

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

OMB No 1545-0052

2012

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

| For ca | llendar year 2012, or tax year beginning | 7/01 ,2012 | , and ending 6/ | <u>30 , 2013 </u> | | | | |
|-------------------|--|---------------------------------------|---------------------------------------|--|--|--|--|--|
| | HILB FAMILY FOUNDATION | | | Employer identification nu 36-4417758 | mber | | | |
| 1315 | JOSEPH PEDOTA 5 W. 22ND STREET, SUITE 305 | | | Telephone number (see the instructions) (630) 990-0355 | | | | |
| OAK | BROOK, IL 60523 | | C | If exemption application is | pending, check here | | | |
| G Ch | eck all that apply. Initial return | Initial return of a form | mer public charity | 1 Foreign organizations, che | ck here | | | |
| | Address change | Name change | | 2 Foreign organizations mee here and attach computation | ting the 85% test, check | | | |
| H (| Check type of organization: X Section 50 Section 4947(a)(1) nonexempt charitable to | 1(c)(3) exempt private t | foundation private foundation | • | <u>. </u> | | | |
| | | counting method: X C | | under section 507(b)(1)(A) |), check here | | | |
| ► \$ | 1,494,784. (Parti) | Other (specify) column (d) must be or | n cash basis.) F | If the foundation is in a 60 under section 507(b)(1)(B) | l-month termination), check here | | | |
| Part | Analysis of Revenue and | (a) Revenue and | (b) Net investment | (c) Adjusted net | (d) Disbursements | | | |
| | Expenses (The total of amounts in | expenses per books | income | income | for charitable | | | |
| | columns (b), (c), and (d) may not neces- sarily equal the amounts in column (a) | | | | purposes (cash | | | |
| | (see instructions).) | | | | basis only) | | | |
| | Contributions, gifts, grants, etc, received (att sch) | 34,160. | | | | | | |
| | 2 Ck If the foundn is not reg to att Sch B | 31/100. | | · · · · · · · · · · · · · · · · · · · | | | | |
| | 3 Interest on savings and temporary | | , , | | | | | |
| | cash investments | 3,683. | 3,683 | . N/A | | | | |
| | 4 Dividends and interest from securities | 44,006. | 44,006 | | | | | |
| | 5 a Gross rents b Net rental income | | | | | | | |
| _ | or (loss) | | | 1. | | | | |
| Ŗ | 6a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all | 66,551. | · · · · · · · · · · · · · · · · · · · | 1 | | | | |
| Ĕ | assets on line 6a 432, 373. | | | | | | | |
| E | 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain | | 66,551 | <u> </u> | | | | |
| E N U | 8 Net short-term capital gain 9 Income modifications | , | • | | | | | |
| Ě | 10 a Gross sales less returns and | . , | , | | ED | | | |
| | returns and allowances | , , | | | | | | |
| | b Less Cost of goods sold | - | | 8 JAN 2 7 3 | 0 Atn | | | |
| | c Gross profit/(loss) (att sch) | <u></u> | | @ JAN 2 7 8 | 1914 8 | | | |
| | 11 Other income (attach schedule) | | | | <u> </u> | | | |
| | SEE STATEMENT 1 | 1,282. | | OGDEN | 117 | | | |
| | 12 Total. Add lines 1 through 11 | 149,682. | 114,240 | | | | | |
| | 13 Compensation of officers, directors, trustees, etc | 0. | | | | | | |
| | 14 Other employee salaries and wages | | | | | | | |
| D A | 15 Pension plans, employee benefits | | | | | | | |
| A D | 16a Legal fees (attach schedule) | | | | | | | |
| ₽ M | b Accounting fees (attach sch) SEE ST 2 | 5,900. | 2,950 | | 2,950. | | | |
| | c Other prof fees (attach sch) SEE ST 3 | 8,163. | 8,163 | • | | | | |
| IN-STRATIVE | 17 Interest | | | | | | | |
| P S E T R R | 18 Taxes (attach schedule)(see instrs). SEE STM 4 19 Depreciation (attach | 1,250. | 150 | | | | | |
| CA. A Di⊅ T | sch) and depletion | | | | , | | | |
| 帯し | 20 Occupancy | | | | | | | |
| | 21 Travel, conferences, and meetings | 1,637. | 818 | | 819. | | | |
| ⊧A: E | 22 Printing and publications | | | | | | | |
| <u>۾</u> روم | 23 Other expenses (attach schedule) | | | | | | | |
| ANOONE NO | SEE STATEMENT 5 | 53. | 38 | • | 15. | | | |
| EXPENSES | 24 Total operating and administrative expenses. Add lines 13 through 23 | 17 002 | 10 110 | | 2 704 | | | |
| S | 25 Contributions, gifts, grants paid PART XV | 17,003. 67,000. | 12,119 | · | 3,784. | | | |
| | L The state of the | 07,000. | | | 67,000. | | | |
| | 26 Total expenses and disbursements. Add lines 24 and 25 | 84,003. | 12,119 | | 70,784. | | | |
| | 27 Subtract line 26 from line 12: | | | | | | | |
| | a Excess of revenue over expenses and disbursements | 65,679. | | | | | | |
| | b Net investment income (if negative, enter -0-) | | 102,121 | | | | | |
| | C Adjusted net income (if negative, enter -0-) | | 102,121 | ' | | | | |
| | - Aujusteu net moome (ii negative, enter 101) | | | | | | | |

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize).

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

1,203,785

1,203,785.

4

5

6

| (a) List and describ | e the kind(s) of property sold (e g , r se; or common stock, 200 shares MI | eal estate. | (b) How acquir P — Purchase D — Donation | (month, day, year) | (d) Date sold (month, day, year) |
|--|---|--|--|---|-------------------------------------|
| 1a SEE STATEMENT 7 | | | | - - | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| е | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | S | (h) Gain or (e) plus (f) m | (loss) ninus (g) |
| а | | | | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| e | | | | | |
| Complete only for assets show | ving gain in column (h) and owned by | y the foundation on 12/31/69 | | (I) Gains (Coli | umn (h) |
| (i) Fair Market Value as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of column (over column (j), if any | | gain minus column (k than -0-) or Losses (fr | (), but not less |
| a | | | | | |
| b | | | | • • | |
| С | | | | | |
| d | | | | | |
| е | | | | | · |
| 2 Capital gain net income or (ne | If (loss), en | enter in Part I, line 7 ter -0- in Part I, line 7 | 2 | 2 | 66,551. |
| 3 Net short-term capital gain or | (loss) as defined in sections 1222(5) | and (6) | | | |
| in Part I, line 8 | e 8, column (c) (see instructions). If | ` ' | 3 | | 0. |
| Part V Qualification Unde | r Section 4940(e) for Reduce | d Tax on Net Investmer | nt Income | | |
| If 'Yes,' the foundation does not qua | ction 4942 tax on the distributable an lify under section 4940(e). Do not co in each column for each year; see th | mplete this part | | Yes | X No |
| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use asse | | (d) Distribution plumn (b) divided | |
| 2011 | 71 677 | 1 202 | C12 | | 0.055450 |
| 2010 | 71,677. | | | - | 0.055450 0.064899 |
| 2009 | 52,493. | 1,249 | | | 0.046821 |
| 2008 | 90,036. | | , 386. | | 0.095642 |
| 2007 | 33,911. | | , 366. | | 0.035909 |
| | 33,311.] | 244 | , 300. | 1 | 0.033303 |
| 2 Total of line 1, column (d) | | | _ 2 | : | 0.298721 |
| | ne 5-year base period — divide the to n has been in existence if less than 5 | | 3 | | 0.059744 |
| 4 Enter the net value of nonchard | table-use assets for 2012 from Part | X, line 5 | 4 | 1 | 1,433,239. |
| 5 Multiply line 4 by line 3 | 5 Multiply line 4 by line 3 | | | | |
| 6 Enter 1% of net investment inc | ome (1% of Part I, line 27b) | | 6 | | 1,021. |
| 7 Add lines 5 and 6 | | | 7 | | 86,648. |
| 8 Enter qualifying distributions from | om Part XII, line 4 | | 8 | | 70,784. |
| If line 8 is equal to or greater the Part VI instructions. | nan line 7, check the box in Part VI, | line 1b, and complete that pa | irt using a 1 | % tax rate. See th | ne |

| | 0-PF (2012) THE HILB FAMILY FOUNDATION | | 6-4417758 | | Page | 4 |
|-----------------------|--|--------------------------|-----------------|-------------------|---|--|
| Part V | 1 | | see instruction | 15) | | _ |
| | mpt operating foundations described in section 4940(d)(2), check here and enter 'N/A' of the copy of letter if necessary — section 4940(d)(2), check here | | - - | | | |
| | e of ruling or determination letter (attach copy of letter if necessary — s mestic foundations that meet the section 4940(e) requirements in Part V, | see instrs) | . • | | 2 042 | |
| | eck here And enter 1% of Part I, line 27b | | - | | 2,042. | ÷ |
| | other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, | column (h) | | | | |
| | | , column (b) | | | | |
| 2 Ta foເ | x under section 511 (domestic section 4947(a)(1) trusts and taxable indations only. Others enter -0-) | | 2 | | 0. | |
| | d lines 1 and 2 | | 3 | | 2,042. | _ |
| 4 Su | btitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations of | nly Others enter -0- | | ·· | 0. | _ |
| | x based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 | • | 5 | | 2,042. | _ |
| 6 Cre | edits/Payments | | 1 1 1 1 1 1 | | ·, · · · · | _ |
| a 201 | 2 estimated tax pmts and 2011 overpayment credited to 2012 6 a | 78 | 7. | | · • • • • • • • • • • • • • • • • • • • | |
| b Ex | empt foreign organizations - tax withheld at source 6b | | | | 1 | |
| c Ta: | x paid with application for extension of time to file (Form 8868) | 3,50 | ō.] ' : [[^] | | , m | |
| d Ba | ckup withholding erroneously withheld 6 d | 1 | | Signal of | , | • |
| 7 To | al credits and payments. Add lines 6a through 6d | | 7 | 4 | 1,287. | <u>.</u> |
| 8 En | ter any penalty for underpayment of estimated tax. Check here 🔲 if Form 2220 is | s attached | 8 | | | _ |
| 9 Tax | due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | ▶ 9 | | 0. | <u>. </u> |
| 10 Ove | rpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | ► 10 | 2 | 2 <u>,245</u> . | |
| | er the amount of line 10 to be. Credited to 2013 estimated tax 2, 245. | Refunded | P 11 | | 0. | <u>.</u> |
| Part V | I-A Statements Regarding Activities | | | | | _ |
| 1 a Dui par | ring the tax year, did the foundation attempt to influence any national, state, or locaticipate or intervene in any political campaign? | al legislation or did if | t | 1 a | es No X | _ |
| b Did (se | it spend more than \$100 during the year (either directly or indirectly) for political pe the instructions for definition)? | ourposes | | 1 b | х | _ |
| If th | ne answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies of any distributed by the foundation in connection with the activities | y materials published | | | 1 | - |
| | the foundation file Form 1120-POL for this year? | | | 1 c | | - |
| | er the amount (if any) of tax on political expenditures (section 4955) imposed during | ng the vear. | | '- | <u> </u> | - |
| (1) | On the foundation >\$ 0. (2) On foundation managers | s ► \$ | 0. | | | , |
| | er the reimbursement (if any) paid by the foundation during the year for political expenditudes the remaining managers. | ure tax imposed on | |] | - | |
| | <u> </u> | IDC3 | | - <u>-</u> - | ;- | _ |
| | s the foundation engaged in any activities that have not previously been reported to Yes,' attach a detailed description of the activities | the IRS | | 2 | X | _ |
| | , | | | | 1 - | |
| 3 Has | the foundation made any changes, not previously reported to the IRS, in its governing in ncorporation, or bylaws, or other similar instruments? <i>If 'Yes,' attach a conformed</i> | strument, articles | | 3 | X | |
| | the foundation have unrelated business gross income of \$1,000 or more during the | | | 4 a | X | - |
| | (es,' has it filed a tax return on Form 990-T for this year? | c year | | 4 b | N/A | - |
| | there a liquidation, termination, dissolution, or substantial contraction during the year? | | | 5 | X | - |
| | res,' attach the statement required by General Instruction T | | | 7,4 | - | - |
| | the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied | ed either | | | | |
| • B | y language in the governing instrument, or | | | 274 (| , 4 | |
| • B | y state legislation that effectively amends the governing instrument so that no mandatory ith the state law remain in the governing instrument? | directions that conflict | t | 6 | x : | - |
| | the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column | (c) and Part XV | | | <u>x</u> | - |
| | er the states to which the foundation reports or with which it is registered (see insti | | • | | ^ | - |
| I | , | | | , | | |
| | e answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | | | - | 1 | |
| | lesignate) of each state as required by General Instruction G? If 'No,' attach explanation | | | 8 b | x | |
| 9 ls tl | ne foundation claiming status as a private operating foundation within the meaning | of section 4942(i)(3) | or 4942(1)(5) | | | - |
| for | calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part | XIV)? If 'Yes,' comp | plete Part XIV | 9 | X | _ |
| 10 Did | any persons become substantial contributors during the tax year? If 'Yes,' attach a sched | dule listing their names | 5 | | | _ |
| ano | addresses | | | 10 | <u> </u> | _ |
| BAA | | | Fo | rm 990-P l | (2012) | |

| Pai | T 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? 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 | Х | |
| 14 | Website address N/A | | | : <u>-</u> |
| 14 | The books are in care of ► JOSEPH PEDOTA Located at ► 1315 W. 22ND STREET, SUITE 305 OAK BROOK IL ZIP + 4 ► 60523 | _990 | -035 | 5 |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here | N/Ā | \ - | |
| | 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, securities, or other financial account in a foreign country? | 16 | Yes | No X |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If 'Yes,' enter the name of the foreign country. | | *,34 | |
| Par | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required | <u></u> | <u> </u> | L |
| | File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies. | T | Yes | No |
| 1. | · · · · · · · · · · · · · · · · · · · | | 162 | NO |
| ıa | During the year did the foundation (either directly or indirectly). | 1 | | · |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No | ٤ | 1 | , |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No | , , | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? |] 1 | ľ., | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | 1 1 | * . | |
| | (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)? Yes X No | 1\q | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) Yes X No | | , | |
| b | If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1 b | Ņ | /A |
| | Organizations relying on a current notice regarding disaster assistance check here | | | · |
| c | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2012? | 1 c | _ s . | 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)): | , | , | |
| а | 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 | | , | |
| | If 'Yes,' list the years ► 20 _ , 20 _ , 20 |] ; | | |
| | 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.) | 2 b | N | /A |
| 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 , 20 | | , | |
| 3 a | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No | | | |
| | If 'Yes,' did it have excess business holdings in 2012 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 Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2012.) | 3 b | N | /A |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4 a | | <u>x</u> |
| | Did the foundation make any investment in a prior year (but after December 31, 1969) that could peopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2012? | 4 b | - | <u> </u> |
| BAA | Fo | rm 99 (| PF (| 2012) |

| Form 990-PF (2012) THE HILB FAMILY F Part VII-B Statements Regarding Activit | OUNDATION | n 4720 May Be Red | 36-4 | 417758 | Page 6 |
|---|---|---|---|--|----------------|
| 5a During the year did the foundation pay or inci | | 11 47 20 may be need | direa (continuea, | / | |
| ` (1) Carry on propaganda, or otherwise attem | = | on (section 4945(e))? | Yes | X No | |
| (2) Influence the outcome of any specific put on, directly or indirectly, any voter registr. | olic election (see sectionation drive? | n 4955), or to carry | | X No | |
| (3) Provide a grant to an individual for travel | study, or other similar | | — <u> </u> | X No | - |
| (4) Provide a grant to an organization other t in section 509(a)(1), (2), or (3), or section | han a charitable, etc, o 1 4940(d)(2)? (see instr | rganization described uctions) | Yes | X No | |
| (5) Provide for any purpose other than religion educational purposes, or for the prevention | ous, charitable, scientifion of cruelty to children | c, literary, or or animals? | Yes | X No | |
| b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)? | the transactions fail to a current notice regar | qualify under the exception disaster assistance | otions e | | N/A |
| Organizations relying on a current notice rega | ırdıng disaster assistan | ce check here | ▶ | | |
| c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure response. | sibility for the grant? | · | N/A Yes | □ No □ | |
| If 'Yes,' attach the statement required by Reg | | | | 1, 4 | |
| 6 a Did the foundation, during the year, receive a on a personal benefit contract?b Did the foundation, during the year, pay prem | - | | Yes | X No 6 b | _ X |
| If 'Yes' to 6b, file Form 8870. | ,, | ,, , | | | - |
| 7 a At any time during the tax year, was the found | | | | X No | |
| b If 'Yes,' did the foundation receive any proces | | | | N/A 7b | |
| Part VIII Information About Officers, D | irectors, i rustees, | Foundation Manag | gers, Highly Paid | Employees, | |
| 1 List all officers, directors, trustees, foundation | n managers and their | compensation (see inst | ructions). | | |
| (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 deferre compensation | t other allo | |
| SEE STATEMENT 8 | | | Compensation | | |
| | | | | | |
| | | 0. | 0 | | 0. |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | 7. | | | |
| 2 Compensation of five highest-paid employees (of | her than those included | on line 1 — see instruction | ns) If none, onter 'NON | <u> </u> | |
| (a) Name and address of each employee | (b) Title, and average | (c) Compensation | (d)Contributions to | (e) Expense | account |
| paid more than \$50,000 | hours per week devoted to position | (c) compensation | employee benefit plans and deferred compensation | other allo | wances |
| NONE | | | <u> </u> | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | _ | - | |
| | | | | | |
| Total number of other continues | | | | | |
| Total number of other employees paid over \$50,000 | TEFA0306L 12 | 2/25/12 | | Form 990-P | 0 F 72012\ |

| -441//58 | Page / |
|----------------|-----------------------|
| aid Employees, | |
| <u>'</u> | |
| | nsation |
| | |
| | |
| <u> </u> | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | 0 |
| | |
| Evnens | <u></u> |
| Expens | |
| | |
| | |
| |),784. |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| Amour | nt |
| | |
| | |
| | <u></u> |
| | |
| | |
| | |
| | |
| | |
| | |
| > | 0. |
| | |
| | Expens Expens Amour |

| see instructions.) | J | • |
|--|-----------|------------|
| 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes: | TI MICE. | |
| a Average monthly fair market value of securities | 1 a | 1,317,188. |
| b Average of monthly cash balances | 1 b | 137,877. |
| c Fair market value of all other assets (see instructions) | 1 c | |
| d Total (add lines 1a, b, and c) | 1 d | 1,455,065. |
| e Reduction claimed for blockage or other factors reported on lines 1a and 1c | 200 | |
| | 0. 2 | |
| 2 Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 Subtract line 2 from line 1d | 3 | 1,455,065. |
| 4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) | 4 | 21,826. |
| 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 1,433,239. |
| 6 Minimum investment return. Enter 5% of line 5 | 6 | 71,662. |
| Part XI: Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private ope and certain foreign organizations check here ► ☐ and do not complete this part. | | indations |
| 1 Minimum investment return from Part X, line 6 | 1 | 71,662. |
| 2 a Tax on investment income for 2012 from Part VI, line 5 2a 2, 042 | 2. 图第 | <u> </u> |
| b Income tax for 2012. (This does not include the tax from Part VI.) | | |
| c Add lines 2a and 2b | 2 c | 2,042. |
| 3 Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 69,620. |
| 4 Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 Add lines 3 and 4 | 5 | 69,620. |
| 6 Deduction from distributable amount (see instructions) | 6 | |
| 7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 69,620. |
| Part VIII 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 | 1 a | 70,784. |
| b Program-related investments — total from Part IX-B | 1 b | |
| 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: a Suitability test (prior IRS approval required) | 3 a | |
| b Cash distribution test (attach the required schedule) | 3 b | |
| 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 70,784. |
| 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 (see instructions) | 5 | |
| 6 Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 70,784. |
| Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the f qualifies for the section 4940(e) reduction of tax in those years. | oundation | · · · |

BAA

Form 990-PF (2012)

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2011 | (c) 2011 | (d) 2012 |
|---|---|----------------------------|--------------------|---------------------------------------|
| 1 Distributable amount for 2012 from Part XI, | , · · · · · · · · · · · · · · · · · · · | | | |
| line 7 | | | | 69,620. |
| 2 Undistributed income, if any, as of the end of 2012. | • | | | |
| a Enter amount for 2011 only | | | 0. | · · · · · · · · · · · · · · · · · · · |
| b Total for prior years: 20, 20, 20 | 1 22 | 0. | | |
| 3 Excess distributions carryover, if any, to 2012: a From 2007 | | * ,. | | |
| b From 2008 | ٠ . | | , | • |
| c From 2009 | | , | | |
| | ٠ - | | , | |
| | - | | | |
| | 04 550 | | | 4 |
| f Total of lines 3a through e | 24,552. | | | |
| 4 Qualifying distributions for 2012 from Part XII, line 4: ► \$ 70.784 | | , | • | |
| XII, line 4: \$ 70,784. a Applied to 2011, but not more than line 2a | | | | |
| a Applied to 2011, but not more than line 2a | - | | 0. | |
| Applied to undistributed income of prior years (Election required — see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | · | |
| (Election required — see instructions) | 0. | | | |
| d Applied to 2012 distributable amount | | | | 69,620. |
| e Remaining amount distributed out of corpus | 1,164. | - | | · · · · · · · · · · · · · · · · · · · |
| 5 Excess distributions carryover applied to 2012 (If an amount appears in column (d), the | 0. | | | 0. |
| same amount must be shown in column (a)) | | | | |
| Enter the net total of each column as indicated below: | | | | |
| a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | 25,716. | | | |
| b Prior years' undistributed income Subtract line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | 0.1 | | |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount — see instructions | | 0. | | |
| e Undistributed income for 2011. Subtract line 4a from | | | | |
| line 2a. Taxable amount — see instructions | | | 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 | | | | <u></u> |
| corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) | | . G | | |
| (see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions) | 0. | | | |
| 9 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a | 25,716. | | | - |
| 10 Analysis of line 9 | | | | - |
| a Excess from 2008 | Ì | | | |
| b Excess from 2009 | | } | | |
| c Excess from 2010 16,747. | | | | |
| d Excess from 2011 7, 805. | ļ | İ | | • |
| e Excess from 2012 1, 164. | | | | |
| BAA | | | | Form 990-PF (2012) |

| Form 990-PF (2012) THE HILB FAMILY | | _ | | 36-4417758 | Page 10 |
|---|---------------------------------------|--|---|-------------------------|------------|
| Part XIV Private Operating Foundar | • | | | | N/A |
| 1 a If the foundation has received a ruling or determined in the seffective for 2012, enter the date of the | ruling | | | | Lagaria |
| b Check box to indicate whether the founda | | erating foundation | | 4942(j)(3) or | 4942(j)(5) |
| 2a Enter the lesser of the adjusted net income from Part I or the minimum | Tax year | (L) 2011 | Prior 3 years | (4) 2000 | (a) Takal |
| investment return from Part X for each year listed | (a) 2012 | (b) 2011 | (c) 2010 | (d) 2009 | (e) Total |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, line 4 for each year listed | | | | | |
| d Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| 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: | | | İ | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c 'Support' alternative test — enter: | | } | | | |
| Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III) | | | | | |
| (3) Largest amount of support from an exempt organization | | | | | |
| (4) Gross investment income | | | | 1 | |
| Part XV Supplementary Information assets at any time during th | (Complete this e vear — see in | s part only if the istructions.) | toundation had | \$5,000 or more I | n |
| Information Regarding Foundation Managera List any managers of the foundation who have close of any tax year (but only if they have SEE STATEMENT 9 | gers: e contributed more to | han 2% of the total c | ontributions received b section 507(d)(2)) | y the foundation before | e the |
| b List any managers of the foundation who own a partnership or other entity) of which the NONE | 10% or more of the foundation has a 1 | stock of a corporation 0% or greater inter | on (or an equally large est | portion of the ownersh | iip of |
| 2 Information Regarding Contribution, Grar Check here X if the foundation only ma requests for funds If the foundation make complete items 2a, b, c, and d. | kes contributions to | preselected charitab | le organizations and do | | |
| a The name, address, and telephone number or | e-mail of the person | n to whom applicatio | ns should be addresse | d | |
| b The form in which applications should be s | submitted and infor | rmation and materia | als they should includ | e | |
| c Any submission deadlines: | | | . = | | |
| d Any restrictions or limitations on awards, s | uch as by geograp | hical areas, charita | ble fields, kinds of in | stitutions, or other fa | ectors |
| | | | | | |

Page 11

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation status of recipient Recipient show any relationship to any foundation manager or Purpose of grant or contribution Amount Name and address (home or business) substantial contributor a Paid during the year SEE ATTACHED CONTRIBUTION EXEMPT ALL GRANTS & 67,000. **SCHEDULE** CONTRIBUTIONS WERE MADE TO BENEFIT WORTHY CHARITABLE, RELIGIOUS, CIVIC, HEALTH OR EDUCATIONAL INSTITUTIONS BY SCHOLARSHIPS, GRANTS, GIFTS AND DONATIONS. ► 3a **Total** 67,000. b Approved for future payment Total 3 b

Part XVI-A Analysis of Income-Producing Activities

| nter gros | s amounts unless otherwise indicated. | Unrelated | business income | Excluded by | section 512, 513, or 514 | (e) |
|---------------------|--|-----------------------------------|---|--|--|--|
| 1 Prog | ram service revenue | (a) Business code | (b) Amount | (c) Exclu- sion code | (d) Amount | Related or exempt function income (See instructions) |
| a | | | | | | |
| b | | | | | | |
| с | | | | | | |
| d | | | <u> </u> | | | |
| е | | | | | | |
| f | | | | | | |
| • | and contracts from government agencies | | | | | |
| | bership dues and assessments | | | _ _ | | |
| | et on savings and temporary cash investments | | | 14 | 3,683. | <u>.</u> |
| | ends and interest from securities | | | 14 | 44,006. | |
| | ental income or (loss) from real estate | 54 2 1 | | | | <u> </u> |
| | financed property | | | | | · · · · · · · · · · · · · · · · · · · |
| | ebt-financed property | | | | | |
| | ntal income or (loss) from personal property | <u> </u> | | | | |
| | investment income | | | | | |
| | r (loss) from sales of assets other than inventory | | | 18 | 66,551. | |
| | ncome or (loss) from special events. | | | | | - |
| | s profit or (loss) from sales of inventory revenue: | | · | | | |
| | | | | | | 1 000 |
| <u>а <u>ғер</u></u> | ERAL TAX REFUND | | | | | 1,282. |
| с | | | - | + + | | |
| ď | | | | + +- | | |
| e | | | | | - | |
| <u> </u> | otal. Add columns (b), (d), and (e) | | | | 114,240. | 1,282. |
| | Add line 12, columns (b), (d), and (e) | L | | | 13 | 115,522. |
| | heet in line 13 instructions to verify calculation | ns.) | | | - | |
| Part XVI. | B Relationship of Activities to the | Accomplis | hment of Evem | nt Purnose | · · · · · · · · · · · · · · · · · · · | |
| | | | | <u> </u> | | |
| Line No. ▼ | Explain below how each activity for which in accomplishment of the foundation's exempt | come is report purposes (other | ed in column (e) of er than by providing | Part XVI-A co | ontributed importantl h purposes) (See ir | y to the structions.) |
| N/A | | | | | | |
| | | - | | | | · |
| | | - | , | | | |
| | | | | - | | |
| | | | | | | |
| | - | | | | | |
| | | | | | | |
| | | | · | | | <u> </u> |
| | | | | | | |
| _ | | - | | | | |
| | | | | | | |
| | | | ··· | | ··· | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | · | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Form 990-PF (2012) THE HILB FAMILY FOUNDATION 36-4417758 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

| d re | old the organization directescribed in section 501(celating to political organization) | c) of the Code (d zations? | other than sectio | on 501(c)(3) orga | nizations) o | r organization r in section | on 527, | î | | Yes No |
|--|--|--|--|--|---------------------------|---------------------------------------|--|-------------------------------------|---------------------------------|--------------------|
| a Transfers from the reporting foundation to a noncharitable exempt organization of. | | | | | | | | | | |
| • | (1) Cash | | | | | | | | | Х |
| ` | 2) Other assets | | | | | | | | 1 a (2) | X |
| | Other transactions: | | | | | | |] | | |
| | Sales of assets to a n | | | | | | | | 1 b (1) | X |
| | 2) Purchases of assets for | | _ | janization | | | | - | 1 b (2) | X |
| • | B) Rental of facilities, eq | | er assets | | | | | L | 1 b (3) | X |
| • | Reimbursement arrange | • | | | | | | L | 1 b (4) | X |
| • | 5) Loans or loan guarant | | | | | | | L | 1 b (5) | X |
| | Performance of service | | | = | | | | L | 1 b (6) | X |
| c S | haring of facilities, equip | ment, mailing li | ists, other assets | s, or paid employ | ees | | | L | 1 c | X |
| d If th ar | the answer to any of the e goods, other assets, or s ny transaction or sharing | e above is 'Yes,' services given by arrangement, s | ' complete the for the reporting four show in column (| ollowing schedule ndation. If the four (d) the value of the | Column (Indation rece | b) should alvived less than | ways show to fair market or services | he fair ma value in received. | arket valu | ue of |
| (a) Line | | | of noncharitable exer | | | scription of tran | | | | ngements |
| N/A | - ' ' | - | - - | | | | - : | | <u>~</u> | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | • | | | | |
| | | | | - | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | - | | | | | | |
| | | | | | | | | | | |
| | | ŀ | | | | - | • | | | |
| | | | | • | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | _ | | | | | |
| | | | | | | · · · · · · · · · · · · · · · · · · · | | | | |
| de | the foundation directly or inscribed in section 501(c) |) of the Code (o | d with, or related other than section | to, one or more ta n 501(c)(3)) or in | x-exempt or section 52 | ganizations 7? | | | Yes | XNo |
| | (a) Name of organiza | | (b) Type | e of organization | 1 | (c |) Descriptio | n of relati | onship | |
| N/A | <u></u> | | (-) 21 | <u> </u> | | <u> </u> | , | | | |
| | | _ | | | | | | | | |
| | | • | | | | | | | | |
| | | | | <u>-</u> | | | | | | |
| | | | | | | | | _ | | |
| | Under penalties of perjury, I deci | lare that I have exam | nined this return, includ | ding accompanying sch | nedules and sta | tements, and to | the best of my | knowledge a | nd belief, it | is true, |
| Sign | correct, and complete Declaration | on of preparer (other | than taxpayer) is base | ed on all information o | f which prepare | er has any know | ledge | | May the If | RS discuss |
| Here | Muga | Heep | _ | 1-1-/_ | 3 ▶ _{TRE} | ISTEE | | | | shown below |
| | Signature of officer or trustee | <u>v</u> | - | Date | Title | | | | (see instru | Yes No |
| | Print/Type preparer's n | ame | Preparer's | signature 0 | O Da | ate | Check | I _{If} P | TIN | 103 110 |
| Paid | JOSEPH PEDC | TΆ | Des | oph (Youth | 3 | 2/16/13 | Self-emplo | □ | 200403 | 354 |
| Prepar | | | GLEY & COME | The Contract of the Contract o | V~- 1 | Shot! | Firm's EIN | 36-224 | | |
| Use O | - | | | 305 | | | | JU 227 | <u></u> | |
| Jac U | | OAK BROOK, | | | | | Phone no | 630-9 | 90-035 | 55 |
| BAA | | Jan Dicolly | <u> </u> | | | · · · · · · · · · · · · · · · · · · · | . none no | | | - PF (2012) |
| | | | | | | | | | J J. J. J. J. J. J. J. J. J. J. | \=='-/ |

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF

OMB No 1545-0047

2012

Name of the organization THE HILB FAMILY FOUNDATION Employer identification number C/O JOSEPH PEDOTA 36-4417758 Organization type (check one). Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor (Complete Parts I and II) Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc, purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc, purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc, contributions of \$5,000 or more during the year Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it must answer 'No' on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2, of its Form 990-PF, to certify that it does not meet the filling requirements of Schedule B (Form 990, 990-EZ, or 990-PF) BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, Schedule **B** (Form 990, 990-EZ, or 990-PF) (2012) or 990-PF.

| Schedule | B (Form 990, 990-EZ, or 990-PF) (2012) | Page | 1 of 1 of Part |
|---------------|--|-------------------------------|--|
| Name of on | ganization ILB FAMILY FOUNDATION | ' ' | er identification number 417758 |
| - | Contributors (see instructions). Use duplicate copies of Part I if additional space is | | 417730 |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | JANE G. HILB | | Person Payroli |
| | 199 NORTH MONTCLAIR AVENUE | \$ <u>34,160.</u> | ا ا |
| | GLEN ELLYN, IL 60137 | | (Complete Part II if there is a noncash contribution.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroli Noncash Complete Part II if there is a noncash contribution.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | ^{\$} | Person Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | ^{\$} | Person Payroll Noncash Complete Part II if there is a noncash contribution) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$\$ | Person Payroll Oncash Complete Part II if there is a noncash contribution) |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash Complete Part II if there is a noncash contribution.) |
| BAA | TEEA0702L 11/30/12 | Schedule B (Form 99 | 0, 990-EZ, or 990-PF) (2012) |

Page

1 to

1 of Part II

Name of organization

THE HILB FAMILY FOUNDATION

36-4417758

Employer identification number

| (a) No. from Part I | (b) Description of noncash property given | ļ | (c) FMV (or estimate) see instructions) | (d) Date received |
|---------------------------|--|----------|---|----------------------|
| 1 | 1,000 SHARES WILLIS GRP HOLDINGS | | | - |
| - | | s_ | 34,160. | 11/08/12 |
| (a) No. from Part I | (b) Description of noncash property given | F | (c) FMV (or estimate) see instructions) | (d) Date received |
| | | \$ | | |
| (a) No. from Part I | (b) Description of noncash property given | F (| (c) MV (or estimate) see instructions) | (d) Date received |
| | | <u> </u> | | |
| (a) No. | (h) | | (6) | (d) |
| from Part I | (b) Description of noncash property given | F (| (C) 'MV (or estimate) see instructions) | (d) Date received |
| | | | | |
| | | \$ | | |
| (a) No. from Part I | (b) Description of noncash property given | F (| (c) MV (or estimate) see instructions) | (d) Date received |
| | | | | |
| - | | \$\$ | | |
| (a) No. from Part I | (b) Description of noncash property given | F | (c) MV (or estimate) see instructions) | (d) Date received |
| | | | | |
| | | \$ | | |

| • | | | | | | | | | | | |
|---------------------------|---|--|-------------------------------------|--|-----------------------|---------------|-------------|--|--|--|--|
| | B (Form 990, 990-EZ, or 990-PF) (2012) | | | Page | 1 to | | f Part III | | | | |
| Name of organ | nization LB FAMILY FOUNDATION | | | | Employer iden 36-4417 | | mber | | | | |
| Part III | Exclusively religious, charitable, e organizations that total more than | \$1,000 for the year. Comple | ete columns (a) th | 1 501(c)(nrough (e) a | 7), (8) or (1 | 0) | /. | | | | |
| | For organizations completing Part III, enter contributions of \$1,000 or less for the year Use duplicate copies of Part III if additiona | (Enter this information once S | naritable, etc, see instructions |) | ► \$ | | <u> N/A</u> | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | (d) Description of how gift is held | | | | | | | |
| | N/A | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | (e) | | | | | | | | | |
| | Transferee's name, addre | Transfer of gift | Relatio | onship of transferor to transferee (d) Description of how gift is held | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | " | | | | | |
| | | | - . | | | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | Desc | (d) ription of hov | v gift is he | eld | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | Transferee's name, addres | (e) Transfer of gift ss, and ZIP + 4 | Relatio | onship of t | transferor to | ransferee | ! | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | ···· | | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | Desc | (d) ription of how | gift is he | eld | | | | |
| ļ | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee | | | | | - | | | | | |
| ļ | | | | · · | | | | | | | |
| | | | | | | | | | | | |
| [| | | | | | | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | | Descr | (d) ription of how | gift is he | eld | | | | |

FORM 990-PF JUNE 30, 2013 FEIN 36-4417758

PART XV - Line 3a - Grants and Contributions Paid

| Recipient | Status | Purpose | Amount |
|------------------------------------|--------|--------------|-----------|
| Be Strong Stay Strong | Public | Contribution | 2,000.00 |
| Bosom Buddies Benefit Organization | Public | Contribution | 15,000.00 |
| Chi Omega | Public | Contribution | 1,000.00 |
| Christopher Lyons Foundation | Public | Contribution | 6,000.00 |
| Collegiate School | Public | Contribution | 3,500.00 |
| FOCUS | Public | Contribution | 4,000.00 |
| HCS Family Services | Public | Contribution | 7,000.00 |
| Marionjoy Foundation | Public | Contribution | 12,500.00 |
| Sportables | Public | Contribution | 1,000.00 |
| St. Andrews | Public | Contribution | 9,000.00 |
| St. Francis High School | Public | Contribution | 4,000.00 |
| Young Life | Public | Contribution | 2,000.00 |
| | | | 67,000.00 |

| 2012 CLIENT 6235 | FEDERAL STATEMENTS THE HILB FAMILY FOUNDATION C/O JOSEPH PEDOTA | | | | |
|---|--|---|--|--|--|
| 12/12/13 STATEMENT 1 FORM 990-PF, PART I, LINE 11 OTHER INCOME | | 03 05PM | | | |
| FEDERAL TAX REFUND | (A) (B) NET REVENUE INVESTMENT PER BOOKS INCOME \$ 1,282. \$ 1,282.\$ 0.\$ | (C) ADJUSTED NET INCOME | | | |
| STATEMENT 2 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES | | | | | |
| GEORGE BAGLEY & CO | (A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME \$ 5,900. \$ 2,950. TOTAL \$ 5,900. \$ 2,950. | (D) CHARITABLE PURPOSES \$ 2,950. \$ 2,950. | | | |
| STATEMENT 3 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES | | | | | |
| INVESTMENT FEES | (A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME \$ 8,163. \$ 8,163. \$ 8,163. \$ 8,163. | (D) CHARITABLE PURPOSES \$ 0. | | | |
| STATEMENT 4 FORM 990-PF, PART I, LINE 18 TAXES | | | | | |
| FEDERAL TAXES FOREIGN TAXES | (A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME \$ 1,100. 150. \$ 150. TOTAL \$ 1,250. \$ 150. | (D) CHARITABLE PURPOSES \$ 0. | | | |

2012

FEDERAL STATEMENTS

PAGE 2

CLIENT 6235

THE HILB FAMILY FOUNDATION C/O JOSEPH PEDOTA

36-4417758

03:05PM

12/12/13

STATEMENT 5 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

| | | (A) EXPENSES PER BOOKS | (B) NET INVESTMENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|--------------------------------------|-------|-------------------------|---------------------------------|-------------------------------|-------------------------------|
| BANK SERVICES CHARGES FILING FEES | TOTAL | \$ 38. 15. \$ 53. | \$ 38. \$ 38. | | \$ 15. \$ 15. |

STATEMENT 6 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

| CORPORATE STOCKS 500SH AT&T INC NEW 400SH AUTO DATA PROCESSING 700SH BRISTOL-MYERS SQUIBB CO 300SH CATERPILLAR INC 200SH CHEVRON CORPORATION 200SH COGNIZANT TECH SOL CL A 416SH DUKE ENERGY CORP NEW 400SH ELI LILLY & CO 300SH EXXON MOBIL CORPORATION 375SH ILLINOIS TOOL WORKS INC 800SH INTEL CORP 300SH JOHNSON & JOHNSON 350SH A F L A C INC 500SH KELLOGG COMPANY 300SH KIMBERLY-CLARK CORP 1,500SH NEWELL RUBBERMAID INC 300SH NEXTERA ENERGY INC 4,000SH NUVEEN EQTY PREM OPTY FD 375SH PEPSICO INCORPORATED 750SH PFIZER INCORPORATED 400SH PROCTOR & GAMBLE 400SH SYNGENTA AG ADR 2,000SH TORTOISE EGY INFRASTRUCT 275SH VERIZON COMMUNICATIONS 3,500SH WILLIS GRP HLDGS PUBLICF 100SH 3M COMPANY 4,958.151SH VANGUARD S/T INVESTMENT 2,000SH KAYNE ANDERSON MLP INVT 150SH BERKSHIRE HATHAWAY B NEW CL B 125SH INTL BUSINESS MACHINES 400SH KINDER MORGAN INC 150SH KRAFT FOODS GROUP 150SH LAB CP OF AMER HLDG NEW 4754.28SH LITMAN GREGORY MASTERS INTL FD 2837.856SH EII INTL PROPERTY CL I 3360.15SH JPMORGAN US REAL ESTATE 3344.406SH LOOMIS SAYLES BOND FUND CL I 450SH MONDELEZ INTL INC CL A 4686.83SH PIMCO UNCONSTRAINED BD FD INST 375SH WELLS FARGO & CO NEW | VALUATION METHOD | BOOK VALUE | FAIR MARKET VALUE |
|---|------------------|--|-------------------------|
| 500SH AT&T INC NEW | MKT VAL | \$ 14,637. | \$ 17,700. |
| 400SH AUTO DATA PROCESSING | MKT VAL | 15,136. | 27,544. |
| 700SH BRISTOL-MYERS SOUIBB CO | MKT VAL | 14,750. | 31,283. |
| 300SH CATERPILLAR INC | MKT VAL | 25,874. | 24,747. |
| 200SH CHEVRON CORPORATION | MKT VAL | 20,179. | |
| 200SH COGNIZANT TECH SOL CL A | MKT VAL | 10,519. | 12,528. |
| 416SH DUKE ENERGY CORP NEW | MKT VAL | 17,489. | |
| 400SH ELI LILLY & CO | MKT VAL | 13,489. | 19,648. |
| 300SH EXXON MOBIL CORPORATION | MKT VAL | 23,686. | 27,105. |
| 375SH ILLINOIS TOOL WORKS INC | MKT VAL | 23,428. | |
| 800SH INTEL CORP | MKT VAL | 19,345. | 19,384. |
| 300SH JOHNSON & JOHNSON | MKT VAL | 19,659. | 25,758. |
| 350SH A F L A C INC | MKT VAL | 15,785. | 20,342. |
| 500SH KELLOGG COMPANY | MKT VAL | 23,907. | 32,115. |
| 300SH KIMBERLY-CLARK CORP | MKT VAL | 17,631. | |
| 150SH MCDONALDS CORP | MKT VAL | 11,226. | |
| 1,500SH NEWELL RUBBERMAID INC | MKT VAL | 10,700. | |
| 300SH NEXTERA ENERGY INC | MKT VAL | 13,967. | 24,444. |
| 4.000SH NUVEEN EOTY PREM OPTY FD | MKT VAL | 45,036. | |
| 375SH PEPSICO INCORPORATED | MKT VAT. | 24,108. | 30,671. |
| 750SH PFIZER INCORPORATED | MKT VAL | 14,272. | |
| 400SH PROCTOR & GAMBLE | MKT VAL | 25,272. | 30,796. |
| 400SH SYNGENTA AG ADR | MKT VAL | 14,591. | 31,144. |
| 2,000SH TORTOISE EGY INFRASTRUCT | MKT VAL | 41,267. | 93,000. |
| 275SH VERIZON COMMUNICATIONS | MKT VAL | 9,969. | 13,843. |
| 3,500SH WILLIS GRP HLDGS PUBLICF | MKT VAL | 117,178. | 142,730. |
| 100SH 3M COMPANY | MKT VAL | 9,234. | |
| 4,958.151SH VANGUARD S/T INVESTMENT | MKT VAL | 53,330. | 52,854. |
| 2,000SH KAYNE ANDERSON MLP INVT | MKT VAL | 43,591. | |
| 150SH BERKSHIRE HATHAWAY B NEW CL B | MKT VAL | 17,086. | 16,788. |
| 125SH INTL BUSINESS MACHINES | MKT VAL | 25,117. | 23,889. |
| 400SH KINDER MORGAN INC | MKT VAL | 14,735. | 15,260. |
| 150SH KRAFT FOODS GROUP | MKT VAL | 5,222. | 8,380. |
| 150SH LAB CP OF AMER HLDG NEW | MKT VAL | 15,109. | 15,015. |
| 4754.28SH LITMAN GREGORY MASTERS INTL FD | MKT VAL | 75,000. | 74,832. |
| 2837.856SH EII INTL PROPERTY CL T | MKT VAL | 55,000. | 53,125. |
| 3360.15SH JPMORGAN US REAL ESTATE | MKT VAL | 55,510. | 55,846. |
| 3344.406SH LOOMIS SAYLES BOND FUND CL. T | MKT VAL | 50,798. | 49,832. |
| 450SH MONDELEZ INTL INC CL A | MKT VAT. | 9,657. | 12,838. |
| 4686.83SH PIMCO UNCONSTRAINED BD FD INST | MKT VAL | 53,501. | 52,914. |
| 375SH WELLS FARGO & CO NEW | MKT VAL | 15,019. | 15,476. |
| | TOTAL. | \$ 1,101,009. | \$ 1,392,008. |
| | | -, -, -, -, -, -, -, -, -, -, -, -, -, - | + 1/002/000. |

| 20 | 4 | 1 |
|----|---|---|
| ZU | | Z |

FEDERAL STATEMENTS

PAGE 3

CLIENT 6235

THE HILB FAMILY FOUNDATION C/O JOSEPH PEDOTA

36-4417758

12/12/13

03:05PM

STATEMENT 7 FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

| | | (B) HOW | (C) DATE | (D) DATE |
|-------------|---|-----------|------------|------------|
| <u>ITEM</u> | (A) DESCRIPTION | ACOUIRED | ACOUIRED | SOLD |
| 1 | 50000 METLIFE INC 5.375%V DUE 12/15/12 | PURCHASED | 2/01/2005 | 12/15/2012 |
| 2 | 200 ENTERGY CORP | PURCHASED | 1/05/2007 | 3/01/2013 |
| 3 | 11029.944 PIMCO S-T INSTL FUND | PURCHASED | VARIOUS | 3/01/2013 |
| 4 | 200 TEVA PHARMACEUTICAL | PURCHASED | 4/21/2010 | 3/01/2013 |
| 5 | 1000 UNIVERSAL HEALTH REALTY | PURCHASED | 2/05/2004 | 3/01/2013 |
| 6 | 4670.561 VANGUARD GNMA FUND | PURCHASED | 4/08/2009 | 3/01/2013 |
| 7 | 1500 LTC PROPERTIES INC | PURCHASED | 11/03/2003 | 6/11/2013 |
| 8 | 5169.782 PIMCO LOW DURATION FUND | PURCHASED | VARIOUS | 6/11/2013 |
| 9 | 50000 GE CAPITAL CORP 41.5% DUE 6/15/13 | PURCHASED | 12/15/2005 | 6/17/2013 |
| 10 | CAPITAL GAIN DIVIDENDS | | | |
| | | | | |

| | (E) GROSS | (F) DEPREC. | (G) COST | (H) GAIN | (I) FMV | (J) ADJ. BAS. | (K) EXCESS | (L) GAIN |
|------|--------------|----------------|--------------|-------------|------------|------------------|---------------|-------------|
| ITEM | SALES | <u>ALLOWED</u> | <u>BASIS</u> | (LOSS) | 12/31/69 | 12/31/69 | (I) - (J) | (LOSS) |
| 1 | 50,000. | | 50,000. | 0. | | | | \$ 0. |
| 2 | 12,436. | | 17,740. | -5,304. | | | | -5,304. |
| 3 | 109,061. | | 106,578. | 2,483. | | | | 2,483. |
| 4 | 7,435. | | 12,433. | -4,998. | | | | -4,998. |
| 5 | 56,811. | | 28,186. | 28,625. | | | | 28,625. |
| 6 | 50,791. | | 50,000. | 791. | | | | 791. |
| 7 | 61,812. | | 17,166. | 44,646. | | | | 44,646. |
| 8 | 53,482. | | 53,721. | -239. | | | | -239. |
| 9 | 50,000. | | 50,000. | 0. | | | | 0. |
| 10 | | | | | | | | 547. |
| | | | | | | | TOTAL | \$ 66,551. |

STATEMENT 8 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

| NAME AND ADDRESS | TITLE AND AVERAGE HOURS PER WEEK DEVOTED | COMPEN- SATION | CONTRI- BUTION TO EBP & DC | EXPENSE ACCOUNT/ OTHER |
|--|--|-------------------|----------------------------------|------------------------------|
| ROBERT H. HILB 199 NORTH MONTCLAIR AVENUE GLEN ELLYN, IL 60137 | TRUSTEE 0 | \$ 0. | \$ 0. | \$ 0. |
| JANE G. HILB 199 NORTH MONTCLAIR AVENUE GLEN ELLYN, IL 60137 | TRUSTEE 0 | 0. | 0. | 0. |
| NANCY H. BRINKMAN 4210 HOWARD STREET WESTERN SPRINGS, IL 60558 | TRUSTEE 0 | 0. | 0. | 0. |
| CYNTHIA H. THILO 1110 THISTLE LANE CHARLOTTE, NC 28226 | TRUSTEE 0 | 0. | 0. | 0. |

2012

FEDERAL STATEMENTS

PAGE 4

CLIENT 6235

THE HILB FAMILY FOUNDATION C/O JOSEPH PEDOTA

36-4417758

12/12/13

03:05PM

STATEMENT 8 (CONTINUED)
FORM 990-PF, PART VIII, LINE 1
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

| NAME AND ADDRESS | TITLE AVERAGE PER WEEK | HOURS | COMPEN- SATION | E | CONTRI- BUTION TO EBP & DC | EXPENSE ACCOUNT/ OTHER |
|---|------------------------------|-------|-------------------|----|----------------------------------|------------------------------|
| ROBERT J. HILB 20 LOWER TUCKAHOE ROAD WEST RICHMOND, VA 23238 | TRUSTEE 0 | | \$ 0. | \$ | 0. | \$ 0. |
| | | TOTAL | \$ 0. | \$ | 0. | \$ 0. |

STATEMENT 9 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

ROBERT H. HILB JANE G. HILB

Application for Extension of Time To File an **Exempt Organization Return**

OMB No. 1545-1709

(Rev January 2013) Department of the Treasury Internal Revenue Service File a separate application for each return. If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box X If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extention on a previously filed Form 8868 **Electronic filing (e-file).** You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits Partial Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension — check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions Employer identification number (EIN) or Type or THE HILB FAMILY FOUNDATION print C/O JOSEPH PEDOTA 36-4417758 Number, street, and room or suite number. If a P.O. box, see instructions. Social security number (SSN) File by the due date for 1315 W. 22ND STREET, SUITE 305
City, town or post office, state, and ZIP code For a foreign address, see instructions filing your return See instructions OAK BROOK, IL 60523 Enter the Return code for the return that this application is for (file a separate application for each return) 04 Application Is For Return Application Is For Return Code Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 09 Form 990-PF 04 Form 5227 10 Form 990-T (section 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 The books are in the care of ► JOSEPH PEDOTA FAX No. ► (630) 990-0374 Telephone No. ► <u>(630)</u> 990-0355 If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box If it is for part of the group, check this box . Figure and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time _ , 20 $\underline{14}$ _ , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year 20 or X tax year beginning 7/01, 20 12, and ending 6/30, 20 13. | |Final return

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions 3a \$ 4,287. b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 787. 3 b | \$ c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions 3 c | \$ 3,500.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

Change in accounting period