

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



Form **990-PF**

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf.

| For (| calendar year 20.14 or tax year beginning | | , and ending | | |
|----------------|--|---------------------------------------|---------------------------|--|---|
| Nar | me of foundation | | | A Employer identification | n number |
| | Cownsend Family Foundation | | | 36-4199459 |) |
| Nun | mber and street (or P O box number if mail is not delivered to stre | et address) | Room/suite | B Telephone number | |
| _3 | 321 N Clark St | | 930 | (312)245-0 | 0077 |
| | ty or town, state or province, country, and ZIP or foreign Chicago, IL 60654 | postal code | | C If exemption application is | pending, check here |
| | Check all that apply: Initial return | Initial return of a for | mer public charity | D 1. Foreign organization | s check here |
| • | Final return | Amended return | mor poons shartly | 1. Toroign organization | o, oneon nore |
| | Address change | Name change | | Foreign organizations m check here and attach c | eeting the 85% test, |
| H C | | exempt private foundation | | E If private foundation sta | |
| | Section 4947(a)(1) nonexempt charitable trust | Other taxable private foundati | ion | under section 507(b)(1 | |
| l Fa | air market value of all assets at end of year J Accour | nting method: X Cash | Accrual | F If the foundation is in a | 60-month termination |
| (fr | from Part II, col. (c), line 16) | Other (specify) | | under section 507(b)(1 | . — |
| | \$ 2,351,009. (Part I, co | lumn (d) must be on cash ba | asıs) | | |
| Pa | Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
| | 1 Contributions, gifts, grants, etc., received | | | N/A | |
| | 2 Check X if the foundation is not required to attach Sch. B | | | | |
| | 3 Interest on savings and temporary cash investments | | | | |
| | 4 Dividends and interest from securities | 15,585. | <u> 15,585.</u> | | Statement 1 |
| | 5a Gross rents | | | | |
| | Net rental income or (loss) | 4 006 470 | | | |
| ě | 63 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all | 1,096,478. | | | |
| Revenue | b Gross sales price for all 1,096,858. | | 1 006 470 | | |
| Вè | 7 Capital gain net income (from Part IV, line 2) | | 1,096,478. | | |
| | 8 Net short-term capital gain | | | | |
| | 9 Income modifications Gross sales less returns | | | | |
| | 10a and allowances b Less Cost of goods sold | | | | |
| | c Gross profit or (loss) | | | | |
| | 11 Other income | | | | |
| | 12 Total Add lines 1 through 1-1 | 1,112,063. | 1,112,063. | | |
| | 13 Compensation of officers, directors, trustees, atc | 0. | 0. | | 0. |
| | 14 Other employee salaries and wages Q | | | | |
| s | 15 Pension plans, employee benefits | | | | |
| | | 2,368. | 0. | | 0, |
| Expense | 16a Legalifees b Accounting fees c Other professional fees | 3,050. | 0. | | 0, |
| | I C Other professional legs | | | | |
| Administrative | 17 Interest | 10 472 | | | |
| stra | 18 Taxes Stmt 4 19 Depreciation and depletion | 10,473. | 0. | | 0. |
| Ë | 19 Depreciation and depletion 20 Occupancy | | | | |
| βď | 21 Travel, conferences, and meetings | | | | |
| and Ad | | | | | <u> </u> |
| | 23 Other expenses | | <u>-</u> | | |
| Operating | 24 Total operating and administrative | | | | |
| per | expenses. Add lines 13 through 23 | 15,891. | 0. | | 0. |
| 0 | 25 Contributions, gifts, grants paid | 243,150. | | | 243,150 |
| | 26 Total expenses and disbursements. | | | | |
| | Add lines 24 and 25 | 259,041. | 0. | | 243,150 |
| | 27 Subtract line 26 from line 12: | | | | |
| | 2 Excess of revenue over expenses and disbursements | 853,022. | 4 4 4 5 5 5 5 5 | | |
| | b Net investment income (if negative, enter -0-) | | 1,112,063. | | <u> </u> |
| | C Adjusted net income (if negative, enter -0-) | | | N/A | <u> </u> |

LHA For Paperwork Reduction Act Notice, see instructions.

| (a) List and descr | ıbe the k | osses for Tax on In and(s) of property sold (e.g. | , real estate, | tincome | (b) | How ac | quired hase | (c) Date a | cquired | (d) Date sold |
|---|---|---|------------------------------------|--------------------------------------|-------------------|---|-----------------------|--------------------------|-------------------------|---|
| 2-story brick wa | 2-story brick warehouse; or common stock, 200 shs. MLC Co.) | | | 6 | - Purci - Dona | ation | (mo., da | y, yr.) | (mo., day, yr.) | |
| 1a Intercontinenta | al E | xchange Inc | | _ | + | | | Vario | us | 12/18/14 |
| b c | | | | | +- | | | | | |
| d | | | | · | + | | | | | |
| e | | | | | | | | | | |
| (e) Gross sales price | (f) | Depreciation allowed (or allowable) | | st or other basis expense of sale | | | | (h) Gai (e) plus | n or (loss (f) minus | s) (g) |
| a 1,096,858. | | | | 38 | 30. | | | | | <u>1,096,478.</u> |
| _b | | | | | | | | | | |
| c d | | | | | | | | - | | |
| e | | | | | | | | | | |
| Complete only for assets showin | g gain in | column (h) and owned by t | he foundation | on 12/31/69 | | | | Gains (Co | L (h) gain | minus |
| (i) F.M.V. as of 12/31/69 | | (j) Adjusted basis as of 12/31/69 | (k) Ex | cess of col. (1) col. (j), if any | | | còl. | (k), but no Losses (1 | ot less tha | n -0-) or |
| a | | . | | | | - | | | - | 1,096,478. |
| b | | | | | | | | | | |
| C | | | | | | | | | | |
| d | | | | | | | | ···· | | |
| e J | · · · · · · · · · · · · · · · · · · · | | | | | | | | | |
| 2 Capital gain net income or (net cap | pıtal loss | $\begin{cases} \text{ If gain, also enter} \\ \text{ If (loss), enter -0-} \end{cases}$ | ın Part I, line ın Part I, line | 7 7 | } | 2 | | | | 1,096,478. |
| 3 Net short-term capital gain or (los If gain, also enter in Part I, line 8, | | | d (6): | | J | | | | | |
| If (loss), enter -0- in Part I, line 8 Part V Qualification U | -d (| Section 4940(e) for | Dadward | Tou on No. | | 3 | | | N/A | <u> </u> |
| (For optional use by domestic private If section 4940(d)(2) applies, leave th Was the foundation liable for the sect If "Yes," the foundation does not quality. | iis part b ion 4942 ify under | lank. 2 tax on the distributable ami 3 section 4940(e). Do not coi | ount of any ye | ear in the base pe irt. | riod? | | | | | Yes X No |
| 1 Enter the appropriate amount in e | ach colu | ımn for each year; see the ın | structions be | fore making any e | entries | S. | | 1 | | /45 |
| (a) Base period years Calendar year (or tax year beginnir | ng in) | (b) Adjusted qualifying dist | | Net value of no | | rıtable- | | | Distril col. (b) di | (d) bution ratio vided by col. (c)) |
| 2013 | | | 1,306. | | 2 | | 8,742 | | | .092259 |
| 2012 | | | 0,760. | | | | 6,867 4 EEE | | | .091045 |
| 2011 2010 | | | 6,050. 8,907. | - | | | <u>4,555</u> 0,611 | | | .067086 .121258 |
| 2009 | | | 0,290. | .= | | | $\frac{0,011}{8,551}$ | | | .086468 |
| 2 Total of line 1, column (d) | | | | | | <u>, , , , , , , , , , , , , , , , , , , </u> | <u> </u> | 2 | | .458116 |
| 3 Average distribution ratio for the 5 the foundation has been in exister | | | n line 2 by 5, | or by the number | r of ye | ears | | 3 | | .091623 |
| 4 Enter the net value of noncharitab | le-use as | ssets for 2014 from Part X, I | ıne 5 | | | | | 4 | | 2,363,598. |
| 5 Multiply line 4 by line 3 | | | | | | | | 5 | | 216,560. |
| 6 Enter 1% of net investment incom | ie (1% o | f Part I, line 27b) | | | | | | 6 | | 11,121. |
| 7 Add lines 5 and 6 | | | | | | | | 7 | | 227,681. |
| 8 Enter qualifying distributions from | ı Part XII | , line 4 | | | | | | 8 | | 243,150. |
| If line 8 is equal to or greater than See the Part VI instructions. | | | 1b, and comp | lete that part usir | ng a 1 | % tax r | ate. | | | |
| 423521 11-24-14 | | | | | | | | | | Form 990-PF (2014) |

| | 990-PF (2014) Townsend Family Foundation | | 3 | 36-4 | 41994 | 59 | Page 4 |
|----|--|---------------------------------------|-------------|----------------|-----------|----------------|------------------|
| Pa | rt VI Excise Tax Based on Investment Income (Section 4940 | (a), 4940(b), 4940(e) | , or 49 | <u> 148 - </u> | see ins | tructi | ons) |
| 1a | Exempt operating foundations described in section 4940(d)(2), check here and ent | ter "N/A" on line 1. | | | | | |
| | Date of ruling of determination letter: (attach copy of letter if nece | | | | | | |
| | Domestic foundations that meet the section 4940(e) requirements in Part V, check here | X and enter 1% | · | 1 | | <u>11,</u> | <u>121.</u> |
| | of Part I, line 27b | | i | | | | |
| C | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of line 27b. | of Part I, line 12, col. (b). 丿 | | | | | |
| | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Other | ners enter -0-) | <u> </u> | 2 | | | <u> </u> |
| | Add lines 1 and 2 | | | 3 | | <u>11,</u> | <u>121.</u> |
| | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Other | hers enter -0-) | | 4 | | | 0. |
| | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | | | 5 | | 11, | <u> 121.</u> |
| | Credits/Payments: | | _ | | | | |
| | 2014 estimated tax payments and 2013 overpayment credited to 2014 | | 00. | | | | |
| | Exempt foreign organizations - tax withheld at source | 6b | | | | | |
| | Tax paid with application for extension of time to file (Form 8868) | 6c | | | | | |
| | Backup withholding erroneously withheld | 6d | | l | | _ | |
| | Total credits and payments. Add lines 6a through 6d | | | 7 | | | 000. |
| | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attact | hed | . ⊦ | 8 | | | 192. |
| | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | | 9 | | 10, | <u>313.</u> |
| | Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | 1 | ▶ ⊦ | 10 | | | |
| | Enter the amount of line 10 to be: Credited to 2015 estimated tax ► rt VII-A Statements Regarding Activities | Refunde | ed 🛌 📗 | 11 | | | |
| | | | | | | V ₀ | s No |
| | During the tax year, did the foundation attempt to influence any national, state, or local legisla | ation or did it participate or in | ervene ir | 1 | | | - |
| | any political campaign? | oo /ooo inatriistiaaa far tha da | f t \ (7 | , | | <u>a</u> | X |
| | Did it spend more than \$100 during the year (either directly or indirectly) for political purpose | • | • | | <u> </u> | b | ^ _ |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities. | copies of any materials p | JDIISHEC | or | | | |
| | • | | | | | | 37 |
| | Did the foundation file Form 1120-POL for this year? | | | | | c | X |
| | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the y (1) On the foundation. \$ 0. (2) On foundation managers. | | 0 | | | | |
| | Enter the reimbursement (if any) paid by the foundation during the year for political expenditu | | 0. | | | | |
| | managers. > \$ 0. | ire tax imposeu on tounuatio | 11 | | | | |
| | Has the foundation engaged in any activities that have not previously been reported to the IRS | 22 | | | | 2 | х |
| | If "Yes," attach a detailed description of the activities. | J. | | | <u> </u> | | +^- |
| | Has the foundation made any changes, not previously reported to the IRS, in its governing ins | strument articles of incornor | ation or | | | | |
| | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | , , , , , , , , , , , , , , , , , , , | ation, or | | | 3 | x |
| | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | | | | a | X |
| | If "Yes," has it filed a tax return on Form 990-T for this year? | | | N | | <u> </u> | - |
| | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | , | | <u> </u> | X |
| | If "Yes," attach the statement required by General Instruction T | | | | | | |
| | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eith | ner: | | | | | - |
| | By language in the governing instrument, or | | | | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory | directions that conflict with the | ne state la | aw | | | |
| | remain in the governing instrument? | | | | | 3 | X |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp | olete Part II, col. (c), and F | art XV | | | ' X | |
| | | | | | | | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions | s) > | | | | | |
| | IL | | | | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Atte | orney General (or designate) | - | | | | |
| | of each state as required by General Instruction G? If "No," attach explanation | | | | 8_ | b X | |
| | Is the foundation claiming status as a private operating foundation within the meaning of sect | | or calend | dar | | | |
| | year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," con | | | | <u></u> ! |) | <u>X</u> |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule | listing their names and addresses | | _ | | 0 | X |
| | | | | | Form 9 | 90-PF | (2014) |

423531 11-24-14

| rm 990-PF (2014) Townsend Family Foundation 36-419 | 9459 | Page 5 |
|--|---------|------------------|
| Part VII-A Statements Regarding Activities (continued) | | |
| 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 |
| 2 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 |
| 3 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Х |
| Website address ► N/A | | |
| 4 The books are in care of ► O'Malley & Kwit LLC Telephone no. ► 312-2 | 45-00 |)77 |
| Located at ▶ 321 N Clark St, Ste 930, Chicago, IL ZIP+4 ▶6 | | |
| 5 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | | |
| and enter the amount of tax-exempt interest received or accrued during the year | N/ | 'A |
| 6 At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, | | Yes No |
| securities, or other financial account in a foreign country? | 16 | 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 | | |
| Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | |
| File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | 1 | Yes No |
| 1a During the year did the foundation (either directly or indirectly): | | |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | | |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | |
| a disqualified person? | 1 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? | 1 1 | |
| (5) Transfer any income or assets to a disqualified person (or make any of either available | | |
| for the benefit or use of a disqualified person)? | | İ |
| (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 | 1 1 | |
| termination of government service, if terminating within 90 days.) | | |
| 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)? | 16 | |
| Organizations relying on a current notice regarding disaster assistance check here | | |
| c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected | | |
| before the first day of the tax year beginning in 2014? | 1c | Х |
| 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? | | |
| If "Yes," list the years \blacktriangleright , , , , | | |
| b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect | | |
| valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach | | - |
| statement - see instructions.) | 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. | | |
| > | | |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | |
| during the year? | | |
| b 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) N/A | 3b | İ |
| 4a 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 tax year beginning in 2014? | 4b | х |
| | orm QQA | PF (2014) |

423541 11-24-14

| orm 990-PF (2014) Townsend Family Foundati | | | <u> 36-41994</u> | <u>59</u> | Page 6 |
|---|---|------------------|--|-----------|---------------------|
| Part VII-B Statements Regarding Activities for Which I | Form 4720 May Be F | Required (contin | ued) | | |
| 5a During the year did the foundation pay or incur any amount to: | | | | | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | • • • | | es X No | - 1 | |
| (2) Influence the outcome of any specific public election (see section 4955); of | or to carry on, directly or indire | | | | |
| any voter registration drive? | | | es X No | ĺ | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | ? | Ye | es 🗶 No | | |
| (4) Provide a grant to an organization other than a charitable, etc., organizatio | n described in section | | [| ļ | |
| 4945(d)(4)(A)? (see instructions) | | Ye | es X No | ŀ | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | or educational purposes, or f | for | | | |
| the prevention of cruelty to children or animals? | | Ye | es X No | | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unit | der the exceptions described i | ın Regulations | | | ł |
| section 53.4945 or in a current notice regarding disaster assistance (see instru | | · | N/A | 5b | - |
| Organizations relying on a current notice regarding disaster assistance check h | пеге | | | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi | | ined | | | |
| expenditure responsibility for the grant? | | Υ. (I/A | es No | | |
| If "Yes," attach the statement required by Regulations section 53.494 | | ., | | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to | • • | | ŀ | | |
| a personal benefit contract? | pay promising on | | es X No | | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | vercenal honofit contract? | | | 6Ь | X |
| If "Yes" to 6b, file Form 8870. | reisonal benefit contract? | | <u> </u> | 00 | +- |
| · | shalter transaction? | | es X No | | - |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | | Y6 | _ | | |
| <u>b If "Yes," did the foundation receive any proceeds or have any net income attributed</u> Part VIII Information About Officers, Directors, Trust | | Uishi | | 7b | |
| Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors | ees, Foundation ivia | inagers, nigni | y | | |
| List all officers, directors, trustees, foundation managers and their | componention | | | | |
| List all officers, directors, didstees, foundation managers and their | | (c) Compensation | (d) Contributions to | (a) E | vnonco |
| (a) Name and address | (b) Title, and average hours per week devoted | (If not paid, | (d) Contributions to employee benefit plans and deferred compensation | accou | xpense nt, other |
| | to position | enter -0-) | compensation | allov | wances |
| | Director | | | | |
| 011 S Mill Street | | _ | _ | | _ |
| Aspen, CO 81611 | 0.00 | 0. | 0. | | 0. |
| | Director | | | | |
| 911 S Mill Street | | | | | |
| Aspen, CO 81611 | 0.00 | 0. | 0. | | 0. |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| · · · · · · · · · · · · · · · · · · · | | | | | |
| | | | | | |
| Compensation of five highest-paid employees (other than those inc | luded on line 1). If none, | enter "NONE." | | | |
| A Mississand address of scales at the state of the state | (b) Title, and average | | (d) Contributions to employee benefit plans | (e) E | xpense |
| (a) Name and address of each employee paid more than \$50,000 | hours per week devoted to position | (c) Compensation | and deferred compensation | | nt, other wances |
| NONE | | ** | osinpoi/seauti | | |
| 110112 | | | | | |
| | | <u> </u> | | | |
| | 1 | | | | |
| | | - | - | | |
| | 1 | | | | |
| | | | | | |
| | 1 | | | | |
| | | - | <u> </u> | | |
| | | | | | |
| | } | <u> </u> | | | |
| otal number of other employees paid over \$50,000 | | | | 200 5 | 0 |

| P | Minimum Investment Return (All domestic foundations must complete this part. Foreign fou | ndations, | see instructions) |
|----|---|--------------|--------------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| а | Average monthly fair market value of securities | 1a | 1,171,617. |
| b | Average of monthly cash balances | 1b | 1,171,617. 1,227,975. |
| C | Fair market value of all other assets | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 2,399,592. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) 1e 0. | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 1 2 | 0. |
| 3 | Subtract line 2 from line 1d | 3 | 2,399,592. |
| 4 | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 35,994. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 2,363,598. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 118,180. |
| 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.) | nd certain | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 118,180. |
| 2a | Tax on investment income for 2014 from Part VI, line 5 | | |
| b | Income tax for 2014. (This does not include the tax from Part VI.) |] | |
| C | Add lines 2a and 2b | 2c | 11,121. |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 107,059. |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| 5 | Add lines 3 and 4 | 5 | 107,059. |
| 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 | 107,059. |
| _ | Qualifying Distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | 0.40 450 |
| a | Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 243,150. |
| 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: | | |
| a | Surtability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 243,150. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | 44 444 |
| | income. Enter 1% of Part I, line 27b | 5 | 11,121. |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 232,029. |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation | qualifies fo | r the section |

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

| • | (a) Corpus | (b) Years prior to 2013 | (c) 2013 | (d) 2014 |
|--|---------------|----------------------------|-------------|---------------------------|
| Distributable amount for 2014 from Part XI, line 7 | | · | | 107,059. |
| 2 Undistributed income, if any, as of the end of 2014 | | | - | |
| a Enter amount for 2013 only | | | 0. | |
| b Total for prior years: | | | | |
| 3 Excess distributions carryover, if any, to 2014: | | 0. | | |
| a From 2009 34,382. | | | | |
| b From 2010 70,394. | | | | |
| c From 2011 17,471. | | | | |
| d From 2012 41,657. | | | | |
| e From 2013 111, 227. | | | | |
| f Total of lines 3a through e | 275,131. | | | |
| 4 Qualifying distributions for 2014 from | | | | |
| Part XII, line 4: ►\$ 243,150. | | | | |
| a Applied to 2013, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | | | | |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2014 distributable amount | | | | 107,059. |
| e Remaining amount distributed out of corpus | 136,091. | | | |
| Excess distributions carryover applied to 2014 (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 | 411,222. | | | |
| 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 2013. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | - |
| f Undistributed income for 2014. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must be distributed in 2015 | | | | ^ |
| 7 Amounts treated as distributions out of | | | | 0. |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | | | | |
| may be required - see instructions) | 0. | | | |
| 8 Excess distributions carryover from 2009 | | | | |
| not applied on line 5 or line 7 | 34,382. | | | |
| 9 Excess distributions carryover to 2015. | 31/3021 | | | |
| Subtract lines 7 and 8 from line 6a | 376,840. | | | |
| 10 Analysis of line 9: | 57070201 | | | |
| a Excess from 2010 | | | | |
| b Excess from 2011 17, 471. | | | | |
| c Excess from 2012 41,657. | | | | |
| d Excess from 2013 111, 227. | | | | |
| e Excess from 2014 136,091. | | | | |
| 423581 11-24-14 | | | | Form 990-PF (2014) |

| | d Family Fo | | U.A | | .99459 Page 10 |
|--|----------------------------|-----------------------------|--|---|---------------------|
| Part XIV Private Operating F | · - | | II-A, question 9) | N/A | |
| 1 a If the foundation has received a ruling o | | | | | |
| foundation, and the ruling is effective for | | - | ▶ └ | 7 10 10 1 10 | 2.0(.)(5) |
| b Check box to indicate whether the found | | ng foundation described | | 4942(j)(3) or49 | 942(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year (a) 2014 | (b) 2013 | Prior 3 years (c) 2012 | (d) 2011 | (e) Total |
| income from Part I or the minimum | (a) 2014 | (U) 2013 | (6) 2012 | (u) 2011 | (6) 10(4) |
| investment return from Part X for | | | | | |
| each year listed . | | | | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, | | | | | |
| line 4 for each year listed | | | | | |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | - | | |
| exempt activities | | | | | |
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities. | | | | | |
| Subtract line 2d from line 2c Complete 3a, b, or c for the | =- | | | | |
| alternative test relied upon: | | | | | |
| a "Assets" alternative test - enter: | | | | | |
| (1) Value of all assets | | | - | | |
| (2) Value of assets qualifying | | | | | |
| under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter | | - | | | |
| 2/3 of minimum investment return | | | | | |
| shown in Part X, line 6 for each year listed | | | | | |
| 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 | | | <u> </u> | | |
| 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 | | | | | |
| Part XV Supplementary Info | rmation (Comple | te this part only | if the foundation | n had \$5.000 or me | ore in assets |
| at any time during t | | | | 40,000 01 | |
| 1 Information Regarding Foundatio | n Managers: | | | | |
| a List any managers of the foundation who | o have contributed more | | tributions received by th | ne foundation before the clo | se of any tax |
| year (but only if they have contributed m | nore than \$5,000). (See s | section 507(d)(2).) | | | |
| See Statement 6 | | | | | |
| b List any managers of the foundation who other entity) of which the foundation has | | | (or an equally large por | tion of the ownership of a p | artnership or |
| None | a love of grouter filters | | | | |
| 2 Information Regarding Contributi | on Grant Gift Loan | Scholarship etc. B | rograme: | · | |
| Check here ► X if the foundation o | | • • • • | • | and accept unsolicited regi | jests for funds. If |
| the foundation makes gifts, grants, etc. | | | | | |
| a The name, address, and telephone num | ber or e-mail address of | the person to whom app | lications should be addi | essed: | ., |
| 2 , accirco, and icop. | | рогост то тот арр | | *************************************** | |
| | - | | | | |
| b The form in which applications should b | e submitted and informa | tion and materials they s | should include: | | |
| | | | | | |
| c Any submission deadlines; | | | | | |
| d Any restrictions or limitations on awards | s, such as by geographic | al areas, charitable fields | kinds of institutions of | r other factors: | ·- · · · · · · · |
| a roomono or minutorio or awards | , caon ao o, goograpino | a. a. vao, ona nabio nelus | , milao or montanono, o | . other lactors. | |
| | | | | | |
| | | | | | F 000 DE (0044) |

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to Foundation Amount contribution status of any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year Public Charity Arts Anderson Ranch Arts Center None 5263 Owl Creek Rd 3,000. Snowmass Village CO 81615 Aspen Art Museum None Public Charity Educational - Museum 590 North Mill Street Aspen CO 81611 9,000. Public Charity Public policy research CATO Institute None 1000 Massachusetts Ave NW organization -Operations 23 400. Washington, DC 20001 Public Charity Educational Chi Omega Foundation None 3395 Players Club Parkway 1,000. Memphis, TN 38125 Public Charity Educational Chicago Yacht Club Foundation None 400 E Monroe Street Chicago IL 60603 1,000. See continuation sheet(s) **▶** 3a Total 243 150 **b** Approved for future payment None Total

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

| Enter gross amounts unless otherwise indicated. | Unrelat | ed business income | | ded by section 512, 513, or 514 | (e) |
|--|-------------------------|-----------------------------|------------------------|---------------------------------|-----------------------------------|
| 1 Program sérvice revenue: | (a) Business code | (b) Amount | Exclu- sion code | (d) Amount | Related or exempt function income |
| | Code | | COGE | | |
| <u>a</u> | | | | | |
| b | | | | | |
| c | | | <u> </u> | | |
| d | | | | | |
| e | | | | | |
| f | | | <u> </u> | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | · |
| 3 Interest on savings and temporary cash | | | | | |
| investments | | | | | |
| 4 Dividends and interest from securities | | | 14 | 15,585. | |
| 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 | 1 | | 18 | 1,096,478. | |
| 9 Net income or (loss) from special events | | | 10 | 1,000,270. | |
| 10 Gross profit or (loss) from sales of inventory | | · <u>.</u> | | | |
| 11 Other revenue: | | | | | |
| | | | | | |
| a | | | - | | |
| b | | | - | · | |
| c | | | | | |
| d | | | - | | |
| e | | | - | 4 440 050 | |
| 12 Subtotal. Add columns (b), (d), and (e) | | 0. | | 1,112,063. | |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 1,112,063. |
| (See worksheet in line 13 instructions to verify calculations.) | | <u> </u> | | | |
| Part XVI-B Relationship of Activities t | o the Acc | omplishment of Ex | emp | t Purposes | |
| | | | | <u> </u> | |
| Line No. Explain below how each activity for which income the foundation's exempt purposes (other than | me is reported | in column (e) of Part XVI-A | contrit | outed importantly to the accom | iplishment of |
| the foundation's exempt purposes (other than | Dy providing id | inus ioi such purposes). | | | |
| | | | | | |
| | _ | | | | |
| | | | | | |
| | .=- | | | | |
| | _ | | | | <u> </u> |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | _ | | | • | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | - | | | | <u>-</u> |

| | | end Family Fou | <u>ndation</u> | | <u>36-4199459</u> | Pa | ge 13 |
|----------------|---------------------------------------|---|--------------------------------------|--|----------------------------|-----------------|------------|
| Part) | (VII Information Re Exempt Organ | egarding Transfers To lizations | and Transactions ar | nd Relationships With | n Noncharitable |) | |
| 1 Did | the organization directly or indi | rectly engage in any of the follow | ring with any other organization | n described in section 501(c) of | | Yes | No |
| the | Code (other than section 501(c |)(3) organizations) or in section | 527, relating to political organiz | zations? | | | |
| a Trai | isfers from the reporting found | ation to a noncharitable exempt o | organization of: | | | | |
| (1) | Cash | | • | | 1a(1) | | <u> </u> |
| (2) | Other assets | | | | 1a(2) | | <u>X</u> |
| b Oth | er transactions: | | | | | | |
| (1) | Sales of assets to a noncharita | ble exempt organization | | | 1b(1) | | <u>X</u> |
| (2) | Purchases of assets from a no | ncharitable exempt organization | | | 1b(2) | \sqcup | <u>X</u> |
| (3) | Rental of facilities, equipment, | or other assets | | | 1b(3) | $\sqcup \sqcup$ | <u>X</u> |
| (4) | Reimbursement arrangements | | | | 1b(4) | | <u>X</u> _ |
| | Loans or loan guarantees | | | | 1b(5) | | <u>X</u> |
| (6) | Performance of services or me | embership or fundraising solicitat | tions | | 1b(6) | | <u>X</u> |
| | | uling lists, other assets, or paid e | - | | 1c | <u> </u> | <u>X</u> |
| d If th | e answer to any of the above is | "Yes," complete the following sci | hedule. Column (b) should alw | ays show the fair market value o | of the goods, other ass | ets, | |
| | | oundation. If the foundation rece | | in any transaction or sharing a | rrangement, show in | | |
| colu | | other assets, or services received | | | | | |
| a) Line no | (b) Amount involved | (c) Name of noncharitat | ole exempt organization | (d) Description of transfers, tra | ansactions, and sharing an | angemer | nts |
| | | N/A | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | _ | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | <u> </u> | | | | | | |
| 2a Isti | e foundation directly or indirec | tly affiliated with, or related to, or | ne or more tax-exempt organiza | ations described | | | _ |
| ın s | ection 501(c) of the Code (othe | r than section 501(c)(3)) or in se | ction 527? | | Yes | X |] No |
| b If "Y | es," complete the following sch | | | | | | |
| | (a) Name of org | panization | (b) Type of organization | (c) Descriptio | on of relationship | | |
| | N/A | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | Under penalties of perjury, I declare | that I have examined this return, including the Beclaration of preparer (other than | ding accompanying schedules and st | tatements, and to the best of my knowledge of which preparer has any knowledge | ■ May the IRS o | liscuss ti | his |
| Sign | | A certification of prepared to the transfer of | // // | ~ | s <u>hown</u> below | (see inst | |
| Here | 1 /le/nt | CVO-1 | 15/15/2013 | PRESIDENT | X Yes | | No |
| | Signature of officer or trustee | | Date | Title | | | |
| | Print/Type preparer's na | ame Preparer's | signature M | Date Check |] If PTIN | | |
| | | | | self- employ | ed | | |
| Paid | Patrick W. | | - vilette + | 713113 | P00446 | | |
| Prepa | | alley & Kwit L | rc X | Firm's EIN | ▶80-02161 | 87 | |
| Use C | | | <u> </u> | | | | |
| | | 1 N. Clark St. | | | | | |
| | Ch | <u>icago, IL 6065</u> | 4 | Phone no. | 312-245-0 | <u>077</u> | |

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual. show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor Court Theatre None Public Charity Arts - Theatre Company 5535 S Ellis Ave Chicago IL 60637 6,000. Families Against Mandatory Minimums Public Charity Public policy -None 1100 H Street NW, Suite 1000 Operations Washington, DC 20005 500. Institute for Justice None Public Charity Public policy -901 N Glebe Road, Suite 900 Operations Arlington, VA 22203 15,000. Jazz Aspen Snowmass None Public Charity Arts - Music 110 E Hallam, Suite 104 Aspen_ CO 81611 10,000. Judd Goldman Adaptive Sailing None Public Charity Educational Foundation 1362 S Linn White Drive Chicago, IL 60605 15,000. Museum of Science & Industry Chicago Public Charity Educational - Museum None 57th Street and Lake Shore Drive Chicago, IL 60637 10,000. The Joffrey Ballet None Public Charity Arts - Dance 10 East Randolph, Floor 3 Chicago, IL 60601 <u>51,500.</u> The University of Chicago None Public Charity Health Care -5747 S Ellis Ave #122 Forefront of Medicine Chicago, IL 60637 25,000. The University of Chicago None Public Charity Educational -5747 S Ellis Ave #122 Chairman's Fund in Chicago, IL 60637 Economics 50,000. University of Chicago Comer None Public Charity Healthcare - Children Children's Hospital Service Healthcare 5721 S Maryland Avenue Chicago, IL 60637 1,000. Total from continuation sheets 205 750.

| Part XV Supplementary Information | | | | |
|--|---|----------------------|----------------------------------|----------|
| 3 Grants and Contributions Paid During the | | | | |
| 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 | - Contribution | |
| | | | | |
| WFMT Fine Arts Circle | None | Public Charity | Arts - Radio | |
| 5400 N St. Louis Avenue | | | | |
| Chicago, IL 60625 | | <u> </u> | | 1,000. |
| | | | | |
| The Sasamani Foundation | None | Public Charity | Education. | |
| PO Box 315 | | | | 15 000 |
| Old Mystic, CT 06372 | | | | 15,000. |
| Hazelden Foundation | Yara | Dublic Charitan | Was lab | |
| 15251 Pleasant Valley Rd | None | Public Charity | Health | |
| Center City, MN 55012 | | | | 250. |
| | | | | |
| Hillsdale College | None | Public Charity | Education | |
| 33 East College Street | | _ | | |
| Hillsdale, MI 49242 | | | | 500. |
| | | | | |
| The Field Museum | None | Public Charity | Public Museum | |
| 1400 South Lake Shore Drive | | | | |
| Chicago, IL 60605 | | | | 5,000. |
| | | | | |
| | | | ! | |
| | | | : | |
| | | | | - |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | - |
| | | | | |
| | | | | |
| | | | | <u> </u> |
| | | | | |
| | | | | 1 |
| | | | | |
| Total from continuation sheets | | 1 | <u> </u> | + |
| TOTAL HOLD CONTINUATION SHOCKS | | | | |

| Form 990-PF | Dividends | and Inter | est from S | Secur | ities ————— | Statement | 1 |
|---------------------------------|-----------------|------------------------------|-------------------------|-------------|---------------------------------|--------------------------|----|
| Source | Gross Amount | Capital Gains Dividend | Rever | nue | (b) Net Invest ment Incom | _ | |
| Goldman Sachs Northern Trust | 5. 15,580. | | 0. 0. 15, | 5. ,580. | 5 15,580 | | |
| To Part I, line 4 | 15,585. | | 0. 15 | ,585. | 15,585 | • | |
| Form 990-PF | | Legal | Fees | | | Statement | 2 |
| Description | | (a) Expenses Per Books | (b) Net Inves | | (c) Adjusted Net Income | (d) Charita Purpos | |
| Legal Fees | | 2,368. | | 0. | | | 0. |
| To Fm 990-PF, Pg 1, 1 | ln 16a <u> </u> | 2,368. | | 0. | | | 0. |
| Form 990-PF | | Accounti | ng Fees | | | Statement | 3 |
| Description | | (a) Expenses Per Books | (b) Net Inves ment Inco | | (c) Adjusted Net Income | (d) Charita Purpos | |
| Accounting Fees | | 3,050. | | 0. | | | 0. |
| To Form 990-PF, Pg 1, | ln 16b | 3,050. | | 0. | | | 0. |
| Form 990-PF | | Tax | es | | | Statement | 4 |
| Description | | (a) Expenses Per Books | (b) Net Inves | | (c) Adjusted Net Income | (d) Charita Purpos | |
| State filing fee Federal tax | | 15. 10,458. | | 0. | | | 0. |
| To Form 990-PF, Pg 1, | , ln 18 | 10,473. | | 0. | | | 0. |

| Form 990-PF | Corporate Stock | | Statement | 5 |
|---|---|------------|----------------------|-----|
| Description | | Book Value | Fair Market Value | |
| Intercontinental Exchange G | rp Inc | 75. | 217,5 | 36. |
| Total to Form 990-PF, Part II, line 10b | | 75. | 217,5 | 36. |
| Form 990-PF | Part XV - Line 1a t of Foundation Manage | ura | Statement | 6 |

Name of Manager

Stuart Townsend MarrGwen Townsend