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

▶ Do not enter Social Security numbers on this form as it may be made public. Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. OMB No 1545-0052

| Ford | alen | dar year 2013 or tax year beginning | | , and ending | | |
|------------------------------|----------|---|--|--|--|---|
| Nar | ne of | foundation | | | A Employer identification | number |
| | | BELLICK FOUNDATION | | | | |
| | | WOLVERINE TRADING, LLC | | | 30-0064562 | |
| | | nd street (or P O box number if mail is not delivered to street | • | Room/suite | B Telephone number | 0.0 |
| | | W. JACKSON BLVD., 2ND | | | 312-884-40 | |
| | | own, state or province, country, and ZIP or foreign p | ostal code | | C If exemption application is p | ending, check here |
| | | CAGO, IL 60604-3034 | Instal satura of a fe | armar public about | D 1 Foreign organizations | a check here |
| Gil | песк | all that apply: Initial return | Amended return | ormer public charity | i Foreigh organizations | s, check here |
| | | . Address change | Name change | | Foreign organizations me check here and attach co | eting the 85% test, |
| <u> </u> | hack | type of organization: X Section 501(c)(3) ex | | <u> </u> | 1 | |
| Ϊ, | _ | | Other taxable private foundation | ation | E If private foundation sta under section 507(b)(1) | |
| L Fa | | rket value of all assets at end of year J Accounti | | Accrual | F If the foundation is in a | |
| | | · | her (specify) | | under section 507(b)(1) | |
| • | | 93,505. (Part I, colu | | basis.) | , , , | |
| Pa | ırt I | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not | (a) Revenue and | (b) Net investment | (c) Adjusted net | (d) Disbursements for charitable purposes |
| | | necessarily equal the amounts in column (a)) | expenses per books | income | income | (cash basis only) |
| | 1 | Contributions, gifts, grants, etc., received | 439,439. | 1 July 25 | N/A | - 1 3 |
| | 2 | Check In the foundation is not required to attach Sch. B | , x x | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| | 3 | Interest on savings and temporary cash investments | 16. | 16. | | STATEMENT 1 |
| | 4 | Dividends and interest from securities | | | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| | 5a | Gross rents RE | CEIVED | * * * | | \$4.5 |
| | _ | Net rental income or (loss) | 7 | 5" - \$^^^ * \$\frac{5}{2} \times \time | 2 | - 2 - 2 - 2 - 3 - 3 - 3 - 3 - 3 - 3 - 3 |
| ne | | Net gain or (loss) from sale of assets not on neglo | - n 7 mus - 191. | i i v y i Fr. , | | Set |
| Revenue | b | assets on line 6a | | 0. | , , , , , , , , , , , , , , , , , , , | - (1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 |
| Ŗ | 7 | Capital gain net income (from Part IV, line 2) Net short-term capital gain | SEN HE | | , 'A 1, " 4, Lau_5 | - W L |
| | 9 | Income modifications | | | | |
| | | Gross sales less returns | | | | ************************************** |
| | | Less Cost of goods sold | | 3 - 3 - 1 - 1 - 1 - 1 - 1 - 1 - 2 - 2 | 277 - X X X X 12 X X X X X X X X X X X X X X | 1 4, |
| | l | Gross profit or (loss) | | | | - |
| | 11 | Other income | | | | · *** * * * * * * * * * * * * * * * * * |
| | 12 | Total Add lines 1 through 11 | 439,455. | 16. | | |
| | 13 | Compensation of officers, directors, trustees, etc | 0. | 0. | | 0. |
| | 14 | Other employee salaries and wages | | | | |
| v | 15 | Pension plans, employee benefits | | | | |
| nse | 16a | Legal fees | 1 005 | | | 0. |
| Expense | þ | Accounting fees STMT 2 | 1,925. | 0. | | 0. |
| | 1 | Other professional fees | | | | |
| ati v | 17 | Interest Taxes | | | | |
| stra | 18 19 | Depreciation and depletion | | | | 7.1. 2 THIS S |
| | 20 | Occupancy | | | | |
| Adn | 21 | Travel, conferences, and meetings | | | | |
| Ď | 22 | Printing and publications | | | | |
| Operating and Administrative | 23 | Other expenses STMT 3 | 47. | 0. | | 0. |
| atin | 1 | Total operating and administrative | | | | |
| per | | expenses. Add lines 13 through 23 | 1,972. | 0. | N K KIVI C STI | 0. |
| 0 | 25 | Contributions, gifts, grants paid | 374,282. | · Libra & Arbitili A | | 374,282. |
| | 26 | Total expenses and disbursements. | | | | 0.000 |
| | ļ | Add lines 24 and 25 | 376,254. | 0. | , , | 374,282. |
| | 27 | Subtract line 26 from line 12: | | | , , , , , , , , , , , , , , , , , , | |
| | | Excess of revenue over expenses and disbursements | 63,201. | 1.6 | | glacing and a second |
| | | Net investment income (if negative, enter -0-) | 8. 4 | 16. | N/A | * |
| | . ^ | BRUIETER DET IRCOMO (d'nocative enter -C \ | AND REPORT OF THE REPORT OF THE PARTY OF THE | product and the second | -: IN / A | 1 |

LHA For Paperwork Reduction Act Notice, see instructions

Form **990-PF** (2013)

THE BELLICK FOUNDATION

| orm 99 | 30-PF (2013) C/O WOLVERINE TRADING, | LLC | 30-00 | 064562 Page 2 | |
|---|---|-----------------------------------|----------------|-----------------------|--|
| Attached schedules and amounts in the description | | Beginning of year | End of ye | f year | |
| rart | Balance Sneets column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value | |
| 1 | Cash - non-interest-bearing | | | 00 505 | |
| | Savings and temporary cash investments | 29,804. | 93,505. | 93,505. | |
| 3 | Accounts receivable - | - | | | |
| | Less: allowance for doubtful accounts | | | | |
| 4 | Pledges receivable | - | | | |
| | Less: allowance for doubtful accounts | | | | |
| 5 | Grants receivable | | | | |
| 6 | Receivables due from officers, directors, trustees, and other | 500. | | | |
| 1_ | disqualified persons | 500. | | | |
|] 7 | Other notes and loans receivable | i | | المستعدية والمستعدية | |
| | Less: allowance for doubtful accounts | | | | |
| = 1 | Inventories for sale or use | | | | |
| 9 | Prepaid expenses and deferred charges a Investments - U.S. and state government obligations | | | | |
| | | | | | |
| - 1 | b Investments - corporate stock c Investments - corporate bonds | - | | | |
| | investments - ton por ate bonds investments - land, buildings, and equipment basis | | | | |
| 11 | | | | | |
| 10 | Less accumulated depreciation Investments - mortgage loans | | | | |
| 13 | | | | | |
| 14 | | | | | |
| '' | Less accumulated depreciation | · · · · · · · · · · · · · · · · · | | | |
| 15 | Other assets (describe | , | | | |
| | Total assets (to be completed by all filers - see the | | | | |
| ." | instructions. Also, see page 1, item 1) | 30,304. | 93,505. | 93,505. | |
| 17 | Accounts payable and accrued expenses | | | | |
| 18 | | | | ∞ 1 | |
| مدا . | | | | ! | |
| ₽ 20 | | | | . 1 | |
| Liabilities | | | | | |
| 22 ٿ | Other liabilities (describe |) | | - | |
| ł | · · · · · · · · · · · · · · · · · · · | | | | |
| 23 | Total liabilities (add lines 17 through 22) | 0. | 0. | 1 | |
| | Foundations that follow SFAS 117, check here | | | : | |
| | and complete lines 24 through 26 and lines 30 and 31. | | | | |
| ğ 24 | | | | | |
| [25 | Temporarily restricted | | | | |
| <u>ळ</u> 26 | Permanently restricted . | | | | |
| Ĕ | Foundations that do not follow SFAS 117, check here | | | | |
| Net Assets or Fund Balances | and complete lines 27 through 31. | 220 556 | 220 776 | | |
| g 27 | · · · · · · · · · · · · · · · · · · · | 338,776. | 338,776. | | |
| 9S 28 | · · · · · · · · · · · · · · · · · · · | 0. | -245,271. | | |
| ¥ 29 | | -308,472. | | | |
| ≥ 30 | Total net assets or fund balances | 30,304. | 93,505. | | |
| | | 30,304. | 93,505. | | |
| | Total liabilities and net assets/fund balances | | 75,700.1 | . <u>.</u> . | |
| Par | t III Analysis of Changes in Net Assets or Fund | Balances | | | |
| 1 To | tal net assets or fund balances at beginning of year - Part II, column (a), lii | ne 30 | | | |
| | ust agree with end-of-year figure reported on prior year's return) | - | 1 | 30,304. | |
| • | ter amount from Part I, line 27a | | 2 | 63,201. | |
| | ner increases not included in line 2 (itemize) | | 3 | 0. | |
| - | d lines 1, 2, and 3 | | 4 | 93,505. | |
| - | creases not included in line 2 (itemize) | | 5 | 0. | |
| 3 00 | | column (b), line 30 | 6 | 93,505. | |

Form 990-PF (2013) C/O WOLVERINE TRADING. LLC

| | (a) List and describe the kind(s) of property sold (e.g., rea 2-story brick warehouse; or common stock, 200 shs. Mi | | | · | | | c) Date a (mo., da | | (d) Date sold (mo., day, yr.) | |
|--|--|--|--|--------------------------------------|----------------|---------------------|--|-----------|----------------------------------|--|
| 1a | | | | | <u> </u> | | | | | |
| b NC | ONE | | | | | | | | | |
| <u> </u> | · · · · · · · · · · · · · · · · · · · | | | | | | | | | |
| <u>d</u> e | - | | | | - | | | | | |
| (e) Gross sales price | | reciation allowed ir allowable) | | t or other basis opense of sale | | | | | ın or (loss) (f) mınus (ç | 3) |
| a | | | | | _ | | | | | ···· |
| <u>b</u> | | | | | | | | | · — | |
| <u>c</u> d | | | | | | | | | | |
| e | † | | | | | | | | - | |
| Complete only for assets show | ıng gaın ın colı | ımn (h) and owned by th | ne foundation | on 12/31/69 | | | (1) (| Sains (Co | ol. (h) gaın r | ninus |
| (i) F.M.V. as of 12/31/69 | | Adjusted basis of 12/31/69 | | cess of col. (i) col. (j), if any | | | | | ot less than from col. (h | |
| <u>a</u> | | | | | | | | | | |
| <u>b</u> | - | | | | | | | | | |
| d | ļ | | | | | | | | | |
| е | | | | | \dashv | | | | | |
| | | f gain, also enter | ın Part I. line 7 | 7 | ٦ | | | | | |
| 2 Capital gain net income or (net o | capital loss) | If (loss), enter -0- | ın Part I, line | 7 | | 2 | | | | |
| 3 Net short-term capital gain or (lo | | I in sections 1222(5) and | d (6): | | | | | | | |
| If gain, also enter in Part I, line 8 | | | | | \mid | ا ، | | | | |
| If (loss), enter -0- in Part I, line 8 | Under Sec | tion 4940(e) for | Reduced | Tax on Net | Inv | estm | ent Inco | me | | |
| (For optional use by domestic priva | | | | | | | | | | |
| | | • | 5 (u) 45 (u) | | | •, | | | | |
| If section 4940(d)(2) applies, leave | this part blank | • | | | | | | | | |
| Was the foundation liable for the se | ction 4942 tax | on the distributable amo | ount of any ye | ar ın the base per | rıod? | | | | | |
| If "Yes," the foundation does not qu | | | nolete this pai | | | | | | | Yes X No |
| | i each column | for sook waars aaa tha in | | | ntrion | | | | | Yes X No |
| Daga a \$17.4 | | for each year; see the in: | | | | | | | | (d) |
| (a) Base period years Calendar year (or tax year begin | nina iu) | for each year; see the in: (b) Adjusted qualifying disti | structions bef | | (c) | | use assets | | | (d) |
| Calendar year (or tax year begini | ning in) | (b) Adjusted qualifying disti | structions bef ributions | ore making any e | (c) | ıtable- | | <u> </u> | | (d) ition ratio ded by col. (c)) |
| Base period years Calendar year (or tax year begini 2012 2011 | ning in) | (b) Adjusted qualifying distr 274 | structions bef | ore making any e | (c) | ıtable- | use assets 0,753. | <u> </u> | | (d) ition ratio ded by col. (c)) 4 • 523398 |
| Calendar year (or tax year begini 2012 | ning in) | (b) Adjusted qualifying distribution 2742 | ributions bef 4,810. 2,658. 6,910. | ore making any e | (c) | 12 13 | 0,753. 1,113. 2,239. | | | (d) ultion ratio ded by col. (c)) 4.523398 2.003567 1.489046 |
| Calendar year (or tax year begins 2012 2011 2010 2009 | ning in) | (b) Adjusted qualifying distribution (a) 274 242 196 | structions before the structions 4,810. 2,658. 6,910. 5,770. | ore making any e | (c) | 6 12 13 | 0,753. 1,113. 2,239. 5,891. | | | (d) ution ratio ded by col. (c)) 4.523398 2.003567 1.489046 .557579 |
| 2012 2011 2010 | ning in) | (b) Adjusted qualifying distribution (a) 274 242 196 | ributions bef 4,810. 2,658. 6,910. | ore making any e | (c) | 6 12 13 | 0,753. 1,113. 2,239. | | | (d) lition ratio ded by col. (c)) 4 • 523398 2 • 003567 |
| Calendar year (or tax year begins 2012 2011 2010 2009 2008 2 Total of line 1, column (d) | | (b) Adjusted qualifying distribution (a) 274 242 196 75 | structions before the structions 4,810. 2,658. 6,910. 5,770. 6,324. | ore making any e | (c) onchar | 12 13 13 | 0,753. 1,113. 2,239. 5,891. | | | (d) ition ratio ded by col. (c)) 4 . 523398 2 . 003567 1 . 489046 . 557579 1 . 542912 |
| Calendar year (or tax year begins 2012 2011 2010 2009 2008 | e 5-year base p | Adjusted qualifying distribution 274 242 199 79 50 | structions before the structions 4,810. 2,658. 6,910. 5,770. 6,324. | ore making any e | (c) onchar | 12 13 13 | 0,753. 1,113. 2,239. 5,891. | | | (d) Ition ratio ded by col. (c)) 4.523398 2.003567 1.489046 .557579 1.542912 |
| 2012 2011 2010 2009 2008 2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in exist | e 5-year base patence if less that | Adjusted qualifying distribution 274 242 196 75 50 period - divide the total oran 5 years | structions before the structions 4,810.2,658.6,910.5,770.6,324. | ore making any e | (c) onchar | 12 13 13 | 0,753. 1,113. 2,239. 5,891. | 2 | | (d) ition ratio ded by col. (c)) 4.523398 2.003567 1.489046 .557579 1.542912 10.116502 |
| 2012 2011 2010 2009 2008 2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in exist | e 5-year base patence if less that | Adjusted qualifying distribution 274 242 196 75 50 period - divide the total oran 5 years | structions before the structions 4,810.2,658.6,910.5,770.6,324. | ore making any e | (c) onchar | 12 13 13 | 0,753. 1,113. 2,239. 5,891. | 2 3 | | (d) Ition ratio ded by col. (c)) 4.523398 2.003567 1.489046 .557579 1.542912 10.116502 2.023300 |
| 2012 2011 2010 2009 2008 2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in exist 4 Enter the net value of noncharit 5 Multiply line 4 by line 3 | e 5-year base patence if less that | Adjusted qualifying distribution 274 242 199 79 50 period - divide the total oran 5 years s for 2013 from Part X, In | structions before the structions 4,810.2,658.6,910.5,770.6,324. | ore making any e | (c) onchar | 12 13 13 | 0,753. 1,113. 2,239. 5,891. | 2 3 4 | | (d) Ition ratio ded by col. (c)) 4.523398 2.003567 1.489046 .557579 1.542912 10.116502 2.023300 143,455 |
| 2012 2011 2010 2009 2008 2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in exist. 4 Enter the net value of noncharit. 5 Multiply line 4 by line 3 6 Enter 1% of net investment income | e 5-year base patence if less that | Adjusted qualifying distribution 274 242 199 79 50 period - divide the total oran 5 years s for 2013 from Part X, In | structions before the structions 4,810.2,658.6,910.5,770.6,324. | ore making any e | (c) onchar | 12 13 13 | 0,753. 1,113. 2,239. 5,891. | 3 4 | | (d) ition ratio ded by col. (c)) 4.523398 2.003567 1.489046 .557579 1.542912 10.116502 2.023300 143,455 |
| 2012 2011 2010 2009 2008 2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in exist | e 5-year base patence if less that able-use assets | Adjusted qualifying distribution 274 242 199 79 50 period - divide the total oran 5 years s for 2013 from Part X, li | structions bef ributions 4,810. 2,658. 6,910. 5,770. 6,324. In line 2 by 5, Inne 5 | Net value of no | (c) nnchar | 12 13 13 3 | 0,753. 1,113. 2,239. 5,891. 6,505. | 2 3 4 5 6 | | (d) ultion ratio ded by col. (c)) 4 . 523398 2 . 003567 1 . 489046 . 557579 |

| | • | | | | | |
|-------------|---|-----------------|-------------|-----------|-------------|-------------|
| | THE BELLICK FOUNDATION | | | | | |
| <u>Forn</u> | | | 0645 | | | Page 4 |
| Pa | art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494 | 18 - | see in | stru | ctio | ns) |
| 1a | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. | ĺ | | | | |
| | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) | | | | | - |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 💹 and enter 1% | 1 | | | | 0. |
| | of Part I, line 27b | | | | | |
| C | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). | | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 2 | | | | 0. |
| 3 | · · · · · · · · · · · · · · · · · · · | 3 | | | _ | 0. |
| 4 | , | 4 | | | | 0. |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | 5 | | | | 0. |
| 6 | Credits/Payments: | | | | | |
| | 2013 estimated tax payments and 2012 overpayment credited to 2013 | | | | | |
| | Exempt foreign organizations - tax withheld at source | 1 | | | | |
| | Tax paid with application for extension of time to file (Form 8868) | | | | | 1 |
| | I Backup withholding erroneously withheld | | <u>-</u> | | | |
| 7 | | 7 | | | | <u> 20.</u> |
| 8 | | 8 | | | | |
| 9 | , | 9 | | | | |
| 10 | | 10 | | | | 20. |
| _ | | 11 | | | | 0. |
| | art VII-A Statements Regarding Activities | | | | Yes | No |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in | | - | | 162 | |
| | any political campaign? | • | - | <u>1a</u> | | X |
| Ď. | Did it spend more than \$100 during the year (either directly) or indirectly) for political purposes (see instructions for the definition)? | | - | <u>1b</u> | | <u>X</u> |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published | or | | | | 1 |
| | distributed by the foundation in connection with the activities. | | | | | 37 |
| | Did the foundation file Form 1120-POL for this year? | | · | <u>1c</u> | | X |
| (| 1 Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | | - 1 | | | · |
| | (1) On the foundation. \blacktriangleright \$\\ 0 \cdot \(\) \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | ļ | | | |
| e | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | İ | | | |
| | managers. > \$ 0. | | | | : | X |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | | 2_ | | |
| | If "Yes," attach a detailed description of the activities. | | | | | |
| 3 | | | ì | 9 | - | · · |
| 4. | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | | ⊦ | 3 4a | | X |
| | a Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year? | N/ | /a | 4b | | <u>A</u> |
| 5 | | 14/ | ^^ | 5 | | x |
| 3 | If "Yes," attach the statement required by General Instruction T. | | İ | | | - 22 |
| e | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | ł | | | , |
| U | By language in the governing instrument, or | | I | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law | w | i | | | 1 |
| | remain in the governing instrument? | | | 6 | х | |
| 7 | | | | 7 | X | |
| • | bit the foundation have at load top, see in accept at any time coming the jear in 100, complete it art in coming the | | · | | | |
| 8: | a Enter the states to which the foundation reports or with which it is registered (see instructions) | | ĺ | | | , |
| - | IL | | | | | |
| 1 | of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | | _ | | | 1 |
| • | of each state as required by General Instruction G? If "No," attach explanation | | | 8b | X | - |
| 9 | | ar | | <u> </u> | | |
| • | year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV | | | 9 |] | X |
| 10 | Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule listing their names and addresses | | Ī | 10 | | X |

| | THE BELLICK FOUNDATION | | | | |
|----|---|-------------------|--|----------|----------|
| | 1990-PF (2013) C/O WOLVERINE TRADING, LLC | 30-0064 | <u> 562</u> | | Page 5 |
| _ | 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 | | X |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory |)rivileges? | | | |
| | If "Yes," attach statement (see instructions) | | 12 | 77 | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | • | 13 | X | L |
| | Website address ► N/A | - 212 00 | | 000 | |
| 14 | | ≥ 312-88 | | | |
| 46 | Located at ► 175 W. JACKSON BOULEVARD, 2ND FLOOR, CHICAGO, IL Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | ZIP+4 ▶ <u>60</u> | 004 | _ | |
| 15 | • | 15 | λī | /A | . Ш |
| 40 | and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank, | 13 | | Yes | No |
| 10 | Securities, or other financial account in a foreign country? | | 16 | 163 | X |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign | | 10 | <u> </u> | |
| | country | | | | |
| P | art VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | —— | | <u> </u> |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | | Yes | No |
| 1: | a During the year did the foundation (either directly or indirectly): | | | | |
| • | | es X No | | | , |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | | |
| | a disqualified person? | es X No | | | : |
| | · — | es X No | | | |
| | <u>==</u> | es X No | | | , |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | | | | |
| | | es X No | | | |
| | (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 | | | | |
| | | es X No | | | |
| 1 | b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | | | | |
| | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | N/A | 1b | _ | |
| | Organizations relying on a current notice regarding disaster assistance check here | ightharpoons | | | |
| | 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 | | | | ٠ . |
| | before the first day of the tax year beginning in 2013? | | 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)): | | | İ | , |
| ; | a At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning | n g | | | |
| | before 2013? | 'es 🗓 No | | | , |
| | If "Yes," list the years >,,,,,,, | | | | , |
| | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect | :t | | | , |
| | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attac | h | _ | | _ 1 |
| | statement - see instructions.) | N/A | 2b | | |
| | c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. | | | l | - |
| | > | | | | |
| 3 | a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | | , |
| | | 'es X No | | | , |
| | b If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons a | | | | ; |
| | May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to | | | | ! |
| | of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule | | | | |
| | Form 4720, to determine if the foundation had excess business holdings in 2013.) | N/A | 3b | <u> </u> | <u> </u> |
| | a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | • | 4a | ļ | X |
| | b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpo: | e that | 1. 1 | l | |

had not been removed from jeopardy before the first day of the tax year beginning in 2013?

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

THE BELLICK FOUNDATION

| Form 990-PF (2013) C/O WOLVERINE TRADING, LLC | 30-0 | 064562 Page 7 |
|--|--|------------------|
| Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued) | dation 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 | | |
| | | |
| | | |
| | | ▶ 0 |
| Total number of others receiving over \$50,000 for professional services 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 pi | tistical information such as the roduced, etc. | Expenses |
| 1 N/A | | |
| 2 | | |
| 3 | | |
| 4 | | |
| Part IX-B Summary of Program-Related Investments | an loss 1 and 0 | Amount |
| Describe the two largest program-related investments made by the foundation during the tax year 1 N/A | on lines 1 and 2. | Amount |
| 2 | | |
| All other program-related investments. See instructions. | | |
| | | |

Total. Add lines 1 through 3

C/O WOLVERINE TRADING, LLC

| P | Art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four | ndations, s | see instructions.) |
|----------|---|---------------|--------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| a | Average monthly fair market value of securities | 1a | 0. |
| Ь | Average of monthly cash balances | 1b | 145,640. |
| c | Fair market value of all other assets | 1c | |
| ď | Total (add lines 1a, b, and c) | 1d | 145,640. |
| e | 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 | 145,640. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 2,185. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 143,455. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 7,173. |
| P | art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.) | d certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 7,173. |
| 2a | Tax on investment income for 2013 from Part VI, line 5 | | |
| b | Income tax for 2013. (This does not include the tax from Part VI.) | | |
| C | Add lines 2a and 2b | 2c | 0. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 7,173. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 7,173. |
| 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 | 7,173. |
| <u>P</u> | Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| а | | 1a | 374,282. |
| 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: | - | |
| а | | 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 | 374,282. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | _ |
| | income. Enter 1% of Part I, line 27b | 5 | 0. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 374,282. |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years. | qualifies for | the section |

Form **990-PF** (2013)

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2012 | (c) 2012 | (d) 2013 |
|---|---------------|----------------------------|-------------|--------------------|
| 1 Distributable amount for 2013 from Part XI, | | | | |
| line 7 | | | | 7,173. |
| 2 Undistributed income, if any, as of the end of 2013 | | | | |
| a Enter amount for 2012 only | | | 0. | |
| b Total for prior years: | | 0 | | |
| Excess distributions carryover, if any, to 2013: | | 0. | | |
| - 1 | | | | |
| a From 2008 54,501. b From 2009 68,975. | | | | ! |
| b From 2009 68,975. c From 2010 190,298. | | | | , |
| d From 2011 236, 602. | | | | • |
| e From 2012 271,772. | | | | |
| f Total of lines 3a through e | 822,148. | | | _ |
| 4 Qualifying distributions for 2013 from | | | | |
| Part XII, line 4: ►\$ 374,282. | | | | |
| a Applied to 2012, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | | | | 4 |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | • | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2013 distributable amount | | | | 7,173. |
| e Remaining amount distributed out of corpus | 367,109. | | | ; |
| 5 Excess distributions carryover applied to 2013 (If an amount appears in column (d), the same amount must be shown in column (a)) | 0. | | - | 0. |
| 6 Enter the net total of each column as indicated below: | - | • • | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 1,189,257. | | - | s. |
| b Prior years' undistributed income. Subtract | | | *** | |
| line 4b from line 2b | * | 0. | | |
| c Enter the amount of prior years' | | | | |
| undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | 0. | , - | |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount - see instructions | | 0. | | } |
| e Undistributed income for 2012. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2013. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2014 | | | | 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 2008 | F4 F01 | | | |
| not applied on line 5 or line 7 | 54,501. | | | |
| 9 Excess distributions carryover to 2014. | 1 124 756 | | | |
| Subtract lines 7 and 8 from line 6a | 1,134,756. | | | |
| 10 Analysis of line 9: | | 1 | | |
| a Excess from 2009 b Excess from 2010 190, 298. | | | | |
| | | | | |
| c Excess from 2011 236,602. d Excess from 2012 271,772. | | | | |
| e Excess from 2013 367, 109. | | | | |
| E LAGGOS HOTH ZUTU JUT 1 TUJ • | · | I | <u> </u> | Form 000 PE (2012) |

c Any submission deadlines:

b The form in which applications should be submitted and information and materials they should include:

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

C/O WOLVERINE TRADING, LLC

| 3 Grants and Contributions Paid During the | | Payment | | |
|--|---|---------------------------|----------------------------------|------------------|
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| BERNARD ZELL ANSHE EMET DAY SCHOOL | NONE | PUBLIC CHARITY | GENERAL PURPOSES | |
| 751 NORTH BROADWAY STREET CHICAGO, IL 60613 | | | | 12,550 |
| FRIENDS OF THE ISRAEL DEFENSE FORCES (FIDF) 29 E. MADISON, STE 802 | NONE | PUBLIC CHARITY | GENERAL PURPOSES | |
| CHICAGO, IL 60602 | | | | 4,000 |
| AUTISM SPEAKS 1060 STATE ROAD, 2ND FLOOR | NONE | PUBLIC CHARITY | GENERAL PURPOSES | |
| PRINCETON, NJ 08540 | | <u> </u> | | 5,000 |
| JEWISH UNITED FUND 1 SOUTH FRANKLIN STREET | NONE | RELIGIOUS ORGANIZATION | GENERAL PURPOSES | |
| CHICAGO, IL 60606-4594 | | | | 31,300 |
| LATIN SCHOOL OF CHICAGO 59 W. NORTH BLVD | NONE | EDUCATION INSTITUTION | GENERAL PURPOSES | 0.500 |
| CHICAGO IL 60610 Total SEE C | ONTINUATION SHE | ET(S) | ▶ 3a | 8 500 374 282 |
| b Approved for future payment | ONTINOMITOR BILL | | 00 | 3/4,202 |
| NONE | | | | |
| | | | | <u></u> |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total | | | ▶ 3b | |

| Part XVI-A | Analysis of | Income-Producing | Activities |
|------------|--------------|------------------|-------------------|
| Fait AVI-A | Milalysis Ul | income-Froducing | MCfinifie2 |

| Enter gross amounts unless otherwise indicated. | Unrelated business income | | | ded by section 512, 513, or 514 | (e) |
|--|---------------------------|-----------------------------|-------------------------------|--|-----------------------------------|
| • | (a) Business code | (b) Amount | (C) Exclu- sion code | (d) Amount | Related or exempt function income |
| 1 Program service revenue: | Code | | 1 | | |
| a b | <u> </u> | | <u> </u> | | |
| | | | | | |
| | | | _ | | |
| | | | | | |
| e | · | | l — | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | _ | | ! | 16. |
| 4 Dividends and interest from securities | | | | | |
| 5 Net rental income or (loss) from real estate: | | - | | | |
| a Debt-financed property | | | | | · · · |
| b Not debt-financed property | | | | | - |
| 6 Net rental income or (loss) from personal | | | | | |
| property | | | | | |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | | | |
| 9 Net income or (loss) from special events | | | | | |
| 10 Gross profit or (loss) from sales of inventory | | | | | <u> </u> |
| 11 Other revenue: | | | | | |
| a | | | | | |
| b | | | | | <u> </u> |
| c | | <u> </u> | ļ | | |
| d | | | <u> </u> | | |
| e | - | | | | |
| 12 Subtotal. Add columns (b), (d), and (e) | <u> </u> | 0. | | 0. | 16. |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 _ | 16. |
| (See worksheet in line 13 instructions to verify calculations.) | | | | | |
| Part XVI-B Relationship of Activities | to the Acc | omplishment of Ex | cemp | t Purposes | |
| Line No. Explain below how each activity for which inc | ome is reported | ın column (e) of Part XVI-A | contri | buted importantly to the accor | nolishment of |
| the foundation's exempt purposes (other than | | | | ,,, | |
| 3 WHILE PROGRAMS ARE BEI | NG DEVE | LOPED BY THE | FC | OUNDATION'S DI | RECTORS, |
| 3 WHILE PROGRAMS ARE BEIN3 CONTRIBUTIONS ARE BEIN | | | | | |
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| 323621 | | | | | Form 990-PF (2013) |
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Form 990-PF (2013) C/O WOLVERINE TRADING, LLC 30-0064562

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable

| | | Exempt Organi | | | | | | | |
|-----|----------------|------------------------------------|-----------------------|--|------------------------------------|-------------------------|---------------------------------------|---------------------------------------|--------------------|
| ı | | | | | g with any other organizatio | | on 501(c) of | | Yes No |
| | | | | | 7, relating to political organi | zations? | | | |
| a | Transfers f | rom the reporting founda | ation to a nonchar | itable exempt org | anization of: | | | | |
| | (1) Cash | • | | | | | | 1a(1) | X |
| | (2) Other a | assets . | | | • | | | 1a(2) | X |
| þ | Other trans | actions: | | | | | | | |
| | (1) Sales | of assets to a noncharitat | ble exempt organi | zation | | | | 1b(1) | X |
| | (2) Purcha | ases of assets from a nor | ncharitable exemp | t organization | | | | . 1b(2) | X |
| | (3) Rental | of facilities, equipment, | or other assets | | • | | | 1b(3) | X_ |
| | (4) Reimb | ursement arrangements | _ | | | | | 1b(4) | X |
| | (5) Loans | or loan guarantees | | | | | | 1b(5) | X |
| | (6) Perfor | mance of services or me | mbership or fundi | raising solicitatio | ns | | | 1b(6) | X |
| c | Sharing of | facilities, equipment, mai | iling lists, other as | ssets, or paid em | ployees | | | 10 | X |
| | | | | | dule. Column (b) should alv | vays show the fair m | arket value of the go | oods, other ass | ets, |
| | or services | given by the reporting fo | oundation. If the fo | oundation receive | ed less than fair market valu | e in any transaction | or sharing arranger | nent, show in | |
| | column (d) | the value of the goods, | other assets, or se | ervices received. | | | | | |
| a)ı | ine no | (b) Amount involved | (c) Name | of noncharitable | exempt organization | (d) Description | of transfers, transaction | ns, and sharing an | rangements |
| | | | | N/A | | | <u>.</u> | | |
| | | | | | | | | | |
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| | | | <u> </u> | | ··········· | | | | ····· |
| 22 | Is the four | ndation directly or indirec | tly affiliated with | or related to, one | or more tax-exempt organi | zations described | | | |
| 24 | | 501(c) of the Code (other | | | | | | Yes | X No |
| | | mplete the following sch | | 1(0)(0)) 01 111 0000 | .0 027 | | | | |
| | 11 163, 00 | (a) Name of org | | | (b) Type of organization | | (c) Description of re | lationship | |
| _ | | N/A | , | ··· | (1/1/2) | | · · · · · · · · · · · · · · · · · · · | · · · · · · · · · · · · · · · · · · · | |
| | | 14/11 | | | | | | | |
| | | | | | | | | | |
| - | | | | | | | | | |
| | | | | | | | | | |
| | Under | penzities of periury. I declare | that Have examined | this return, including | g accompanying schedules and | statements, and to the | best of my knowledge | - Inc | |
| Si | ign and be | elier, it is true correct, and cor | mplete Detlaration o | of preparer (other that | n taxpayer) is based on all inform | nation of which prepare | has any knowledge | May the IRS return with th | e preparer |
| H | ere | II Val | W.XX | | 16/15/14 | TREASU | ਰਜ਼ਰਾ | shown below | |
| | | nature of officer or trustee | | ······································ | Date | Title | /KBK | | |
| | Oigi | Print/Type preparer's na | | Preparer's s | | Date | Check If | PTIN | |
| | | Transcrype preparer Sile | unite | 1 Topaler 3 S | | | self- employed | | |
| P | aid | TOID! " " | * X 111217 M32 | 100) | K Magazi | 6-11-14 | 22 Sp.0,00 | D01220 | 511 |
| | aiu reparer | JOHN K. FI | | AUDDOU'S C | ASSOCIATES | LTD. | Firm's EIN ► 3 | P01338 | |
| | se Only | Firm's name ► JOH | ш к. ғь | AHERTY & | ASSOCIATES) | LTD. | CHINSEIN > 3 | 0-3/431 | T.# |
| J | oe Only | Eurola address > 4.4 | 1 57 77 7 | TWOOM BY | III) CIITME 1 | 200 | | _ | |
| | | Firm's address ► 11 | | | | .300 | Dhan - 31 | 2 2 4 4 4 | 61 E |
| | | L CH | HICAGO, I | <u> LL 60604</u> | <u> </u> | | Phone no. 31 | | |
| | | | | | | | | Form 99 | 0-PF (2013) |

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.
 ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Name of the organization

THE BELLICK FOUNDATION

C/O WOLVERINE TRADING, LLC

Employer identification number

30-0064562

Organization type (check one): Filers of: Section: 501(c)() (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt chantable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$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, chantable, 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 its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

THE BELLICK FOUNDATION

C/O WOLVERINE TRADING, LLC

Employer identification number

30-0064562

| Part I | Contributors (see instructions). Use duplicate copies of Part I if a | additional space is needed. | |
|------------|--|-----------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | ROBERT R AND SHERYL D. BELLICK 1856 N. ORCHARD STREET CHICAGO, IL 60614-5106 | \$\$ <u>439,439</u> . | Person X Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |

Name of organization

Employer identification number

THE BELLICK FOUNDATION

C/O WOLVERINE TRADING, LLC

30-0064562

| Noncash Property (see instructions) Use duplicate copies of Pa | art II if additional space is needed. | |
|--|--|--|
| (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | |
| | \$ | |
| (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | |
| (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | |
| | \ \$ | |
| (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | |
| | | |
| (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | |
| | \$ | |
| (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | |
| | | |
| | (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given (b) Description of noncash property given | Description of noncash property given (b) (c) FMV (or estimate) (see instructions) (b) Description of noncash property given (c) (c) FMV (or estimate) (see instructions) (d) (e) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (f) Description of noncash property given (ge instructions) (h) Description of noncash property given (ge instructions) (h) Description of noncash property given (h) Description of noncash property given (h) Description of noncash property given (h) Description of noncash property given (h) Description of noncash property given (h) Description of noncash property given (c) FMV (or estimate) (see instructions) |

Employer identification number

| V.TOW O. | ICK FOUNDATION ERINE TRADING, LLC | | | 30-0064562 | | |
|--------------------------|---|---|---|--|--|--|
| art | Exclusively religious, charitable, etc., individue ar. Complete columns (a) through (e) and the fine total of exclusively religious, charitable, etc., close duplicate copies of Part III if additional s | al contributions to section 501(c) ollowing line entry. For organization contributions of \$1,000 or less for to pace is needed. | (7), (8), or (10) organizations completing Part III, enter the year. (Enter this information onco | ons that total more than \$1,000 for the | | |
| a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Desc | cription of how gift is held | | |
| | | | | | | |
| | | (e) Transfer of gift | | | | |
| | Transferee's name, address, and a | ZIP + 4 | Relationship of tra | ansferor to transferee | | |
| a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Desc | cription of how gift is held | | |
| | Transferee's name, address, and | (e) Transfer of gift ZIP + 4 | | ansferor to transferee | | |
|) No. rom art I | (b) Purpose of gift | (c) Use of gift | (d) Desc | cription of how gift is held | | |
| | | (e) Transfer of gift | | | | |
| | Transferee's name, address, and ZIP + 4 | | Relationship of tra | ansferor to transferee | | |
| n) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Des | cription of how gift is held | | |
| | | | | | | |
| | (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee | | | | | |
| | Transferee's name, address, and | | neialionship of the | unistriction to bights letter | | |

| FORM 990-PF INTEREST ON SAVI | NGS AND TEM | PORARY CASH | INVESTMENTS | STATEMENT 1 |
|--------------------------------|------------------------------|-------------|------------------------------|---------------------------------|
| SOURCE | (A REVE PER B | NUE NET | (B) INVESTMENT INCOME | (C) ADJUSTED NET INCOME |
| WELLS FARGO | | 16. | 16. | |
| TOTAL TO PART I, LINE 3 | | 16. | 16. | |
| FORM 990-PF | ACCOUNTI | NG FEES | | STATEMENT 2 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | NET INVEST- | (C) ADJUSTED NET INCOM | (D) CHARITABLE E PURPOSES |
| ACCOUNTING FEES | 1,925. | 0 | • | 0. |
| TO FORM 990-PF, PG 1, LN 16B | 1,925. | 0 | • | 0. |
| FORM 990-PF | OTHER E | XPENSES | | STATEMENT 3 |
| DESCRIPTION | | NET INVEST- | | (D) CHARITABLE E PURPOSES |
| ANNUAL STATE FEES BANK FEES | 15. 32. | | • | 0. |
| TO FORM 990-PF, PG 1, LN 23 | 47. | 0 | • | 0. |

| 3 Grants and Contributions Paid During the | | · · · · · · · · · · · · · · · · · · · | | |
|--|--|---------------------------------------|----------------------------------|----------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | Control | - |
| | | | hamman bunnagag | |
| AXE A WISH FOUNDATION OF ILLINOIS OO. BOX 97104 | NONE | PUBLIC CHARITY | GENERAL PURPOSES | |
| ASHINGTON DC 20090 | | | _ | 6,00 |
| ICHAEL ROLFE PANCREATIC CANCER OUNDATION | NONE | PUBLIC CHARITY | GENERAL PURPOSES | |
| 7 NORTH STATE STREET, SUITE 1550 HICAGO, IL 60602 | | | _ | 31,03 |
| | | | | <u>.</u> |
| MUSEUM OF CONTEMPORARY ART CHICAGO | NONE | PUBLIC CHARITY | GENERAL PURPOSES | |
| 220 E. CHICAGO AVENUE CHICAGO IL 60611-2644 | | | | 64,60 |
| | | | | |
| SHALVA | NONE | PUBLIC CHARITY | GENERAL PURPOSES | |
| 315 FIFTH AVENUE | | | | 3 |
| NEW YORK, NY 10016 | | - | | 36 |
| TEMPLE SHALOM | NONE | RELIGIOUS | GENERAL PURPOSES | |
| 3480 N. LAKE SHORE DRIVE | | ORGANIZATION | | |
| CHICAGO, IL 60657 | | | | 1,1 |
| | | DIENT TO CHARTEN | CENTED AT HINDS | |
| THE ARK 6450 N. CALIFORNIA AVENUE | NONE | PUBLIC CHARITY | GENERAL FUNDS | |
| CHICAGO, IL 60645 | | 1 | | 3 |
| | | | | |
| THE WOLCOTT SCHOOL 524 N. WOLCOTT AVENUE | NONE | PUBLIC CHARITY | GENERAL PURPOSES | |
| CHICAGO, IL 60622 | | | | 92,5 |
| UNIVERSITY OF CALIFORNIA BERKELEY | NONE | UNIVERSITY | GENERAL PURPOSES | |
| FOUNDATION | | | | |
| 2080 ADDISON ST, STE 4200 BERKELEY, CA 94720-4200 | | | | 3 |
| | | | | |
| UNIVERSITY OF FLORIDA | NONE | UNIVERSITY | GLYCOGEN STORAGE | |
| PO BOX 100296 | | | DISEASE PROGRAM | |
| GAINSVILLE, FL 32610-0296 | | | | 35,0 |
| AND THE PROPERTY OF THE PROPER | VOVE | INITIDD OF THE | CENTER AT DUMPOCES | |
| UNIVERSITY OF MICHIGAN 3003 S. STATE ST, STE 9000 | NONE | UNIVERSITY | GENERAL PURPOSES | |
| ANN ARBOR, MI 48109-1268 | | | | 5,0 |
| Total from continuation sheets | | | | 312.9 |

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount contribution any foundation manager status of Name and address (home or business) or substantial contributor recipient PUBLIC CHARITY GENERAL PURPOSE CHILDREN'S FUND FOR GLYCOGEN STORAGE NONE DISEASE RESEARCH 917 BETHANY MOUNTAIN RD 1,800. CHESHIRE CT 06410 CHRISTOPHER REEVE FOUNDATION NONE PUBLIC CHARITY GENERAL PURPOSE 636 MORRIS TURNPIKE, STE 3A 500. SHORT HILLS NJ 07078 CURE INTERNATIONAL NONE PUBLIC CHARITY GENERAL PURPOSE P.O. BOX 296 CAMP HILL, PA 17001-9912 600. NONE PUBLIC CHARITY GENERAL PURPOSE GOLD COAST DOWN SYNDROME 915 SOUTH FEDERAL HIGHWAY 100. BOYNTON BEACH, FL 33435 EMORY UNIVERSITY NONE PUBLIC CHARITY GENERAL PURPOSE 201 DOWMAN DR 10,000. ATLANTA GA 30322 PUBLIC CHARITY GENERAL PURPOSE ERIKSON UNIVERSITY NONE 451 N LASALLE ST 500, CHICAGO, IL 60654 NONE PUBLIC CHARITY GENERAL PURPOSE GAME ON SPORTS CAMP FOUNDATION 3000 DUNDEE ROAD, STE 210 550. NORTHBROOK, IL 60062 GASTRO-INTESTINAL RESEARCH FOUNDATION NONE PUBLIC CHARITY GENERAL PURPOSE 70 E. LAKE ST, STE 1015 1,000. CHICAGO, IL 60601 PUBLIC CHARITY GENERAL PURPOSE NONE HIGH JUMP 59 W. NORTH BOULEVARD 1,250. CHICAGO IL 60610 LURIE CHILDREN'S HOSPITAL NONE PUBLIC CHARITY GENERAL PURPOSE 225 EAST CHICAGO AVENUE 50,000. CHICAGO IL 60611-2605 Total from continuation sheets

THE BELLICK FOUNDATION C/O WOLVERINE TRADING, LLC 30-0064562 Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Purpose of grant or Foundation show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor NONE PUBLIC CHARITY GENERAL PURPOSE NATIONAL MARFAN FOUNDATION 22 MANHASSET AVE 136. PORT WASHINGTON, NY 11050 PUBLIC CHARITY GENERAL PURPOSE NETWORK FOR GOOD NONE 1140 CONNECTICUT AVE NW. STE 700 575. WASHINGTON, DC 20036 PUBLIC CHARITY GENERAL PURPOSE NONE NORTHWESTERN UNIVERSITY 1800 SHERIDAN RD 200. EVANSTON IL 60208 PUBLIC CHARITY GENERAL PURPOSE NONE JEWISH UNITED FUND C/O RAZOODONATIONS.ORG 30 S WELLS STREET, ROOM 3134 CHICAGO, IL 60606 100. PUBLIC CHARITY GENERAL PURPOSE SLOAN KETTERING CANCER CENTER NONE 1275 YORK AVE 200. NEW YORK, NY 10065 PUBLIC CHARITY GENERAL PURPOSE NONE JEWISH STUDENT CONNECTION 180 SOUTH BROADWAY, STE 310 650. WHITE PLAINS NY 10605 NONE PUBLIC CHARITY GENERAL PURPOSE US HOLOCAUST MEMORIAL MUSEUM 100 RAOUL WALLENBERG PI SW 365. WASHINGTON DC 20024 PUBLIC CHARITY GENERAL PURPOSE NONE HYDE PARK DAY SCHOOL 1374 E. 60TH ST 2,500. CHICAGO, IL 60637

MISCELLANEOUS

PUBLIC

CHARITIES

GENERAL PURPOSES

NONE

Total from continuation sheets

5,620.

Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No. 1545-1709

| • If yo | u are filing for an Automatic 3-Month Extension, complet | e only Pa | rt I and check this box | | | ightharpoons |
|-------------------------|---|-------------|---|----------------|------------------|------------------|
| If yo | u are filing for an Additional (Not Automatic) 3-Month Ext | tension, c | omplete only Part II (on page 2 of t | his form). | | |
| | complete Part II unless you have already been granted a | | | | | |
| Electr | onic filing (e-file). You can electronically file Form 8868 if y | ou need a | 3-month automatic extension of time | ne to file (6 | months for a | corporation |
| require | ed to file Form 990-T), or an additional (not automatic) 3-mor | nth extens | ion of time. You can electronically fil | le Form 88 | 68 to reques | t an extension |
| of time | to file any of the forms listed in Part I or Part II with the exc | eption of | Form 8870, Information Return for T | ransfers A | ssociated Wi | th Certain |
| Persor | nal Benefit Contracts, which must be sent to the IRS in paper | er format (| (see instructions). For more details o | n the elect | tronic filing of | f this form, |
| vişıt w | ww.irs.gov/efile and click on e-file for Charities & Nonprofits | | | | | |
| Parl | Automatic 3-Month Extension of Time | . Only s | ubmit original (no copies nee | eded). | | |
| A corp | oration required to file Form 990-T and requesting an auton | natic 6-mo | nth extension - check this box and c | complete | | |
| Part I | only | • | · · · | | | .▶ 📖 |
| All oth | er corporations (including 1120-C filers), partnerships, REM | ICs, and tr | rusts must use Form 7004 to reques | t an extens | sion of time | |
| to file i | ncome tax returns. | | | Enter file | r's identifyin | g number |
| Туре | Name of exempt organization or other filer, see instruc | ctions. | | Employer | identification | number (EIN) or |
| print | THE BELLICK FOUNDATION | | | | | |
| | C/O WOLVERINE TRADING, LLC | _ | | | 30-006 | 4562 |
| File by to due date | | ee instruct | tions. | Social sec | curity number | r (SSN) |
| filing you | " 175 W. JACKSON BLVD 2ND F | LOOR | | | | |
| instructi | | reign add | ress, see instructions. | | | |
| | CHICAGO, IL 60604-3034 | | | | | |
| | | | | | | |
| Enter | the Return code for the return that this application is for (file | a separa | te application for each return) | | | 0 4 |
| | | | | | | |
| Applie | eation | Return | Application | | Return | |
| is For | | Code_ | ls For | | | Code |
| Form | 990 or Form 990-EZ | 01 | Form 990-T (corporation) | | | |
| Form | 990-BL | 02 | Form 1041-A | | | 08 |
| Form | 4720 (ındıvıdual) | 03 | Form 4720 (other than individual) | | | 09 |
| Form | 990-PF | 04 | Form 5227 | | | 10 |
| Form | 990-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | | | 11 |
| Form | 990-T (trust other than above) | 06 | Form 8870 | | | 12 |
| | JUDY KULA, C/O | WOLV | ERINE TRADING | | | |
| • Th | e books are in the care of 175 W. JACKSON | | | CHIC | AGO, II | 60604 |
| Te | ephone No. ► 312-884-4000 | | Fax No. ▶ | | | |
| • If t | ne organization does not have an office or place of business | s in the Ur | nited States, check this box | | | . ▶ □ |
| • If t | his is for a Group Return, enter the organization's four digit | Group Exe | emption Number (GEN) I | If this is for | the whole gr | roup, check this |
| box] | If it is for part of the group, check this box | and atta | ich a list with the names and EINs of | f all memb | ers the exten | sion is for. |
| 1 | I request an automatic 3-month (6 months for a corporation | required | to file Form 990-T) extension of time | until | | |
| | AUGUST 15, 2014 , to file the exemp | t organiza | tion return for the organization name | ed above. | The extension | n |
| | is for the organization's return for: | | | | | |
| | ► X calendar year 2013 or | | | | | |
| | tax year beginning | , an | ed ending | | | |
| | | | | | | |
| 2 | If the tax year entered in line 1 is for less than 12 months, o | heck reas | on: Initial return | Final retur | n | |
| | Change in accounting period | | | | | |
| 3a | If this application is for Forms 990-BL, 990-PF, 990-T, 4720 | , or 6069, | enter the tentative tax, less any | | - | |
| | nonrefundable credits. See instructions. | | | 3a | \$ | 0. |
| ь | If this application is for Forms 990-PF, 990-T, 4720, or 6069 | enter an | y refundable credits and | | | |
| - | estimated tax payments made. Include any prior year overp | | | 3b | \$ | 20. |
| С | Balance due. Subtract line 3b from line 3a. Include your pa | | | | | |
| Ü | by using EFTPS (Electronic Federal Tax Payment System). | | | 3c | s | |
| Caut | on. If you are going to make an electronic funds withdrawal | | | | nd Form 8879 | |
| | on, if you are going to make an electronic funds withdrawal | . , | , | | | paymont |
| | | | | | | |

Form 8868 (Rev. 1-2014)

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

LHA 323841 12-31-13 Form **8868** (Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No. 1545-1709

| ● If you | are filing for an Automatic 3-Month Extension, comple | te only Pa | art I and check this box | | | > X |
|---------------------------|--|---------------|---------------------------------------|---------------|--------------------|--------------------|
| If you | are filing for an Additional (Not Automatic) 3-Month Ex | tension, c | complete only Part II (on page 2 of | this form). | | |
| Do not | complete Part II unless you have already been granted a | an automa | ttic 3-month extension on a previou | sly filed Fo | m 8868. | |
| Electro | nic filing (e-file). You can electronically file Form 8868 if y | ou need a | a 3-month automatic extension of ti | me to file (6 | 6 months for | a corporation |
| require | f to file Form 990-T), or an additional (not automatic) 3-mo | nth extens | sion of time. You can electronically | file Form 8 | 368 to reque | est an extension |
| of time | to file any of the forms listed in Part I or Part II with the ex | ception of | Form 8870, Information Return for | Transfers / | Associated \ | With Certain |
| Person | al Benefit Contracts, which must be sent to the IRS in pap | er format | (see instructions). For more details | on the elec | tronic filing | of this form, |
| visit ww | w.irs.gov/efile and click on e-file for Chanties & Nonprofits | ; <u> </u> | _ | | | |
| Part | Automatic 3-Month Extension of Time | e. Only s | submit original (no copies ne | eeded). | | |
| A corpo | ration required to file Form 990-T and requesting an autor | natic 6-mo | onth extension - check this box and | complete | | |
| Part I o | nly | | | | | ▶ 🗀 |
| All othe | r corporations (including 1120-C filers), partnerships, REM | IICs, and t | rusts must use Form 7004 to reque | st an exten | sion of time | |
| to file ır | come tax returns. | | | Enter file | r's identify | ing number |
| Туре о | Name of exempt organization or other filer, see instru | ctions. | | Employe | r identificatio | on number (EIN) or |
| print | THE BELLICK FOUNDATION | | | | | |
| | C/O WOLVERINE TRADING, LLC | | | | 30-00 | 64562 |
| File by the due date | | ee instruc | tions. | Social se | cunty numb | er (SSN) |
| filing your return Se | 175 W. JACKSON BLVD., 2ND | FLOOR | | İ | • | |
| instruction | | oreign add | lress, see instructions. | | | |
| | CHICAGO, IL 60604-3034 | _ | | | | |
| | | | | | | |
| Enter ti | e Return code for the return that this application is for (file | a separa | te application for each return) | | | 0 4 |
| | • | • | , | | | · <u></u> |
| Applica | ition | Return | Application | | | Return |
| ls For | • | Code | Is For | | | Code |
| | 90 or Form 990-EZ | 01 | Form 990-T (corporation) | | | 07 |
| Form 9 | | 02 | Form 1041-A | | | 08 |
| | 720 (individual) | 03 | Form 4720 (other than individual) | | | 09 |
| Form 9 | | 04 | Form 5227 | | | 10 |
| | 90-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | | | 11 |
| | 90-T (trust other than above) | 06 | Form 8870 | | | 12 |
| . 0 0 | JUDY KULA, C/O | | ^ | | | 1 12 |
| • The | books are in the care of ► 175 W. JACKSON | | | - CHIC | AGO T | T. 60604 |
| | phone No. ► 312-884-4000 | рооц. | Fax No. | CILLO | 1100, 1 | T 0000# |
| | e organization does not have an office or place of business | e in the I Ir | | | ··· | ▶ □ |
| | s is for a Group Return, enter the organization's four digit | | | | | group, check this |
| box 🕨 | . If it is for part of the group, check this box | | | | | • • • |
| | request an automatic 3-month (6 months for a corporation | | | | CIS IIIG EXIE | ilsion is ioi. |
| , , | | - | tion return for the organization nam | | The extension | on. |
| - | for the organization's return for: | t organiza | don retain for the organization han | ied above. | THE EXCENSE | 011 |
| | X calendar year 2013 or | | | | | |
| | tax year beginning | 20 | ad anding | | | |
| • | Lax year beginning | , , an | | | - · | |
| o 14 | the tax year entered in line 1 is for less than 12 months, of | book roon | on: Initial return | Final retur | _ | |
| 2 H | Change in accounting period | HECK IEAS | on initial feturit | rinai ietui | " | |
| On 16 | | 0000 | | <u> </u> | <u> </u> | |
| | this application is for Forms 990-BL, 990-PF, 990-T, 4720 | , or 6069, | enter the tentative tax, less any | | | |
| _ | onrefundable credits. See instructions. | | | 3a | \$ | 0. |
| | this application is for Forms 990-PF, 990-T, 4720, or 6069 | • | • | | | 0.0 |
| _ | stimated tax payments made. Include any prior year overp | | | 3b_ | \$ | 20. |
| | alance due. Subtract line 3b from line 3a. Include your pa | • | · · · · · · · · · · · · · · · · · · · | | 1 | _ |
| | y using EFTPS (Electronic Federal Tax Payment System). | • • | | 3c | \$ | 0. |
| Cautio instruc | n. If you are going to make an electronic funds withdrawal | (direct de | bit) with this Form 8868, see Form | 8453-EO a | nd Form 887 | 79-EO for payment |
| LHA 323841 12-31-13 | For Privacy Act and Paperwork Reduction Act Notice, | see instr | uctions. | P | · Form 8 | 3868 (Rev. 1-2014) |