

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



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

2014

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

► 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.

Open to Public Inspection

For ca	endar year 2014, or tax year beginning	, 2014	, and ending		
	foundation]	A Employer identification number 36 - 3865180	
Number a	ey Family Foundation Indistreet (or PO box number if mail is not delivered to street a	nddress)	Room/suite	B Telephone number (see instructions)	
111	West Jackson Boulevard wn, state or province, country, and ZIP or foreign postal code		810	(312) 786-5000	
			50504	C If exemption application is pending, check here.	\Box
Chic		Initial return of a forme	00004	a champaon application is penang, arook nord	ᆜ
G CI	eck all that apply Initial return	Amended return	er public charity	D 1 Foreign organizations, check here ►	Ш
	Address change	Name change		2 Foreign organizations meeting the 85% test, check	$\overline{}$
H Ch		(c)(3) exempt private fou	indation	here and attach computation	Ш
	Section 4947(a)(1) nonexempt charitable trus		I	E If private foundation status was terminated	_
		ounting method X C	ash Accrual	under section 507(b)(1)(A), check here >	
	m Part II, column (c), line 16)	Other (specify)		F If the foundation is in a 60-month termination	\neg
► \$		column (d) must be on c	ash basis)	under section 507(b)(1)(B), check here	
Part	Analysis of Revenue and Expenses (The total of amounts in	(a) Revenue and	(b) Net investment	(c) Adjusted net (d) Disbursements	
	columns (b), (c), and (d) may not neces-	expenses per books	income	income for charitable purposes	
	sarily equal the amounts in column (a) (see instructions))			(cash basis only)	
	Contributions, qifts, grants, etc, received (attach schedule)	1,026,038.			
	2 Ck ► X if the foundn is not required to attach Sch B				_
	3 Interest on savings and temporary cash investments	•	-		_
	Interest on savings and temporary cash investments Dividends and interest from securities	1. 376,028.	376,028	3.	—
	5 a Gross rents	370,020.	370,020	* :	_
	b Net rental income or (loss)			, , , , , , , , , , , , , , , , , , , ,	_
R	6 a Net gain or (loss) from sale of assets not on line 10	130,461.			_
E V	b Gross sales price for all assets on line 6a	1 1	, -		_
E N	7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain		130,461		
U	9 Income modifications		 ,		
E	10 a Gross sales less returns and			, 6	_
	allowances b Less Cost of				
	goods sold · · ·				_
	c Gross profit or (pss) (attach sen-pete) CEVED. 11 Other Income (attach schedule)	7 ()		<u> </u>	_ ,
	Miscellaneous		243		
	12 Total Add line through 1/1 V . 2 1 . 2013	1,532,771.	506,733		
	13 Compensation of ficers, directors, trustees, etc	18			_
	14 Other employee salanes and wages				_
	15 Pension plans, employee begans 16 a Legal fees (attach schedule)				
A	h Accounting fees (attach sch)	1,985.	1,985		
M !	c Other prof fees (attach sch)	1,965.	1,905	· · · · · · · · · · · · · · · · · · ·	_
0 I	17 Interest	8.	8	T.	_
ET	18 Taxes (attach schedule)(see instrs) See Line.18 Stmt	14,295.	14,170	115	<u> </u>
E T R R A A T T	19 Depreciation (attach sch) and depletion	··			_
l j	20 Occupancy				-
N V G E	21 Travel, conferences, and meetings		-··		_
A E N X D P	22 Printing and publications				_
A N D E N	23 Other expenses (attach schedule)				
S	24 Total operating and administrative		- · ·		_
E S	expenses Add lines 13 through 23	16,288.	16,163		
	25 Contributions, gifts, grants paid	317,000.		317,000	÷
	26 Total expenses and disbursements Add lines 24 and 25 · · · · · · · · · · · · · · · · · ·	333,288.	16,163	317,115	
	27 Subtract line 26 from line 12		10,103	317,113	÷
	a Excess of revenue over expenses				
	and disbursements	1,199,483.	400 530	*	_
	b Net investment income (if negative, enter -0-) C Adjusted net income (if negative, enter -0-)		490,570	·	—
RAA F	or Paperwork Reduction Act Notice, see inst	ructions	TEFA0301 12/10	1 Form 990-PF (2014	_

Pa	rt II	Balance Sheets column should be for end-of-year amounts only	beginning or year	Ena c	or year
		(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing	70,948.	11,029.	11,029.
	2	Savings and temporary cash investments			
	3	Accounts receivable			
	1	Less allowance for doubtful accounts			1
	4	Pledges receivable	·		
	'	Less allowance for doubtful accounts		• -	
	5	Grants receivable	<u> </u>		
	1 [<u></u>		
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)	,		-
Α	'				,
S		Less allowance for doubtful accounts			ļ
S S E T	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges	ļ		
S	10 a	a Investments — U.S. and state government obligations (attach schedule)]		
	.	,			
	1	D Investments — corporate stock (attach schedule)		 ,	
	1	Investments — corporate bonds (attach schedule)			
	11	Investments — land, buildings, and equipment basis · · · · · · · · · · · · · · · · ·		•	•
		· · · · · · · · · · · · · · · · · · ·	المسادد المسادد المسادد		A
		Less accumulated depreciation (attach schedule)	1		
	12	Investments – mortgage loans			
	13	Investments — other (attach schedule) L-13. Stmt	8,295,667.	9,555,556.	15,029,042.
	14	Land, buildings, and equipment basis	3,233,007.	· 2,333,330.	13,023,042.
	'	Less accumulated depreciation		<u> </u>	
	l	(attach schedule)			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers —			
	 	see the instructions Also, see page 1, item I).	8,366,615.	9,566,585.	15,040,071.
ī	17	Accounts payable and accrued expenses	4,120.	8,240.	
A	18	Grants payable			The same of the sa
B	19	Deferred revenue			The state of the s
L	20	Loans from officers, directors, trustees, & other disqualified persons			
i T	21	Mortgages and other notes payable (attach schedule)		 	
i	22	Other liabilities (describe			ergel field a 12 million
E	23	Total liabilities (add lines 17 through 22)	4 120	0 240	18 gares 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
<u> </u>	23	Foundations that follow SFAS 117, check here	4,120.	8,240.	· · · · · · · · · · · · · · · · · · ·
		and complete lines 24 through 26 and lines 30 and 31.			
N F E U	1	Unrestricted			
TN	25	Temporarily restricted			2 14 14 4-6
, D	26	Permanently restricted			
A B S A E A		Foundations that do not follow SFAS 117, check here . Fand complete lines 27 through 31.			
ĘĻ	27	Capital stock, trust principal, or current funds			-
SN	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
O E	29	Retained earnings, accumulated income, endowment, or other funds	8,362,495.	9,558,345.	
RS	30	Total net assets or fund balances (see instructions)	8,362,495.	9,558,345.	
	31	Total liabilities and net assets/fund balances	0.266.615		~ ,
Dan	 -	(see instructions)	8,366,615.	9,566,585.	
					
1	Total	net assets or fund balances at beginning of year — Part II, column (if-year figure reported on prior year's return)	a), line 30 (must agree wi	th 	0 363 405
		amount from Part I, line 27a			8,362,495. 1,199,483.
3					1,133,483.
4		nes 1, 2, and 3 · · · · · · · · · · · · · · · · · ·			9 561 070
5		ises not included in line 2 (itemize) Net Changes in		5	9,561,978.
	Total	net assets or fund balances at end of year (line 4 minus line 5) — Pa	TAGGETTATE		3,633. 9,558,345.
		or the office of	2.1.1.1 00.01.11.1 (D), IIIIO 00		2,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,

Part IV Capital Gains and	Losses for rax on investine	nt income				
(a) List and describe 2-story brick warehous	b) How acqui P — Purchas D — Donatio	se (month, day, year)	(d) Date sold (month, day, year)			
1a Keeley All Cap Val			12/08/14			
b LICT Corp					12/30/14	
c CIBL Inc		P			12/30/14	
d						
е	 					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) mil		
a 269,980.		151	,119.		118,861.	
b 19,100.		12	,900.		6,200.	
c 5,400.			0.		5,400.	
d						
e						
(i) Fair Market Value as of 12/31/69	ing gain in column (h) and owned by th (j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	,	(I) Gains (Coli gain minus column (kj than -0-) or Losses (fro), but not less	
	ds 01 12/0 1/09					
b					118,861. 6,200.	
c	- 				5,400.	
d					3,100.	
e						
2 Capital gain net income or (net	capital loss) If gain, also if (loss), enter	enter in Part I, line 7 er -0- in Part I, line 7		2	130,461.	
3 Net short-term capital gain or (I	oss) as defined in sections 1222(5) an				130,101.	
If gain, also enter in Part I, line	8, column (c) (see instructions) If (loss	s), enter -0-		3		
	er Section 4940(e) for Reduce					
	foundations subject to the section 494				· -	
			,			
If section 4940(d)(2) applies, leave th	is part blank					
Was the foundation liable for the sect	ion 4942 tax on the distributable amou	int of any year in the base pen	od?	Yes	X No	
If 'Yes,' the foundation does not qualif	fy under section 4940(e) Do not comp	lete this part		لبا	ت	
1 Enter the appropriate amount in	n each column for each year, see the ir	nstructions before making any	entries			
(a) Base period years Calendar year (or tax year	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use asset	s (c	(d) Distribution column (b) divided by		
beginning in)					· · · · · · · · · · · · · · · · · · ·	
2013	759,510.	11,751,			0.064634	
2012	11,500.	9,584,			0.001200	
2010	353,555.	8,782, 7,636,			0.040257	
2009	156,465. 691,098.	5,764,			0.119888	
2009	691,096.	5,764,	, 545.		0.119000	
, , , , , , , , , , , , , , , , , , , ,				2	0.246469	
	e 5-year base period — divide the total has been in existence if less than 5 years.			3	0.049294	
4 Enter the net value of noncharit	able-use assets for 2014 from Part X,	line 5		4 14	,365,945.	
5 Multiply line 4 by line 3		5	708,155.			
6 Enter 1% of net investment inco	ome (1% of Part I, line 27b)			6	4,906.	
7 Add lines 5 and 6	7 Add lines 5 and 6					
			· · ·	7	713,061.	
8 Enter qualifying distributions fro	m Part XII, line 4			8	713,061.	

Form 99	00-PF(2014) Keeley Family Foundation	36	3865	100		1	Page 4
Part V						'	age
	empt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1	- 566	msu	uction	15)		
	the of ruling or determination letter (attach copy of letter if necessary – see instrs)		~~~	-			
	omestic foundations that meet the section 4940(e) requirements in Part V.		1			۵	811.
	eck here - I and enter 1% of Part I, line 27b		├			٠,	511.
	other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)						
2 Ta	ıx under section 511 (domestic section 4947(a)(1) trusts and taxable undations only Others enter -0-)		2				0.
	dd lines 1 and 2 · · · · · · · · · · · · · · · · · ·		3				811.
	ubtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4				0.
	x based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		5			ο.	811.
	edits/Payments		<u> </u>			<i>J</i> ,	
	14 estimated tax pmts and 2013 overpayment credited to 2014			•			
	empt foreign organizations tax withheld at source		,				
	x paid with application for extension of time to file (Form 8868) 6 c				•	, ,	•
	ickup withholding erroneously withheld 6 d					-	-
	tal credits and payments Add lines 6a through 6d		7				
	eter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached		8				221.
_	x due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9				032.
	erpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10			10,	0.
	ter the amount of line 10 to be Credited to 2015 estimated tax Refunded	·	11				
	II-A Statements Regarding Activities	• • •					
						Yes	No
1 a Du	rring the tax year, did the foundation attempt to influence any national, state, or local legislation or did it rticipate or intervene in any political campaign?				1 a	163	X
•							 ^
b Did (se	d it spend more than \$100 during the year (either directly or indirectly) for political purposes ele Instructions for the definition)?				1 b		х
If ti	he answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials pub	ished					
	distributed by the foundation in connection with the activities					٠ • • • • • • • • • • • • • • • • • • •	
c Did	the foundation file Form 1120-POL for this year?				1 c		Х
	ter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					المراجعة المراجعة	- 14
	On the foundation • \$ (2) On foundation managers • \$				1.3	እ. ት	
	ter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed or indation managers ► \$	1			100		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	s the foundation engaged in any activities that have not previously been reported to the IRS?				2	.2	X
	Yes,' attach a detailed description of the activities						
	•				÷, -	1 111	·
3 Ha	s the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes.				3		
	If the foundation have unrelated business gross income of \$1,000 or more during the year?				4 a		X
	Yes,' has it filed a tax return on Form 990-T for this year?				4 b		
	s there a liquidation, termination, dissolution, or substantial contraction during the year?				5		Х
	Yes,' attach the statement required by General Instruction T				-		
	e the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						, '
	By language in the governing instrument, or			,		• " ,	
					-		,
■ E	By state legislation that effectively amends the governing instrument so that no mandatory directions that cor with the state law remain in the governing instrument?	flict			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.				7	X	
	ter the states to which the foundation reports or with which it is registered (see instructions)					^_	
	L - Illinois	_		-	,	٠.,	'
	e answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			-	-		1
or o	designate) of each state as required by <i>General Instruction G? If 'No,' attach explanation</i>				8 ь	X	ĺ

BAA

10

Form **990-PF** (2014)

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If Yes, 'complete Part XIV

Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses

⊢orn	m 990-PF (2014) Keeley Family Foundation 36-386	<u>5180</u>		Page 5
Pa	rt 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		13	Х	
	Website address			
14	The books are in care of John L. Keeley, Jr. Telephone no (3:	1 <u>2)</u> 786	5-500	20
	Located at 111 West Jackson - Suite 810 Chicago IL 219+4 60604			
15	3		. •	. []
	and enter the amount of tax-exempt interest received or accrued during the year		Yes	No
16	At any time during calendar year 2014, 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	163	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If 'Yes,' enter the name of the foreign country			
Pai	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		т	Τ
4.	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	<u> </u>	Yes	No
1 8	During the year did the foundation (either directly or indirectly)			,
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	۷٥	1.	l
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	· 1		, ,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		 .	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	10	1	١
	(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)?	غ ز do		:
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the			ļ.,
	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)	10		ž.
ŧ	o 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 t		-
	Organizations relying on a current notice regarding disaster assistance check here			
•	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 2014?	1 0		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 $4942(j)(5)$)			,
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?	lo	ļ.,	<u>'</u>
	If 'Yes,' list the years 20 , 20 , 20 , 20 , 20 , 20 , 20			Ι,
t	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	<u> </u>	X
C	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?	10 ,		
Ь	of if Yes,' did it have excess business holdings in 2014 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 2014)	. 3 b	-	^
4 a	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tay year beginning in 20142	, A h		

BAA

Form 990-PF (2014) Keeley Family Four	ndation		36-386	55180	Page 6			
Part VII-B Statements Regarding Activit		n 4720 May Be Rec	uired (continued)					
5 a During the year did the foundation pay or incur a			_					
(1) Çarry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes X No								
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registration	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?							
(3) Provide a grant to an individual for travel, stu		•	· · · · · Yes X	No				
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions).	n a charitable, etc, organi	zation described	Yes X	No				
(5) Provide for any purpose other than religious educational purposes, or for the prevention	, charitable, scientific, lite of cruelty to children or a	erary, or nimals?	····· Yes X	No				
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in a (see instructions)?	current notice regarding	disaster assistance		5b				
Organizations relying on a current notice regards				,				
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	foundation claim exemptility for the grant?	tion from the	Yes	No -				
If 'Yes,' attach the statement required by Regula	tions section 53 4945-5(d	1)			- 1			
6 a Did the foundation, during the year, receive any on a personal benefit contract?				No				
b Did the foundation, during the year, pay premium	ns, directly or indirectly, o	on a personal benefit con	tract?	. 6b	X			
If 'Yes' to 6b, file Form 8870	aa a aastu ta a asabubitaa	t toy chalter transaction?	Yes X	No I				
7 a At any time during the tax year, was the foundation b If Yes, did the foundation receive any proceeds				7 b				
Part VIII Information About Officers, D								
and Contractors	nectors, musices,	Touridation manag	gers, mgmy r aid L	,iiipioyee.	3,			
1 List all officers, directors, trustees, foundatio	n managers and their c	ompensation (see insti	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 deferred compensation	(e) Expense other al	e account, llowances			
John L. Keeley, Jr								
111 West Jackson - Suite 810 Chicago IL 60604	President 10.00	0.	0.		0.			
Barbara G. Keeley 111 West Jackson - Suite 810	Secretary							
Chicago IL 60604	5.00	0.	0.		0.			
Kevin Keeley	"-"							
111 West Jackson - Suite 810	Director							
Chicago IL 60604	5.00	0.	0.		0.			
See Information about Officers, Directors, Trustees, Etc.								
		_	_		_			
2 Compensation of five highest-paid employee	c (other than those inc	0.	0.	tor 'NONE '	0.			
(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	(b) compensation	employee benefit plans and deferred compensation		lowances			
None								
		ĺ						
Total number of other employees paid over \$50,000 .			· · · · · · · · · · · · · · · · · · ·		None			
BAA	TEEA0306 06/	17/14		⊦orm 990	-PF (2014)			

Page 6

Form 990-PF (2014) Keeley Family Foundation	3 <u>6</u> -3865180 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Hand Contractors (continued)	lighly Paid Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, ent	er 'NONE.'
(a) Name and address of each person paid more than \$50,000 (b) Type of services.	vice (c) Compensation
None	
Total number of others receiving over \$50,000 for professional services	None
	None
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number organizations and other beneficiaries served, conferences convened, research papers produced, etc.	of Expenses
1 Not applicable	
	0.
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	2 Amount
1 Not applicable	
	0.
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	None
BAA	Form 990-PF (2014)

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 . . .

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income

BAA

Form 990-PF (2014)

317,115.

317,115.

0.

4

Part XIII Undistributed Income (see instructions)

	•	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1	Distributable amount for 2014 from Part XI, line 7				708,486.
2	Undistributed income, if any, as of the end of 2014				
а	Enter amount for 2013 only			0.	
b	Total for prior years 20 , 20 , 20				
	Excess distributions carryover, if any, to 2014	,			
а	From 2009 1,800,623.				
b	From 2010	•			
c	From 2011 0 .				•
d	From 2012 0 .				
е	From 2013 188,011.		i		
f	Total of lines 3a through e	2,360,936.			
4	Qualifying distributions for 2014 from Part	,			
	XII, line 4 ► \$ 317,115.				
а	Applied to 2013, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required — see instructions)	<u> </u>		-	
С	Treated as distributions out of corpus (Election required — see instructions)				i t
d	Applied to 2014 distributable amount				317,115.
	Remaining amount distributed out of corpus	0.			
	Excess distributions carryover applied to 2014	391,331.	* 1		391,331.
•	(If an amount appears in column (d), the	, , , ,	5 × -		1
	same amount must be shown in column (a))				1
_			*		1
6	Enter the net total of each column as indicated below:	£ 3 = -			
а	Corpus. Add lines 3f, 4c, and 4e Subtract line 5	1,969,605.	-	, ,	y
	Prior years' undistributed income. Subtract				, m. i.e.
	line 4b from line 2b		0.	, ,	
C	Enter the amount of prior years' undistributed income for which a notice of deficiency has	` ^_ + ,		ч _	•
	been issued, or on which the section 4942(a) tax has been previously assessed			,	
d	Subtract line 6c from line 6b Taxable				• ,
	amount - see instructions		0.	*	- 1
	Undistributed income for 2013 Subtract line 4a from	, 1			1
·	line 2a Taxable amount — see instructions	,		0.	
f	Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must be		•	-	
	distributed in 2015				40.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)				
8	Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	1,409,292.			
9	Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	560,313.	,		
10	Analysis of line 9	200,213.			
	Excess from 2010 372, 302.		•	,	
	Excess from 2011 . 0 .				
	Excess from 2012 0 .				
	Excess from 2013				
	Excess from 2014 0 .				
					Form 990-PF (2014)

Form 990-PF (2014) Keeley Family For	undation			36-3865180	Page 10
Part XIV. Private Operating Foundation				 	N/A
1 a If the foundation has received a ruling or det is effective for 2014, enter the date of the rul	ing			<u></u> • [
b Check box to indicate whether the foundation		ng foundation descr		4942(J)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	(n 2011	(e) Total
investment return from Part X for each year listed	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
b 85% of line 2a					
 Qualifying distributions from Part XII, line 4 for each year listed 					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon		1			
a 'Assets' alternative test — enter			l		
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(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					<u> </u>
Part XV Supplementary Information assets at any time during th	(Complete this e year – see in	part only if the structions.)	foundation had	\$5,000 or more	in
Information Regarding Foundation Manag List any managers of the foundation who hav close of any tax year (but only if they have or	e contributed more	than 2% of the total \$5,000) (See section	contributions received	by the foundation be	efore the
John L. Keeley, Jr.		, , ,	, , , , ,		
b List any managers of the foundation who owi	n 10% or more of the	stock of a corporate	ion (or an equally larg	je portion of the owne	rship of
a partnership or other entity) of which the fou None	ndation has a 10% o	or greater interest			
2 Information Regarding Contribution, Gran	t Gift Loan Sabel	archin etc Proces	ms:		
Check here If the foundation only ma requests for funds If the foundation makes g complete items 2a, b, c, and d	kes contributions to	preselected charitat	ole organizations and		
a The name, address, and telephone number of	or e-mail address of	the person to whom	applications should b	e addressed	
John L. Keeley, Jr.		·			
111 West Jackson - Suite 8		. /21	2) 706 5000		
b The form in which applications should be sub	IL 60604		2) 786-5000 ev should include	· · · · · · · · · · · · · · · · · · ·	
Letter			.,		
c Any submission deadlines					 · · <u></u> -
None					
d Any restrictions or limitations on awards, suc None	h as by geographica	l areas, charitable fi	elds, kınds of ınstitutio	ons, or other factors	
					
BAA	TO	5A0310 06/17/14		En	rm 990-PF (2014)

Form 990-PF (2014) Keeley Family Foundation

Part XV* Supplementary Information (continued)

3 Grants and Contributions Pa	ild During the Y	ear or Approved for Fut		it	
Recipient		If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or	business)	substantial contributor	100.0	 	
a Paid during the year	1				
Mount Carmel High School 6410 S Dante			/		
Chicago Sisters of St Dominic 555 Albany Avenue	IL 60637		N/A	Unrestricted	19,400.
Amityville Lyons Township High Sowest Cossitt Avenue	NY 11701 chool		N/A	Unrestricted	4,000.
LaGrange Standing Tall Charital 1100 N River Road	IL 60525 ole		N/A	Unrestricted	2,500.
Des Plaines Old St. Pat's Church 700 W Adams,	IL 60016		N/A	Unrestricted	2,500.
Chicago, St Vincent DePaul Cent 2145 N Halsted	IL 60661 er		N/A	Unrestricted	9,500.
Chicago American Ireland Fund 205 West Wacker	IL 60614		N/A	Unrestricted	1,500.
Chicago CC Extension Society 150 S Wacker Drive	IL 60606		N/A	Unrestricted	52,000.
Chicago Notre Dame Club of Chi 224 S Michigan	IL 60606 Lcago		N/A	Unrestricted	30,000.
Chicago See Line 3a statement	IL 60604		N/A	Unrestricted	1,000.
					194,600.
Total		<u> </u>		3a	317,000.
b Approved for future payment					
Total				▶ 3b	

nter gross amounts unless otherwise indicated	Unrelate	ed business income	Exclude	d by section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)
a	<u> </u>				
b	 				
c					
d	1				
e					
f	<u> </u>				
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments	_		14	1.	
4 Dividends and interest from securities			14	376,028.	
5 Net rental income or (loss) from real estate	FR .		1 dy		
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					
O Gross profit or (loss) from sales of inventory					
1 Other revenue	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	्रण के प्राप्तकार अञ्चलके प्रकारिकात	والمراجع والمراجع	· ない、 と ・ ・	Lotte - Lington
a					
b					
С	<u> </u>				
d					
е					
Subtotal Add columns (b), (d), and (e)	10年前4月1日		1		
3 Total. Add line 12, columns (b), (d), and (e)	· · · · · · ·	· · · · · · · · · · · · · · · · · · ·		13	376,029
ee worksheet in line 13 instructions to verify calculations	s)				

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

Form 990-PF (2014) Keeley Family Foundation 36-3865180 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

							· .		
describ	organization directly o ed in section 501(c) of to political organizatio	the Code (other	re in any of the followithan section 501(c)(3)	ng with any) organizatio	other organization ons) or in section 527,			Yes	No
a Transfe	rs from the reporting f	oundation to a no	ncharitable exempt oi	rganization (of		ا مان الله الله الله الله الله الله الله ال		`
(1) Cas	sh						1 a (1)		Х
(2) Oth	er assets						1 a (2)		X
b Other tr	ansactions								
(1) Sale	es of assets to a nonc	haritable exempt	organization				1 b (1)	-	Х
(2) Pur	chases of assets from	a noncharitable	exempt organization.				1 b (2)		Х
` ,	ital of facilities, equipm						1 b (3)		X
	mbursement arrangen						1 b (4)		X
. ,	ns or loan guarantees						1 b (5)		<u>X</u>
	formance of services						1 b (6)	-	
, ,		•	ŭ						_ <u>X</u> _
c Sharing	of facilities, equipmen	nt, mailing lists, ot	ner assets, or paid en	npioyees			10		<u>X</u>
the good	ds, other assets, or se	rvices given by th	e reporting foundation	n If the four	mn (b) should always sh ndation received less tha ods, other assets, or sen	ın faır market value ı	alue of n		
(a) Line no	(b) Amount involved	(c) Name of n	onchantable exempt orga-	nization	(d) Description of trans	fers, transactions, and s	haring arrang	ements	
·		- · · · · · · · · · · · · · · · · · · ·					-		
									
- 									
				-					
					 				
									
					· · · · · · ·				
		ļ <u></u>							
		_							
									
describe	d in section 501(c) of	the Code (other t	with, or related to, one han section 501(c)(3)	or more tax) or in section	x-exempt organizations on 527?		. Yes	χi	No
	complete the following		(L) T : -1		,	December of set 1			
(a) Name of organization	n	(b) Type of orga	anization	(C)	Description of relation	nsnip		
	· · · · · · · · · · · · · · · · · · ·								
Sign correct,	penalties of perjury, I declare to and complete Declaration of	that I have examined th f preparer (other than ta	is return, including accompai ixpayer) is based on all infon	nying schedules mation of which	s and statements, and to the bes preparer has any knowledge	t of my knowledge and beli	ef, it is true, May the IR this return	S discus	ss
Here	Kleele		05/1	15/15	Trustee		preparer si	hown be	low
Signa	ture of officer or trustee		alg	7/	Title		(see instru	ctions)? Yes	7,,
	Print/Type preparer s name	e /	Preparer's signature	ter	Date	Check X if	PTIN		لتند
	1	I	1 1/10	Duran	C/0/12			0.50	
Paid		YER, ATTY	THOMAS J.	DWYER,	ATTY ()		P01426	953	
Preparer		06 TAX SER			1 1	Firms EIN 20-41	91327		
Use Only	Firm's address 4	<u>01 S_La_Sa.</u>	lle/St/, Ste 6	06					
	C	hicago	_//	II	60605	Phone no (312)	786-5	959	
BAA						-	Form 990	-PF (2	014)

Form 990-PF, Page 1	1, Part I, Line	18
Line 18 Stmt		

Taxes	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Illinoıs Charity Bureau	115.			115.
Illinois Secretary of State	10.		\	
Federal Excise Taxes	14,170.	14,170.		
Total	14,295.	14,170.		115.

Form 990-PF, Page 6, Part VIII, Line 1 Information about Officers, Directors, Trustees, Etc.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Person. X Business . Mark T. Keeley 111 West Jackson - Suite 810	Director			
Chicago IL 60604	5.00	0.	0.	0.
Person . X Business .				
John L. Keeley, III				
111 West Jackson - Suite 810	Director			
Chicago IL 60604	5.00	0.	0.	0.

п	+_	ı
	เมเส	ı

0.	0.	0.

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Recipient Name and address	If recipient is an individual, show any	Foun- dation status	Purpose of grant or contribution	Person or Business Checkbox
(home or business)	relationship to any foundation manager or substantial contributor	of re- cipient		Amount
a Paid during the year				
Congregation of the Mission				Person or
16663 Rider Trail North				Business X
Earth City MO 63045		N/A	Unrestricted	10,000.
St Jude Hospital				Person or
262 Danny Thomas Place				Business X
Memphis TN 38105		N/A	Unrestricted	1,000.
Mother McCauley High School				Person or
3737 W 99th				Business X
Chicago IL 60805		N/A	Unrestricted	3,200.

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Continued

Recipient	If recipient is an individual,	Foun-	Purpose of grant or contribution	Person or Business
Name and address (home or business)	show any relationship to	status of re-	grant or community	Checkbox
	any foundation manager or substantial contributor	cipient		Amount
a Paid during the year				
WITW				Person or
5400 N St Louis				Business X
Chicago IL 60625		N/A	Unrestricted	500.
Circle of Friends				Person or
11508 West Pico			<u> </u>	Business X
Los Angeles CA 90064		N/A	Unrestricted	200.
Providence Life Services				Person or
18601 N Creek Drive		N/A	Unrestricted	Business X 500.
Tinley Park IL 60477			Officeur	Person or
Misericordia 6300 N Ridge				Business X
Chicago IL 60660		N/A	Unrestricted	1,000.
Western Springs Fire & Rescue		117,22	Onreberreded	Person or
740 Hillgrove				Business X
Western Springs IL 60558		N/A	Unrestricted	100.
Operation Smile				Person or
3641 Faculty Boulevard				Business X
Virginia Beach VA 23453		N/A	Unrestricted	1,000.
After School Matters				Person or
66 E Randolph Street				Business X
Chicago IL 60601		N/A	Unrestricted	17,600.
National Kidney Foundation				Person or
215 West Illinois				Business X
Chicago IL 60654		N/A	Unrestricted	5,000.
Invest for Kids				Person or
875 North Michigan				Business X
Chicago IL 60611		N/A	Unrestricted	2,000.
DePaul University				Person or
1 East Jackson				Business X
Chicago IL 60604		N/A	Unrestricted	150,000. Person or
Swedish Covenant Hospital				. —
5145 N California Chicago IL 60625		N/A	Unrestricted	Business X 1,000.
Chicago IL 60625 Korean War National Museum		14/ 12	oni eaci icted	Person or
9 Old State Capital Plaza				Business X
Springfield IL 62701	- -	 N/A	Unrestricted	500.
Sheridan Carroll Charitable Works		,		Person or
2015 N Harlem				Business X
Chicago IL 60707		N/A	Unrestricted	1,000.

Form 990-PF, Page 2, Part II, Line 13

1 -1	3	Stm	ŀ

1	End o	f Year
Line 13 - Investments - Other:	Book Value	Fair Market Value
KACVX	3,673,639.	4,622,237.
KALVX	948,060.	948,003.
KISVX	24,335.	24,300.
KMDVX	334,634.	565,370.
KMCVX	155,470.	348,131.
KMCIX	453,780.	588,756.
KSDIX	1,421,445.	2,200,610.
KSDVX	944,018.	1,775,355.
KSCVX	964,727.	2,897,930.
KSMVX	563,474.	918,941.
KACVX	11,148.	19,086.
KMDVX	3,343.	4,908.
KMCVX	7,558.	11,313.
KSDVX	12,151.	18,393.
KSCVX	37,774.	85,709 <u>.</u>

Total

9,555,556. 15,029,042.