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### orm **990-PF**

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

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OMB No 1545-0052 2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For ca	endar year 2014, or tax year beginning	7/01 ,2014	, and ending 6/3	30 , 2015	
			A		nber
	HILB FAMILY FOUNDATION		<u> </u>	36-4417758	_ <del>,~</del>
	JOSEPH PEDOTA W. 22ND STREET, SUITE 305		В	Telephone number (see inst	
	BROOK, IL 60523		}		
			c	If exemption application is	pending, check here
G Ch	eck all that apply Initial return	Initial return of a form	mer public charity	1 Foreign organizations, chec	k here
	Final return	Amended return	1	•	
	Address change	Name change		2 Foreign organizations meet here and attach computation	ing the 85% test, check
H Ch		1(c)(3) exempt private t			
	Section 4947(a)(1) nonexempt charitable		private foundation E		
		counting 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	
► \$		, column (d) must be or	n cash basis.)	under section 507(b)(1)(B)	, check here
Part	Analysis of Revenue and	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces-	expenses per books	income	ıncome	for charitable purposes
	sarily equal the amounts in column (a)				(cash basis only)
	(see instructions).)	01 000	<u> </u>		. · · · · · · · · · · · · · · · · · · ·
	1 Contributions, gifts, grants, etc, received (attach schedule) 2 Ck if the foundn is not required to attach Sch B	81,020.	1 1 1 1 1 1		
				<del> </del>	
	3 Interest on savings and temporary cash investments	15.	<u>1</u> 5.	. N/A	
	4 Dividends and interest from securities	48,877.	48,877.		
	5 a Gross rents	* * * * * * * * * * * * * * * * * * * *			
_	b Net rental income or (loss)	SET TO THE PARTY OF		A	1
R	<b>6 a</b> Net gain or (loss) from sale of assets not on line 10 <b>b</b> Gross sales price for all	28,123.	-		
٧	assets on line 6a	المراجع المراج	00 100		
E N	7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain		28,123		1 3 1 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Ü	9 Income modifications	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Ε	10 a Gross sales less returns and		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 - T C	
	allowances		4,233		
	b Less Cost of goods sold DSO-SEI				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Gross profit or (loss) (attach schellule)				
	11 Other income (attach schedule)				
			<u></u>	<u>_</u>	
	12 Total Add lines 1 through 11	158,035.	77,015	·	2 605
	13 Compensation of officer and wages 14 Other employee salaries and wages	7,250.	3,625	<del></del>	3,625.
	15 Pension plans employee herefits			<del></del>	<del></del>
_	15 Pension plans, employee penefits 16a Legal fees (attach schedule) SFF ST 1		<u> </u>		
A D	<b>b</b> Accounting fees (attach sch) SEE ST 1	5,900.	2,950	<del> </del>	2 950
M	c Other prof fees (attach sch) SBEST 2	8,999.	8,999	<b>'</b>	2,950.
O N	17 Interest	0,333.	- 0,333	<b>†</b>	
O S T R	18 Taxes (attach schedule)(see instrs) SEE STM 3	1,110.	1,110		
RRAA	19 Depreciation (attach			<del></del>	1 4 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1 1	sch) and depletion			<u> </u>	
N V G E	20 Occupancy 21 Travel, conferences, and meetings	12 610	6.724	ļ. <u> </u>	<u> </u>
A E	22 Printing and publications.	13,618.	6,734	·	6,808.
N X D P	23 Other expenses (attach schedule)				
E	SEE STATEMENT 4	25.	10.	.	15.
ŝ	24 Total operating and administrative				
š	expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid PART XV	36,902.	23,428	·	13,398.
	17.	88,000.	<del> </del>	<del> </del>	88,000.
	26 Total expenses and disbursements. Add lines 24 and 25	124,902.	23,428		101,398.
	27 Subtract line 26 from line 12:	1 227,302.	23, 120	<del></del>	101,330.
	a Excess of revenue over expenses		1		- ;
	and disbursements	33,133.		<del></del>	· · · · · · · · · · · · · · · · · · ·
	b Net investment income (if negative, enter -0-)		53,587	·	
	C Adjusted net income (if negative, enter -0-)	<u> </u>	TEE 005041 10/10		Form <b>900 PF</b> (2014)

Part	11	Balance Sheets	column should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	- T	(c) Fair Market Value
	_	Cash - non-interes		(a) Book value	(b) BOOK Value		(C) Fall Warket Value
			rary cash investments	50,201.	33,1	<del>/7</del> +	33,147.
		Accounts receivable	· ·	50,201.	33,1	<del>* / ·  </del>	33,147.
	3	Less: allowance for			<b>.</b>		
	4	Pledges receivable			<del> </del>		
	-	Less allowance for	doubtful accounts >				
	5	Grants receivable		-	•		
	6	• • • • • • • • • • • • • • • • • • • •	lears dispetors trustees and other	-		-+	
	•	disqualified persons (atta	icers, directors, trustees, and other ach schedule) (see instructions).	2,500.		i	
	7	Other notes and loans red	ceivable (attach sch)				,
A		Less: allowance for	doubtful accounts >			~ ~ -	
S	8	Inventories for sale	or use				
ASSET	9	Prepaid expenses a	and deferred charges				
Ś	10 a	a Investments – U.S. obligations (attach s	. and state government				
	ı		e stock (attach schedule) STATEMENT 5	1,106,290.	1,158,9	77.	1,570,043.
		c Investments — corporate		2/200/2301			
		Investments - land	·			$\neg \uparrow$	
		equipment basis.  Less: accumulated depre	cuation				
		(attach schedule)	• • • • • • • • • • • • • • • • • • •				
	12	Investments - more					
	13		· ·			$\longrightarrow$	
	14						
,		Less: accumulated depre (attach schedule)	eciation	_			
	15				-		
	16	Total assets (to be see the instructions	completed by all filers — Solution (1) (2) (2) (3) (4) (4) (4) (5) (6) (6) (6) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7	1,158,991.	1,192,1	24.	1,603,190.
Ļ	17	Accounts payable a	and accrued expenses	-			
Å	18	Grants payable					
Ŗ	19	Deferred revenue					
Ŀ	20		ectors, trustees, & other disqualified persons				
ļ	21	• •	es payable (attach schedule)				•
<u>i</u>	22	Other liabilities (de:	scribe)		•		
E S	23	Total liabilities (add	d lines 17 through 22)	0.		0.	
		Foundations that for	ollow SFAS 117, check here X 4 through 26 and lines 30 and 31.				, -
N F	24	·	-	1,158,991.	1,192,1	24.	the state of
N F E U T N	25	Temporarily restrict	ted		,	$\neg$	
D	26	Permanently restrict	cted		<u> </u>		
A B S A L T		Foundations that dand complete lines	lo not follow SFAS 117, check here 🕒 🗀				
ΕL	27	Capital stock, trust	principal, or current funds				A STATE OF THE STA
SŅ	28	Paid-in or capital surplu	s, or land, bldg., and equipment fund				AND WATER TO
OE	29	Retained earnings, accur	mulated income, endowment, or other funds				and the second second
ŘŠ	30		fund balances (see instructions)	1,158,991.	1,192,1	24.	7.5
	31	Total liabilities and (see instructions)	d net assets/fund balances	1,158,991.	1,192,1	24	1. A. 1.
Par	EIII		nges in Net Assets or Fund Balanc		1,102,1		· · · · · · · · · · · · · · · · · · ·
1			balances at beginning of year - Part II, colu		gree with		
•	end-	-of-year figure report	ed on prior year's return) .			1	1,158,991.
2		er amount from Part				2	33,133.
3		r increases not included in	line 2 (itemize).			3	
4		lines 1, 2, and 3		•		4	1,192,124.
5		eases not included in line 2				5	
6_	Tota	al net assets or fund	balances at end of year (line 4 minus line 5	) - Part II, column (b),	iine 30.	6	1,192,124.

Part	IV Capital Gains and I	Losses for Tax on Investmen	nt Income			
	(a) List and describe 2-story brick warehous	e the kind(s) of property sold (e.g., se; or common stock, 200 shares M	real estate, LC Company)	b) How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1 a	SEE STATEMENT 6					Ţ.,
b						
С						
d						<u> </u>
e					<u> </u>	L
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basi plus expense of sale		(h) Gain oi (e) plus (f) n	
а						
<u>b</u>						<del></del>
<u>c</u>			-			
d						<del></del>
e		<u> </u>	10/21/0	· ·		
	(i) Fair Market Value	ving gain in column (h) and owned  (i) Adjusted basis	(k) Excess of column		(I) Gains (Co gain minus column (	
	as of 12/31/69	as of 12/31/69	over column (j), if an		nan -0-) or Losses (1	
a					<del></del>	
C					· · · · · · · · · · · · · · · · · · ·	
d					<del> </del>	
<u>u</u>						
		Lif gain, also	enter in Part I, line 7		T	
2	Capital gain net income or (ne	et capital loss).	iter -0- in Part I, line 7	2		28,123.
3	Net short-term capital gain or	(loss) as defined in sections 1222(	5) and (6).			
			<del></del> 1			
	in Part I, line 8	ne 8, column (c) (see instructions)	11 (1055), etitel -0-	3	1	18.
Par		er Section 4940(e) for Reduce	ed Tax on Net Investme	ent Income	•	
		foundations subject to the section 494	O(a) tax on net investment inco	ome.)		-
.,	4040(4)(0) applies leave	Above many blands				
if sec	ction 4940(d)(2) applies, leave	this part blank				_
Was	the foundation liable for the se	ection 4942 tax on the distributable	amount of any year in the ba	se period?	Yes	X No
If 'Ye		alify under section 4940(e). Do not				
_1	Enter the appropriate amount in	each column for each year, see the ir	nstructions before making any o	entries		
_	(a) Base period years Calendar year (or tax year	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	ets (co	<b>(d)</b> Distributio lumn (b) divided	
	beginning in)					
	2013	81,172.	1,547			0.052447
	2012	70,784.	1,433			0.049387
	2011	71,677.	1,292			0.055450
	2010	81,066.	1,249			0.064899
	2009	52,493.	1,121	.,144.	<del></del>	0.046821
2	Total of line 1, column (d).			2		0.269004
3	Average distribution ratio for number of years the foundation	the 5-year base period — divide the on has been in existence if less tha	total on line 2 by 5, or by th n 5 years	e <b>3</b>		0.053801
4	Enter the net value of noncha	aritable-use assets for 2014 from Pa	art X, line 5	4		1,620,787
5	Multiply line 4 by line 3 .			. 5		87,200.
6	Enter 1% of net investment ii	ncome (1% of Part I, line 27b)		6		536
7	Add lines 5 and 6	· · · · ·		7		87,736
		from Dark VII has 4				
8	Enter qualifying distributions	from Part XII, line 4 nan line 7, check the box in Part VI, lir	e 1b, and complete that part is	8   sino a 1% tax		101,398
	Part VI instructions	ion into 7, oncon the box in a die 41, in		9 - 1 /0 10/		

	417758		Pa	age 4		
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see i	nstructio	ns)				
1 a Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.						
Date of ruling or determination letter: (attach copy of letter if necessary — see instrs)						
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V,	1		5	<u>36.</u>		
check here. ► X and enter 1% of Part I, line 27b						
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)						
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				_		
foundations only Others enter -0-)	2			0.		
3 Add lines 1 and 2	3		5	<u>36.</u>		
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	<del></del>		<u>0.</u>		
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	<del></del> -	<del> 5</del>	<u>36.</u>		
6 Credits/Payments:			•			
a 2014 estimated tax pmts and 2013 overpayment credited to 2014  b Exempt foreign organizations — tax withheld at source  6 b			,			
b Exempt foreign organizations — tax withheld at source c Tax paid with application for extension of time to file (Form 8868)  6 c						
			`			
	7		1,6	27		
7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here	8		1,0	<u> </u>		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	-		0.		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.	10		1,0			
11 Enter the amount of line 10 to be: Credited to 2015 estimated tax  1,091. Refunded	11		<u>+, 0</u>	0.		
Part VII-A   Statements Regarding Activities				<del></del>		
		$\top$	Yes	No		
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		1 a		Х		
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?		1 b		X		
If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities			٠			
c Did the foundation file Form 1120-POL for this year?		1 c		X		
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			.			
(1) On the foundation >\$ 0. (2) On foundation managers >\$	0	-  1				
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ 0.						
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X		
If 'Yes,' attach a detailed description of the activities				<del></del>		
			1			
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		3		X		
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4 a		X		
<b>b</b> If 'Yes,' has it filed a tax return on Form 990-T for this year?		4 b	N	⁄Α		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X		
If 'Yes,' attach the statement required by General Instruction T		"	, ,			
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.						
<ul> <li>By language in the governing instrument, or</li> </ul>		. 1				
<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?</li> </ul>		6	ж.22 Х			
7 Did 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	Х			
8a Enter the states to which the foundation reports or with which it is registered (see instructions)		و واد	2			
IL		1 - 1	.			
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation		8 b	X	:		
	4040/NE	<del></del>				
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If 'Yes,' complete	e Part XIV	9		X		
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses.		10		X		
RAA	F	orm <b>99</b> 0	1-PF (2	014)		

	'			
	990-PF (2014) THE HILB FAMILY FOUNDATION 36-4417	1758	F	age 5
Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address  N/A	13	Х	
14	The books are in care of ► JOSEPH PEDOTA  Telephone no. ► (63  Located at ► 1315 W. 22ND STREET, SUITE 305 OAK BROOK IL  ZIP + 4 ► 60523	0) 990	0-035	5
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	N/I	<u>√</u> <u>F</u>	∏ N/A
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	Yes	No 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			-
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?	o	1.52	
	(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?  (3) Yes X N			
			[, ]	
		<b>0</b>		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  Yes  X N	•		,
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)  Yes  X N	o :		- 5
t	If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b		X
	Organizations relying on a current notice regarding disaster assistance check here	1,5		
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?	10		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)).	-	-	
æ	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?		1	, !
	If 'Yes,' list the years ► 20, 20, 20			,
ŧ	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	· .		
	all years listed, answer 'No' and attach statement – see instructions.)	2 b	N	/A
(	: If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  20, 20, 20, 20	ر م الارداد		•=
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	lo kaji	100 m	· .
Ŀ	of '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 diff 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.)	36	N	/A
4 8	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a		x

**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?

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Form **990-PF** (2014)

Form 990-PF (2014) THE HILB FAMILY FO				417758 Page <b>6</b>
Part VII-B   Statements Regarding Activiti		4720 May Be Req	uired (continued	)
5 a During the year did the foundation pay or incu	-	40454.00	П.,	m.,
(1) Carry on propaganda, or otherwise attemp	_		∐Yes	X No
(2) Influence the outcome of any specific publion, directly or indirectly, any voter registra	tion drive?		<b>⊢</b> .	X No
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes	X No
(4) Provide a grant to an organization other the in section 4945(d)(4)(A)? (see instructions	nan a charitable, etc, or )	ganization described	Yes	X No
(5) Provide for any purpose other than religion educational purposes, or for the preventio	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes	X No
<b>b</b> If any answer is 'Yes' to 5a(1)-(5), did <b>any</b> of described in Regulations section 53.4945 or in (see instructions)?	the transactions fail to o a current notice regard	qualify under the excep ding disaster assistance	tions	5b N/A
Organizations relying on a current notice rega	rding disaster assistand	ce check here	▶	
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	the foundation claim ex sibility for the grant?	emption from the	N/A Yes	No
If 'Yes,' attach the statement required by Regi	ulations section 53.494	5-5(d).	<u> </u>	_   ] '
6 a Did the foundation, during the year, receive ar on a personal benefit contract?	ny funds, directly or ind	irectly, to pay premium	Yes	X No
<b>b</b> Did the foundation, during the year, pay premi If 'Yes' to 6b, file Form 8870.	iums, directly or indirec	tly, on a personal bene	fit contract?	6 b X
7a At any time during the tax year, was the found				X No
<b>b</b> If 'Yes,' did the foundation receive any procee				N/A 7b
Part VIII Information About Officers, Dand Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid	d Employees,
				· · · · · · · · · · · · · · · · · · ·
1 List all officers, directors, trustees, foundation	(b) Title, and average		(d) Contributions to	o (e) Expense account,
(a) Name and address	hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	employee benef plans and deferr compensation	it other allowances
SEE STATEMENT 7				
		7,250.		0. 0.
2 Compensation of five highest-paid employees (o	ther than those included	on line 1 – see instructio	ns). If none, enter 'NC	NE.'
(a) Name and address of each employee	(b) Title, and average	(c) Compensation	(d)Contributions to	o (e) Expense account,
paid more than \$50,000	hours per week devoted to position		employee beneft plans and deferre compensation	it other allowances
NONE				
			1	
		<u> </u>		
		l	<u> </u>	
Total number of other employees paid over \$50,00	0	<u></u>	<u>.                                    </u>	<u>▶</u> 0

	417758 Page <b>7</b>
Rant VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	Employees,
3 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 (b) Type of service	(c) Compensation
NONE	
<del></del>	<del></del>
	{
Total number of others receiving over \$50,000 for professional services	<u> </u>
Partix 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 organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
<u> </u>	<del> </del>
1 CONTRIBUTIONS GIVEN TO 12 TAX-EXEMPT ORGANIZATIONS DURING THE YEAR ENDED JUNE 30, 2015	-
ENDED CORE 30, 2013	88,000.
2	337330.
	_
3	_
	<del> </del>
4	-
	-
Part X 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	Amount
' N/A	-
2/	-
2	
All other program-related investments. See instructions.	
3	-
	-
Total. Add lines 1 through 3	P 0.
BAA	Form <b>990-PF</b> (2014)

Form 990-PF (2014) THE HILB FAMILY FOUNDATION	36-4417758	Page 8
Minimum Investment Return (All domestic foundations must complete this part see instructions.)		lations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes a Average monthly fair market value of securities.	1 a	1,612,402.
<b>b</b> Average infinitely rain market value of securities.	1b	33,067.
c Fair market value of all other assets (see instructions)	1 c	33,007.
d Total (add lines 1a, b, and c) .	<del></del>	1,645,469.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c	100	
(attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	1,645,469.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	24,682.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,620,787.
6 Minimum investment return. Enter 5% of line 5	6	81,039.
Part XI ■ Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private of and certain foreign organizations check here □ and do not complete this part	perating foundart.)	ations
1 Minimum investment return from Part X, line 6	1	81,039.
2a Tax on investment income for 2014 from Part VI, line 5	36.	
b Income tax for 2014. (This does not include the tax from Part VI)	الله الله الله	
c Add lines 2a and 2b	2 c	536.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	80,503.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	80,503.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	80,503.
RantXII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:	1	
<b>a</b> Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1 a	101,398.
<b>b</b> Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes.	2	
3 Amounts set aside for specific charitable projects that satisfy the: <ul> <li>a Suitability test (prior IRS approval required)</li> </ul>	3a	
<b>b</b> Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	101,398.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part 1, line 27b (see instructions)	5	536.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	100,862.
<b>Note.</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the qualifies for the section 4940(e) reduction of tax in those years.	ne foundation	
RAA	Forr	m <b>990-PF</b> (2014)

### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	<b>(c)</b> 2013	<b>(d)</b> 2014
Distributable amount for 2014 from Part XI, line 7				80,503.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
<b>b</b> Total for prior years: 20, 20, 20		0.		1
3 Excess distributions carryover, if any, to 2014.	*	ı		
a From 2009			į	
<b>b</b> From 2010 16,747.		,		
c From 2011 7,805.				
<b>d</b> From 2012 1, 164.				
e From 2013 4,405.			į	
f Total of lines 3a through e	30,121.			
4 Qualifying distributions for 2014 from Part			1	
XII, line 4: \$ 101, 398.		-		
a Applied to 2013, but not more than line 2a			0.	<u> </u>
<ul> <li>Applied to undistributed income of prior years (Election required — see instructions)</li> </ul>		0.		
c Treated as distributions out of corpus	0			
(Election required – see instructions)	0.			80,503.
d Applied to 2014 distributable amount  e Remaining amount distributed out of corpus	20,895.		,	60,303.
5 Excess distributions carryover applied to 2014	20,893.			0.
(If an amount appears in column (d), the				
same amount must be shown in column (a) )			. [	
6 Enter the net total of each column as indicated below:		İ		
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5	51,016.			
<b>b</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 instructions	· · · · · · · · · · · · · · · · · · ·		0.	
f Undistributed income for 2014. Subtract lines				
4d and 5 from line 1. This amount must be			•	•
distributed in 2015		. ,		0.
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)	0.			<u> </u>
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	51,016.			'
10 Analysis of line 9:				
<b>a</b> Excess from 2010 16,747.			ļ	
<b>b</b> Excess from 2011 7,805.		]		
c Excess from 2012 1,164.	1			
<b>d</b> Excess from 2013 4, 405.			ļ	
e Excess from 2014 20,895.	<u> </u>	<u>                                     </u>		Form <b>990-PF</b> (2014)

	(2014) THE HILB FAMILY F				36-4417758	
Part XIV	Private Operating Foundat					N/A_
is effec	oundation has received a ruling or deter ctive for 2014, enter the date of the	ruling		_		1 40 40 () (5)
	box to indicate whether the foundat		erating foundation of		4942(j)(3) or	4942(j)(5)
∠a Enter t	he lesser of the adjusted net from Part I or the minimum	Tax year	45 2012	Prior 3 years	(4) 2011	(e) Total
investri each y	nent return from Part X for ear listed	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(e) Total
<b>b</b> 85% of	line 2a					
c Qualify line 4 f	ing distributions from Part XII, or each year listed					
	included in line 2c not used directly conduct of exempt activities	·-				
for act	ring distributions made directly ve conduct of exempt activities. ct line 2d from line 2c					
	ete 3a, b, or c for the tive test relied upon:					
a 'Assets	s' alternative test – enter:					
` '	lue of all assets					
sec	lue of assets qualifying under ction 4942(j)(3)(B)(i)					
mınımun	nent' alternative test — enter 2/3 of n investment return shown in Part X, r each year listed					
<b>c</b> 'Suppo	rt' alternative test — enter:				-	
inv div on	tal support other than gross estment income (interest, idends, rents, payments securities loans (section 2(a)(5)), or royalties)					
moi	oport from general public and 5 or re exempt organizations as provided ection 4942(j)(3)(B)(iii)					
<b>(3)</b> La an	rgest amount of support from exempt organization					-
	oss investment income			_		
Part XV	Supplementary Information assets at any time during th	(Complete this e year – see ir	s part only if the structions.)	e foundation had	l \$5,000 or more	in
a List and close of SEE	ation Regarding Foundation Manager managers of the foundation who have fany tax year (but only if they have STATEMENT 8	e contributed more t e contributed more	than \$5,000) (See	e section 507(d)(2).)		
a partr NONE	nership or other entity) of which the	foundation has a	10% or greater intel	rest.	e portion of the owners	allp of
Check reques comple	ation Regarding Contribution, Gran here \(^{\subset} \overline{\mathbb{X}}\) if the foundation only ma its for funds. If the foundation make the items 2a, b, c, and d.	kes contributions to s gifts, grants, etc	preselected charitations (see instructions) to	ole organizations and to individuals or orga	anizations under othe	
<b>a</b> The na	me, address, and telephone number or	e-mail address of t	the person to whom a	applications should be	e addressed:	
<b>b</b> The fo	rm in which applications should be	submitted and info	rmation and materi	als they should inclu	ude:	
c Any su	ibmission deadlines:					
<b>d</b> Any re	strictions or limitations on awards,	such as by geogra	phical areas, charit	able fields, kinds of	institutions, or other	factors:

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation Recipient Purpose of grant or contribution status of recipient Amount Name and address (home or business) a Paid during the year NONE EXEMPT ALL GRANTS & 88,000. SEE ATTACHED CONTRIBUTION CONTRIBUTIONS WERE **SCHEDULE** MADE TO BENEFIT WORTHY CHARITABLE, RELIGIOUS, CIVIC, HEALTH OR EDUCATIONAL INSTITUTIONS BY SCHOLARSHIPS, GRANTS, GIFTS AND DONATIONS. ► 3a 88,000. Total **b** Approved for future payment ► 3b **Total** 

Dark VVII A	A!	of Income-Produci	
Lair VALA	Anaiysis	of income-Product	ng Acuviues

Enter gross amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by	section 512, 513, or 514	(e)	
Program service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	<b>(d)</b> Amount	Related or exempt function income (See instructions)	
a						
b						
С						
d						
e			<u> </u>			
f						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments			14	15.		
4 Dividends and interest from securities			14	48,877.		
5 Net rental income or (loss) from real estate:		·	<u> </u>			
a Debt-financed property						
<b>b</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			18	28,123.		
9 Net income or (loss) from special events.		_				
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:	- 4	•				
a						
b						
c						
d			1			
e						
12 Subtotal Add columns (b), (d), and (e)	'			<u>77,</u> 015.		
13 Total. Add line 12, columns (b), (d), and (e)				13	77,015	
(See worksheet in line 13 instructions to verify calculate	ions )					
Part XVI-B Relationship of Activities to the	e Accomplish	ment of Exem	pt Purpose	es		
Line No. Explain below how each activity for which accomplishment of the foundation's exemp	income is reporte	ed in column (e) of	Part XVI-A c	ontributed important	y to the	

N/A	
	1

# PartXVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

described relating to a Transfers (1) Cash (2) Other train (1) Sales (2) Purch (3) Renta (4) Reim (5) Loans (6) Perforct c Sharing of	r assets.	of the Code (otloons?  foundation to a  charitable exer  n a noncharital ment, or other ments  s  or membershi ent, mailing list bove is 'Yes,' o	mpt organization the exempt organization the exempt organic the assets  p or fundraising the complete the follower than the reporting found	501(c)(3) organized exempt organized exempt organized exempt organized exempt organized exempt of the four owing schedule lation. If the four	ees Column	n (b) should alw	rays show the fa	1 b (1) 1 b (2) 1 b (3) 1 b (4) 1 b (5) 1 b (6) 1 c	X X X X X X X
	(b) Amount involved		f noncharitable exemp			<del></del>		and sharing arrangements	<u> </u>
N/A	<u>, , , , , , , , , , , , , , , , , , , </u>	,-,		÷		<u> </u>	·		
<del>  </del>			-					-	
								<u> </u>	
	<del></del>	<del>                                     </del>							
		<del></del>							
		<u></u>							
								<del></del>	
							<del></del>		
		ļ		_					
								···	
		-							
described	ndation directly or inc d in section 501(c) o complete the followi	of the Code (ot	I with, or related to her than section	o, one or more ta 501(c)(3)) or in	x-exemp section	t organizations 527?		Yes X	No
	Name of organizati		<b>(b)</b> Type	of organization		(c	) Description of	relationship	
N/A									
	· <u> </u>								
Under no	enalties of peruiry. I declar	re that I have exami	ned this return, include	ing accompanying so	hedules an	d statements, and to	the best of my know	ledge and belief, it is true.	
Sign Here	enalties of perjury, I declar and complete Declaration	Purkua	than taxpayer) is base	12 · 2 · 15	▶	PRUSTEE	ledge	May the IRS disci this return with th preparer shown b (see instructions)	uss ie pelow
	Print/Type preparer's nai	me	Preparer's s	ignature 🔨 🐧	Λ	Date .	Check	I PTIN	
	'' ' '		1( )	ふ ( イ ) は	#.	11/23/13	self-employed	"	
Paid	JOSEPH PEDOT			an Jean	100	11/25/11	<del>-</del>	P00403354	
Preparer	· —			ANY L.L.C.	<u> </u>		Firm's EIN 56	-2245607	
Use Only	· —	L315 W. 22			<u>.</u>		{		
	<u> </u>	AK BROOK,	IL 60523-	2062			Phone no 63	0-990-0355	
BAA								Form 990-PF (	2014)

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

Department of the Treasury Internal Revenue Service

**Schedule of Contributors** 

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

OMB No 1545-0047

Name of the organization THE HILB FAMILY	FOUNDATION	Employer identification number				
C/O JOSEPH PEDOT	A	36-4417758				
Organization type (check one):						
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a	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 pri	vate foundation				
	501(c)(3) taxable private foundation					
Check if your organization is covered by the	General Rule or a Special Rule					
Note. Only a section 501(c)(7), (8), or (10) or	ganization can check boxes for both the General Rule and a	Special Rule. See instructions.				
General Rule						
X For an organization filing Form 990, 990-l property) from any one contributor. Comp	[X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.					
Special Rules						
For an organization described in section 5 under sections 509(a)(1) and 170(b)(1)(A)(vireceived from any one contributor, during Form 990, Part VIII, line 1h, or (ii) Form 9	501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% sup ), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13 the year, total contributions of the greater of (1) \$5,000 or ( 990-EZ, line 1. Complete Parts I and II	port test of the regulations , 16a, or 16b, and that <b>2</b> ) 2% of the amount on (i)				
For an organization described in section 5 during the year, total contributions of mor purposes, or for the prevention of cruelty	501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received to than \$1,000 exclusively for religious, charitable, scientific, to children or animals. Complete Parts I, II, and III.	from any one contributor, literary, or educational				
during the year, contributions exclusively \$1,000 If this box is checked, enter here charitable, etc., purpose Do not complete	501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received for religious, charitable, etc., purposes, but no such contribute total contributions that were received during the year for any of the parts unless the <b>General Rule</b> applies to this orgable, etc., contributions totaling \$5,000 or more during the year.	tions totaled more than an <i>exclusively</i> religious, janization bec <u>a</u> use				
990-PF) but it must answer 'No' on Part IV.	by the General Rule and/or the Special Rules does not file S line 2, of its Form 990; or check the box on line H of its Forn the filing requirements of Schedule B (Form 990, 990-EZ, or	n 990-EZ or on its Form 990-PF.				
BAA For Paperwork Reduction Act Notice, sor 990-PF.	see the Instructions for Form 990, 990EZ, Schedule B	(Form 990, 990-EZ, or 990-PF) (2014)				

, ,			
Schedule	<b>B</b> (Form 990, 990-EZ, or 990-PF) (2014)	Page	1 of 1 of <b>Part 1</b>
Name of org		1 ' '	identification number
	LB FAMILY FOUNDATION		117758
Parti	Contributors (see instructions). Use duplicate copies of Part I if additional space	is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ROBERT H. HILB		Person X
<i>-</i>			Payroll
	199 NORTH MONTCLAIR AVENUE	\$40,000.	Noncash
	GLEN ELLYN, IL 60137		(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	JANE G. HILB		Person
<b>=</b>		1	Payroll
	199 NORTH MONTCLAIR AVENUE	\$41,020.	Noncash X
	GLEN ELLYN, IL 60137	•	(Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
	L	<b>1</b>	Payroll
		- \$	Noncash
		-	(Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		-	Payroll
		- \$ 	Noncash
		-	(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution

(a) Number Name, address, and ZIP + 4 (C) Total contributions

Person Payroll Noncash Noncash (Complete Part II for noncash contributions)

(Complete Part II for noncash contributions)

BAA

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Person Payroll Noncash

l to

of Part II

Name of organization

Employer identification number

THE HILB FAMILY FOUNDATION 36-4417758

Part II F Additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	1,000 SHARES WILLIS GRP HOLDINGS		
2			
		\$41,020.	10/01/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			•
		\$	
		Ÿ	
(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
			<del></del>
	<u></u>	\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	L	<u> </u>	
		\$	
BAA	Sche	dule <b>B</b> (Form 990, 990-EZ, c	or 990-PF) (2014)

to

of Part III

Name of organization
THE HILB FAMILY FOUNDATION

Employer identification number 36-4417758

PARTING Fychicity religious charitable etc. contributions to organizations described in section 501(cV7).

<u>न्यतात्यमः</u> अ	or (10) that total more than \$1,000 for the following line entry. For organizations co-contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional states.	ie year from any one contrib mpleting Part III, enter the tota Enter this information once. Se	I of exclusively religious, charitable, etc.,	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	N/A			
	Transferee's name, address	(e) Transfer of gift s, 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	
	Transferee's name, address	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	
	Transferee's name, addres	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	
	Transferee's name, addres	Relationship of transferor to transferee		

2014	FEDERAL STATEMENTS	PAGE 1
CLIENT 6235	THE HILB FAMILY FOUNDATION C/O JOSEPH PEDOTA	36-441775
11/23/15		02:39Pt
STATEMENT 1 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES		
GEORGE BAGLEY & CO ACCOUNTI	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  NG FEES \$ 5,900. \$ 2,950.	(D) CHARITABLE PURPOSES \$ 2,950.
GLONGE BROBET & CO RECOONT	NG FEES \$ 5,900. \$ 2,950. TOTAL \$ 5,900. \$ 2,950.	\$ 2,950.
STATEMENT 2 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES		
INVESTMENT FEES	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME \$ 8,999. \$ 8,999.	(D) CHARITABLE E PURPOSES
	TOTAL \$ 8,999. \$ 8,999. \$ 8,999.	\$ 0.
STATEMENT 3 FORM 990-PF, PART I, LINE 18 TAXES		
	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOM	
FOREIGN TAXES	TOTAL $\frac{\$}{\$}$ 1,110. $\frac{\$}{\$}$ 1,110.	\$ 0.
STATEMENT 4 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES		
	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTEI PER BOOKS INCOME NET INCOM	
BANK SERVICES CHARGES FILING FEES	TOTAL \$ 10. \$ 10. \$ 25. \$ 10.	\$ 15. \$ 15.

2014

11/23/15

#### **FEDERAL STATEMENTS**

THE HILB FAMILY FOUNDATION C/O JOSEPH PEDOTA

36-4417758

PAGE 2

**CLIENT 6235** 

02 39PM

#### STATEMENT 5 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
CORPORATE STOCKS  500SH AT&T INC NEW 400SH AUTO DATA PROCESSING 700SH BRISTOL-MYERS SQUIBB CO 300SH CATERPILLAR INC 200SH CHEVRON CORPORATION 416SH DUKE ENERGY CORP NEW 400SH ELI LILLY & CO 300SH EXXON MOBIL CORPORATION 375SH ILLINOIS TOOL WORKS INC 800SH INTEL CORP 300SH JOHNSON & JOHNSON 350SH A F L A C INC 300SH KIMBERLY-CLARK CORP 150SH MCDONALDS CORP 1,500SH NEWELL RUBBERMAID INC 300SH NEXTERA ENERGY INC 375SH PEPSICO INCORPORATED 400SH PROCTOR & GAMBLE 400SH SYNGENTA AG ADR 2,000SH TORTOISE EGY INFRASTRUCT 275SH VERIZON COMMUNICATIONS 4,500SH WILLIS GRP HLDGS PUBLICF 100SH 3M COMPANY 5,168.451SH VANGUARD S/T INVESTMENT 2,000SH KAYNE ANDERSON MLP INVT 150SH BERKSHIRE HATHAWAY B NEW CL B 125SH INTL BUSINESS MACHINES			VALUE
400SH KINDER MORGAN INC	MKT VAL	14,735.	15,356.
150SH KRAFT FOODS GROUP	MKT VAL	5,222.	12,771.
150SH LAB CO OF AMER HLDG NEW	MKT VAL	15,109.	18,183.
4860.616SHLITMAN GREGORY MASTERS INTL FD	MKT VAL	76,887.	89,776.
3748.492SH LOOMIS SAYLES BOND FUND CL I	MKT VAL	56,879.	53,678.
900SH MONDELEZ INTL INC CL A	MKT VAL	25,636.	37,026.
4862.466SHPIMCO UNCONSTRAINED BD FD INST	MKT VAL	55,471.	54,168.
375SH WELLS FARGO & CO NEW	MKT VAL	15,019.	21,090.
1740SH SCH US REIT ETF	MKT VAL	53,678.	63,197.
400SH FISERV INC	MKT VAL	26,174.	33,132.
1000SH GENERAL ELECTRIC CO	MKT VAL	26,024.	26,570.
200SH UNITED TECHNOLOGIES CORP	MKT VAL	21,690.	22,186.
950SH VANGUARD INT'L EQUTY ETF	MKT VAL TOTAL	55,137.	52,687.

#### STATEMENT 6 FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

		(B) HOW	(C) DATE	(D) DATE
ITEM	(A) DESCRIPTION	ACQUIRED	ACOUIRED	SOLD
1	400 COGNIZANT TECHNOLOGIES SOLUTIONS, INC.	PURCHASED	4/21/2010	9/10/2014
2	500 KELLOGG COMPANY	PURCHASED	VARIOUS	9/10/2014
3	92.72 EII INTL PROPERTY CL I	PURCHASED	12/19/2013	9/10/2014
_			12/19/2013	

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#### **FEDERAL STATEMENTS**

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## THE HILB FAMILY FOUNDATION C/O JOSEPH PEDOTA

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#### STATEMENT 6 (CONTINUED) FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

ITEM		(A) DES	CRIPTION		(B) ACOU	HOW (C	DATE	(D) DATE SOLD
4	2837.858 E	II INTL PRO	PERTY CL I	[	PURCH	IASED	VARIOUS	9/10/2014
5	133 CDK GLOBAL INC				PURCH	LASED	VARIOUS	6/09/2015
6	37 HALYARD	HEALTH INC	•		PURCH	LASED	VARIOUS	6/09/2015
7	3915 NUVEEL	N S&P 500 E	UY-WRITE		PURCH	IASED	VARIOUS	6/09/2015
8	CIL .333SH	CDK GLOBAI	INC		PURCH	IASED	VARIOUS	9/30/2014
9	CIL .5SH HZ	ALYARD HEAI	TH INC		PURCE	LASED	VARIOUS	10/31/2014
10	CIL .88SH I	NUVEEN S&P	500 BUY-WI	RITE	PURCH	IASED	VARIOUS	12/23/2014
11	CAPITAL GA	IN DIVIDENI	S					
	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)
	GROSS	DEPREC.	COST	GAIN	FMV	ADJ. BAS.	EXCESS	GAIN
<u>ITEM</u>	<u>SALES</u>	ALLOWED	BASIS	<u>(LOSS)</u>	12/31/69	12/31/69	<u>(I) - (J)</u>	(LOSS)
1	18,175.		10,519.	7,656.				\$ 7,656.

	(E)	(F)	(G)	(H)	(I)	(J)	(K)	(L)
	GROSS	DEPREC.	COST	GAIN	FMV	ADJ. BAS.	EXCESS	GAIN
ITEM	SALES	ALLOWED	BASIS	(LOSS)	12/31/69	12/31/69	(I) - (J)	(LOSS)
1	18,175.		10,519.	7,656.				\$ 7,656.
2	32,151.		23,907.	8,244.				8,244.
3	1,783.		1,765.	18.				18.
4	54,576.		55,000.	-424.				-424.
5	6,969.		1,913.	5,056.				5,056.
6	1,560.		732.	828.				828.
7	50,260.		45,036.	5,224.				5,224.
8	10.		0.	10.				10.
9	18.		0.	18.				18.
10	11.		0.	11.				11.
11								1,482.
							TOTAL	\$ 28,123.

#### STATEMENT 7 FORM 990-PF, PART VIII, LINE 1 LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
ROBERT H. HILB 1315 W. 22ND STREET; STE 305 OAK BROOK, IL 60523	TRUSTEE 0	\$ 0.	\$ 0.	\$ 0.
JANE G. HILB 1315 W. 22ND STREET; STE 305 OAK BROOK, IL 60523	TRUSTEE 0	0.	0.	0.
NANCY H. BRINKMAN 1315 W. 22ND STREET; STE 305 OAK BROOK, IL 60523	TRUSTEE 2.00	3,250.	0.	0.
CYNTHIA H. THILO 1315 W. 22ND STREET; STE 305 OAK BROOK, IL 60523	TRUSTEE 0	2,000.	0.	0.

2014

#### **FEDERAL STATEMENTS**

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STATEMENT 7 (CONTINUED)
FORM 990-PF, PART VIII, LINE 1
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
ROBERT J. HILB 1315 W. 22ND STREET; STE 305 OAK BROOK, IL 60523	TRUSTEE 0	\$ 2,000.	\$ 0.	\$ 0.
	TOTAL	\$ 7,250.	\$ 0.	\$ 0.

STATEMENT 8 FORM 990-PF, PART XV, LINE 1A FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

ROBERT H. HILB JANE G. HILB 2014

#### FEDERAL SUPPORTING DETAIL

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## THE HILB FAMILY FOUNDATION C/O JOSEPH PEDOTA

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OPERATING & ADMINISTRATIVE EXP. (990-PF) TRAVEL, CONFERENCES, ETC.

TRAVEL & MEETINGS MEALS

#### HILB FAMILY FOUNDATION FORM 990-PF JUNE 30, 2015 FEIN 36-4417758

#### PART XV - Line 3a - Grants and Contributions Paid

Recipient	Status	Purpose	Amount
Aging Care Connections	Public	Contribution	8,000.00
Bosom Buddies Benefit Organization	Public	Contribution	20,000.00
Breakthrough Ministries	Public	Contribution	3,500.00
Chi Omega	Public	Contribution	1,000.00
Christopher Lyons Foundation	Public	Contribution	5,000.00
Dreams to Reality	Public	Contribution	1,000.00
FOCUS	Public	Contribution	10,000.00
Marian Joy Scholarship	Public	Contribution	7,500.00
Sacred Heart	Public	Contribution	10,000.00
Speak Up Foundation	Public	Contribution	1,000.00
St. Andrew's	Public	Contribution	18,000.00
Young Irish Fellowship Club	Public	Contribution	2,000.00
Young Life	Public	Contribution	1,000.00
			88,000.00