

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

D	partm	nent of the Treasury Revenue Service		cial security numbers o		-	•	
_			► Information about Form					Open to Public Inspection
_			or tax year beginning	00	5/30 , 2014	, and endin		12/31, 2014
		of foundation					' '	entification number
_		YCO FOUNDATI				T	47-1330	
	Numb	er and street (or PO	box number if mail is not delivere	d to street address)		Room/suite	1	umber (see instructions)
							((314) 552-6187
_		EAST WACKER						
	City o	r town, state or provin	ce, country, and ZIP or foreign po	ostal code				
							C If exemption appending, check	pplication is X
	CHI	CAGO, IL <u>6</u> 06	01					
G	Che	ck all that apply	X Initial return	Initial return	of a former p	oublic charit	D 1 Foreign orga	anizations, check here ►
			Final return	Amended re	turn		2 Foreign orga	anizations meeting the
			Address change	Name chang	е			eck here and attach
Н	Che	ck type of organiz	zation X Section 501	(c)(3) exempt private f	oundation		· ·	
ſ	□s	section 4947(a)(1) r	nonexempt charitable trust	Other taxable pr	ıvate founda	tion		dation status was terminated 507(b)(1)(A) check here
ī	Fair	market value o	f all assets at J Acco	ounting method X C	ash Acc	crual		on is in a 60-month termination
	end	of year (from Pai	rt II, col (c), line	ther (specify)				07(b)(1)(B) check here
		•		column (d) must be on cas	sh basis)			
	art	Analysis of Rev	venue and Expenses (The	(a) Revenue and			•	(d) Disbursements
		total of amounts in	columns (b), (c), and (d)	expenses per	(b) Net inve	I .	(c) Adjusted net income	for charitable purposes
		column (a) (see ins		books	Incon		income	(cash basis only)
	1	Contributions, gifts, grant	ts, etc., received (attach schedule) .	426,000.				
	2	Chack In If the	e foundation is not required to				· . · · · · · · · · · · · · · · · · · ·	
	3		ch Sch B					
	4	J	rest from securities	4.		4.		ATCH 1
	5a						· · · · · · · · · · · · · · · · · · ·	
			(loss)					
a	1		m sale of assets not on line 10					
Revenue	b	Gross sales price for a	all					
Š	7	assets on line 6a	come (from Part IV, line 2) .					
2	8	. •	oital gain					
	9	•	ons					
		Gross sales less return	ns			-		
	h	and allowances Less Cost of goods so			-			
		<u> </u>	s) (attach schedule)					
	11		ich schedule)					
	12		through 11	426,004.		4.		
_	13		cers, directors, trustees, etc	0				
Se	14	•	alaries and wages				-	
JS(15		ployee benefits					
ě	15 16a		schedule)				· · · · · · · · · · · · · · · · · · ·	
Ä	10a	- '	attach schedule)				·	
Ş	b c		fees (attach:schedule)					
큚	17		VED					-
st	18		dule) (see instructions).					- -
`≣	19	N '	ch schedule) and depletion.				_	
투	19 20	Occupancy . 2 6.				-	-	
ĕ	21		N C -	-				
=	21 22		s and meetings :					
		Other wyses (at	tach schedule)	-			.	
Operating	23							
ā	24	• -	id administrative expenses.	d				
ğ			gh 23	30,250.				30,250.
J	25 26		s, grants paid	30,250.				30,250
-	26			33,230.				30,230
	27	Subtract line 26 fro	om line 12 expenses and disbursements	395,754.				
			come (if negative, enter -0-)	3,7,7,34.	-	4.		
	D		ne (if negative, enter -0-)			1-1-		

JSA For Paperwork Reduction Act Notice, see instructions.
4E1410 1 000 7229IX 761H 5/13/2015 9:52:40 AM V 14-4.6F

6	art II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year		of year
		<u> </u>	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ing	<u> </u>	395,754.	395,754
	2	Savings and temporary	cash investments			
	3	Accounts receivable ▶				
		Less allowance for dou	btful accounts ▶			
	4					
		Less allowance for dou	btful accounts ▶			
	5					
	6		officers, directors, trustees, and other			
			tach schedule) (see instructions)			
	7		eceivable (attach schedule)		· · · · · · · · · · · · · · · · · · ·	
			btful accounts			
ø	8		e			-
ssets	9		eferred charges		 -	-
As	10 a		e government obligations (attach schedule)			
			stock (attach schedule)			
			bonds (attach schedule)			
	11 C	Investments - land, buildings	s, button			
	12	Investments - mortgage	loans			
	42	Investments other (atte	sch cchodulo)			
	114	Land huildings and				
		Less accumulated deprecia	tion			
	15	Other assets (describe	>)			
			completed by all filers - see the			
		instructions. Also, see pa	age 1, item I)	O	395,754.	395,754.
	17	Accounts payable and a	ccrued expenses		-	
Ş						
ij			rs, trustees, and other disqualified persons			
Liabilities			tes payable (attach schedule)			
Ξ			• -)		<u> </u>	
		,				
	23	Total liabilities (add line	s 17 through 22)	O	0	
			ow SFAS 117, check here			
s			24 through 26 and lines 30 and 31.			
ances	24	Unrestricted				
ılar		Temporarily restricted				
Ä	26					
Pur			not follow SFAS 117, ▶ 🗓			
Ē		check here and com	plete lines 27 through 31.			
ō	27		cipal, or current funds			
et	28		land, bldg, and equipment fund			
ASS	29		lated income, endowment, or other funds		395,754.	
	30		balances (see instructions)	0	395,754.	
Ž	31		net assets/fund balances (see	-	, , , , , ,	
			` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	0	395,754.	
Р			nges in Net Assets or Fund Balar	ices		
			alances at beginning of year - Part II		ust agree with	
•			d on prior year's return)		· '	0
2		er amount from Part I,				395,754.
3					· · · · · · · · · 	
						395,754.
5	Deci	reases not included in				
			alances at end of year (line 4 minus l	ine 5) - Part II, column (b)		395,754.
-	. 510	ussette or rund be	and at one or your time of minds	o, . art ii, soluiiii (b)	,, <u>U</u>	

Pa	rt IV Capital Gains	s and Losses for Tax on Inv	vestment Income			rage U
	(a) List an	nd describe the kind(s) of property sold	(e g , real estate,	(b) How acquired	(c) Date	(d) Date sold
	2-story t	orick warehouse, or common stock, 200	Oshs MLC Co)	P - Purchase D - Donation	acquired (mo , day, yr)	(mo , day, yr)
<u>1a</u>	-					
_b					·	
<u>_</u> C						
<u>d</u>						
<u>e</u>						L.,
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) minu	
<u>a</u>						
<u>b</u>						
_ <u>c</u> _			-			
e e						
	Complete only for assets	showing gain in column (h) and own	ed by the foundation on 12/31/69		O (O-1 (b) -	
		(j) Adjusted basis	(k) Excess of col (ı)		Gains (Col (h) g (k), but not less t	
((i) F M V as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	
а						
b						
С						
d					-	
<u>e</u>						
2	Capital gain net income		f gain, also enter in Part I, line 7			
_	, •	· ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	f (loss), enter -0- in Part I, line 7	2		
3		ain or (loss) as defined in sections				
	-		structions) If (loss), enter -0- in			
		Under Costion 4040(a) for De		3		
			educed Tax on Net Investment In			
(FO	r optional use by domesti	c private foundations subject to tr	ne section 4940(a) tax on net investr	ment incor	ne)	
lf co	action 4040(d)(2) applies	loave this part blank NO	T AVAILABLE FOR INITIAL	עניאם סנ	ישנוסאוכ	
11 30	ection 4940(d)(2) applies,	leave this part blank	I MANIBODE TON INTIAL	TEAN NE	7101113	
Wa:	s the foundation liable for	the section 4942 tax on the distri	butable amount of any year in the ba	ase period	2	Yes No
		not qualify under section 4940(e)			·	, .ee ne
1	Enter the appropriate an	nount in each column for each yea	ar, see the instructions before makin	g any entr	ies	
	(a) Base period years	(b)	(c)		(d)	
Cat	endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets	(Distribution ra col (b) divided by	
	2013					
	2012					
	2011					
	2010					
_	2009					
				_2		
3		•	de the total on line 2 by 5, or by the	_		
	number of years the four	ndation has been in existence if le	ss than 5 years	3		
				_		
4	Enter the net value of no	ncharitable-use assets for 2014 fi	rom Part X, line 5	_4		
				_		
5	Multiply line 4 by line 3.			5		
_	E 1. 40/ 5 5			_		
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		
-	Add Imag F and C			7		
′	Aud lines 5 and 6		• • • • • • • • • • • • • • • • • • • •	'		
8	Enter qualifying distribute	ons from Part XII line 4		8		
U	If line 8 is equal to or di	reater than line 7. check the box	ın Part VI, line 1b, and complete t		ISING a 1% tay	rate See the
	Part VI instructions	,	,			

•	7	U	Λ			
Fo	rm	99	0-P	F	201	4)

7

8b

Χ

Χ

Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either

Enter the states to which the foundation reports or with which it is registered (see instructions)

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."

· By language in the governing instrument, or

Х

Par	rt VII-A Statements Regarding Activities (continued)	, 505		
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
• • •		44		X
42	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		-^-
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	40		
4.2	person had advisory privileges? If "Yes," attach statement (see instructions)	12	x	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		L
	Website address ► N/A	610		
14	The books are in care of ► LAWRENCE P. KATZENSTEIN Telephone no ► 314-552	-010		
	Located at ▶35 EAST WACKER DRIVE CHICAGO, IL ZIP+4 ▶ 60601			T-1-
15	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		T.,	·
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority	1	Yes	
	over a bank, securities, or other financial account in a foreign country?	16	L	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			<u> </u>
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	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? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after	'		
	termination of government service, if terminating within 90 days)			
þ	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)?	<u>1b</u>		
	Organizations relying on a current notice regarding disaster assistance check here			
С	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		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 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 ▶			
ь	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			v
	all years listed, answer "No" and attach statement - see instructions)	2b		X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
3 a	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	<u>,</u>		v
	foundation had excess business holdings in 2014)	3b		X
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
Ь	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	.		17
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b)_DE	X (2014)
	For	m and	1-F-F	1201A

NONE

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

CLAYCO FOUNDATION 47-1330583 Form 990-PF (2014) Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, Part VIII and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (c) Compensation (b) Type of service NONE 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 statistical information such as the number of Expenses organizations and other beneficiaries served, conferences convened, research papers produced, etc 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 NONE

Form 990-PF (2014)

3 NONE

Total. Add lines 1 through 3.

All other program-related investments. See instructions

Par	t X	Minimum Investment Return (All domestic foundations must complete this part. Foreignee instructions.)	gn foundations,	
1	Fai	r market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	pur	poses		
а	Ave	erage monthly fair market value of securities	1a	
b	Ave	erage of monthly cash balances	1b	148,373.
С	Fai	r market value of all other assets (see instructions).	1c	
d	Tot	al (add lines 1a, b, and c)	1d	148,373.
е	Rec	duction claimed for blockage or other factors reported on lines 1a and		
	1c	(attach detailed explanation)		
2	Acc	uisition indebtedness applicable to line 1 assets	2	
3	Sub	otract line 2 from line 1d	3	148,373.
4	Cas	otract line 2 from line 1d		
		ructions)	4	2,226.
5	Net	value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	146,147.
6		imum investment return. Enter 5% of line 5	6	7,307.
Par	t XI	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foun	dations	
		and certain foreign organizations check here ▶ and do not complete this part)		
1		imum investment return from Part X, line 6	1	7,307.
2 a	Tax	on investment income for 2014 from Part VI, line 5		
b	Inco	ome tax for 2014 (This does not include the tax from Part VI).		
С	Add	I lines 2a and 2b	2c	
3		tributable amount before adjustments Subtract line 2c from line 1	3	7,307.
4		coveries of amounts treated as qualifying distributions	4	
5	Add	I lines 3 and 4	5	7,307.
6		duction from distributable amount (see instructions)	6	
7		tributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line	1	7	7,307.
Par	XII	Qualifying Distributions (see instructions)		
1	Am	ounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а		enses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	30,250.
b	Pro	gram-related investments - total from Part IX-B	1b	30,233.
2	Am	ounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.		
_		poses	2	
3	Am	ounts set aside for specific charitable projects that satisfy the	-	
a		ability test (prior IRS approval required)	3a	
b		sh distribution test (attach the required schedule)	3b	
4	Qua	lifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	30,250.
5		indations that qualify under section 4940(e) for the reduced rate of tax on net investment income	-	30,230.
_		er 1% of Part I, line 27b (see instructions)	5	^
6	Adi	usted qualifying distributions. Subtract line 5 from line 4	6	30,250.
•	No	te. The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		
	.40	qualifies for the section 4940(e) reduction of tax in those years	arculating whether	me roundation

Form 990-PF (2014) ' Page 9 Part XIII Undistributed Income (see instructions) (a) (b) (d) Corpus Years prior to 2013 2013 2014 Distributable amount for 2014 from Part XI, 7,307. Undistributed income, if any, as of the end of 2014 Enter amount for 2013 only Total for prior years 20 12 ,20 11 .20 10 Excess distributions carryover, if any, to 2014 From 2009 From 2010 From 2011 From 2012 From 2013 Total of lines 3a through e Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 30,250. a Applied to 2013, but not more than line 2a . . . Applied to undistributed income of prior years (Election required - see instructions)..... c Treated as distributions out of corpus (Election required - see instructions) 7,307. d Applied to 2014 distributable amount 22,943. e Remaining amount distributed out of corpus . . . Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 22,943. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 Prior years' undistributed income Subtract line 4b from line 2b 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 d Subtract line 6c from line 6b Taxable amount - see instructions
Undistributed income for 2013 Subtract line
4a from line 2a Taxable amount - see f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015 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) Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2015. 22,943. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2010 . . . b Excess from 2011 . . . c Excess from 2012 . . . d Excess from 2013 . . . 22,943. e Excess from 2014 . . .

Ра	TEXIV Private Op	erating Foundations	s (see instructions a	ind Part VII-A, ques	tion 9)		NOT A	PETICART
1 a	If the foundation has				rating			
	foundation, and the rulin	g is effective for 2014, e	enter the date of the ruling	l 	▶└			
Ь	Check box to indicate	whether the foundation	is a private operating	foundation described	in section	4942(j)(3) or	4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years			(e) Total
	justed net income from Part	(a) 2014	(b) 2013	(c) 2012	(d) 2	011	,	
	I or the minimum 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							
đ	Amounts included in line 2c not used directly for active conduct of exempt activities							
е	Qualifying distributions made		ļ					
	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							
а	"Assets" alternative test - enter							
	(1) Value of all assets							
	(2) Value of assets qualifying under section							
_	4942(j)(3)(B)(i)							
Ь	"Endowment" alternative test- enter 2/3 of minimum invest-							
	ment return shown in Part X,							
	line 6 for each year listed							
С	"Support" alternative test - enter							
	(1) Total support other than gross investment income							
	(interest, dividends rents payments on securities				ľ			
	loans (section 512(a)(5))							
	or royalties)				-			
	public and 5 or more							
	exempt organizations as provided in section 4942							
	(j)(3)(B)(iii)				+			
	port from an exempt							
	organization				+			
Pai	· ·	ntary Information (Complete this par	t only if the foun	dation had	\$5,000	or more	in assets
		e during the year -s				40,000	0	455545
1	Information Regardin	g Foundation Manage	rs:					
а	List any managers of						ed by the	foundation
	before the close of any	y tax year (but only if th	ney have contributed r	nore than \$5,000) (\$	See section 5	07(d)(2))		
	N/A							
b	List any managers of					an equally	large po	rtion of the
	ownership of a partner	rship or other entity) of	which the foundation	nas a 10% or greate	r interest			
	N/A	0-4-16-41	O'ff I am Oak alamb	34- Dunaman				
	Information Regardin	_		•				
	Check here ► X if t unsolicited requests for							
	other conditions, comp			arito, etc (see motrut	3110113) to 1110	ividuals 0	i Organiza	mons ander
	The name, address, a	nd telephone number	or e-mail address of t	he person to whom a	oplications sh	ould be add	ressed	
		·			·			
b	The form in which app	lications should be sub	omitted and information	on and materials they	should inclu	de		
С	Any submission deadli	nes	<u> </u>					
_ _ _	Any restrictions or li	mitations on awards	such as by deodra	iphical areas charits	able fields	unds of u	astitutions	or other
	factors		20 0, googic	arous, oriente				, or other

Part XV Supplementary Information (continued)

Form 990-PF (2014)

Page **11**

3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	ng the Year or Appr	oved for I	uture 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	contribution	,
a Paid during the year				
ATCH 3				
		i		
		·		
Total			▶ 3a	30,250.
b Approved for future payment	-			·
.,				
Total	<u> </u>	<u> </u>	▶ 3b	

JSA 4E1491 1 000

	Analysis of Income-Produ					
Enter gross	amounts unless otherwise indicated	Unrel	ated business income (b)	Excluded by	(d)	(e) Related or exempt function income
1 Program	service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
а						
b						
d		<u> </u>		-		
		<u></u>				
f						
•	and contracts from government agencies	-		 	<u></u>	· · · · · · · · · · · · · · · · · · ·
	ship dues and assessments					
	on savings and temporary cash investments					
	ds and interest from securities	<u> </u>		+		4.
	, ,			-		
	-financed property	-	· · · · · ·			
	il income or (loss) from personal property					
	vestment income			 		1 1
	loss) from sales of assets other than inventory					<u></u>
	ome or (loss) from special events					
	rofit or (loss) from sales of inventory	<u> </u>				
	venue a					
					1	
_						
u			-			<u> </u>
e						
е	Add columns (b), (d), and (e)					4.
e 12 Subtotal	Add columns (b), (d), and (e)				13	
e12 Subtotal			• • • • • • • • • • • • • • • • • • • •		13	
e12 Subtotal	dd line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calc	ulations)				
e 12 Subtotal 13 Total Ad (See works)	dd Inne 12, columns (b), (d), and (e) . heet in line 13 instructions to verify calc Relationship of Activities	ulations) to the Ac	complishment of Ex	empt Purp	oses	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.
e	dd Inne 12, columns (b), (d), and (e)	ulations) to the Ac	complishment of Ex	empt Purp	oses e) of Part XVI-A contribu	4.

	•									
Part	_	<u> </u>	Regarding Tra	FOUNDATION ransfers To and Trans	sactions a	nd Relationshi	47-1330 ps With None			age 13 e
a 1 () () () () () () () () () () () () ()	in secondary organization (1) Ca (2) Other (1) Sa (2) Pc (3) Rc (4) Rc (5) Lc (6) Pc Shariii If the	the organization direct oction 501(c) of the Conizations? In the reporting of the conizations of the conizations. The conizations of assets of assets to a not occur of the conization of facilities, equipment of facilities	ctly or indirectly code (other than ing foundation to concharitable exergement, or other gements	empt organization. er assets chain or fundraising solicitation ists, other assets, or paid en vices given by the reporting vices given by the reporting assets.	zations) or in organization of the control of the c	of	ting to political	1a(1) 1a(2) 1b(1) 1b(2) 1b(3) 1b(4) 1b(5) 1b(6) 1c	fair m	X X X X X X X X
		e in any transaction or	or sharing arrang	ngement, show in column	(d) the value	e of the goods, oth	her assets, or se	ervices	s rece	eived
(a) Line	іе по	(b) Amount involved	(c) Name of	noncharitable exempt organization		escription of transfers, tr	ransactions, and share	ring arrar	ngeme	ents
		N/A			N/A					
		 	+							
		 	 							
										
			+							
			 							-
			 							
										
										_
										_
c	descr	ribed in section 501(c)	c) of the Code (o	ffiliated with, or related to other than section 501(c)(3)	•	, ,	_	Ye	es X] No
<u> </u>	1 16	es," complete the follow (a) Name of organization		(b) Type of organizati	·	(c) D ₆	escription of relations			
		(a) Ivanie or organization	<u>n</u>	(b) 1700 C. C.g	iOn	1-7	SCRIPTION OF TORSESSEE	'µib		
										
										
						[
						1				
				nined this return, including accompany			best of my knowledg	ge and be	elief, it	is tru
O:an	- 1	act, and complete Declaration of	of preparer (other than to	taxpayer) is based on all information of v	which preparer has	s any knowledge				
Sign				1			May the IRS with the pre	S discuss reparer_sl		
Here	1 3	gnature of officer or trustee		Date	Title		(see instructions		Ves [No

Form **990-PF** (2014)

(see instructions)? X Yes

self-employed P00061253

615-360-5500

Check If PTIN

Fim's EIN ▶35-0921680

Date

37067-7260

5/13/2015

Phone no

Paid

Preparer

Use Only

Print/Type preparer's name

John Colwell

Firm's name

▶ CROWE HORWATH LLP

TN

Firm's address ▶ 720 COOL SPRINGS BLVQ.

FRANKLIN,

Preparer's sign

Part	XVII	Exempt Orga		ransters 10 ar	nd Transact	ions a	and Relatior	isnips I	With None	chari	itable)
1	Did the	organization direc	tly or indirectly	engage in any o	of the followin	g with	any other orga	anization	described		Yes	No
		on 501(c) of the C								-		
(organiz	cations?				,		_	,			1
а	Transfe	ers from the reporti	ng foundation t	o a noncharitable	e exempt orgai	nization	of					
		sh								1a(1)		Х
		er assets										X
		ransactions										
((1) Sal	es of assets to a n	oncharitable ex	empt organization						1b(1)		Х
((2) Pur	chases of assets f	rom a nonchari	table exempt orga	nization					1b(2)		X
((3) Rer	ntal of facilities, equ	upment, or othe	er assets						1b(3)		Х
((4) Rei	mbursement arrang	gements							1b(4)		Х
((5) Loa	ins or loan guarante	es							1b(5)		X
ĺ	(6) Per	formance of servic	es or members	ship or fundraising	solicitations					1b(6)		X
c	Sharing	g of facilities, equip	ment, mailing li	sts, other assets,	or paid employ	ees .				1c		Х
		answer to any of t									fair m	arke
,	value o	of the goods, other	assets, or serv	vices given by the	e reporting fo	undatio	n If the found	lation re	ceived less	than	fair m	arke
,	value ii	n any transaction o	r sharing arrar	ngement, show in	n column (d) t	he valu	e of the good	s, other a	assets, or so	ervice	s rece	eived
(a) Lin		(b) Amount involved	1	noncharitable exempt			Description of trans					
		N/A				N/A	<u>.</u>					
							· · · · · · · · · · · · · · · · · ·					
-												
							-					
		 _								·		
			1			-			-			
			 									
	-		+			-	· ·					
			†									
			1			-			·			
			+									
												
						 	·	_				
	_					<u> </u>	·					
			 				- 451					
	 +-						-					
0- 1				££.1								
		foundation directly								\neg	Tv.	1
		ed in section 501(c			1 50 1(c)(3)) or	ın secti	ion 52//		L	Y €	es X	No
<u> D 1</u>	i res,	" complete the follo		1	of organization			(a) Decemb	on of relations			
		(a) Name of organization	<u> </u>	(b) Type	of organization			(c) Descrip	tion of relations	nip	-	
								· · · · · ·				
		 .										
				 								
												
	Llador	pendition of popular I doe	lore that I have even	and the seture regulation		hadulas a		- 45 - 5 - 4	-			
	correct	penalties of perjury, I dec , and complete Declaration	of preparer (other than	taxpayer) is based on all ii	ng accompanying so nformation of which p	nequies ar preparer ha	nd statements, and i is any knowledge	o the best of	of my knowledge	e and b	elief, it i	s true,
Sign		TMA	M	7 -	19 Du	0	60		May the IRS	discuss	this i	retum
Here		10013	741 – T	<u> </u>	1 / 20/5		<u>/ O</u>		with the pre	parer_s	hown	below
	Sign	ature of officer or trustee		Date		Title			(see instructions)? X	Yes	No
	_L,											
Paid		Print/Type preparer's na	me	Preparer's signe	ture/ /// ///	1	Date 5/12/2	O15 Che	~" └─ "	TIN		
		John Colwell			on (olwer,	CPA	5/13/2	JIJ sel			5125	3
Prepa			ROWE HORWAT		<u></u>			Firm's EIN	▶ 35-09	2168	0	
Use (Only		20 COOL SPF	_	SUITE 600			,				
		FI	RANKLIN, I	<u>'N</u>		3	7067-7260	Phone no	615-36	<u>0-5</u> 5	00	

Schedule B

(Form 990, 990-EZ, or 990-PF)

or 990-PF)
Department of the Treasury
Internal Revenue Service

Name of the organization

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

2014

Employer identification number

CLAYCO FOUNDATION		47-1330583						
Organization type (check one)		1 47 1330303						
Filers of:	Section:							
Form 990 or 990-EZ	501(c)() (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private	foundation						
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private four	idation						
	501(c)(3) taxable private foundation							
· –	overed by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and	a Special Rule See						
General Rule								
_	iling Form 990, 990-EZ, or 990-PF that received, during the year, control property) from any one contributor. Complete Parts I and II. See instructions.	-						
Special Rules								
regulations under sec 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ctions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 99 that received from any one contributor, during the year, total contribution the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1	90 or 990-EZ), Part II, line ons of the greater of (1)						
contributor, during th	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that e year, total contributions of more than \$1,000 exclusively for religious, all purposes, or the prevention of cruelty to children or animals. Complete	charitable, scientific,						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled 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 totaling \$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 lin certify that it does not meet the filing requirements of Schedule B (Form	e H of its Form 990-EZ or on its						
For Paperwork Reduction Act Notice,	see the Instructions for Form 990, 990-EZ, or 990-PF. Schedu	ile B (Form 990, 990-EZ, or 990-PF) (2014)						

Name of organization CLAYCO FOUNDATION

Employer identification number 47-1330583

Part I	Contributors (see instructions). Use duplicate copies of Pa	art I if additional space is nee	eded.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1 _	ROBERT G. CLARK 8039 PARK DRIVE ST. LOUIS, MO 63117	\$262,000.	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	
2_	DAVE MOSES 12445 BALWYCK LANE DES PERES, MO 63131	\$68,000.	Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
3_	STEPHEN R. SIECKHAUS 12703 WYNDBUSH COURT DES PERES, MO 63131	\$41,000.	Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
4 -	TOM SCHROYER 288 WOODCLIFFE PLACE DRIVE CHESTERFIELD, MO 63005	\$15,000.	Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
5	KEVIN MCKENNA 415 SOUTH PARK LAGRANGE, IL 60525	\$15,000.	Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
6 - 1	TOM SIECKHAUS 904 SUMMERSET PARC LANE	\$ 15,000.	Person X Payroll Noncash	

Name of organization CLAYCO FOUNDATION

Employer identification number 47-1330583

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
7 _	KIRK WARDEN 719 EAST MONROE OAKLAND, MO 63122	\$\$.	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 CLAYCO FOUNDATION

Employer identification number

47-1330583

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.					
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received		
		\$			

Employer identification number 47-1330583

Part III	Exclusively religious, charitable, etc that total more than \$1,000 for the following line entry. For organization contributions of \$1,000 or less for the Use duplicate copies of Part III if additional total	year from any one of secompleting Part III, ne year. (Enter this in	contributor. Compenser the total of formation once. S	exclusively religious, charitable, etc.	
(a) No. from Part I	(b) Purpose of gift	(c) Use		(d) Description of how gift is held	
	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4		Relatio	telationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
	(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held	
- - - -					
	(e) Transfer of g Transferee's name, address, and ZIP + 4			Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held	
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee				

FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

NET INVESTMENT INCOME	4.	4.
REVENUE AND EXPENSES PER BOOKS	. 4	4.
		TOTAL
DESCRIPTION	INTEREST INCOME	

ATTACHMENT 1 PAGE 19

COMPENSATION	0	0	0	0	0
TITLE AND AVERAGE HOURS PER	PRESIDENT/TRUSTEE	V.P./TRUSTEE	V.P. TRUSTEE	V.P. 10.00	CFO
WEEK DEVOTED TO POSITION	10.00	10.00	10.00		10.00
NAME AND ADDRESS	ROBERT G. CLARK	KEVIN MCKENNA	STEPHEN R. SIECKHAUS	RUSS BURNS	ANTHONY SCHOFIELD
	35 EAST WACKER DRIVE				
	CHICAGO, IL 60601				

GRAND TOTALS

47-1330583

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

ATTACHMENT 3

TOTAL CONTRIBUTIONS PAID

30, 250

ATTACHMENT 3 PAGE 21

72291X 761H 5/13/2015

V 14-4.6F

Clayco Foundation 35 East Wacker Drive Chicago, IL 60601

EIN 47-1330583

Part VII-A, Statements Regarding Activities Question 10

- Robert G. Clark
 8039 Park Drive
 St. Louis, MO 63117
- Dave Moses
 12445 Balwyck Lane
 Des Peres, MO 63131
- Stephen R Sieckhaus 12703 Wyndbush Court Des Peres, MO 63131
- Tom Schroyer 288 Woodcliffe Place Drive Chesterfield, MO 63005
- Kevin McKenna
 415 South Park
 Lagrange, IL 60525
- Tom Sieckhaus
 904 Summerset Parc Lane
 Fenton, MO 63026
- Kırk Warden 719 East Monroe Oakland, MO 63122