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Form **990-PF**

Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury Infernal Revenue Service

SCANN TO DEC 9.3 2015

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

Open to Public Inspection

| _ | | nue Service | ► Information ab | | 90-PF and its se | eparate instru | ctions | is at w | ww.irs.gov/ | form990pf. Op | en to Public Insp | ection |
|------------------------------|-----------|---------------------|--|-----------------|--------------------|---------------------------------------|--------|----------|---------------------|----------------------------|--|----------------|
| For | calen | dar year 20 | 014 or tax year be | ginning | AUGUS | ST 1 | , 2014 | i, and e | ending | JULY 31 | , 20 | 15 |
| Na | me of fo | undation | | | | | | | A Employe | r identification num | ber | |
| | | | OUNDATION | | | | | | | 32-600706 | 3 | |
| Nu | mber an | d street (or P C | box number if mail is | not delivered (| to street address) | | Room | /suite | B Telephon | e number (see instru | ictions) | |
| | | T MONROE | | | | | | | | _(217)793-38 | 00 | |
| Cit | y or tow | n, state or prov | ince, country, and ZIP | or foreign post | al code | | | | C If exempt | ion application is pe | nding, check here | • □ |
| SP | RINGFI | IELD, IL 6270 | 04 | | | | | | | | - | _ |
| G | Check | all that app | oly: 🔲 Initial ret | urn | ☐ Initial returi | n of a former | oublic | chanty | D 1. Foreign | n organizations, chec | ck here . | ▶□ |
| | | | ☐ Final retu | ırn | Amended | return | | | 2 Foreign | n organizations meet | ung the 85% toet | _ |
| | | | ☐ Address | change | Name cha | nge | | | check | here and attach com | putation | ▶□ |
| Н | Check | type of org | janization: 📝 S | ection 501(| c)(3) exempt p | rivate founda | ation | | | foundation status wa | | _ |
| | Section | on 4947(a)(1 |) nonexempt chari | table trust | Other tax | kable private | found | lation | Section 5 | 07(b)(1)(A), check he | re | ▶∐ |
| Ī | Fair m | narket value | of all assets at | J Acco | unting method | l: 🗹 Cash | □ Ac | ccrual | F If the four | ndation is in a 60-mo | onth termination | |
| | end of | f year <i>(fron</i> | n Part II, col. (c), | □∘ | ther (specify) | | | | | ction 507(b)(1)(B), ch | | ▶ 🔲 |
| | line 16 | 5)▶\$ | 14,420,877 | (Part I, coi | lumn (d) must be | on cash basis |) | _ | | | | |
| P | art I | Analysis o | of Revenue and E | xpenses (T | he total of | (a) Revenue | and | | | | (d) Disbursen | |
| | | | olumns (b), (c), and (d) | | essarily equal | expenses p | | | investment icome | (c) Adjusted net income | for charital purposes | |
| | | the amounts | ın column (a) (see ınsti | ructions).) | | DOOKS | | | | | (cash basis | |
| | 1 | | ns, gifts, grants, etc., | - | - | 1,00 | 0,000 | | | | | |
| | 2 | Check ► [|] If the foundation is r | not required to | attach Sch. B | | | | | | | |
| | 3 | Interest on | savings and temp | orary cash | investments | | 4,703 | | 4,703 | | | |
| | 4 | Dividends | and interest from | securities | | 64 | 5,346 | | 645,346 | | | |
| | 5a | Gross rent | s | | | | | | | | | |
| | b | | income or (loss) | | | | | | | | | |
| ne | 6a | _ | r (loss) from sale o | | t on line 10 | | | | | | | |
| ē | b | | price for all assets on | | | | | | | | | |
| Revenue | 7 | | in net income (fron | | • | | | | | | | |
| ~ | 8 | Net short- | term capital gain . | | | | | | | | | |
| | 9 | | | | | | | | | | | |
| | 10a | | less returns and allo | <u> </u> | | | | | | | | |
| | b | | of goods sold | | | | | | | | | |
| | c | - | fit or (loss) (attach | | | | | | | | | |
| | 11 | | me (attach schedu | | | | | | | | | |
| | 12 | | l lines 1 through 1 | | | 1,65 | 0,049 | | 650,049 | | | |
| S | 13 | | ation of officers, di | | | | | | | | | |
| Ľ | 14 | | loyee salaries and | | : 4. | | | | | | | |
| xpenses | 15 16a | | ans, employee be | | | | | | | | | |
| Ä | 1 . | Account in | (attach schedule) | adula) a | | | | | | | | |
| | b | Other pref | g fees (attach schoessional fees (atta | | 2015 · [6] | | 0.440 | | 40.440 | | | |
| aŧi | 17 | | | | | | 3,418 | | 13,418 | | | — |
| str | 18 | Tayes latte | | COEN | النساني إلى | | 2 244 | | | | | |
| ï | 19 | Denreciati | on (attach schedu | and den | letion | 1 | 2,314 | | | | | |
| Operating and Administrative | 20 | , | y | , | | | | | · | | - | ! |
| ĕ | 21 | Travel, co | nferences, and me | etinas | | | | | | | | |
| Б | 22 | | | | | | | | | | | |
| a | 23 | | enses (attach sche | | | | 15 | · | | | | |
| Ĕ | 24 | | erating and adn | | | | | | | | | |
| ā | | Add lines | 13 through 23 . | | | , | 5,747 | | 13,418 | | | |
| þe | 25 | | ons, gifts, grants p | | | | 9,700 | | 13,410 | - | GA | 9,700 |
| 0 | 26 | | nses and disbursen | | | | 5,447 | | 13,418 | - | | 9,700 9,700 |
| _ | 27 | | ne 26 from line 12 | | | <i>,</i> | | | 10,710 | | 04 | 3,700 |
| | a | | revenue over expe | | sbursements | 97 | 4,602 | | , | | | / |
| | b | | tment income (if r | | | , , , , , , , , , , , , , , , , , , , | .,,502 | | 636,631 | | 1 | |
| | | | net income (if nec | - | • | | | | 200,031 | | + | |

| D. | ız II | Attached schedules and amounts in the description column | Beginning of year | End o | f year |
|--------------------|--------|---|---------------------------|----------------|-----------------------|
| LE | ЩАЦ | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| ¥ | 1 | Cash-non-interest-bearing | 728,596 | 1,114,212 | 1,114,212 |
| | 2 | Savings and temporary cash investments | | | |
| | 3 | Accounts receivable ► | | | |
| | | Less: allowance for doubtful accounts ▶ | | | |
| | 4 | Pledges receivable ► | | | |
| | | Less: allowance for doubtful accounts ▶ | | | |
| | 5 | Grants receivable | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | | disqualified persons (attach schedule) (see instructions) | | | |
| | 7 | Other notes and loans receivable (attach schedule) ▶ | | | |
| | | Less: allowance for doubtful accounts ▶ | | | |
| ts | 8 | Inventories for sale or use | | | |
| Assets | 9 | Prepaid expenses and deferred charges | | | |
| Ä | 10a | Investments—U.S. and state government obligations (attach schedule) | | | |
| | b | Investments—corporate stock (attach schedule) | | | |
| | С | Investments—corporate bonds (attach schedule) | 12,506,950 | 13,095,936 | 13,306,665 |
| | 11 | Investments—land, buildings, and equipment: basis ▶ | | | |
| | | Less: accumulated depreciation (attach schedule) ▶ | | | |
| | 12 | Investments – mortgage loans | | | |
| | 13 | Investments—other (attach schedule) | | | |
| | 14 | Land, buildings, and equipment: basis ▶ | | | |
| | | Less: accumulated depreciation (attach schedule) ▶ | | | |
| | 15 | Other assets (describe ►) | | | |
| | 16 | Total assets (to be completed by all filers—see the | | | |
| | | instructions. Also, see page 1, item l) | 13,235,546 | 14,210,148 | 14,420,877 |
| | 17 | Accounts payable and accrued expenses | | | |
| S | 18 | Grants payable | | | |
| ţie | 19 | Deferred revenue | | | |
| ij | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| Liabilities | 21 | Mortgages and other notes payable (attach schedule) | | | |
| _ | 22 | Other liabilities (describe ►) | | | |
| | 23 | Total liabilities (add lines 17 through 22) | | | |
| Balances | | Foundations that follow SFAS 117, check here ▶ □ and complete lines 24 through 26 and lines 30 and 31. | | | |
| Ě | 24 | Unrestricted | | | |
| a | 25 | Temporarily restricted | | | |
| | 26 | Permanently restricted | | | |
| Net Assets or Fund | | Foundations that do not follow SFAS 117, check here ▶ □ and complete lines 27 through 31. | | | |
| ō | 27 | Capital stock, trust principal, or current funds | 14,000,000 | 15,000,000 | |
| şts | 28 | Paid-ın or capıtal surplus, or land, bldg., and equipment fund | 1,000,000 | 10/000/000 | |
| SS | 29 | Retained earnings, accumulated income, endowment, or other funds | -764,454 | -789,852 | · |
| Ä | 30 | Total net assets or fund balances (see instructions) | 13,235,546 | | |
| ē | 31 | Total liabilities and net assets/fund balances (see | | | |
| | | instructions) | 13,235,546 | 14,210,148 | |
| Pa | rt III | Analysis of Changes in Net Assets or Fund Balances | | | |
| 1 | | Il net assets or fund balances at beginning of year-Part II, colu | | | |
| | | of-year figure reported on prior year's return) | | 1 | 13,235,546 |
| 2 | Ente | er amount from Part I, line 27a | | 2 | 974,602 |
| 3 | | er increases not included in line 2 (itemize) | | | |
| 4 | Add | lines 1, 2, and 3 | | 4 | 14,210,148 |
| 5 | D | | | 5 | |
| 6 | Tota | reases not included in line 2 (itemize) ► Il net assets or fund balances at end of year (line 4 minus line 5)—l | Part II, column (b), line | e 30 6 | 14,210,148 |
| | | | | | - 000 DE |

| c d e Complete only for assets showing gain in c | eciation allowed allowable) | (a) Cost or | D-Donation | (mo , day, yr.) | (mo , day, yr) |
|--|-------------------------------------|---------------------------------------|------------------------------|--------------------|---|
| b c d e (e) Gross sales price (f) Deprication a b c d e Complete only for assets showing gain in c (i) F.M V. as of 12/31/69 (j) A as a b c d e 2 Capital gain net income or (net capital 3 Net short-term capital gain or (loss) as if gain, also enter in Part I, line 8, col Part I, line 8 | | (a) Cost or | | | |
| c d e (e) Gross sales price (f) Deprication a b c d e Complete only for assets showing gain in c (i) F.M V. as of 12/31/69 (j) A as a b c d e 2 Capital gain net income or (net capital 3 Net short-term capital gain or (loss) as if gain, also enter in Part I, line 8, col Part I, line 8 | | (a) Cost or | | | |
| d e (e) Gross sales pnce (f) Depr (or a b c d e Complete only for assets showing gain in c (i) F.M V. as of 12/31/69 (ii) F.M V. as of 12/31/69 C d e 2 Capital gain net income or (net capital a Net short-term capital gain or (loss) as if gain, also enter in Part I, line 8, col Part V Qualification Under Section | | (a) Coat or | | | |
| e (e) Gross sales pnce (f) Depross for the policy of the | | (a) Cost or | | | |
| (e) Gross sales price a b c d e Complete only for assets showing gain in c (i) F.M V. as of 12/31/69 (j) A as a b c d e Capital gain net income or (net capital short-term capital gain or (loss) as if gain, also enter in Part I, line 8, col Part V Qualification Under Section | | (a) Coot or | | | |
| b c d e Complete only for assets showing gain in c (i) F.M V. as of 12/31/69 a b c d e Capital gain net income or (net capital Net short-term capital gain or (loss) as If gain, also enter in Part I, line 8, col Part I, line 8 | | | other basis nse of sale | | in or (loss) (f) minus (g) |
| c d e Complete only for assets showing gain in c (i) F.M V. as of 12/31/69 a b c d e Capital gain net income or (net capital Net short-term capital gain or (loss) as If gain, also enter in Part I, line 8, col Part V Qualification Under Section | | | | | |
| d e Complete only for assets showing gain in c (i) F.M V. as of 12/31/69 a b c d e Capital gain net income or (net capital Net short-term capital gain or (loss) as if gain, also enter in Part I, line 8, col Part I, line 8 | | | | | |
| e Complete only for assets showing gain in of (i) F.M V. as of 12/31/69 a b c d e Capital gain net income or (net capital sain, also enter in Part I, line 8, col Part I, line 8 | | | | | |
| Complete only for assets showing gain in C (i) F.M V. as of 12/31/69 a b c d e 2 Capital gain net income or (net capital and short-term capital gain or (loss) as if gain, also enter in Part I, line 8, col part I, line 8 | | | | | ·-· |
| (i) F.M V. as of 12/31/69 a b c d e 2 Capital gain net income or (net capital 3 Net short-term capital gain or (loss) as if gain, also enter in Part I, line 8, col Part I, line 8 | | | | | |
| a b c d e 2 Capital gain net income or (net capital 3 Net short-term capital gain or (loss) as if gain, also enter in Part I, line 8, col Part I, line 8 | column (h) and owned b | y the foundation | on 12/31/69 | | l (h) gain minus |
| b c d e Capital gain net income or (net capital Net short-term capital gain or (loss) as If gain, also enter in Part I, line 8, col Part I, line 8 Part V Qualification Under Section | djusted basis of 12/31/69 | | s of col (i) (j), if any | | ot less than -0-) or from col (h)) |
| c d e Capital gain net income or (net capital Net short-term capital gain or (loss) as If gain, also enter in Part I, line 8, col Part I, line 8 Part V Qualification Under Section | | | | | · |
| d e 2 Capital gain net income or (net capital 3 Net short-term capital gain or (loss) as If gain, also enter in Part I, line 8, col Part I, line 8 | | | | | |
| 2 Capital gain net income or (net capital 3 Net short-term capital gain or (loss) as If gain, also enter in Part I, line 8, col Part I, line 8 | | | | | |
| Capital gain net income or (net capital Net short-term capital gain or (loss) as if gain, also enter in Part I, line 8, col Part I, line 8 | | | | | |
| Net short-term capital gain or (loss) as If gain, also enter in Part I, line 8, col Part I, line 8 Part V Qualification Under Section | | | | <u> </u> | |
| If gain, also enter in Part I, line 8, col Part I, line 8 | | ilso enter in Pai enter -0- in Par | | 2 | |
| Part V Qualification Under Section | umn (c) (see instruct | tions). If (loss) | , enter -0- ın) | | |
| | | | | 3 | |
| | | | | | |
| If section 4940(d)(2) applies, leave this part bl Was the foundation liable for the section 494 If "Yes," the foundation does not qualify under | ank. 2 tax on the distributi | able amount of | any year in the l | · | ☐ Yes ☐ No |
| 1 Enter the appropriate amount in each | | | | akıng anv entries. | |
| (a) | (b) ted qualifying distributions | | (c) f noncharitable-use a | Dis | (d) stribution ratio divided by col. (c)) |
| 2013 | | | | | |
| 2012 | | | | | |
| 2011 | | | | | |
| 2010 | | | | | |
| 2009 | | | | | |
| 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-year | | | | | |
| number of years the foundation has be | | | | | |
| 4 Enter the net value of noncharitable-u | se assets for 2014 fro | om Part X, line | 5 | . 4 | |
| 5 Multiply line 4 by line 3 | | | | . 5 | |
| 6 Enter 1% of net investment income (1 | % of Part I, line 27b) | | | . 6 | |
| 7 Add lines 5 and 6 | | | | . 7 | |
| 8 Enter qualifying distributions from Par If line 8 is equal to or greater than line Part VI instructions. | | | | | |

| Part ^e | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see | nstru | <u>ıctio</u> ı | ns)_ |
|-------------------|--|-----------|----------------|----------------|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup \) and enter "N/A" on line 1. | | | |
| ` . | Date of ruling or determination letter: (attach copy of letter if necessary—see instructions) Domestic foundations that meet the section 4940(e) requirements in Part V, check | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ □ and enter 1% of Part I, line 27b | | 2,733 | |
| С | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of | | | |
| _ | Part I, line 12, col. (b). | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | | |
| 3 | Add lines 1 and 2 | 1 | 2,733 | |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | | |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 | 1 | <u>2,733</u> | ļ |
| 6 | Credits/Payments: | | | |
| a | 2014 estimated tax payments and 2013 overpayment credited to 2014 6a 12,000 | | | |
| b | Exempt foreign organizations—tax withheld at source 6b Tax paid with application for extension of time to file (Form 8868) . 6c | | | |
| c d | Backup withholding erroneously withheld 6d | | | ļ |
| 7 | Total credits and payments. Add lines 6a through 6d | | 2 000 | لـــــا |
| 8 | Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached | | 2,000 | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | 733 | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10 | | | |
| 11 | Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ Refunded ▶ 11 | | | |
| Part | VII-A Statements Regarding Activities | | | |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | | Yes | No |
| | participate or intervene in any political campaign? | <u>1a</u> | | ✓ |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? | 1b | | 1 |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | |
| | published or distributed by the foundation in connection with the activities. | | | |
| C | Did the foundation file Form 1120-POL for this year? | 1c | | ✓_ |
| d | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ | | ; | |
| е | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ► \$ | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | ✓ |
| 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 | | _ |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | 1 |
| b | If "Yes," has it filed a tax return on Form 990-T for this year? | 4b | | <u> </u> |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | 1 |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | |
| | By language in the governing instrument, or | | | |
| | • By state legislation that effectively amends the governing instrument so that no mandatory directions that | | | |
| | conflict with the state law remain in the governing instrument? | 6 | | 1 |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV | 7 | ✓ | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ | | | |
| _ | | | | |
| 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 | 8b | 1 | Ļ . |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," | | | |
| | complete Part XIV | | | 1 |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | 9 | - | _ |
| | names and addresses | 10 | 1 | |
| | | | | |

| At any time during the year, did the foundation, directly or indirectly, own a controlled entity wit meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: 1: | 2 3 | 1 |
|---|---|--------------------------|----------|
| person had advisory privileges? If "Yes," attach statement (see instructions) | 1; ication? 1; 217/75 6270 | 3 ✓ 93-3800 4-1439 | |
| Website address ▶ NOT APPLICABLE | 217/79 6270- | 93-3800 4-1439 | |
| 14 The books are in care of ► MIKE GORISZEWSKI Telephone no ► | 6270 | 4-1439 | |
| Located at ▶ 2401 WEST MONROE STREET, SPRINGFIELD, IL ZIP+4 ▶ | | | |
| 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 | 15 | | ▶ □ |
| At any time during calendar year 2014, did the foundation have an interest in or a signature or other over a bank, securities, or other financial account in a foreign country? | 10 | Yes | No ✓ |
| See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90 "Yes," enter the name of the foreign country ▶ | -22.1). If | | |
| Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1a During the year did the foundation (either directly or indirectly): | | | |
| (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | ☑ No ☑ No | | |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes (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)? | ✓ No ✓ No ✓ No | | |
| (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) | | | |
| b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Reg section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | | b | |
| Organizations relying on a current notice regarding disaster assistance check here | ▶□ | | |
| c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted ac were not corrected before the first day of the tax year beginning in 2014? | | C | |
| 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a operating foundation defined in section 4942(j)(3) or 4942(j)(5)): | private | | |
| a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? | ☑ No | | |
| b Are there any years listed in 2a for which the foundation is not applying the provisions of section 49 (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942 all years listed, answer "No" and attach statement—see instructions.) | | b | |
| c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years he ≥ 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20 | <u> </u> | | |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | ☑ No | | |
| b If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the I the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine foundation had excess business holdings in 2014.) | d by the lapse of e if the | b | |
| Did the foundation invest during the year any amount in a manner that would jeopardize its charitable pur Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeoparcharitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in | rdize its | | / |

| Part | VII-B Statements Regarding Activities | tor W | thich Form | 4720 | <u>may Be R</u> | equire | d (contir | nued) | | |
|----------------|--|-----------|-------------------------------|-----------|------------------------|-----------|----------------------------|----------|-----------------|-------------------------|
| 5a | During the year did the foundation pay or incur a | | | | | | | | | |
| • | (1) Carry on propaganda, or otherwise attempt t | | | | | | ☐ Yes | ✓ No | | |
| | (2) Influence the outcome of any specific public | | on (see secti | on 495 | 5); or to ca | arry on, | | | | |
| | directly or indirectly, any voter registration dr | ıve? | | | | | ☐ Yes | ✓ No | | |
| | (3) Provide a grant to an individual for travel, stu | dy, or d | other similar i | ourpos | es? | | ☐ Yes | ✓ No | | Į. |
| | (4) Provide a grant to an organization other than | a cha | ritable, etc., | organız | ation descr | nbed in | | | | |
| | section 4945(d)(4)(A)? (see instructions) | | | | | | ☐ Yes | ✓ No | | |
| | (5) Provide for any purpose other than religious, | , charit | able, scientıfı | c, litera | ary, or educ | ational | | _ | | i i |
| | purposes, or for the prevention of cruelty to o | hildrer | or animals? | | | | Yes | ✓ No | | |
| b | If any answer is "Yes" to 5a(1)-(5), did any of the | transa | actions fail to | qualify | under the | exception | ons descr | ibed in | | |
| | Regulations section 53.4945 or in a current notice | | | | | | | | 5b | |
| | Organizations relying on a current notice regarding | na disa | ster assistan | ce che | ck here . | | | ▶□ | | |
| С | If the answer is "Yes" to question 5a(4), does t | - | | | | | | | | ŀ |
| _ | because it maintained expenditure responsibility | | | | • | | | □No | | i i |
| | If "Yes," attach the statement required by Regula | | = | | | | | | | |
| 6a | Did the foundation, during the year, receive any | | | | | emilims | | | | |
| | on a personal benefit contract? | | - | - | | | ☐Yes | √ No | | |
| h | Did the foundation, during the year, pay premium | | | | | | | | 6b | |
| _ | If "Yes" to 6b, file Form 8870. | 10, 0110 | only or maner | ony, on | a porocriai | Donom | Contract | • • | 0.5 | |
| 7a | At any time during the tax year, was the foundation a | a narty : | to a prohibited | i tay sh | elter transac | tion? | ☐ Yes | ☑ No | | |
| | If "Yes," did the foundation receive any proceeds | | | | | | _ | | 7b | |
| | VIII Information About Officers, Direct | | | | | | | | | |
| . CII | and Contractors | , . | | Junuu | | .go.o, | | u.u = | р.оус | .00, |
| 1 | List all officers, directors, trustees, foundation | mana | agers and th | eir con | nnensation | lsee ir | etructio | ns) | | |
| • | | | e, and average | | mpensation | | Contributions | | 43.5 | |
| | (a) Name and address | hou | rs per week ed to position | (If r | not paid, iter -0-) | emplo | yee benefit erred compe | plans | (e) Expen | se account, lowances |
| DICHA | RD H LEVI | devoi | ed to position | en | iter -0-) | and dere | area compe | isation | | |
| | | TDUCT | TE 1 11011B | | • | | | _ | | |
| | /EST MONROE, SPRINGFIELD, IL 62704 | IKUSI | EE - 1 HOUR | | 0 | | | 0 | | 0 |
| | | TDUCT | EE 4 11011B | | | | | | | _ |
| • | REENSIDE DRIVE, SPRINGFIELD, IL 62704 AY M MATTHEWS | IKUSI | EE - 1 HOUR | | 0 | | | 0 | | 0 |
| | | TOLICE | TE 4 11011D | | • | | | | | _ |
| | OSEPHINE PLACE, SPRINGFIELD, IL 62704 M LEVI | IRUSI | EE - 1 HOUR | | 0 | | | 0 | | 0 |
| | | TDUCT | EE 411011D | | | | | • | | _ |
| 5324 E | AREFOOT BAY CT, BONITA SPRINGS, FL 34134 Compensation of five highest-paid employee | | EE - 1 HOUR | e incl | uded on li | no 1 - (| ego inetr | uetion | c) If no | DO OPTOR |
| | "NONE." | 25 (Util | er triair trios | e men | uded on in | 116 1-: | | uctions | 5). 11 110 | me, enter |
| | (a) Alama and address of such assulation (| | (b) Title, and a | verage | (m) O= | | (d) Contribu | | (e) Expen | se account, |
| | (a) Name and address of each employee paid more than \$50,00 | 0 | hours per v | | (c) Comper | nsation | plans and d | deferred | | llowances |
| | <u> </u> | | | | | | compens | oatiUl1 | | |
| NONE | | | 1 | | | | | | | |
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| ıotal | number of other employees paid over \$50,000 . | | <u> </u> | <u> </u> | <u> </u> | <u> </u> | <u> </u> | | | |
| | | | | | | | | | Form 990 |)-PF (2014) |

| Sive 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 (d) Compensation (e) Type of service (d) Compensation (e) Type of service (e) Compensation (e) | Part ⁽ VIII | Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid El and Contractors (continued) | mpioyees, |
|--|-------------------------------|---|------------------------|
| Fotal 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 organizations and other beneficiaries served, conferences convened, research papers produced, etc 1 NONE 2 3 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 NONE 2 All other program-related investments See instructions 3 All other program-related investments See instructions Fotal. Add lines 1 through 3 | 3 Five | ighest-paid independent contractors for professional services (see instructions). If none, enter "NO | NE." |
| Fortal number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities | | (a) Name and address of each person paid more than \$50,000 (b) Type of service | (c) Compensation |
| Fortal number of others receiving over \$50,000 for professional services List the foundation's four largest 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. 1 NONE 2 3 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 NONE All other program-related investments See instructions 3 List the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions | NONE | | |
| Fortal number of others receiving over \$50,000 for professional services List the foundation's four largest 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. 1 NONE 2 3 4 Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount 1 NONE All other program-related investments See instructions 3 List the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions | | | |
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| List the foundation's four largest 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 1 NONE 2 | | | |
| 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 1 NONE 2 | Total number | r of others receiving over \$50,000 for professional services | |
| 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 1 NONE 2 | Part IX-A | Summary of Direct Charitable Activities | |
| organizations and other beneficiaries served, conferences convened, research papers produced, etc 1 NONE 2 | | | |
| 2 | List the four organization | dation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of and other beneficiaries served, conferences convened, research papers produced, etc | Expenses |
| Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions 3 All other program-related investments See instructions | 1 NONE | | |
| Part IX-B Summary of Program-Related Investments (see instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions 3 All other program-related investments See instructions | | | |
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| Amount Amount Amount All other program-related investments See instructions All other program-related investments See instructions All other program-related investments See instructions Total. Add lines 1 through 3 | | | |
| Amount Amount Amount All other program-related investments See instructions All other program-related investments See instructions All other program-related investments See instructions Total. Add lines 1 through 3 | з —— | | - |
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| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions Total. Add lines 1 through 3 | 4 | | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions Total. Add lines 1 through 3 | | | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions Total. Add lines 1 through 3 | - 10V - | | |
| 1 NONE 2 | | | Amount |
| All other program-related investments See instructions 3 Total. Add lines 1 through 3 | | | 74110411 |
| All other program-related investments. See instructions 3 Total. Add lines 1 through 3 | I NOIL | ······································ | |
| All other program-related investments. See instructions 3 Total. Add lines 1 through 3 | | | |
| 3 | 2 | | |
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| Total. Add lines 1 through 3 | All other pro | gram-related investments. See instructions | |
| | 3 | | |
| | | | |
| | Total Addition | and 1 through 2 | |
| | i otal. Add li | nes i uirougn o | Form 990-PF (20 |

| Part | Minimum Investment Return (All domestic foundations must complete this part. Forei | ign tound | ations, |
|------|---|--|------------|
| | see instructions.) | | |
| ٠1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes: | | |
| а | Average monthly fair market value of securities | 1a | 13,036,296 |
| b | Average of monthly cash balances | 1b | 849,218 |
| C | Fair market value of all other assets (see instructions) | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 13,885,514 |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | |
| 3 | Subtract line 2 from line 1d | 3 | 13,885,514 |
| 4 | Cash deemed held for charitable activities. Enter 1 $\frac{1}{2}$ % of line 3 (for greater amount, see | | |
| | instructions) | 4 | 208,283 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 13,677,231 |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 683,862 |
| Part | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations check here ► □ and do not complete this part.) | oundation | าร |
| 1 | Minimum investment return from Part X, line 6 | 1 | 683,862 |
| 2a | Tax on investment income for 2014 from Part VI, line 5 2a 12,733 | | |
| b | Income tax for 2014. (This does not include the tax from Part VI.) 2b | | |
| С | Add lines 2a and 2b | 2c | 12,733 |
| 3 | Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 671,129 |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | 671,129 |
| 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 | 671,129 |
| Dart | XII Qualifying Distributions (see instructions) | ' | |
| Fait | Qualifying distributions (see instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | | |
| а | Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26 | 1a | 649,700 |
| b | Program-related investments—total from Part IX-B | 1b | |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the. | | |
| а | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 649,700 |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. | | |
| | Enter 1% of Part I, line 27b (see instructions) | 5 | |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 649,700 |
| | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years. | g whether | |

| art | Unaistributea income (see instruction | ons) | | <u>-</u> | |
|-----|--|---------------------------------------|----------------------------|-------------|-------------|
| .1 | Distributable amount for 2014 from Part XI, | (a) Corpus | (b) Years prior to 2013 | (c) 2013 | (d) 2014 |
| | line 7 | | | | 671,129 |
| 2 | Undistributed income, if any, as of the end of 2014: | | | | |
| а | Enter amount for 2013 only | | | 614,456 | |
| b | Total for prior years: 20,20,20 | | | | |
| 3 | Excess distributions carryover, if any, to 2014: | | | | |
| а | From 2009 | | | | |
| b | From 2010 | | | | |
| С | From 2011 | | | | |
| d | From 2012 | | | | |
| e | From 2013 | | | | |
| f | Total of lines 3a through e | | - | | |
| 4 | Qualifying distributions for 2014 from Part XII, | | | | |
| 7 | line 4: > \$ | | | | |
| _ | | | - | | |
| a | Applied to 2013, but not more than line 2a. | | ļ | 614,456 | |
| D | Applied to undistributed income of prior years | | | | 1 |
| | (Election required—see instructions) | <u> </u> | | | |
| С | Treated as distributions out of corpus (Election | | | | |
| | required—see instructions) | | | | |
| d | Applied to 2014 distributable amount | | | | 35,244 |
| е | Remaining amount distributed out of corpus | | | | |
| 5 | Excess distributions carryover applied to 2014 | | | | |
| | (If an amount appears in column (d), the same | | | | |
| | amount must be shown in column (a).) | | | | İ |
| 6 | Enter the net total of each column as indicated below: | | | | |
| а | Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 | | - | | |
| | Prior years' undistributed income. Subtract | | | | |
| | line 4b from line 2b | | | | |
| _ | | | | | i i |
| С | 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 | | | i | |
| | amount—see instructions | <u> </u> | | | |
| е | Undistributed income for 2013. Subtract line | | | | |
| | 4a from line 2a. Taxable amount—see | | | | |
| | instructions | , | | | |
| f | Undistributed income for 2014. Subtract lines | | | | |
| | 4d and 5 from line 1. This amount must be | | | | |
| | distributed in 2015 | | | | 635,885 |
| 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) | | | | Ì |
| 8 | Excess distributions carryover from 2009 not | | | | |
| | applied on line 5 or line 7 (see instructions) . | | | | |
| 9 | Excess distributions carryover to 2015. | | | | _ |
| _ | Subtract lines 7 and 8 from line 6a | | | | ļ |
| 10 | Analysis of line 9: | | | | |
| | | | | | İ |
| a | Excess from 2010 | | | | |
| b | Excess from 2011 | | | | |
| C | Excess from 2012 | | 1 | İ | |
| d | Excess from 2013 | | | | |
| е | Excess from 2014 | | | | - |

| D | VOV. Dista Operation E. de | 4 / | | VIII A | ·· | |
|-------|---|--------------------|---------------------|--------------------|---------------------|----------------------|
| Part | | | | | 9) | |
| 1a | If the foundation has received a ruling | | | | | |
| • | foundation, and the ruling is effective fo | | _ | | 1040(| VO) [] 40.40(!)(E) |
| ь | Check box to indicate whether the four | | operating toundat | | ection 4942(j |)(3) or 4942(j)(5) |
| 2a | Enter the lesser of the adjusted net income from Part I or the minimum | Tax year | 71.0040 | Prior 3 years | I in sect | (e) Total |
| | investment return from Part X for | (a) 2014 | (b) 2013 | (c) 2012 | (d) 2011 | |
| | each year listed | | | | | |
| b | 85% of line 2a | | | | | |
| С | line 4 for each year listed | | | | | |
| d | Amounts included in line 2c not used directly for active conduct of exempt activities | | | | | |
| е | Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c | | | | | |
| 3 | Complete 3a, b, or c for the alternative test relied upon: | | | | | |
| а | "Assets" alternative test - enter: | | | | | |
| | (1) Value of all assets | | | | | |
| | (2) Value of assets qualifying under | | | | | |
| | section 4942(j)(3)(B)(i) | | | | | <u> </u> |
| р | "Endowment" alternative test—enter 2/3 of minimum investment 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 loans (section 512(a)(5)), or royalties) | | | | | |
| | (2) Support from general public | | | | | |
| | and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| | (3) Largest amount of support from an exempt organization | | | | | |
| | (4) Gross investment income | ` | | | | |
| Part | | | | he foundation h | ad \$5,000 or m | nore in assets at |
| | any time during the year- | -see instruction | ns.) | | | |
| 1 | Information Regarding Foundation | | | | | |
| а | List any managers of the foundation before the close of any tax year (but of | | | | | by the foundation |
| | PPLICABLE | | | | | |
| b | List any managers of the foundation ownership of a partnership or other e | | | | | arge portion of the |
| NOT A | PPLICABLE | | | | | |
| 2 | Information Regarding Contribution | | | | | |
| | Check here ► ☑ if the foundation | | | | | |
| | unsolicited requests for funds. If the | | gitts, grants, etc. | (see instructions) | to individuals or o | organizations under |
| | other conditions, complete items 2a, | | | | | |
| а | The name, address, and telephone no | imber or e-mail ac | dress of the perso | on to whom applic | cations should be | addressed: |
| | PPLICABLE | | ····· | · | | |
| b | The form in which applications should | d be submitted and | d information and | materials they sho | ould include: | |
| NOT A | PPLICABLE | | | | | |
| С | Any submission deadlines: | | | | | |
| | PPLICABLE | | | | | |
| d | Any restrictions or limitations on av | vards, such as by | y geographical ar | eas, charitable fi | elds, kinds of in | stitutions, or other |
| | factors: | | | | | |
| NOT A | PPLICABLE | | | | | |

| Part | SXV Supplementary Information (cont | nued) | | | |
|-------|--|--|-----------|----------------------------------|----------|
| 3 | Grants and Contributions Paid During t | he Year or Approv | ed for Fu | ture Payment | , |
| | Recipient | If recipient is an individual, show any relationship to any foundation manager | 0.0.00 | Purpose of grant or contribution | Amount |
| | Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
| а | Paid during the year | | | | |
| SEE A | TTACHED SCHEDULE | | | | 649,700 |
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| | Total | <u> </u> | | ▶ 3a | 649,700 |
| b | Approved for future payment | | | | |
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| | Total | L | l | | |
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| | r gros | s amounts unless otherwise indicated. | (a) | usiness income (b) | (c) | ion 512, 513, or 514 (d) | (e) Related or exempt function income |
|-------------------|-------------------------|--|--------------------|-----------------------|----------------|-----------------------------|---------------------------------------|
| 1 | _ | ram service revenue: | Business code | Amount | Exclusion code | Amount | (See instructions) |
| | a _ | | | <u> </u> | ļ | | ļ |
| | ь _ | | | | | | ļ |
| | °. – | | | | | | ļ |
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| | e _ | | | | | | ļ |
| | f _ | | | | | | ļ |
| | g F | ees and contracts from government agencies | | | | | |
| 2 | Mem | bership dues and assessments | | | | | |
| 3 | Intere | est on savings and temporary cash investments | | | | | ļ <u> </u> |
| 4 | Divid | lends and interest from securities | | | | | |
| 5 | Net r | rental income or (loss) from real estate: | | | | | |
| | a D | Pebt-financed property | | | | | |
| | b N | lot debt-financed property | | | | | |
| 6 | Net r | rental income or (loss) from personal property | | | | | |
| 7 | | r investment income | | | | | |
| 8 | | or (loss) from sales of assets other than inventory | | | | | |
| 9 | Net | ncome or (loss) from special events | | - " | | | |
| 10 | | s profit or (loss) from sales of inventory | | | | | |
| 11 | Othe | r revenue: a | | | | | |
| | b | | | | | | - |
| | c | | | | | | |
| | d - | | | | | | |
| | e - | | | | | | |
| 12 | | otal. Add columns (b), (d), and (e) | | | | | |
| | | I. Add line 12, columns (b), (d), and (e) | | | | 13 | |
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| See | | sheet in line 13 instructions to verify calculation | s.) | | | | |
| See Par Lin | work: rt XV e No. | sheet in line 13 instructions to verify calculation Relationship of Activities to the A | s.) .ccomplishm | ent of Exemp | t Purposes | | mportantly to the |
| See Par Lin | work | sheet in line 13 instructions to verify calculation | s.) .ccomplishm | ent of Exemp | t Purposes | | mportantly to the ctions.) |
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| Form 99 | 0-PF | (2014) | | | | | | | | Pa | ige 13 |
|--------------|-------|--|--|-------------------------|------------------------------------|-------------------------|--|--|------------------------------------|-----------------|-----------------|
| Part | 'XVI | | n Regarding Tra ganizations | nsfers T | o and Trans | saction | s and R | elationships With Nonch | aritab | le | |
| ٠1 | in s | | | | | | | other organization described ection 527, relating to political | | Yes | No |
| а | Trai | nsfers from the rep | porting foundation t | to a nonc | haritable exer | npt orga | nization | of: | 1, | | |
| | (1) | Cash | | | | | | | 1a(1) | | 1 |
| | | Other assets . | | | | | | | 1a(2) | <u> </u> | ✓ |
| b | | er transactions: | | | | | | | 11.64 | <u> </u> | |
| | | | a noncharitable ex ets from a nonchar | | | | | | 1b(1) | | 1 |
| | | | , equipment, or oth | | | | | | 1b(2) | _ | 1 |
| | | | rrangements | | | | | | 1b(4) | | 7 |
| | | | rantees | | | | | | 1b(5) | | 1 |
| | | | ervices or members | | | | | | 1b(6) | | 1 |
| С | | | | | | | | | 1c | | 1 |
| d | valu | ue of the goods, o | ther assets, or senon or sharing arran | vices give gement, s | en by the repo show in colum | rting fou in (d) the | indation. value of | Column (b) should always shift the foundation received lead the goods, other assets, or state of the goods. | ss than services | fair m recei | narket ved. |
| (a) Lin | e no | (b) Amount involved | (c) Name of non- | charitable e | xempt organizatio | n | (d) Descri | ption of transfers, transactions, and s | haring an | rangem | ents |
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| 2a b | des | cribed in section 5 | ectly or indirectly a 501(c) of the Code (e following scheduk | other tha | vith, or related In section 501 | d to, one (c)(3)) or | or mor in sectio | e tax-exempt organizations n 527? | ☐ Ye | s 🗸 | No |
| | | (a) Name of organ | | | (b) Type of orga | inization | | (c) Description of relat | ionship | | |
| | | | | | | | | | | | |
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| | Un | der penalties of partiry. I | I declare that I have exami | ned this retur | n including accom | nanving sch | nedules and | statements, and to the best of my know | edge and | helief if | is truo |
| Sign Here | P 001 | frect, and complete Decl | laration of preparer (other t | | | ormation of TRU | | arer has any knowledge May the with the | RS disc preparer tructions)? | uss this | return below |
| | | gnature of officer or titus Print/Type preparer | | Prepare | er's softature | Title | • | Date | PTIN | | |
| Paid | | | | MX | | リー |) | Check I if self-employed | i | 4 457 4 | 10 |
| Prep | | | JOSEPH M GORISZ | EWSKICE | A | | <u> </u> | Firm's EIN | <u> </u> | 14574 | 18 |
| Use | Only | y | 2401 WEST MONRO | | | D, IL 627 | 04 | | 217/793 | -3800 | |
| | | | | 1/ | ., | , 0_/ | - · · · · · · · · · · · · · · · · · · · | | Form QC | | (2014) |

Schedule B

(Form 990, 990-EZ, 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

| | Y & SHOUP FOUNDAT | | 32-6007063 |
|-----------|--|---|--|
| Organiz | ation type (check or | e): | |
| Filers of | f: | Section: | |
| Form 99 | 0 or 990-EZ | ☐ 501(c)() (enter number) organization | |
| | | 4947(a)(1) nonexempt charitable trust not treated as a priva | ate foundation |
| | | ☐ 527 political organization | |
| Form 99 | 0-PF | 501(c)(3) exempt private foundation | |
| | | 4947(a)(1) nonexempt charitable trust treated as a private f | oundation |
| | | ☐ 501(c)(3) taxable private foundation | |
| | | | |
| | nly a section 501(c)(7 | covered 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 |
| Genera | Rule | | |
| Ø | | filing Form 990, 990-EZ, or 990-PF that received, during the year r property) from any one contributor. Complete Parts I and II. Se ontributions. | |
| Special | Rules | | |
| | regulations under se 13, 16a, or 16b, and | described in section 501(c)(3) filing Form 990 or 990-EZ that me ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Fi that received from any one contributor, during the year, total co the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ | orm 990 or 990-EZ), Part II, line ontributions of the greater of (1) |
| | contributor, during t | described in section 501(c)(7), (8), or (10) filing Form 990 or 990-the year, total contributions of more than \$1,000 exclusively for related purposes, or for the prevention of cruelty to children or animals. | ligious, charitable, scientific, |
| | contributor, during t contributions totaled during the year for a General Rule applie | described in section 501(c)(7), (8), or (10) filing Form 990 or 990- he year, contributions exclusively for religious, charitable, etc., p d more than \$1,000. If this box is checked, enter here the total c in exclusively religious, charitable, etc., purpose. Do not comple tes to this organization because it received nonexclusively religious ore during the year | ourposes, but no such ontributions that were received te any of the parts unless the us. charitable, etc., contributions |

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Name of organization **Employer identification number LEVI, RAY & SHOUP FOUNDATION** 32-6007063 Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) (c) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution LEVI, RAY & SHOUP, INC. Person __1__ **Payroll** 1,000,000 Noncash 2401 WEST MONROE STREET (Complete Part II for noncash contributions.) SPRINGFIELD, IL 62704 (b) (a) (d) (c) Νo. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) No. (b) (c) (d) **Total contributions** Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for

noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Name of organization Employer identification number LEVI, RAY & SHOUP FOUNDATION 32-6007063 Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (c) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) FMV (or estimate) (d) from Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (see instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) FMV (or estimate) (b) (d) from Description of noncash property given **Date received** Part I (see instructions) (a) No. (c) (d) from FMV (or estimate) Description of noncash property given **Date received** Part I (see instructions)

| Name of or | ganization | | | | Employer identification number |
|---------------------------|--|---|--|---------------------------------------|---|
| | & SHOUP FOUNDATION | | | | 32-6007063 |
| Fart III | Exclusively religious, charitable, e (10) that total more than \$1,000 for the following line entry. For organiza contributions of \$1,000 or less for the Use duplicate copies of Part III if add | r the year from any tions completing Pa ne year. (Enter this in | one contributor. art III, enter the total aformation once. S | Complete o | columns (a) through (e) and vely religious, charitable, etc., |
| (a) No. from | | ·· | | / 0.5 | |
| Part I | (b) Purpose of gift | (c) Use | of gift | (d) Des | cription of how gift is held |
| _ | | (e) Trans | fer of gift | | |
| | Transferee's name, address, a | | _ | nship of tran | sferor to transferee |
| | *************************************** | | | | |
| | | | | · | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use | of gift | (d) Des | cription of how gift is held |
| | | | | | |
| | | | | | |
| | | (e) Trans | fer of gift | | |
| - | Transferee's name, address, a | nd ZIP + 4 | Relation | nship of tran | sferor to transferee |
| | | | | | |
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| (a) No. from Part I | (b) Purpose of gift | (c) Use | of gift | (d) Des | cription of how gift is held |
| | | | | | |
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| - | | (e) Trans | fer of gift | <u> </u> | |
| | Transferee's name, address, a | nd ZIP + 4 | Relatio | nship of tran | sferor to transferee |
| | | | | · · · · · · · · · · · · · · · · · · · | |
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| -(2) N - | | | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use | of gift | (d) Des | cription of how gift is held |
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| | | (e) Trans | sfer of gift | ļ | |
| | Transferee's name, address, a | | _ | nship of trar | sferor to transferee |
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Levi Ray & Shoup Foundation
• Form 990-PF
Tax Year Ending - July 31, 2015

Page 1, Part I, Question 1 - Contributions, gifts, grants, etc.

| Contribution received from Levi, Ray & Shoup, Inc. | 1,000,000 |
|--|-----------|
| Page 1, Part I, Question 16c - Other Professional Fees | |
| Investment management fees | 13,418 |
| Total other professional fees | 13,418 |
| Page 1, Part I, Question 18 - Taxes | |
| FY14 Investment tax - balance due with return | 314 |
| FY15 Estimated tax payment - investment tax | 12,000 |
| Total Taxes | 12,314 |
| Page 1, Part I, Question 23 - Other Expenses | |
| Annual Filing Fee - Illinois | 15_ |
| Total Other Expenses | 15_ |

Page 4, Part VII-A, Question 10 - Schedule of Substantial Contributors

Levi, Ray & Shoup, Inc. 2401 West Monroe Street Springfield, IL 62704

Levi Ray & Shoup Foundation EIN 32-6007063 2014 990 PF, Page 2, Part II, Line 10c Investments - Corporate Bonds

| | Beginning of Year | Ē | End of Year |
|--|-------------------|------------|-------------------|
| Secunty Name | Book Value | Book Value | Fair Market Value |
| American Express, 6 15%, Due 8/28/17, \$1,000,000 | 1,065,700 | 1,065,700 | 1,092,430 |
| Comcast Global, 8 875%, Due 5/01/17, \$1,000,000 | 1,235,300 | 1,235,300 | 1,127,750 |
| General Electric Capital Corp, 6%, Due 8/17/19, \$1,000,000 | 1,048,150 | 1,048,150 | 1,148,580 |
| Goldman Sachs, 6 150%, Due 4/01/18, \$1,000,000 | 1,073,400 | 1,073,400 | 1,108,740 |
| Hewlett Packard 4 050% Due 9/15/22 \$1,000,000 | 991,800 | 991,800 | 1,021,150 |
| Horace Mann Educators, 6 85%, Due 4/15/16, \$1,000,000 | 1,014,000 | 1,014,000 | 1,039,160 |
| Reynolds American , 6 875%, Due 05/01/2020, \$400,000 | 446,920 | 446,920 | 463,644 |
| Morgan Stanley, 4 200%, Due 11/20/2014, \$1,000,000 | 1,034,200 | 0 | 0 |
| Morgan Stanley, 5 950%, Due 12/28/2017, \$410,000 | 428,860 | 428,860 | 449,061 |
| Morgan Stanley, 3 700%, Due 10/23/2024, \$1,000,000 | 0 | 1,005,000 | 1,001,390 |
| PNC Bank n A Pittsburgh PA, 3 800%, Due 7/25/2023, \$600,000 | 0 | 618,186 | 618,030 |
| Prudential Financial, 6.10%, Due 6/15/17, \$1,000,000 | 1,066,000 | 1,066,000 | 1,081,790 |
| Wells Fargo Company, 4 125%, Due 8/15/2013, \$1,000,000 | 1,048,500 | 1,048,500 | 1,034,230 |
| Westmifflin PA Gen Ob, 4 728%, Due 10/1/2023, \$1,000,000 | 1,025,120 | 1,025,120 | 1,075,910 |
| Sunoco Inc , 5 75%, Due 1/15/17, \$1,000,000 | 1,029,000 | 1,029,000 | 1,044,800 |
| Totals | 12,506,950 | 13,095,936 | 13,306,665 |

| Recipient Name and Address | If recipient is an individual show any relationship to foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|--|--|--------------------------------|---|--------|
| J N "Ding" Darling Foundation 1 Wildlife Drive Sanibel, FL 33957 | Not Applicable | Unrelated | To support organization's role in providing conservation education | 5,000 |
| Boys & Girls Clubs of Central Illinois 300 S 15th Street Springfield, IL 62708 | Not Applicable | Unrelated | To assist organization with programs that enable young people to acquire the skills and qualities needed to become responsible citizens and leaders | 10,000 |
| United Way of Central Illinois 730 E Vine Springfield, IL 62704 | Not Applicable | Unrelated | To assist organization in supporting social service organizations in the Sangamon county area | 20,000 |
| American Heart Association 2525 Farragut Drive, Suite A Springfield, IL 62704-1433 | Not Applicable | Unrelated | To support the cure for heart disease and stroke | 5,000 |
| Central Illinois Food Bank 2000 E Moffat Springfield, IL 62702 | Not Applicable | Unrelated | To assist organization in alleviating hunger in central Illinois | 3,000 |
| Sacred Heart Griffin High School 1200 W Washington Springfield, IL 62702 | Not Applicable | Unrelated | To improve the education of youth attending Sacred Heart Griffin | 10,000 |
| Big Brother Big Sıster 444 South Grand Avenue West Springfield, IL 62704 | Not Applicable | Unrelated | To assist organization in serving kids in need of a positive role model | 1,000 |
| Camp Care-A-Lot Post Office Box 13083 Springfield, IL 62791-3083 | Not Applicable | Unrelated | To assist organization in serving impoverished children | 5,000 |

| Recipient Name and Address | If recipient is an individual show any relationship to foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|--|---|--------------------------------------|---|---------|
| Eastern Illinois University Foundation 600 Lincoln Avenue Charleston, IL 61920 | Not Applicable | Unrelated | To improve the education of youth attending Eastern Illinois University | 50,000 |
| Memorial Medical Center Foundation One Memorial Plaza Springfield, IL 62781 | Not Applicable | Unrelated | To assist organization in maintaining and improving the health care of the residents in the Springfield area | 261,000 |
| United Cerebral Palsy Land of Lincoln 101 North 16th Street, Suite 5 Springfield, IL 62703 | Not Applicable | Unrelated | To assist organization with its mission to provide quality services, programs and advocacy to individuals with all types of disabilities | 2,500 |
| Children's Miracle Network 400 N 9th Street Springfield, IL 62702 | Not Applicable | Unrelated | To assist organization with its mission to save and improve lives of children by raising money for local children's hospitals | 1,500 |
| The Ricky King Foundation 5051 Castello Drive, #21 Naples, FL 34103 | Not Applicable | Unrelated | To assist organization with its mission to enrich the lives of children with disabilities in Southwest Florida by providing essential medical equipment and services in times of need | 1,000 |
| Georges Malaıka Foundation 244 Fifth Avenue, Suite N225 New York, NY 10001 | Not Applicable | Unrelated | To assist organization in its mission to educate young African girls in the Democratic Republic of Congo | 10,000 |
| SPARC 232 Bruns Lane Springfield, IL 62702 | Not Applicable | Unrelated | To assist organization in its mission to help persons dealing with intellectual and developmental disabilities | 50,000 |
| Lutheran High School 3500 W Washington Street Springfield, IL 62711 | Not Applicable | Unrelated | To improve the education of youth attending Lutheran High in Springfield, Illinois | 78,500 |
| Christ the King Church | Not Applicable | Unrelated | To assist church with its mission | 20,000 |

| Recipient Name and Address | If recipient is an individual show any relationship to foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|---|--|--------------------------------|--|--------|
| 1930 Barberry Drive Springfield, IL 62704 | | | | |
| Family Service Center of Sangamon County 730 East Vine Springfield, IL 62703 | Not Applicable | Unrelated | Assist organization with its mission to improve the lives of people in Central illinois through excellent foster care, adoption services and family support | 10,500 |
| Girl Scouts of Central Illinois 3020 Baker Drive Springfield, IL 62703 | Not Applicable | Unrelated | Assist organization with its mission of building girls of courage, confidence and character who make the world a better place | 5,000 |
| Abraham Lincoln Council, Boy Scouts of America 5231 South Sixth Street Road Springfield, IL 62703 | Not Applicable | Unrelated | Assist organization in its goal of giving young people an appreciation of the outdoors through programs that teach leadership, community service and provide outdoor adventure | 5,000 |
| Orthopedic Center of Illinois Foundation 1301 S Koke Mill Road Springfield, IL 62711 | Not Applicable | Unrelated | To assist organization in its charitable purpose to support projects promoting patient education, continuing medical education, and regional charitable organizations | 2,500 |
| Springfield YMCA 701 South Fourth Street Springfield, IL 62703 | Not Applicable | Unrelated | To assist organization in serving youth and providing its Adaptive Physical Education program for the disabled | 1,000 |
| Rutledge Youth Foundation 534 W Miller Springfield, IL 62702 | Not Applicable | Unrelated | To assist organization in serving abused and neglected youth | 1,000 |
| SIU Foundation 927 Rutledge Springfield, IL 62794 | Not Applicable | Unrelated | To support an event which benefits Camp COCO Camp COCO is a summer camp for children with cancer and blood related disorders | 1,000 |
| American Cancer Society 687 Linton Ave. | Not Applicable | Unrelated | To assist organization in eliminating cancer as a major health problem | 5,000 |

Levi, Ray & Shoup Foundation 32-6007063 Tax Year Beginning August 1, 2014 and ending July 31, 2015

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| Recipient Name and Address | If recipient is an individual show any relationship to foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|---|---|--------------------------------|--|--------|
| Springfield, IL 62703 | | | | |
| Friend in Deed P.O Box 15 Springfield, IL 62705-0015 | Not Applicable | Unrelated | To help Springfield area residents that are in need during the Christmas holiday season | 10,000 |
| Royal Palm Sailing Club, Inc 15880 Summerlin Rd 300-175 Fort Myers, FL 33908-9612 | Not Applicable | Unrelated | To help organization meet its charitable purpose of teaching kids and adults to sail | 2,400 |
| Sojourn Shelter and Services, Inc 1800 Westchester Blvd. Springfield, IL 62704 | Not Applicable | Unrelated | To assist organization in its mission of ending domestic violence | 2,000 |
| The Coast Guard Foundation 394 Taugwonk Road Stonington, CT 06378-1807 | Not Applicable | Unrelated | To assist organization in supporting projects that enhance the education, welfare and morale of all Fort Myers Coast Guard members and their families | 1,500 |
| Alzheimer's Association, Greater Illinois Chapter 8430 W Bryn Mawr Ave/, Suite 800 Chicago, IL 60631-3473 | Not Applicable | Unrelated | To assist organization in its mission to eliminate Alzheimer's disease through advancement of research; to enhance care and support all affected, and to reduce the risk of dementia | 1,000 |
| United States Police Canine Association PO Box 80 Springboro, OH 45066 | Not Applicable | Unrelated | To assist organization in its mission to provide training and certifications for federal, state and local law enforcement K-9 programs | 2,000 |
| Kumler Outreach Ministries 600 N 5th Street Springfield, IL 62702 | Not Applicable | Unrelated | To assist organization in its mission to feed the hungry, care for the sick, helping clothe people, teaching life skills and building relationships | 5,000 |
| St Martin de Porres Center 1725 South Grand Avenue East Springfield, IL 62703 | Not Applicable | Unrelated | To assist organization in its mission of distributing food, clothing, bedding, furniture and household items at no cost to those in need | 10,000 |

| Recipient Name and Address | If recipient is an individual show any relationship to foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|---|--|--------------------------------------|---|--------|
| Fish 36, Inc 751 Fisherman's Wharf Fort Myers Beach, FL 33931 | Not Applicable | Unrelated | To assist organization in its charitable education purpose | 2,500 |
| Health Missions, Inc PO Box 3614 Peoria, IL 61614 | Not Applicable | Unrelated | To assist organization in enhancing exposure of natural health care to communities around the world | 1,000 |
| Kiwanis Gateway to the Islands 16970-160 San Carlos Blvd #310 Fort Myers, FL 33908 | Not Applicable | Unrelated | To educate low to middle income parents on parenting, early literacy, child protection and nutrition | 800 |
| USS Illinois Commissioning Committee 175 N. Adams Street Oswego, IL 60543-9602 | Not Applicable | Unrelated | To assist organization in its mission to promote awareness within IL of the construction of the USS Illinois, provide support to the crew and the ship | 1,000 |
| Illinois Executive Mansion Association 410 E Jackson Springfield, IL 62701 | Not Applicable | Unrelated | To assist in the restoration/renovation of Illinois' Executive Mansion | 5,000 |
| Springfield High School 101 South Lewis Street Springfield, IL 62704 | Not Applicable | Unrelated | Support and promote the school's football team | 750 |
| Springfield High School 101 South Lewis Street Springfield, IL 62704 | Not Applicable | Unrelated | Support and promote the school's band | 1,000 |
| University of Illinois Foundation - Innocence Project 1305 West Green Street Urbana, IL 61801 | Not Applicable | Unrelated | To support the evaluation and investigation of credible claims by Illinois inmate's actual innocence, and, when appropriate, provide legal representation | 5,000 |

| Recipient Name and Address | If recipient is an individual show any relationship to foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount |
|--|--|--------------------------------|---|--------|
| The Lincoln Academy of Illinois One Old State Capitol Plaza Springfield, IL 62701 | Not Applicable | Unrelated | To help support the Academy's student laureate program | 5,000 |
| Inner City Mission of Springfield PO Box 8148 Springfield, IL 62791 | Not Applicable | Unrelated | To help support the agency in providing shelter to the homeless | 5,000 |
| M.E.R.C.Y. Communities 1344 N. 5th Street Springfield, IL 62702 | Not Applicable | Unrelated | To help the agency in providing support to homeless mothers and their children | 2,500 |
| Girls on the Run of Central Illinois 907 Clocktower Drive Springfield, IL 62704 | Not Applicable | Unrelated | To help support the organization in their effort to help girls embrace their individuality | 2,500 |
| American Lung Association of Central Illinois 3000 Kelly Lane Springfield, IL 62711 | Not Applicable | Unrelated | To support organization in its goal to improve lung health and prevent lung disease | 5,000 |
| Fort Myers Beach PTO 2751 Oak Street Fort Myers Beach, FL 33931 | Not Applicable | Unrelated | To support organization in its efforts to provide technical upgrades, supplies, enrichment and field trips to the students of Fort Myers Beach Elementary | 1,000 |
| American Cancer Society - Florida Division 4575 Via Royale, Suite 110 Fort Myers, FL 33919 | Not Applicable | Unrelated | To assist organization in eliminating cancer as a major health problem | 3,500 |
| Mu Delta Lambda Charitable Foundation PO Box 6203 Springfield, IL 62703 | Not Applicable | Unrelated | To assist foundation in its goal to promote higher education, community service, health awareness and low income housing | 000 |
| Oak Ridge Cemetery Foundation | Not Applicable | Unrelated | to assist foundation in its goal of maintaining, preserving and enhancing | 5,000 |

Total

| Amount | | 1,250 |
|--|--|---|
| Purpose of grant or contribution | the final resting place of President Abraham Lincoln | To assist organization with programs that enable young people to acquire the skills and qualities needed to become responsible citizens and leaders |
| Foundation status of recipient | | Unrelated |
| If recipient is an individual show any relationship to foundation manager or substantial contributor | | Not Applicable |
| Recipient Name and Address | 1441 Monument Springfield, IL 62702 | Boys & Girls Club of Lee County 7275 Concourse Drive, Suite 200 Fort Myers, FL 33908 |