N5
		Gross profit or (loss)			ACCOUNT MANAGE OGDEN	
	11	Other income			OGDEN	MENT
	12	Total Add lines Through 1	184,657.	184,657	•	
	13	Compensation of officers, directors, trustees, etd.	0.	0.	<u> </u>	0.
	14	Other employee salaries and wages				
g	15	i busion pians, dimprotop acidents (- ,)				<u></u>
penses	IIVE	Laparaces	13,650.	0		13,650.
ğ	ַ	Accounting fees STMT 2	13,030.			15,050.
Š	17	Interest-				
Operating and Administrative	18	Interest STMT 3	2,284.	0.		0.
ist	19	Depreciation and depletion				
Ē		Occupancy				
¥	21	Travel, conferences, and meetings				
ä	22	Printing and publications	40 045	4.6 0.60		
ing		Other expenses STMT 4	19,315.	16,362		0.
erat	24	Total operating and administrative	25 240	16 262		12 650
ŏ	25	expenses. Add lines 13 through 23	35,249. 185,750.	16,362	<u> </u>	13,650. 185,750.
		Contributions, gifts, grants paid Total expenses and disbursements.	103,730.			103,730
	- "	Add lines 24 and 25	220,999.	16,362		199,400.
	27	Subtract line 26 from line 12:				
		Excess of revenue over expenses and disbursements	-36,342.			
	1	Net investment income (if negative, enter -0-)		168,295		
	٥	Adjusted net income (if negative, enter -0-)			N/A	
2235	01	LHA For Paperwork Reduction Act Notice, see	instructions.			Form 990-PF (2012

223501 12-05-12 LHA For Paperwork Reduction Act Notice, see instructions.

6-14

223511 12-05-12

5 Decreases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Part IV Capital Gains ar	nd Losses for Tax on In	vestment	Income					
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)				(b)			Date acquired no., day, yr.)	(d) Date sold (mo., day, yr.)
1a SEE ATTACHED STATEMENT				P	VA	RIOUS	VARIOUS	
b CAPITAL GAINS D	IVIDENDS							
С				_		<u> </u>		
<u>d</u>				┝		ļ		
<u>e</u>	(A) D	(-) ()	44bbt-	<u> </u>		<u> </u>	/h) Coin on /lone	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale			(e	(h) Gain or (loss e) plus (f) minus	(9)
a 59,511.	· · · · · · · · · · · · · · · · · · ·							59,511
ь 33,022.	* * * * * * * * * * * * * * * * * * *							33,022
C								
d								
Complete only for assets showing	gain in column (h) and owned by:	the foundation	on 12/31/60			//\ Ca	ina (Cal. (h) anir	- minus
Complete only for assets snowing	(i) Adjusted basis		cess of col. (i)			col. (k)	ins (Col. (h) gair , but not less tha	ın -0-) or
(I) F.M.V. as of 12/31/69	as of 12/31/69		col. (j), if any			Ĺ	osses (from col.	(h)) ·
a								59,511
Ь					· · · · · · · · · · · · · · · · · · ·			33,022
c	· · · · · · · · · · · · · · · · · · ·							
d								
е			-					
	∫ If gain, also enter	r in Part I, line	7	٦				
2 Capital gain net income or (net capi				. J	2			92,533
3 Net short-term capital gain or (loss)) as defined in sections 1222(5) ar	nd (6):						
If gain, also enter in Part I, line 8, co								
If (loss), enter -0- in Part I, line 8.	der Section 4940(e) for	. Na di ina			3		N/A	<u>\</u>
						ICOI	ne -	
(For optional use by domestic private f	oundations subject to the section	4940(a) tax on	net investment ir	ncom	B.)			
If section 4940(d)(2) applies, leave this	; part blank.							
Was the foundation liable for the section	n 1012 tay on the distributable an	nount of any ve	ar in the bace no	riod?				Yes X No
If "Yes," the foundation does not qualify		- •	•	11001				163 £ZZJ 110
1 Enter the appropriate amount in ea				entrie	S.	-		
(a)	(b)			(c			Dietel	(d) bution ratio
Base period years Calendar year (or tax year beginning	مائد مائد الماديد المحدد المالة	tributions	Net value of no		ritable-use asse	ets	(col. (b) di	vided by col. (c))
2011	5	1,653.			,546,73		· · · · · · · · · · · · · · · · · · ·	.01456
2010	18	1,025.		3	,647,26	6.		.04963
2009	18	8,125.		3	,373,01	8.		.05577
2008		8,568.			,143,72			.05680
2007		7,685.		4	,308,65	57.		.08765
						- 1		
2 Total of line 1, column (d)						$\cdot \cdot \mid$	2	.26442
3 Average distribution ratio for the 5-								05200
the foundation has been in existence	e it less than 5 years			<i>.</i>			3	.05288
4. Enter the net value of semple-itable	was seeds for 0040 from Dark V	Uma P				ı	, l	3 646 300
4 Enter the net value of noncharitable	-use assets for 2012 from Part A,	me 5				·· ··	4	3,646,390
5 Multiply line 4 by line 3							5	192,843
5 Midiuply line 4 by line 3				******		··· }	-	192,043
6 Enter 1% of net investment income	(1% of Part I line 27h)					l	6	1,683
THO THOU BIT VOLINGIE HIVVIIIO	or are good Erty	••• ••••		•••••	•••••••••••	t	- 	
7 Add lines 5 and 6	**** *** *** *** *** ***					- 1	7	194,526
,,,,				•••••	• • • • • • • • • • • • • • • • • • • •	" " †		
8 Enter qualifying distributions from I						L	8	199,400
If line 8 is equal to or greater than li See the Part VI instructions.	ne 7, check the box in Part VI, line	1b, and comp	lete that part usir	ng a 1	% tax rate.			

			3484			age 4
	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	740 - 1	see in	stru	Cuoi	15)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	Ĭ.			1	
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					0.2
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%	_1_			1,6	83.
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				x 1	^
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			1 ~	0.
	Add lines 1 and 2	3			1,6	03.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				~~
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			1,6	83.
	Credits/Payments;	·				
	2012 estimated tax payments and 2011 overpayment credited to 2012			•		
	Exempt foreign organizations - tax withheld at source					
	Tax paid with application for extension of time to file (Form 8868) 6c	1				
d	Backup withholding erroneously withheld				_	^4
7	Total credits and payments. Add lines 6a through 6d	7				21.
8	Enter any penalty for underpayment of estimated tax. Check here L if Form 2220 is attached	8				23.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			1,1	85.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be: Credited to 2013 estimated tax ▶ Refunded ▶	11				
	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene i	n			Yes	
	any political campaign?		Į	1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for 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	d or				
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?		[1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		İ			
	(1) On the foundation. > \$ 0. (2) On foundation managers. > \$ 0.		l			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		l			
	managers. ▶ \$ 0 .					
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?	N/	A	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.		ľ			
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?		[7	X	
	If "Yes," complete Part II, col. (c), and Part XV.				l	
	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	IL					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
	of each state as required by General Instruction G? If "No," attach explanation			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 caler		Ì		[
	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV			9	l_	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		1	10	·	X

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	art VII-A Statements Regarding Activities (continued)			
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		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	10		v
12	If "Yes," attach statement (see instructions)	12	X	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW • CMEGROUP • COM	. [13]	ΙΛ.	<u> </u>
14	The books are in care of ► KATHY SCRIBA C/O CHICAGO BOT Telephone no. ► 312-	435-3	500	
17	Located at ▶ 141 WEST JACKSON BLVD., CHICAGO, IL ZIP+4 ▶			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	00001		T
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank,		-	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign			
	country			
Pε	art 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
18	During the year did the foundation (either directly or indirectly):	,	,	I
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	, <u> </u> ;		ŀ
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	'		
	a disqualified person? Yes 🛣 No			ŀ
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?) [
	(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.)	'		
t	of any answer is "Yes" to 1a(1)-(6), did any of the acts fall to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		<u> </u>
	Organizations relying on a current notice regarding disaster assistance check here	J ∥ , !		İ
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			l
_	before the first day of the tax year beginning in 2012?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012? Yes X No			
	Defore 2012? Yes LX. No	' '		
,	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		l	
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
		26		
	statement - see instructions.)	. 2b	-	├──
38	a Did the foundation hold more than a 2% direct or Indirect interest in any business enterprise at any time			
	during the year?	,		
Ł	b If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after	' ·	1	
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	1		
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2012.)	3b		
48	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
ì	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 leopardy before the first day of the tax year beginning in 2012?	4b		x

Form 990-PF (2012). CHICAGO BO OF TRADE FOR Part VII-B Statements Regarding			36-33484	59 Page 6
5a During the year did the foundation pay or incur any amount to:	Offit 4720 May be r	neu (contin	ueo)	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?		s X No	1 1
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indire	<u></u>		
any voter registration drive?		Y	s X No	
any voter registration drive?	· · · · · · · · · · · · · · · · · · ·		s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		□ Y	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or		
the prevention of cruelty to children or animals?			a X No	1 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	er the exceptions described i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see Instru			N/A 5	ib
Organizations relying on a current notice regarding disaster assistance check h	ere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it maintai	ned	. —	
expenditure responsibility for the grant?	N	/A Y	es I No	1 1
If "Yes," attach the statement required by Regulations section 53.4945				1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p				
			s X No	1 1
a personal benefit contract?	ersonal benefit contract?			в X
If "Yes" to 6b, file Form 8870.			· · · · · · · · · · · · · · · · · · ·	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?		es X No	
b if "Yes," did the foundation receive any proceeds or have any net income attribu				'b
Part VIII Information About Officers, Directors, Trusto	es. Foundation Ma	nagers, Highl	v	
Part VIII Paid Employees, and Contractors	•			
1 List all officers, directors, trustees, foundation managers and their				
r Mome and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deterred	(e) Expense account, other
(a) Name and address	to position	enter -0-)	and deterred compensation	allowances
		ļ		
SEE STATEMENT 8		0.	0.	0.
	TI.			
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	devoted to position	(o) componedation	and deterred compensation	allowances
NONE			1	
		1		
		I		

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Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	lation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, en		
(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		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant sta number of organizations and other beneficiaries served, conferences convened, research papers pr	tistical information such as the roduced, etc.	Expenses
1 N/A		
2		
The state of the s		
3		
		·
4		
- Indiana - Allinon - Alli		
Part IX-B Summary of Program-Related Investments		
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		
6		
All other program-related investments. See instructions.		
3		

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	I	
8	Average monthly fair market value of securities	1a	3,583,048.
	Average of monthly cash balances	1b	118,871.
		1c	
đ		1d	3,701,919.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,701,919.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	55,529.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,646,390.
6	Minimum Investment return. Enter 5% of line 5	6	182,320.
Б	pistributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certain	•
	foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	182,320.
2a	Tax on investment income for 2012 from Part VI, line 5	, ,	
b	Income tax for 2012. (This does not include the tax from Part Vi.) 2b		
C	Add lines 2a and 2b	2c	1,683.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,683. 180,637.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	180,637.
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	180,637.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	199,400.
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:		
8	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	199,400.
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	1,683.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	197,717.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies for	the section

Part XIII	Undistributed	Income	(see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d)
Distributable amount for 2012 from Part XI.	Corpus	rears prior to 2011	2011	2012
line 7				180,637.
2 Undistributed income, if any, as of the end of 2012.				100,037.
a Enter amount for 2011 only			0.	
b Total for prior years:			,	· · · · · · · · · · · · · · · · · · ·
,		0.		
3 Excess distributions carryover, if any, to 2012:				
aFrom 2007 376,034.				
bFrom 2008 178,568.				
cFrom 2009 188,125.				; · ·
dFrom 2010 181,025.				, , ,
eFrom 2011 51,653.	0.05 4.05			
f Total of lines 3a through e	975,405.			
4 Qualifying distributions for 2012 from	1]		
Part XII, line 4: ►\$ 199,400.			۱	
a Applied to 2011, but not more than line 2a			0.	
b Applied to undistributed income of prior		0.	1 1	
years (Election required - see instructions) C Treated as distributions out of corpus		U•	1	
(Election required - see instructions)	199,400.			·
d Applied to 2012 distributable amount	100,400.			0.
e Remaining amount distributed out of corpus	0.			0.
5 Excess distributions carryover applied to 2012	180,637.			180,637.
(If an amount appears in column (d), the same amount must be shown in column (a).)				100,037.
6 Enter the net total of each column as indicated below:				*1
& Corpus Add lines 3f, 4c, and 4e. Subtract line 5	994,168.			
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		0.	,	11,
assessed		V•		
amount - see instructions		0.		
e Undistributed income for 2011. Subtract line		0.		······
4a from line 2a, Taxable amount - see instr.			0.	
f Undistributed Income for 2012, Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2013				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007	405 005			
not applied on line 5 or line 7	195,397.			
9 Excess distributions carryover to 2013.	700 771			
Subtract lines 7 and 8 from line 6a 10 Analysis of line 9:	798,771.			
*Excess from 2008. 178,568.	,			•
b Excess from 2009 188,125.			j	•
e Excess from 2010 181,025.			į	
d Excess from 2011 51,653.			ļ	
e Excess from 2012 199,400.			j	•
	** SEE STATEM	ENT 9		Form 990-PF (2012)

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	BC D OF 1				48469 Page 10
Part XIV Private Operating F			l-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for					
b Check box to indicate whether the found		ng foundation described i		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	4:1004	Prior 3 years	1150000	
income from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(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					1
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			· · · · · · · · · · · · · · · · · · ·		
(1) Total support other than gross					
Investment Income (interest,					
dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)		<u> </u>			
(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			<u> </u>		
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5 000 or m	ore in accete
at any time during t			ii tile loulluatioi	1 11au 40,000 or 111	Ole III assets
1 Information Regarding Foundatio					
a List any managers of the foundation who		than 2% of the total cont	ributions received by the	s foundation before the clo	se of any tay
year (but only if they have contributed m	ore than \$5,000). (See s	ection 507(d)(2).)	inductions recoived by the		30 OI BITY BX
NONE					
b List any managers of the foundation who	o own 10% or more of th	e stock of a corporation	or an equally large port	on of the ownership of a p	artnership or
other entity) of which the foundation has	a 10% or greater intere:	st.	. ,		
NONE					
2 Information Regarding Contributi					
Check here ► L If the foundation o	nly makes contributions	to preselected charitable	organizations and does	not accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc. (omplete items 2a, b, c, and	d d
a The name, address, and telephone number	per or e-mail of the perso	n to whom applications s	should be addressed:		
ELLEN PAPARELLI					
141 W. JACKSON BLVD.				·····	
b The form in which applications should b WRITTEN REQUESTS FOR		tion and materials they st	ould include:		
c Any submission deadlines:	<u> </u>				
NONE					
d Any restrictions or limitations on awards	, such as by geographica	ıl areas, charitable fields.	kinds of institutions, or	other factors:	
NONE	· · · · · · · · · · · · · · · · · ·		, .	-	
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3 Grants and Contributions Paid During the	If recipient is an individual	rayment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
SEE ATTACHED STATEMENT				
				185,750.
Total			▶ 3a	185,750.
b Approved for future payment				
NONE				
NONE				
		;		
				•
				•
Total			> 3b	0.

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
	(a) '	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion code	Amount	function income
g					·····
h			 		
D			├		
			-		
d			 		
e			ļ		
					· · · · · · · · · · · · · · · · · · ·
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	92,124.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property			1		······
b Not debt-financed property			<u> </u>		
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory	1		18	92,533.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
C			 		·
A		****		I	
6	——		t		
12 Subtotal. Add columns (b), (d), and (e)		0.	†	184,657.	0.
13 Total. Add line 12, columns (b), (d), and (e)					
(See worksheet in line 13 instructions to verify calculations.)			• •		
	- 4b- A	omplishment of E		4 Duranana	
Part XVI-B Relationship of Activities to	o tile Acc	ombusimient of Ex	Kemp	n rurposes	
Line No. Explain below how each activity for which incom	ne is reported	in column (e) of Part XVI-A	contril	outed importantly to the accom	plishment of
the foundation's exempt purposes (other than t	by providing fu	inds for such purposes).		•	
	, <u>.</u>	······································			
					· · · · · · · · · · · · · · · · · · ·
		 			······································
		·····			···· <u>-</u> ·····
		······································		· · · · · · · · · · · · · · · · · · ·	
	· <u> </u>				
					
	····				
		· · · · · · · · · · · · · · · · · · ·			

223621 12-05-12					Form 990-PF (2012)

Form 99					DE FOUNDATIO		36-3348			ige 13
Part :	XVII	Information Re Exempt Organ		sfers To a	and Transactions a	and Relations	ships With Noncha	ritabl	е	
1 Dio	the or			of the followin	g with any other organization	on described in sec	tion 501(c) of	1	Yes	No
					7, relating to political organ		• •			
		from the reporting found								ł
								1a(1)		x
(2)	Other	assets		•• • •		•• •••••		1a(2)	******	X
b Oth	er tran:	sactions:						1.5(2)		
		· · · · · · ·	nble exempt organiza	ition				16(1)		х
(2)	Purch	ases of assets from a no	ncharitable exempt	organization				1b(2)	 	X
(3)	Renta	l of facilities, equipment,						1b(3)	_	X
(4)								1b(4)	1	X
	Loans	or loan quarantees		• • • • • • • • • • • • • • • • • • • •						X
(6)	Perfo	rmance of services or me	emhershin or fundrai	ising solicitatio				1b(6)		X
e Sh	erina of	facilities equinment ma	siling lists other asse	ate or naid am	ployees			10(0)		X
									l	
							n or sharing arrangement, s		οτω,	
) the value of the goods,			ou 1033 diam lair market vast	ic in any mansacho	is or snaring arrangement, s	IOW III		
(a)Line n		(b) Amount involved			exempt organization	(d) Description	on of transfers, transactions, and s	shadno ar	7800ema	ents
<u>``</u>	\dashv		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	N/A		(-/				
	+		 	41/44						
	+									
	-		 							
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		····.					· · · · · · · · · · · · · · · · · · ·	·		
	+		 							
2a ist	he four	dation directly or indirec	tly affiliated with or	related to one	or more tax-exempt organi	rations described				
					tion 527?		Г	☐ Yes	ſΨ] No
		mplete the following sch		1/(0/) 01 111 3001					L68	110
	00, 00	(a) Name of org			(b) Type of organization	T	(c) Description of relations!	aio.		
		N/A	****		(0) () (0)		(b) b configuration	···Þ		
				 	· · · · · · · · · · · · · · · · · · ·	 				
										
•	*******			····			···· · · · · · · · · · · · · · · · · ·			
				· · · · · · · · · · · · · · · · · · ·						
	Under	penalties of perjury, I declare	that I have examined th	ils return, includir	g accompanying schedules and	statements, and to the	best of my knowledge			
Sign	and be	lief, it is true, correct, and cor			n taxpayer) is based on all inform	nation of which prepare	retu	the IHS	e prepar	er
Here			Cilla		15/15/201	5 CHAI	RMAN 📆	wn below Yes	(600 1/13	No
	Sign	ature of officer or trustee	9		Date	Title		100		10
		Print/Type preparer's na	ame	Preparer's s	Ignature	Date	Check if PTIN			
				DIM	2-	10/1	self- employed			
Paid		DAVID M. K	TOT	1 00 m	いた!	19/11/13		L3 4 0	917	
Prepa		Firm's name ► WOL	F & COMPA	NY LLP		·	Firm's EIN ► 36-29			
lica ()nlv								_	

(630)545-4500 Form **990-PF** (2012)

Firm's address ▶ 1901 S. MEYERS RD, SUITE 500 OAKBROOK TERRACE, IL 60181-5209

Phone no.

FORM 990-PF DIVIDENT	DS AND	INTER	EST F	ROM	SECUE	RITIES	STATEMENT	1
SOURCE		GROSS	AMOU	INT		TAL GAINS	COLUMN (A)
DIVIDENDS	•		125,1	.46.		33,022.	92,1	24.
TOTAL TO FM 990-PF, PART I, I	LN 4		125,1	.46.		33,022.	92,1	24.
FORM 990-PF	AC	COUNTI	NG FE	EES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS		(B) INVE		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES	1	3,650.			0.		13,6	50.
TO FORM 990-PF, PG 1, LN 16B	1	3,650.	•		0.		13,650	
FORM 990-PF		TAX	ES				STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS		(B) INVE		(C) ADJUSTED NET INCOM		
INCOME TAXES		2,284.	-		0.			0.
TO FORM 990-PF, PG 1, LN 18		2,284.			0.			0.
FORM 990-PF	0	THER E	XPENS	SES	-		STATEMENT	4
DESCRIPTION	EXPE	A) NSES BOOKS		(B) INVE		(C) ADJUSTED NET INCOM		
BANK ADMIN FEES OUTSIDE SERVICES INSURANCE COMMITTEE LUNCHEONS		6,362. 130. 2,798. 25.		16,	362. 0. 0.			0. 0. 0.
TO FORM 990-PF, PG 1, LN 23	1	9,315.		16,	362.			0.
			====					

FORM 990-PF	OTHER INCREASES	IN NET ASSET	rs or	FUND	BALANCES	STATEMENT	5	
DESCRIPTION						AMOUNT		
UNREALIZED GAI	N ON MARKETABLE	SECURITIES				258,4	99.	
TOTAL TO FORM	990-PF, PART III	, LINE 3				258,4	99.	
FORM 990-PF		CORPORATE	STOCE	ζ		STATEMENT	6	
DESCRIPTION				1	BOOK VALUE	FAIR MARKE	T	
COMMON STOCK -	SEE ATTACHED ST	MT			2,213,259.	59. 2,213,25		
TOTAL TO FORM	990-PF, PART II,	LINE 10B			2,213,259.	2,213,2	59.	
FORM 990-PF		CORPORATE	BONDS	3		STATEMENT	7	
DESCRIPTION				1	BOOK VALUE	FAIR MARKE	T	
CORPORATE BOND	S - SEE ATTACHED	STMT			1,346,413.	1,346,4	13.	
TOTAL TO FORM	990-PF, PART II,	LINE 10C			1,346,413.	1,346,4	13.	

	LIST OF OFFICERS, D		STAT	EMENT 8
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
CHARLES P. CAREY 141 W. JACKSON BLVD CHICAGO, IL 60604	CHAIRMAN 0.75	0.	0.	0.
ROBERT CORVINO 141 W. JACKSON BLVD CHICAGO, IL 60604	VICE-CHAIRMAN 0.75	0.	0.	0.
DAVID BRENNAN 141 W. JACKSON BLVD CHICAGO, IL 60604	DIRECTOR 0.75	0.	0.	0.
MICHAEL DALEY 141 W. JACKSON BLVD CHICAGO, IL 60604	DIRECTOR 0.75	0.	0.	0.
JILL A. HARLEY 141 W. JACKSON BLVD CHICAGO, IL 60604	TREASURER 0.75	0.	0.	0.
ELLEN PAPARELLI 141 W. JACKSON BLVD CHICAGO, IL 60604	ADMINISTRATOR 0.75	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PA	AGE 6, PART VIII	0.	0.	0.

FORM 990-PF

ELECTION UNDER REGULATIONS SECTION
53.4942(A)-3(D)(2) TO TREAT
EXCESS QUALIFYING DISTRIBUTIONS
AS DISTRIBUTIONS OUT OF CORPUS

STATEMENT

9

CHICAGO BOARD OF TRADE FOUNDATION HEREBY ELECTS TO TREAT AS A CURRENT DISTRIBUTION OUT OF CORPUS AMOUNTS DISTRIBUTED IN PRIOR YEARS WHICH WERE TREATED AS DISTRIBUTIONS OUT OF CORPUS BUT WERE NOT AVAILED OF FOR ANY OTHER PURPOSE PURSUANT TO REGULATION SECTION 53.4942(A)-3(C)(2)(IV) AND TO DESIGNATE QUALIFYNG DISTRIBUTIONS FOR 2010 AS BEING MADE OUT OF CORPUS PURSUANT TO REGULATION SECTION 53.4942(A)-3(D)(2).

Form 886	8 (Rev. 1-2013)					Page 2	
	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II and check this	box		. X	
	ly complete Part II if you have already been granted an a						
	are filing for an Automatic 3-Month Extension, comple						
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no co	pies neede	<u>d).</u>	
			Enter filer's	identifyin	g number, se	e instructions	
Type or	Name of exempt organization or other filer, see instru	Employer	Employer Identification number (EIN)				
print			0.5 0.04.04.50				
File by the	CHICAGO BOARD OF TRADE FOUNT		······································	36-3348469			
due date for filing your return See	Number, street, and room or suite no. If a P.O. box, s 141 WEST JACKSON BOULEVARD	Social security number (SSN)					
City, town or post office, state, and ZIP code. For a foreign address, see instructions. CHICAGO, IL 60604							
Enter the	Return code for the return that this application is for (file	e e senara	te application for each return)			0 4	
						- I Datum	
Applicati	on	Return	1 ''			Return	
Is For		Code	Is For			Code	
	or Form 990-EZ	01	Form 1041 A	·		08	
Form 990		02	Form 1041-A Form 4720			09	
Form 990	20 (Individual)	03	Form 5227			10	
	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069				
	O-T (trust other than above)	06	Form 8870				
***************************************	o not complete Part II if you were not already granted		<u> </u>	iously file	ed Form 8868.	12	
<u> </u>	KATHY SCRIBA C						
• The b	ooks are in the care of > 141 WEST JACKS			60604			
	none No. ► 312-435-3500		FAX No. ▶	·· · · · · · · ·	····		
•	organization does not have an office or place of busines	s in the U					
	is for a Group Return, enter the organization's four digit					oup, check this	
box 🕨	. If it is for part of the group, check this box						
4 re			BER 15, 2013.				
5 For	r calendar year 2012 , or other tax year beginning		, and endin	g		<u> </u>	
	he tax year entered in line 5 is for less than 12 months, o		son: Initial return	Final r	etum		
	Change in accounting period						
	ate in detail why you need the extension						
	AXPAYER IS REQUESTIING ADDIT	IONAL	TIME IN ORDER TO	FILE	A COMPL	ETE AND	
<u>A</u> (CCURATE RETURN.						
8a If t	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any				
no	nrefundable credits. See instructions.			8a	\$	521.	
	his application is for Form 990-PF, 990-T, 4720, or 6069,	-			1		
	payments made. Include any prior year overpayment al	lowed as	a credit and any amount paid			501	
	eviously with Form 8868.			8b	\$	521.	
	lance due. Subtract line 8b from line 8a. Include your pa	-	th this form, if required, by using			0	
EF	TPS (Electronic Federal Tax Payment System). See instr		ah baran da da Barbart	8c	\$	0.	
Under per	Signature and verificat lalties of perjury, I declare that I have examined this form, include correct, and complete, and that I am authorized to prepare this fo	ding accomp	st be completed for Part II of panying schedules and statements, and to		f my knowledge	and belief,	
		V: 1114			_		
Signature	► Title ►			Date			
					Form 88 6	68 (Rev. 1-2013)	

Form 2848

Power of Attorney

OMB No 1545-0150

For IRS Use Only

and Declaration of Representative (Rev July 201 Department of the Treasury Internal Revenue Service ► Information about Form 2848 and its Instructions is at www.irs.gov/form2848. Part A Power of Attorney Telephone Caution: A separate Form 2848 should be completed for each texpayer. Form 2848 will not be honored for Function any purpose other than representation before the IRS Taxpayer Information. Taxpayer must sign and date this form on page 2, line 7. Date Taxpayer identification number(s) Taxpayer name and address CHICAGO BOARD OF TRADE FOUNDATION 36-3348469 141 W JACKSON BLVD, #1801 Plan number (if applicable) Daytime telephone number CHICAGO, IL 60604 (312) 341-3000 hereby appoints the following representative(s) as attorney(s)-in-fact: 2 Representative(s) must sign and date this form on page 2, Part II. Name and address CAF No 4005-15472 PATRICK J. RUBEY PTIN P00544035 309 W WASHINGTON STREET #850 Telephone No. (312) 917-1107 CHICAGO, IL 60606-3207 Fax No (312) 674-7309 x Check if new: Address Check if to be sent copies of notices and communications Telephone No. Fax No. Name and address CAF No. **PTIN** Telephone No. Fax No. Check if to be sent copies of notices and communications Check if new Address Telephone No. Fax No. 1 Name and address CAF No. PTIN MAY 1 9 2015 287 Telephone No. Fax No only two representative (Note, IRS sends notices and communi Check if new: Address Name and address CAF No. PTIN Telephone No. Fax No. (Note. IRS sends notices and communications to only two representatives.) Address to represent the taxpayer before the Internal Revenue Service and perform the following acts. 3 Acts authorized (you are required to complete this line 3.) With the exception of the acts described in line 5b, I authorize my representative(s) to receive and inspect my confidential tax information and to perform acts that I can perform with respect to the tax matters described below. For example, my representative(s) shall have the authority to sign any agreements, consents, or similar documents (see instructions for line 5a for authorizing a representative to sign a return). Description of Matter (Income, Employment, Payroll, Excise, Estate, Gift, Whistleblower, Practitioner Discipline, PLR, FOIA, Civil Penalty, Sec 5000A Shared Responsibility Payment, Sec Year(s) or Period(s) (if applicable) (see instructions) Tax Form Number (1040, 941, 720, etc) (if applicable) 4980H Shared Responsibility Payment, etc.) (see instructions) FORM NUMBER: 990-PF INCOME 2011:2012:2013&2014 5 a Additional acts authorized. In addition to the acts listed on line 3 above, I authorize my representative(s) to perform the following acts (see instructions for line 5a for more information): Authorize disclosure to third parties; Substitute or add representative(s): Sign a return; Other acts authorized:

Form 2848 (Rev 7-2014)	CHICAGO BOARD	OF TRADE FOUNDAT	ION	36-	3348469 Pa	age 2
b Specific acts not or accepting paym other entity with w	t authorized. My represe nent by any means, elect whom the representative(s	ntative(s) is (are) not authoriz ronic or otherwise, into an ac s) is (are) associated) issued	red to endorse or other count owned or contro by the government in r	rwise negotiate any che lled by the representative espect of a federal tax	ck (including directing ve(s) or any firm or	
List any specific d	leletions to the acts other	wise authorized in this power	of attorney (see instru	ctions for line 5b).		. – -
of attorney on file v do not want to rev	with the Internal Revenue oke a prior power of atto	f attorney. The filing of this possible Service for the same matter mey, check here	s and years or periods	covered by this docum	ent. If you 🦳	
7 Signature of taxp attorney even if the executor, receiver	payer. If a tax matter con	cems a year in which a Joint r me representative(s) If signed on behalf of the taxpayer, I	eturn was filed, each s	pouse must file a sepa r, partner, guardian, tax	matters partner.	
the taxpayer. ► IF NOT COMF	PLETED, SIGNED, AND I	DATED, THE IRS WILL RET	URN THIS POWER O	F ATTORNEY TO THE	TAXPAYER.	
	CMPC	^	"#17.8\T	<u> </u>	RMAN	
CHARLES	S CAREY Signature		Da	19	Title (if applicable)	
	Print Name		Prir	nt name of taxpayer from line 1	if other than individual	
	on of Representativ			<u></u>		
I am not current I am subject to	regulations contained in (w i declare that: d from practice before the Int Circular 230 (31 CFR, Subtite			before the Internal	
Revenue Servic		er identified in Part I for the ma	atter(s) specified there	· and		
• I am one of the		. ragitands in Fact to 210 in	atter(s) opeoned alore	, una		
a Attomey — a	member in good standin	ig of the bar of the highest co	urt of the jurisdiction sl	nown below.		
	- ,	alified to practice as a certifie	•	•	pelow.	
	-	t by the internal Revenue Se	rvice per the requireme	ents of Circular 230.		
	oona fide officer of the tax oployee — a full-time emp					
f Family Memb	per - a member of the ta	expayer's immediate family (for	or example, spouse, pa	arent, child, grandparen	t, grandchild.	
step-parent, s	step-child, brother, or sist	ter).				
		tuary by the Joint Board for the Service is limited by section 1				
to sign the re tax return pr	etum Preparer — Your a turn under examination a reparers and unenrolled	uthority to practice before the nd have prepared and signed freturn preparers in the ins	i internal Revenue Ser I the return. See Notic tructions (PTIN requi	vice is limited. You mus e 2011-6 and S <i>pecial</i> i ired for designation h)	it nave been eligible rules for registered	
i Registered Ta authority to p and have pre	ax Return Preparer — n ractice before the interna pared and signed the ret	egistered as a tax return prep al Revenue Service is limited. urn See Notice 2011-6 and (PTIN reguired for designa	arer under the require You must have been of Special rules for regi	ments of section 10 4 o	f Circular 230, Your 1 under examination	
k Student Attor	ney or CPA — receives p	ermission to represent taxpa	yers before the IRS by	virtue of his/her status	as a law, business,	
F Enrolled Reti	rement Plan Agent — enr	rolled as a retirement plan agr Service is limited by section 1	ent under the requirem	•		
► IF THIS D	ECLARATION OF REPI	RESENTATIVE IS NOT COMES MUST SIGN IN THE ORD	PLETED, SIGNED AN			VER
	d-f, enter your title, posit	on, or relationship to the tax				
Designation — insert above letter (a - r)	Licensing jurisdiction (state) or other licensing authority (rf applicable)	Bar, license, certification, registration, or enrollment number (if applicable). See instructions for Part II for more information	Sigr	nature	Date	
b	IL	# 065.014412	8 Tu	y .	11/12/14	
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