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

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

OMB No 1545-0052

Interna	Revenue Service Information about Form		te instructions is at w	ww.irs.gov/		Open to Public Inspection
	alendar year 2014 or tax year beginning	12	$2/31$ , 2014, and $\epsilon$		Employer ident	11/30, <b>20</b> 15
	e of foundation			^		
	C FAMILY FOUNDATION	t to atract address)	- Doom	Vousto B	47-26188	ber (see instructions)
Num	ber and street (or P O box number if mail is not delivered	to street address)	Room	I/Suite   B	•	• •
501	w. STATE STREET, SUITE 206				(6	30) 335-7357
City	or town, state or province, country, and ZIP or foreign po-	stal code				
CEN	IEUN TI 60134			c	If exemption application pending, check he	cation is
	NEVA, IL 60134  eck all that apply X Initial return	Initial return	of a former public	charity		. □
G CII	Final return	Amended re	-	Cilarity D	1 Foreign organiz	ations, check here P L
	Address change	Name chang		-	85% test, check	here and attach
H Ch	eck type of organization   X   Section 501(				computation .	
	Section 4947(a)(1) nonexempt charitable trust	Other taxable pr		E	•	on status was terminated
	r market value of all assets at J Acco					(b)(1)(A), check here .
		ther (specify)				is in a 60-month termination (b)(1)(B) check here
	· · · · · · · · · · · · · · · · · · ·	column (d) must be on cas				(a),(·),(a) and an indicate (
نصعة	Analysis of Revenue and Expenses (The	• • • • • • • • • • • • • • • • • • • •				(d) Disbursements
البنجي	total of amounts in columns (b), (c), and (d)	(a) Revenue and expenses per	(b) Net investmen	t (c)	Adjusted net	for charitable purposes
	may not necessarily equal the amounts in column (a) (see instructions) )	books	income		income	(cash basis only)
<b>T</b> 1	Contributions, gifts, grants, etc., received (attach schedule)	5,000,000.				
2	Chack if the foundation is not required to					
3	Interest on savings and temporary cash investments.					
4	Dividends and interest from securities	31,876.	31,87	6.		ATCH 1
-	Gross rents				<del></del>	
	Net rental income or (loss)					
- 1	Net gain or (loss) from sale of assets not on line 10					•
Revenue	Capital gain net income (from Part IV, line 2) .					
~ 8	Net short-term capital gain					
9	Income modifications					
10 a	Gross sales less returns and allowances			ت ا		
l t	Less Cost of goods sold				REC	
	Gross profit or (loss) (attach schedule)					9 2016 Q
11	Other income (attach schedule)				MANG 1	g 2016 Q
12	Total. Add lines 1 through 11	5,031,876.	31,87	6.		. 83
رم 13 دم	Compensation of officers, directors, trustees, etc	C				
ğ 14	Other employee salanes and wages			l		EN.UI
<b>5</b> 15	Pension plans, employee benefits					
<b>♀</b> 16 a	Legal fees (attach schedule)					
₩ t	Accounting fees (attach schedule)	7.660	7.66	- 0		
) <u>[</u> ≩.	Other professional fees (attach schedule). [2]	7,662.	7,66	02.		
Administrative Expenses 14 12 12 12 12 12 12 12 12 12 12 12 12 12	Interest					
<b>2</b> 18	Taxes (attach schedule) (see instructions)			_		<del>-</del>
Ē 19	Depreciation (attach schedule) and depletion.	· .				
20	Occupancy					
21	Travel, conferences, and meetings		ļ			-
21 22	Printing and publications			$\perp$		<del> </del>
P 23	Other expenses (attach schedule)					
= 24	Total operating and administrative expenses.	7.660	7	. ,		
23 24 25 25	Add lines 13 through 23	7,662.	7,66	02.		200 003
-	Contributions, gifts, grants paid	296,667.	7.00			296,667
26	Total expenses and disbursements Add lines 24 and 25	304,329.	7,66	02.		296,667
27	Subtract line 26 from line 12	4 707 5 17				
	Excess of revenue over expenses and disbursements	4,727,547.	24 01	4		<del></del>
	Net investment income (if negative, enter -0-)		24,21	.4.		
	Adjusted not income (if negative enter -0-)	i .	i .			i e

JSA For Paperwork Reduction Act Notice, see instructions. 4E1410 1 000 5776KK N26K 8/3/2016 10:57

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	4 11	Balance Sheets description column should be for end-of-year	Beginning of year		End of	year
<u> </u>	art II	amounts only (See instructions )	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash - non-interest-bearing				
	2	Savings and temporary cash investments		117,9	}81.	117,981.
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable		-		
	-	Less allowance for doubtful accounts ▶			ŀ	
	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 ▶			$\rightarrow$	
ssets	8	Inventories for sale or use			$\rightarrow$	
ASS	9	Prepaid expenses and deferred charges			$\longrightarrow$	
٩		Investments - U S and state government obligations (attach schedule)				
		Investments - corporate stock (attach schedule)		4,636,5	266.	4,349,986.
	4.4 C	Investments - corporate bonds (attach schedule)				
	11	Investments - land, buildings, and equipment basis				
		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 I)	0	4,754,5	547.	4,467,967.
_	17	Accounts payable and accrued expenses		-,,		
	18				$\dashv$	
<b>,</b>		Grants payable			$\dashv$	
Liabilities	19	Deferred revenue			$\dashv$	
ij	20	Loans from officers, directors, trustees, and other disqualified persons			$\dashv$	
Lia	21	Mortgages and other notes payable (attach schedule)		27 (	$\frac{1}{200}$	
	22	Other liabilities (describe ►ATCH_3)		27,0		
		T ( 11 1714		27 (	,,,	
_	23	Total liabilities (add lines 17 through 22)	0	27,0	100.	
		Foundations that follow SFAS 117, check here.				
es		and complete lines 24 through 26 and lines 30 and 31.			İ	
alances	24	Unrestricted				
ala	25	Temporarily restricted				
Net Assets or Fund B	26	Permanently restricted				
5		Foundations that do not follow SFAS 117, $\triangleright  X $				
F		check here and complete lines 27 through 31.				
S	27	Capital stock, trust principal, or current funds		4,727,5	547.	
set	28	Paid-in or capital surplus, or land, bldg, and equipment fund				
ASS	29	Retained earnings, accumulated income, endowment, or other funds				
et ,	30	Total net assets or fund balances (see instructions)	0	4,727,5	547.	
Z	31	Total habilities and net assets/fund balances (see				
		instructions)	o	4,754,5	547.	
P	art II	Analysis of Changes in Net Assets or Fund Bala				
		al net assets or fund balances at beginning of year - Part		nust agree with		
'		of year figure reported on prior year's return).		•		
•	EIIU	or amount from Bort Line 27s			1	4,727,547.
2	Ente	er amount from Part I, line 27a			2	4,121,541.
		er increases not included in line 2 (itemize)			3	A 707 F47
4	Add	lines 1, 2, and 3			4	4,727,547.
		reases not included in line 2 (itemize)			5	4 505 5 :=
_6	Tota	al net assets or fund balances at end of year (line 4 minus	line 5) - Part II, column (b	), line 30	6	4,727,547.

_	4
Page	

Pa	art IV Capital Gains	and Losses for Tax on Inv	estment Income			<u>_</u>
		d describe the kind(s) of property sold		(b) How acquired	(c) Date	(d) Date sold
	2-story b	P - Purchase D - Donation	acquired (mo, day, yr)	(mo , day, yr )		
1a						
b					-	
С						
<u>d</u>						
_e						
	(e) Gross sales price		(h) Gain or (lo (e) plus (f) minu			
а						
b						
_c						
d						
<u>e</u>						
	Complete only for assets	showing gain in column (h) and owne	ed by the foundation on 12/31/69		Gains (Col (h) ga	ain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis	(k) Excess of col (i)		(k), but not less t	han -0-) or
		as of 12/31/69	over col (j), if any		Losses (from co	l (h))
<u>a</u>						
<u>b</u>						
С						
d						·
<u>e</u>		·				
2	Capital gain net income of	nr (net canital ince)	gain, also enter in Part I, line 7			
		_ ` '	(loss), enter -0- in Part I, line 7	2		
3		in or (loss) as defined in sections				
			tructions) If (loss), enter -0- in			
				3		
			duced Tax on Net Investment li			
(Fo	or optional use by domestic	c private foundations subject to th	e section 4940(a) tax on net investi	ment incoi	me)	
ıc .	40.40(d)(0)l	In a continuo mandal blanda NOT	T AND THE HOD INTERTAL .	voan ni	amilio N.O.	
11 5	ection 4940(d)(2) applies,	leave this part blank NO	r AVAILABLE FOR INITIAL	ILAK KI	LIUKNS	
Wa	s the foundation liable for	the section 4942 tax on the distrib	outable amount of any year in the ba	ase nerior	12	Yes No
		not qualify under section 4940(e)		asc period	•	] 163 110
1			ar, see the instructions before makin	g any enti	iles	
_	(a)	(b)	(c)		(d)	
Ca	Base period years illendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
	2013				(00. (0) 0	(-)/
	2012					
	2011					
	2010		<u> </u>			
	2009					
			· · · · · · · · · · · · · · · · · · ·		-	
2	Total of line 1, column (d	) <b></b>		2		
3	Average distribution ratio	for the 5-year base period - divid	le the total on line 2 by 5, or by the			
			ss than 5 years	3		
	•		•		_	
4	Enter the net value of no	ncharitable-use assets for 2014 fr	om Part X, line 5	4		
5	Multiply line 4 by line 3.			5		
-						
6	Enter 1% of net investme	ent income (1% of Part I line 27b)		6		
•			!			
7	Add lines 5 and 6			7		
·	=== <del>= == •</del>					
8	Enter qualifying distribution	ons from Part XII. line 4		8		
•			in Part VI, line 1b, and complete t		using a 1% tax	rate See the
	Part VI instructions	· · · · · · · · · · · · · · · · · · ·		•		

Pai	Excise Tax Based on investment income (Section 4940(a), 4940(b), 4940(e), or 4948 - see it	<u>nstru</u>	ctions	<u>s)</u>
1a	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 instructions)		_	
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check		4	184.
	here  and enter 1% of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of J Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2		4	184.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		4	184.
6	Credits/Payments			
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a			
b	Exempt foreign organizations - tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld			0
7	Total credits and payments Add lines 6a through 6d			0
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			104
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		4	184.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refunded ▶ 11			
	t VII-A Statements Regarding Activities		V	N-
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	4.0	Yes	No X
	participate or intervene in any political campaign?	1a		Λ
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	1b		Х
	Instructions for the definition)?	- 10		Λ.
	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	1c		х
	Did the foundation file Form 1120-POL for this year?	-16		
a	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation ▶ \$			
_	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
e	foundation managers > \$			
•	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			
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		Х
A a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	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			i
	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	X	
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	Χ	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	IL,			
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 <sup>2</sup> If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			1
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"			
	complete Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			1
_	names and addresses . A.T.C.H. 4	10	X	

Pai	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	İ	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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ▶ N/A			
14	The books are in care of ► NICK CALAMOS Telephone no ► 630-335	-735	7	
	The books are in care of b NICK CALAMOS Telephone no b 630-335 Located at b501 W. STATE STREET, SUITE 206 GENEVA, IL ZIP+4 b 60134			
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			
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		_X_
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-221) If			
	"Yes," enter the name of the foreign country >			
Pai	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No" if the		ŀ	
	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 Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			Х
•	were not corrected before the first day of the tax year beginning in 2014?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
_	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?			
	If IIVes II list the views			
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
~	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement - see instructions )	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b>&gt;</b>			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2014 )	3b		
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		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?	4b		X
	Fo	m <b>99</b>	0-PF	(2014)

(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				

Form 990-PF (2014)

Form 990-PF (2014) Page 7 Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Compensation NONE Total number of others receiving over \$50,000 for professional services . . . . . . . . . . . . . . Part IX-A **Summary of Direct Charitable Activities** List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc. Expenses Summary of Program-Related Investments (see instructions) Amount Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 1 NONE All other program-related investments. See instructions 3 NONE

Form 990-PF(2014)

Total. Add lines 1 through 3

Form 990-PF (2014) Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., 1a 3,839,855. 1b 1,109,486. c Fair market value of all other assets (see instructions) 1c 4,949,341. Reduction claimed for blockage or other factors reported on lines 1a and 2 Subtract line 2 from line 1d 3 4,949,341. Cash deemed held for charitable activities. Enter 1, 1/2 % of line 3 (for greater amount, see instructions) 74,240. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4. 4,875,101. 243,755. Part XI Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private operating foundations and certain foreign organizations check here ▶ | | and do not complete this part ) 243,755. Minimum investment return from Part X, line 6 . . . . . . . . . . . . . . . 2a Tax on investment income for 2014 from Part VI, line 5 . . . . . . . 2a Income tax for 2014 (This does not include the tax from Part VI). . 2b 484 243,271. Distributable amount before adjustments Subtract line 2c from line 1 . . . . . . . . . . 3 243,271. 6 Deduction from distributable amount (see instructions). Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 243,271. Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc - total from Part I, column (d), line 26 296,667. 1a Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., 2 purposes Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 296,667. 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 Adjusted qualifying distributions. Subtract line 5 from line 4 6 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2014)

Form 990-PF (2014)

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Pa	rt XIII Undistributed Income (see instru	ictions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2014 from Part XI,	Corpus	Years prior to 2013	2013	2014
	line 7				243,271.
2	Undistributed income, if any, as of the end of 2014				
а	Enter amount for 2013 only			<del></del>	
b	Total for pnor years 20_12_,20_11_,20_10_				
3	Excess distributions carryover, if any, to 2014				
а	From 2009				
	From 2010				
C	From 2011				
	From 2012				
	From 2013	_			
	Total of lines 3a through e	0			
4	Qualifying distributions for 2014 from Part XII,				
	line 4 ▶ \$296,667.				
а	Applied to 2013, but not more than line 2a			·	
b	Applied to undistributed income of prior years				
	(Election required - see instructions)				
C	Treated as distributions out of corpus (Election				
	required - see instructions)				243,271.
	Applied to 2014 distributable amount	53,396.			243,2/1.
е 5	Remaining amount distributed out of corpus  Excess distributions carryover applied to 2014	33,370.			
J	(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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	53,396.			
	Prior years' undistributed income Subtract				
	line 4b from line 2b				
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable				
	amount - see instructions				
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				
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)				
	Excess distributions carryover from 2009 not				
8	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2015.				
•	Subtract lines 7 and 8 from line 6a	53,396.			
10					1
	Excess from 2010				
b					
С	Excess from 2012				
	Excess from 2013				
	Excess from 2014 53,396.				L

Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets Part XV at any time during the year - see instructions.)

Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

NICK AND KIMBERLY CALAMOS

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

Form 990-PF (2014)

2d from line 2c

alternative test relied upon a "Assets" alternative test - enter (1) Value of all assets .

> under section 4942(j)(3)(B)(i)....

or royalties) . . . .

exempt organizations

Part XIV

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ▶ X | if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

JSA 4E1490 1 000

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Page 11

<b>Grants and Contributions Paid Du</b>	ring the Year or App	roved for Fu	ture Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	
Paid during the year				
rch 7				
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		1		
			<b>,</b>	
		1	1	
		1		
		1		
		1		
Total	<u> </u>	<u> </u>	▶ 3a	296,6
Approved for future payment				
		1		
		1		
		1 1		
		1		
		1		
		1		
		1		
	:			

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Form 990-PF (2014)

Pao	e	1	

nter gross amount		cing Activ	/ities			
	ts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
Program service	revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a						(OGO MONGONO)
f						
_	tracts from government agencies					
Membership due	es and assessments					
	s and temporary cash investments			1		
	nterest from securities			14	31,876.	100
a Debt-finance	ed property					
	anced property					
	or (loss) from personal property					
Other investmen	nt income					
Gain or (loss) from	n sales of assets other than inventory					
Net income or (	loss) from special events					
Gross profit or (	loss) from sales of inventory					
Other revenue	a					
	<del> </del>					
				+		
e	olumns (b), (d), and (e)				31,876.	
e worksheet in I	12, columns (b), (d), and (e) ine 13 instructions to verify calc	ulations)				31,87
art XVI-B R	Relationship of Activities	to the Ac	complishment of Ex	empt Purp	oses	
l l	ain below how each activit				· •	•
	omplishment of the foundation				· •	
					· •	
					· •	
					· •	
					· •	
- API					· •	
_ ~ ~ P.					· •	•
_ ~ ~ P.					· •	
EAP!					· •	•
EAP!					· •	•
EAP!					· •	•
					· •	
- API					· •	

Form 99	10-PF (20			LY FOUNDA				47-2618			ge <b>13</b>
Part 1	XVII	Information R Exempt Organ		ansfers To	and Transact	tions and	d Relations	ships With Non	charit	able	<del></del> -
1 D	od the	organization direct	lly or indirectly	engage in an	y of the following	ig with an	y other organ	nization described		Yes	No
ır	n secti	on 501(c) of the Co									
		ations? ers from the reportin	a foundation to	a noncharita	blo ovomat oraș	nization of					
			-						12(4)		X
		h							1 1		X
		er assets							1a(2)		
		ransactions	anderstable eve						45.40		Х
		es of assets to a no									X
		chases of assets fro							1b(2)		X
		ntal of facilities, equi							-		X
		mbursement arrang									X
		ns or loan guarantee formance of service									X
		of facilities, equipr									X
		answer to any of th									
		of the goods, other			•		, ,	•			
		n any transaction of									
(a) Line		(b) Amount involved	T	noncharitable exe				ers, transactions, and sha			
(a) Luie	3110	N/A	(c) Name of	HOHOHAHABIC CXC	inprorganization	N/A	CIPTION OF TRUITOR	ora, deribections, erre sine	ing ana	igenie	110
	-+	11/21				11/21					
	-							·			
	-									-	
			<del> </del>	<del></del>							
			<del> </del>								
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			<del>                                     </del>								
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	-					<u> </u>				-	
						1					
	_		1			<del>                                     </del>				-	
						<del> </del>					
-	-+		-			<del> </del>					
d	lescrib	foundation directly led in section 501(c) " complete the follo	of the Code (owing schedule	other than sec	tion 501(c)(3)) o		n 527?			s X	] No
		(a) Name of organizatio	n	(b) T	ype of organization	1	(	c) Description of relations	snip		
				_	-						
	Under	penalties of perjury I decl	are that have exam	lined this return, in	duding accompanying	schedules and	statements, and to	the best of my knowledge	e and be	elief, it	is true
	correct	and Complete Degraration	preparer (other than	taxpayer) is based or	all information of which	preparer has a	any knowledge		,	•	
Sign Here	Sign	ature of officer or trustee	fle	Date	16/2016	TRUS!	ree		discuss eparer s		retum below No
	Jigii	and the second second		Date				(see mandenon	-/- [	, <u>.</u>	
Do:-1	•	Print/Type preparer's na	ame	Preparer's s	signature		Date	Check if	РПИ		
Paid		PHILIP C CZAJ		1009	glun'h		08/15/2	<del></del>	P001		.5
Prepa		Firm's name ► BF		//				Firm's EIN ► 44-0	16026	0	
Use (	Unly	Firm's address > 19	901 S. MEYE	RS ROAD,	SUITE 500						

630.282.9500 Form **990-PF** (2014)

OAKBROOK TERRACE, IL

60181-5209 Phone no

## Schedule B

(Form 990, 990-EZ,

## **Schedule of Contributors**

OMB No 1545-0047

or 990-PF)

Department of the Treasury
Internal Revenue Service

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

Name of the organization		•	Employer identification number
NKC FAMILY FOUNDATION			47 2610074
Organization type (check one)			47-2618874
Filers of:	Section:		
Form 990 or 990-EZ	501(c)( ) (enter number) orga	anization	
	4947(a)(1) nonexempt charitable	trust not treated as a private fou	ndation
	527 political organization		
Form 990-PF	X 501(c)(3) exempt private foundation	on	
	4947(a)(1) nonexempt charitable	trust treated as a private foundat	cion
	501(c)(3) taxable private foundation	on	
	red by the <b>General Rule</b> or a <b>Special Ru</b> ), or (10) organization can check boxes		Special Rule See
General Rule			
_	g Form 990, 990-EZ, or 990-PF that re operty) from any one contributor. Com butions		<del>-</del>
Special Rules			
regulations under sect 13, 16a, or 16b, and th \$5,000 or (2) 2% of th  For an organization de contributor, during the	cribed in section 501(c)(3) filing Form (sins 509(a)(1) and 170(b)(1)(A)(vi), that at received from any one contributor, disamount on (i) Form 990, Part VIII, line cribed in section 501(c)(7), (8), or (10) year, total contributions of more than \$	checked Schedule A (Form 990 uring the year, total contributions 1h, or (II) Form 990-EZ, line 1 Confiling Form 990 or 990-EZ that religious, children 1,000 exclusively for religious, children 1,000	or 990-EZ), Part II, line of the greater of (1) omplete Parts I and II eceived from any one aritable, scientific,
literary, or educational	ourposes, or the prevention of cruelty to	children or animals. Complete P	arts I, II, and III
contributor, during the contributions totaled medium during the year for an General Rule applies t	cribed in section 501(c)(7), (8), or (10) ear, contributions exclusively for religioner than \$1,000. If this box is checked, aclusively religious, charitable, etc., purply this organization because it received and during the year.	us, charitable, etc., purposes, buenter here the total contributions cose. Do not complete any of the conexclusively religious, charitable	it no such that were received parts unless the , etc , contributions
Caution. An organization that is 990-EZ, or 990-PF), but it must a	ot covered by the General Rule and/or nswer "No" on Part IV, line 2, of its Forr rtify that it does not meet the filing requ	the Special Rules does not file S m 990, or check the box on line h	chedule B (Form 990, I of its Form 990-EZ or on its
For Paperwork Reduction Act Notice, s	the Instructions for Form 990, 990-EZ, or 990-Pl	Schedule	B (Form 990, 990-EZ, or 990-PF) (2014)

Name of organization NKC FAMILY FOUNDATION

Employer identification number 47-2618874

Part I	Contributors (see instructions) Use duplicate copies of	of Part I if additional space is nee	ded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1 _	NICK AND KIMBERLY CALAMOS 501 W. STATE STREET, SUITE 206	<b>s</b> 5,000,000.	Person X Payroll Noncash
	GENEVA, IL 60134		(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		   \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZiP + 4	(c)  Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		   \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		   \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		   \$	Person Payroll Noncash (Complete Part II for noncash contributions)

JSA

Name of organization NKC FAMILY FOUNDATION

Employer identification number 47-2618874

	Name - In Description	a) I lea duplicate copies of Dort II if additional appears to pand of	
2an II	Noncash Property (See Instruction)	s) Use duplicate copies of Part II if additional space is needed	

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
		Sahadula B (Farm (	000 000 EZ 000 DE\ /2014

Employer identification number

47-2618874

	following line entry For organizations contributions of \$1,000 or less for th Use duplicate copies of Part III if addit	s completing Part III, e year (Enter this ir	enter the total of enformation once S	exclusively religious, charitable, etc ,
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
Paili				
		(e) Transi	er of gift	
	Transferee's name, address, ai			nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transí	er of gift	
	Transferee's name, address, at	nd ZIP + 4	Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transi	er of gift	
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held
		(e) Transi	er of gift	
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee
	·			

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10)

ATTACHMENT 1

## ATTACHMENT 1

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

	NET	INVESTMENT	INCOME	31,876.	31,876.
REVENUE	AND	EXPENSES	PER BOOKS	31,876.	31,876.
					TOTAL
			DESCRIPTION	DIVIDENDS AND INTEREST	

47-2618874

ATTACHMENT 2

# FORM 990PF, PART I - OTHER PROFESSIONAL FEES

	NET	INVESTMENT	Ī	562. 7,662
REVENUE	AND	EXPENSES	PER BOOKS	7,662.
			DESCRIPTION	INVESTMENT ADVISORY FEES

TOTALS

7,662.	7,662.
7,662.	7,662.
INVESTMENT INCOME	EXPENSES PER BOOKS

NKC FAMILY FOUNDATION

47-2618874

ATTACHMENT 3

FORM 990PF, PART II - OTHER LIABILITIES

DESCRIPTION

ENDING BOOK VALUE

OUTSTANDING GRANT CHECKS

27,000.

TOTALS

27,000.

ATTACHMENT

## - NEW SUBSTANTIAL CONTRIBUTORS LINE 10 PART VII-A, FORM 990PF,

## NAME AND ADDRESS

NICK AND KIMBERLY CALAMOS 501 W. STATE STREET, SUITE 206 GENEVA, IL 60134

## ATTACHMENT 5

## FORM 990PF, PART VII-B, LINE 5C-EXPENDITURE RESPONSIBILITY STATEMENT

GRANTEE'S NAME: WOOD FAMILY FOUNDATION GRANTEE'S ADDRESS: 121 W. WACKER DRIVE CITY, STATE & ZIP: CHICAGO, IL 60601

GRANT DATE: 07/10/2015

GRANT AMOUNT: 10,000.

GRANT PURPOSE: FIRST ANNUAL STORYBOOK GALA

AMOUNT EXPENDED: 10,000.

ANY DIVERSION? NO

DATES OF REPORTS: VARIOUS

VERIFICATION DATE:

RESULTS OF VERIFICATION:

VARIOUS VERIFICATION DATES - GRANT SPENT IN ACCORDANCE OF INTENDED

**PURPOSE** 

EXPENSE ACCT

CONTRIBUTIONS

ATTACHMENT

ALLOWANCES AND OTHER

BENEFIT PLANS TO EMPLOYEE

COMPENSATION

TITLE AND AVERAGE HOURS PER

WEEK DEVOTED TO POSITION

NAME AND ADDRESS

- LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

0

0

0

0

501 W. STATE STREET, SUITE 206 GENEVA, IL 60134

KIMBERLY CALAMOS

501 W. STATE STREET, SUITE 206

NICK CALAMOS

GENEVA, IL 60134

FORM 990PF, PART VIII

0 0 GRAND TOTALS 1.00 1.00 TRUSTEE TRUSTEE

ATTACHMENT 7

1159347

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

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
NATIONAL HELLENIC MUSEUM 333 S HALSTED ST CHICAGO, IL 60661	NONE PC	UNRESTRICTED	166,667
NORTHERN ILLINOIS UNIVERSITY FOUNDATION ALTGELD HALL 134 DEKALB, IL 60115-2882	NONE PC	UNRESTRICTED	35,000
GREENHOUSE MOVEMENT 171 N CUYLER AVE OAK PARK, IL 60302	NONE PC	UNRESTRICTED	15,000
AURORA CHRISTIAN SCHOOL 2255 SULLIVAN ROAD AURORA, IL 60506	NONE PC	UNRESTRICTED	41,000
WOOD FAMILY FOUNDATION 121 W WACKER DRIVE CHICAGO, 11, 60601	NONE PF	FIRST ANNUAL STORYBOOK GALA	10,000
COMPASSION FOUNDATION P O BOX 270 AURORA, IL 60507-0270	NONE PC	UNRESTRICTED	2,000

FOUNDATION	
FAMILY	
NKC	

47-2618874

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

ATTACHMENT 7 (CONT'D)		AIBUTION AMOUNT	3,000	10,000	10,000		2,000
		PURPOSE OF GRANT OR CONTRIBUTION	UNRESTRICTED	UNRESTRICTED	UNRESTRICTED		UNRESTRICTED
	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND	FOUNDATION STATUS OF RECIPIENT	NONE PC	NONE PC	NONE	PC	NONE PC
		RECIPIENT NAME AND ADDRESS	CASA KANE COUNTY 100 S 3RD STREET SUITE 460	GENEVA, IL 60134-2767 IMMUNE DEFICIENCY FOUNDATION 110 WEST ROAD	SUITE 300 TOWSON, MD 21204 WEST SHORE FOOD BANK	P O BOX 630 LAKESIDE, MT 59922-0630	LOAVES AND FISHES 1871 HIGH GROVE LANE NAPERVILLE, IL 60540

296, 667 TOTAL CONTRIBUTIONS PAID

ATTACHMENT 7

V 14-7 16