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# EXTENDED TO NOVEMBER 15, 2016 Return of Private Foundation

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

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For calendar year 2015 or tax year beginning and ending Name of foundation A Employer identification number ROBERT AND MAYARI PRITZKER FAMILY FNDN 20-3829597 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number 1 N. FRANKLIN 2420 312-980-1102 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here CHICAGO, IL 60606 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: | X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 5,424,824. ▶\$ (Part I, column (d) must be on cash basis Part I Analysis of Revenue and Expenses (a) Revenue and expenses per books (d) Disbursements (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) charitable purposes (cash basis only) income ıncome 24,038. Contributions, gifts, grants, etc., received N/A Check If the foundation is not required to attach Sch. B. 4.41 interest on savings and temporary cash investments  $8,\overline{479}$ 8,479. STATEMENT 117,901.4 Dividends and interest from securities 117,901. STATEMENT 5a Gross rents 2 1 b Net rental income or (loss) 38,894. 2 6a Net gain or (loss) from sale of assets not on line 10 **9** b Gross sales price for all assets on line 6a 2,831,664. Y. 30/ B 7 Capital gain net income (from Part IV, line 2) 38,894. 1. % M. Di. 8 Net short-term capital gain 9 Income modifications 8 10a Gross sales less returns and allowances ã 3.4 b Less Cost of goods sold E. B. s. c Gross profit or (loss) <del>-76</del>. 11 Other income -76. STATEMENT 3 189,236. Total. Add lines 1 through 11 165,198. Compensation of officers, directors, trustees, etc. 0. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees STMT 4 10,650. 10,650. **b** Accounting fees 0. STMT 5 54,190. 54,190. c Other professional fees 0. 17 Interest STMT 6 15,096. 18 Taxes 15,096 0. 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses Total operating and administrative 16 expenses Add lines 13 through 23 79,936. 79,936 25 Contributions, gifts, grants paid, 809,200809,200. 26 Total expenses and disbursements Add lines 24 and 25 889,136. 79<u>,</u>936 809,200. Subtract line 26 from line 12: -699,900. & Excess of revenue over expenses and disbursements ,262 b Net investment income (if negative, enter -0-) 1/8/1/2 c Adjusted net income (if negative, enter -0-) N/A 523501 11-24-15 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2015)

| For   | 3829597 Page 2 |  |                       |                    |  |  |  |
|---|----------------|--|-----------------------|--------------------|--|--|--|
| P   | art            | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year     |                    | of year                                |  |  |
|   |                | Colonia should be for and on year amounts only   | (a) Book Value        | (b) Book Value     | (c) Fair Market Value                  |  |  |
|   | 1              | Cash - non-interest-bearing  | 540,006.              | 314,175.           | 314,175.                               |  |  |
|   | 1              | Savings and temporary cash investments   |                       |                    | N                                      |  |  |
|   | 3              | Accounts receivable  |                       |                    |  |  |  |
|   | ١.             | Less: allowance for doubtful accounts  |                       | \$4 #3 × × ×       | ***                                    |  |  |
|   | 4              | Pledges receivable -   |                       |                    |  |  |  |
|   | ١.             | Less: allowance for doubtful accounts  | <del></del>           | <del></del>        | <del>-</del>                           |  |  |
|   | 1              | Grants receivable  | <del></del>           | <del></del>        | <u>-</u>                               |  |  |
|   | 6              | Receivables due from officers, directors, trustees, and other  |                       |                    |  |  |  |
|   | ļ _            | disqualified persons   | . '. \$00 4 8 7 8 8 9 | A46 34 5.7. "1 .2. | 3.7866                                 |  |  |
|   | 7              | Other notes and loans receivable   |                       |                    |  |  |  |
|   | ١.             | Less: allowance for doubtful accounts  | <del></del>           |                    |  |  |  |
| Assets  | 8              | Inventories for sale or use  | <del></del>           | <del></del>        | <del></del>                            |  |  |
| SS  | 9              | Prepaid expenses and deferred charges  | <del></del>           | <del></del>        | <del></del>                            |  |  |
| ~   | ۳.۰۰           | Investments - U.S. and state government obligations  | F F42 F12             | F 000 440          | F 110 C40                              |  |  |
|   | l              | Investments - corporate stock STMT 7   | 5,543,512.            | 5,069,442.         | 5,110,649.                             |  |  |
|   | 1              | Investments - corporate bonds  | 36 386 3.30           | 200 . 200 . 20     | * ************************************ |  |  |
|   | 11             | Investments - land, buildings, and equipment basis   |                       |                    |  |  |  |
|   |                | Less accumulated depreciation  |                       |                    |  |  |  |
|   | ı              | Investments - mortgage loans   |                       |                    |  |  |  |
|   | 13             | Investments - other  | 7,% % %               | <b>∜</b> >> 3 %    |  |  |  |
|   | 14             | Land, buildings, and equipment basis   |                       |                    |  |  |  |
|   | _ ا            | Less accumulated depreciation  | <del></del>           | _ <del></del>      | <del></del>                            |  |  |
|   |                | Other assets (describe   | <u> </u>              | <del></del>        | <del></del>                            |  |  |
|   | 16             | Total assets (to be completed by all filers - see the  | 6 002 510             | E 202 (17          | E 424 024                              |  |  |
|   | -              | instructions. Also, see page 1, item I)  | 6,083,518.            | 5,383,617.         | 5,424,824.                             |  |  |
|   |                | Accounts payable and accrued expenses  | <del></del> -         |                    |  |  |  |
|   | 18             | Grants payable   | <u> </u>              |                    |  |  |  |
| es  | 19             | Deferred revenue   | <del></del>           |                    |  |  |  |
| Liabilities   | 20             | Loans from officers, directors, trustees, and other disqualified persons                                       | <u> </u>              |                    |  |  |  |
| <u> </u>  | 21             | Mortgages and other notes payable  |                       | <del>.</del>       |  |  |  |
| _   | 22             | Other liabilities (describe )  | <del></del>           |                    |  |  |  |
|   | 22             | Total liabilities (add lines 17 through 22)  | 0.                    | 0.                 |  |  |  |
|   | 23             | Foundations that follow SFAS 117, check here   |                       | <u>-</u>           |  |  |  |
|   |                | and complete lines 24 through 26 and lines 30 and 31.  |                       |                    |  |  |  |
| ģ   | 24             | Unrestricted   | <b>i</b>              | !                  |  |  |  |
| ĕ   | 25             | Temporarily restricted   |                       | <del></del>        |  |  |  |
| or Fund Balances  |                | Permanently restricted   |                       |                    |  |  |  |
| 9   | -"             | Foundations that do not follow SFAS 117, check here  | <u> </u>              |                    |  |  |  |
| 풀   |                | and complete lines 27 through 31.  |                       |                    |  |  |  |
| ŏ   | 27             | Capital stock, trust principal, or current funds   |                       | 0.                 |  |  |  |
| Net Assets  | 28             | Paid-in or capital surplus, or land, bldg., and equipment fund   | 0.                    | 0.                 |  |  |  |
| ASS   | 29             | Retained earnings, accumulated income, endowment, or other funds   | 6,083,518.            | 5,383,617.         |  |  |  |
| et/   | ı              | Total net assets or fund balances  | 6,083,518.            | 5,383,617.         |  |  |  |
| Z   | ••             |  |                       |                    |  |  |  |
|   | 31             | Total liabilities and net assets/fund balances   | 6,083,518.            | 5,383,617.         |  |  |  |
| Partilli Analysis of Changes in Net Assets or Fund Balances |                |  |                       |                    |  |  |  |
| [P  | art!           | III Analysis of Changes III Net Assets of Fund Ba  |                       |                    |  |  |  |
| 1   | Total          | net assets or fund balances at beginning of year - Part II, column (a), line                                   | 30                    |                    |  |  |  |
|   | (mus           | at agree with end-of-year figure reported on prior year's return)  |                       | 1                  | 6,083,518.                             |  |  |
| 2   | Enter          | amount from Part I, line 27a   | 2                     | -699,900.          |  |  |  |
| 3   | Othe           | r increases not included in line 2 (itemize)   |                       | 3                  | 0.                                     |  |  |
| 4   | Add            | lines 1, 2, and 3  |                       | 4                  | 5,383,618.                             |  |  |
|   |                | eases not included in line 2 (itemize)   | 5                     | 0.                 |  |  |  |
| <u>6</u>  | Total          | net assets or fund balances at end of year (line 4 minus line 5) - Part II, c                                  | olumn (b), line 30    | 6                  | 5,383,618.                             |  |  |
|   |                |  | <del></del>           |                    | Form <b>990-PF</b> (2015)              |  |  |

|   | RT AND MAYARI P. nd Losses for Tax on In              |                |                      | _            |                                       |            | 20-382                                 |   | Page 3      |
|---|---|----------------|----------------------|--------------|---------------------------------------|------------|--|---|-------------|
|   | be the kind(s) of property sold (e.g                  |                | IIICOIIIE            |              | B ATTAC<br>How acquired<br>- Purchase |            | STATEM  Date acquired                  | ≤N'T'<br>(d) Date so                              | ıld         |
|   | ehouse; or common stock, 200 shs                      |                |                      | D<br>P       | - Purchase<br>- Donation              |            | o., day, yr.)                          | (mo., day, y                                      |             |
| 1a  |   |                |                      |              |                                       |            | _                                      |   |             |
| <u>b</u>  |   |                |                      |              |                                       |            |  |   |             |
| <u>c</u>  | <del></del>   |                |                      |              |                                       |            |  |   |             |
| <u>d</u>  |   |                |                      | -            |                                       | -          |  | •   |             |
| <u>e</u>  | (f) Depreciation allowed                              | (a) Co         | st or other basis    | <u> </u>     | <del></del>                           |            | h) Gain or (loss                       | \   |             |
| (e) Gross sales price   | (or allowable)  | 10,            | expense of sale      | l            |                                       |            | plus (f) minus                         |   |             |
| a .   |   |                |                      |              |                                       |            | _                                      |   |             |
| b   |   |                |                      |              | _                                     |            |  |   |             |
| _c  |   |                |                      |              |                                       |            |  |   |             |
| d 0.031 664   |   |                |                      |              |                                       |            |  |   |             |
| e 2,831,664.  | gara in column (b) and award by                       |                | 2,792,77             | 0.           |                                       |            |  | 38,8  | 94.         |
| Complete only for assets showing  | gain in column (h) and owned by t                     |                |                      |              | c                                     | (I) Gair   | is (Col. (h) gain<br>but not less thai | minus<br>1 -0-) or                                |             |
| (i) F.M.V. as of 12/31/69   | (j) Adjusted basis<br>as of 12/31/69                  |                | cess of col. (i)     |              |                                       |            | ses (from col. (                       |   |             |
| a   |   |                |                      |              |                                       |            |  |   |             |
| b   |   |                |                      |              |                                       |            |  |   |             |
| <u>c</u>  |   | <u> </u>       | <u> </u>             | _            |                                       | _          |  |   |             |
| <u>d</u>  |   |                |                      | _            |                                       |            |  | 20.0  |             |
| е   |   | <u>.</u>       | <u></u>              | ↲            | <del></del>                           |            |  | 38,8  | 94.         |
| 2 Capital gain net income or (net cap   | If gain, also enter<br>ital loss) If (loss), enter -0 |                |                      |              | 2                                     |            |  | 38,8  | 94.         |
| 3 Net short-term capital gain or (loss  |   | •              |                      |              |                                       |            |  | <u> </u>  |             |
| If gain, also enter in Part I, line 8, c  |   | iu (0).        |                      | ] [          |                                       |            |  |   |             |
| If (loss), enter -0- in Part I, line 8  |   |                |                      |              | 3                                     |            | N/A                                    |   |             |
| *   | der Section 4940(e) for                               |                |                      |              |                                       | ome        |  |   |             |
| (For optional use by domestic private f   | oundations subject to the section 4                   | 1940(a) tax on | net investment inc   | come.        | )                                     |            |  |   |             |
| If section 4940(d)(2) applies, leave this                                       | s part blank.   |                |                      |              |                                       |            |  |   |             |
| Was the foundation liable for the section                                       | an 4040 tay on the distributable am                   | ount of one    | the been new         | ~ 40         |                                       |            |  | Yes X   | ٦           |
| If "Yes," the foundation does not qualify                                       |   | , , ,          |                      | our          |                                       |            |  | res   | 7 140       |
| Enter the appropriate amount in ea  |   |                |                      | tries.       |                                       |            | _                                      |   |             |
| (a) Base period years   | (b)   |                |                      | (c)          |                                       |            | Diotrib                                | (d)<br>ution ratio                                |             |
| Calendar year (or tax year beginning  |   | tributions     | Net value of nor     | nchar        | ıtable-use asset                      | ts         | (col. (b) div                          | ided by col. (c))                                 |             |
| 2014  |   | 3,425.         |                      |              | ,071,63                               |            |  | .127  | <u>753</u>  |
| 2013  | 70  | 2,680.         |                      |              | ,380,84                               |            |  | .160  |             |
| 2012  |   | 4,354.         |                      |              | ,284,45                               |            |  | .211  |             |
| 2011  |   | 9,750.         |                      |              | ,210,96                               |            |  | .046  |             |
| 2010  |   | 4,000.         |                      | 2            | ,441,66                               | 4.         | · -                                    | .079  | <u>454</u>  |
| C. Tatal of line 4. columns (d)   |   |                |                      |              |                                       |            |  | 625   | <i>C</i>    |
| 2 Total of line 1, column (d) 2 Average distribution ratio for the 5            | waar baga pariad - duuda tha total e                  | n line O by E  | or her the promber   | ~ <b>6</b> ~ |                                       | <u> </u> - | 2                                      | .625  | <u>548</u>  |
| 3 Average distribution ratio for the 5-<br>the foundation has been in existence |   | m ime ∠ by b,  | or by the number (   | or yea       | ırs                                   |            | ,                                      | .125  | 130         |
| the foundation has been in existence  | e ii less tilali 3 years                              |                |                      |              |                                       | <u> </u>   | 3                                      | • 123   | 130         |
| 4 Enter the net value of noncharitable  | -use assets for 2015 from Part X. I                   | ine 5          |                      |              |                                       |            | 4                                      | 6,031,2   | 98.         |
|   |   |                |                      |              |                                       |            |  | <del>, , , , , , , , , , , , , , , , , , , </del> |             |
| 5 Multiply line 4 by line 3   |   |                |                      |              |                                       |            | 5                                      | 754,6   | 96.         |
|   |   |                |                      |              |                                       |            |  |   |             |
| 6 Enter 1% of net investment income   | (1% of Part I, line 27b)                              |                |                      |              |                                       |            | 6                                      | 8!  | <u>53.</u>  |
|   |   |                |                      |              |                                       |            |  | <u>-</u>  |             |
| 7 Add lines 5 and 6   |   |                |                      |              |                                       | <u> </u>   | 7                                      | 755,54  | <u> 49.</u> |
|   |   |                |                      |              |                                       |            |  | 000 0   |             |
| 8 Enter qualifying distributions from F   | •   |                |                      |              |                                       | L          | 8                                      | 809,2   | <u> </u>    |
| If line 8 is equal to or greater than li<br>See the Part VI instructions.       | ine 7, check the box in Part VI, line                 | 1b, and comp   | lete that part using | j a 1%       | 6 tax rate.                           |            |  |   |             |
| 523521 11-24-15   | <del></del>   |                |                      |              | <del></del>                           |            |  | orm <b>990-PF</b>                                 | (2015)      |
| 0=004     -67-10  |   |                |                      |              |                                       |            | Г                                      | OLIN 200-1 1                                      | (2010)      |

|    | 990-PF (2015) ROBERT AND MAYARI PRITZKER FAMILY FNDN 20-38 rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - sec  | 29597 Page 4 instructions) |
|----|---|----------------------------|
|    | 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)                                  | 853.                       |
| b  | Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%  | 003.                       |
| _  | of Part I, line 27b   |                            |
|    | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).  Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | 0.                         |
|    | Add lines 1 and 2   | 853.                       |
|    | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)   | 0.                         |
|    | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-   | 853.                       |
|    |   | N 3 39 3 7825 . W.         |
|    | Credits/Payments: 2015 estimated tax payments and 2014 overpayment credited to 2015  6a 6,516.  |                            |
|    | Exempt foreign organizations - tax withheld at source   |                            |
|    | Tax paid with application for extension of time to file (Form 8868)  6c   |                            |
| d  | Backup withholding erroneously withheld   | <u>11272</u>               |
| 7  | Total credits and payments. Add lines 6a through 6d   | 6,516.                     |
| 8  | Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached  |                            |
| 9  | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed   |                            |
|    | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid   | 5,663.                     |
|    | Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ 5,663. Refunded ▶ 11  | 0.                         |
|    |   | Yes No                     |
| ıa | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?  | 1a X                       |
| h  | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?  | 1b X                       |
| •  | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or  | 3 10 3 %                   |
|    | distributed by the foundation in connection with the activities   |                            |
| C  | Did the foundation file Form 1120-POL for this year?  | 1c X                       |
| d  | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  |                            |
|    | (1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0.  |                            |
| е  | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation   |                            |
|    | managers. ► \$0.  | i si "i "i V               |
| 2  | Has the foundation engaged in any activities that have not previously been reported to the IRS?   | 2 X                        |
|    | If "Yes," attach a detailed description of the activities   |                            |
| 3  | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes          | 3 X                        |
| Дa | Did the foundation have unrelated business gross income of \$1,000 or more during the year?   | 4a X                       |
|    | If "Yes," has it filed a tax return on Form 990-T for this year?  | 4b X                       |
|    | Was there a liquidation, termination, dissolution, or substantial contraction during the year?  | 5 X                        |
|    | If "Yes," attach the statement required by General Instruction T  |                            |
| 6  | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:   |                            |
|    | 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 X                        |
|    |   |                            |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions)  |                            |
| ı  | II.  If the appropriate line 7, has the foundation furnished a convert Form 000 PE to the Attornory Conord (or designate)   |                            |
| 0  | 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 X                       |
| ۵  | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar   |                            |
| 9  | year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV  | 9 X                        |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," ettach a schedule listing their names and addresses  | 10 X                       |
|    |   | Form <b>990-PF</b> (2015)  |

| orm | 990-PF (2015) ROBERT AND MAYARI PRITZKER FAMILY FNDN 20-3829  | <u>597</u> |                                       | Page 5     |
|-----|---|------------|---------------------------------------|------------|
| Pa  | rt VII-A` Statements Regarding Activities (continued)   |            |                                       |            |
|     |   |            | Yes                                   | No         |
| 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         |                                       | <b>X</b> _ |
| 12  | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?  |            |                                       |            |
|     | If "Yes," attach statement (see instructions)   | 12         |                                       | X          |
| 13  | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?   | 13         | Х                                     |            |
|     | Website address ► N/A   |            |                                       |            |
| 14  | The books are in care of ▶ REBECCA SPOONER Telephone no. ▶ (312)  | 980        | -11                                   | 02         |
|     | Located at ▶1 N FRANKLIN, CHICAGO, IL ZIP+4 ▶60   |            |                                       |            |
| 15  | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here   |            | <b>&gt;</b>                           |            |
|     | and enter the amount of tax-exempt interest received or accrued during the year   | N          | /A                                    |            |
| 16  | At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,  |            | Yes                                   | No         |
| _   | securities, or other financial account in a foreign country?  | 16         |                                       | х          |
|     | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the  | 25.        | - 91                                  |            |
|     | foreign country   |            | 8                                     |            |
| Pa  | rt 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.   | 787        | Yes                                   | No         |
| 12  | During the year did the foundation (either directly or indirectly):   | 23.0       |                                       |            |
|     | (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)   |            |                                       | 13 -       |
|     | a disqualified person?  |            | <b>1</b>                              |            |
|     | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  |            | 327                                   |            |
|     | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  |            | Not a                                 |            |
|     | (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"   |            | ěs.                                   |            |
|     | If the foundation agreed to make a grant to or to employ the official for a period after  |            |                                       |            |
|     | termination of government service, if terminating within 90 days.)  Yes X No  | <b>[</b> . |                                       |            |
| h   | If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations   | 3          |                                       |            |
| O   | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  N/A  | 1b         |                                       | ( 3 € 2    |
|     | Organizations relying on a current notice regarding disaster assistance check here  | ''         | * . *                                 | S N        |
| ^   | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected   | <b>(</b>   |                                       |            |
| G   | before the first day of the tax year beginning in 2015?   | ,          |                                       | X          |
| 9   | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation  | 1c         | 200                                   | <u> </u>   |
| 2   |   | ls l       |                                       | 1          |
| _   | defined in section 4942(j)(3) or 4942(j)(5)): At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning  |            |                                       | - 4        |
| 4   | before 2015?  |            |                                       | . 2        |
|     | If "Yes," list the years \( \)  |            | <u>%</u> 3                            | · i        |
| h   | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect  | ¥3         |                                       | - Kin      |
| J   | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach   | 8.         | انق                                   | ,          |
|     | statement - see instructions.)  | 2b         |                                       | 2 - 6003   |
| _   | If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.   | 20         | .] 1 %                                | 161        |
| C   |   | *          | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |            |
| 2-  | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time   | الأخرا     |                                       |            |
| 34  | during the year?  Yes X No  |            | 9                                     |            |
|     | If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after  |            |                                       | الأدا      |
| 0   | 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.  | 3 %        | , ,                                   |            |
|     | 37/3  | 3b         | V. + A                                |            |
| 4.0 | · · · · · · · · · · · · · · · · · · ·   | 4a         |                                       | x          |
|     | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?  Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that | +d         | iline 1                               | <u>^</u>   |
| ø   | had not been removed from jeopardy before the first day of the tax year beginning in 2015?  | 4b         | M                                     | X          |
|     | The first soon control from Joseph dy sociole and more day or the tax year beginning in 2010.   | ערן        |                                       |            |

| Part VII-B   Statements Regarding Activities for Which F  |   |  | 20-30293   | Page 6                     |  |  |  |  |
|---|---|--|--|----------------------------|--|--|--|--|
| 5a During the year did the foundation pay or incur any amount to:   |   | CONTIN                                 | Jed)   | <u> </u>                   |  |  |  |  |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section   | n 4045/a\\2   | [ ] v                                  | s X No   |                            |  |  |  |  |
| (2) Influence the outcome of any specific public election (see section 4955); o   | • • •   |  | is ( <u>11</u> 110   |                            |  |  |  |  |
|   | in to carry on, unecting or mone                                |  | s X No   |                            |  |  |  |  |
| any voter registration drive?   | o.  |  | s X No   |                            |  |  |  |  |
| (3) Provide a grant to an individual for travel, study, or other similar purposes   |   | , T0                                   | 8 22 10  |                            |  |  |  |  |
| (4) Provide a grant to an organization other than a charitable, etc., organization  | n described in Section  | X Ye                                   | s No   |                            |  |  |  |  |
| 4945(d)(4)(A)? (see instructions)   | au advisational avenagas or f                                   |  | :s NO  |                            |  |  |  |  |
| (5) Provide for any purpose other than religious, charitable, scientific, literary,   | or educational purposes, or i                                   |  | es X No  |                            |  |  |  |  |
| the prevention of cruelty to children or animals?   | d 4b a  |  | S A NO   |                            |  |  |  |  |
| b if any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un   |   | n Regulations                          | -  | 5b X                       |  |  |  |  |
| section 53.4945 or in a current notice regarding disaster assistance (see instru  |   |  | _ <b>⊾</b> ┌─┐ }   | 30 A                       |  |  |  |  |
| Organizations relying on a current notice regarding disaster assistance check h   |   |  |  |                            |  |  |  |  |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for   | rom the tax because it maintai                                  |  |  | N (2 SE) 28                |  |  |  |  |
| expenditure responsibility for the grant?   |   | A Ye                                   | es 🔲 No 📗  |                            |  |  |  |  |
| If "Yes," attach the statement required by Regulations section 53 4945  | • •   |  | ľ  |                            |  |  |  |  |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to   | pay premiums on   | ,,                                     | 13   |                            |  |  |  |  |
| a personal benefit contract?  |   | Y                                      | es X No  | 6b X                       |  |  |  |  |
| <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p  | personal benefit contract?                                      |  | 1  | 6b X                       |  |  |  |  |
| If "Yes" to 6b, file Form 8870  |   |  | s X No   |                            |  |  |  |  |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s  |   | Y (                                    | N/A  | 7b                         |  |  |  |  |
| b If "Yes," did the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any proceeds or have any net income attributed in the foundation receive any net in the foundation receive any net income attributed in the foundation receive any net income attributed in the foundation receive any net in the foundation receive any net income attributed in the foundation receive and the foundation receive any net income attributed in the foundation receive and the foundation receive and the foundation receive and receive and receive |   | nagere Highly                          | N/A  |                            |  |  |  |  |
| Paid Employees, and Contractors   | ces, i ouridation ivial   | lagers, riiginy                        |  |                            |  |  |  |  |
| 1 List all officers, directors, trustees, foundation managers and their   | compensation.   |  |  |                            |  |  |  |  |
|   | (b) Title, and average  | (c) Compensation                       | (d) Contributions to<br>employee benefit plans<br>and deferred | (e) Expense account, other |  |  |  |  |
| (a) Name and address  | hours per week devoted to position                              | (If not paid,<br>enter -0-)            | and deferred<br>compensation                                   | account, other allowances  |  |  |  |  |
| MAYARI S. PRITZKER  | DIRECTOR  |  |  |                            |  |  |  |  |
| 1 N. FRANKLIN, SUITE 2420   |   |  |  |                            |  |  |  |  |
| CHICAGO, IL 60606   | 0.20  | 0.                                     | 0.   | 0.                         |  |  |  |  |
| MICHAEL A. LOVALLO  | DIRECTOR  |  |  |                            |  |  |  |  |
| 10 S. WACKER DRIVE, 40TH FLOOR  | 7   |  |  | 1                          |  |  |  |  |
| CHICAGO, IL 60606   | 0.20  | 0.                                     | 0.   | 0.                         |  |  |  |  |
| REBECCA L. SPOONER  | DIRECTOR  |  |  | T                          |  |  |  |  |
| 1 N. FRANKLIN, SUITE 2420   | ]   |  |  | 1                          |  |  |  |  |
| CHICAGO, IL 60606   | 0.75  | 0.                                     | 0.   | 0.                         |  |  |  |  |
|   |   |  |  |                            |  |  |  |  |
|   | }   |  |  | 1                          |  |  |  |  |
|   | <u> </u>  | <u>L</u>                               | L  | <u> </u>                   |  |  |  |  |
| 2 Compensation of five highest-paid employees (other than those inc   |   | enter "NONE."                          | (d) Contabutions to  | (a) Finance                |  |  |  |  |
| (a) Name and address of each employee paid more than \$50,000   | (b) Title, and average<br>hours per week<br>devoted to position | (c) Compensation                       | (d) Contributions to<br>employee benefit plans<br>and deferred | account, culoi             |  |  |  |  |
|   | devoted to position   | ļ.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | compensation   | allowances                 |  |  |  |  |
| NONE  | 4   |  |  |                            |  |  |  |  |
|   |   | <del> </del>                           |  | <del> </del>               |  |  |  |  |
|   | -   |  | ļ  | 1                          |  |  |  |  |
|   |   |  |  |                            |  |  |  |  |
|   |   |  |  |                            |  |  |  |  |
|   |   |  |  |                            |  |  |  |  |
|   | 4   |  | 1  |                            |  |  |  |  |
|   | <del> </del>  | +                                      | <del> </del>   | +                          |  |  |  |  |
|   | -{  |  | ļ  |                            |  |  |  |  |
| Total number of other amployees paid over \$50,000  | <del></del>   | <u> </u>                               | <del>'                                    </del>               |                            |  |  |  |  |

| Form 990-PF (2015) ROBERT AND MAYARI PRITZKER FAMILY  |                                       | <u>-3829597</u>                                  | Page 7    |
|---|---------------------------------------|--|-----------|
| Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)   | Managers, Highly                      |  |           |
| 3 Five highest-paid independent contractors for professional services. If none, enter "NC   | <br>DNE."                             |  |           |
| (a) Name and address of each person paid more than \$50,000   | (b) Type of service                   | (c) Com  | pensation |
| NONE  | (2) 1) pa_ at att att                 |  |           |
|   |                                       |  |           |
|   |                                       | <del></del>                                      |           |
|   |                                       |  |           |
|   | · · · · · · · · · · · · · · · · · · · |  |           |
|   |                                       | j  |           |
|   |                                       |  |           |
|   |                                       |  |           |
|   |                                       |  |           |
|   |                                       |  |           |
| Total number of others receiving over \$50,000 for professional services  |                                       | <b>•</b>   | 0         |
| Part IX-A Summary of Direct Charitable Activities   |                                       |  |           |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produced. |                                       | Expenses   | 3         |
| 1 N/A   |                                       | <del>                                     </del> |           |
| · · · · · · · · · · · · · · · · · ·   |                                       | 7  |           |
|   |                                       | 7  |           |
| 2   |                                       |  |           |
|   |                                       | 7  |           |
|   |                                       | <u> </u>   |           |
| 3   |                                       |  |           |
|   |                                       |  |           |
|   |                                       |  |           |
| 4   |                                       | _  |           |
|   |                                       | _  |           |
| Dort IV P C   |                                       |  |           |
| Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines  | 4 4 0                                 |  |           |
| 7.7   | 1 and 2.                              | Amount   |           |
| 1N/A  |                                       | 4  |           |
|   |                                       | $\dashv$   |           |
| 2   | <del></del>                           | <del> </del>                                     |           |
|   | <del> </del>                          | ┪  |           |
|   |                                       | ┪  |           |
| All other program-related investments. See instructions.  |                                       | <del> </del>                                     |           |
| 3   |                                       |  |           |
|   |                                       |  |           |
|   |                                       | <u> </u>   |           |
| Total. Add lines 1 through 3  | <b>&gt;</b>                           |  | 0.        |

20-3829597 Form 990-PF (2015) 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., purposes: 5,930,491. Average monthly fair market value of securities 1a 182,413. Average of monthly cash balances 1b 10,241. c Fair market value of all other assets 10 6,123,145. d Total (add lines 1a, b, and c) 10 Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 6.123145 Subtract line 2 from line 1d 3 91,847 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 6,031,298. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 301, 565. Part XIII Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here 
and do not complete this part.) 301 565. Minimum investment return from Part X, line 6 853. Tax on investment income for 2015 from Part VI, line 5 ١, Income tax for 2015. (This does not include the tax from Part VI.) 2b 853 Add lines 2a and 2b 2¢ Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 300 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 300 712 Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 809,200. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 b 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., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) За **b** Cash distribution test (attach the required schedule) 3b 809,200. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4

Adjusted qualifying distributions. Subtract line 5 from line 4 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.

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

income. Enter 1% of Part I, line 27b

Form 990-PF (2015)

808.

853.

# Part XIII Undistributed Income (see instructions)

|   | (a)<br>Corpus                         | (b)<br>Years prior to 2014               | (c)<br>2014      | (d)<br>2015                        |
|---|---------------------------------------|--|------------------|------------------------------------|
| 1 Distributable amount for 2015 from Part XI,   |                                       |  |                  | 2010                               |
| line 7  | İ                                     |  |                  | 300,712.                           |
| 2 Undistributed income, if any, as of the end of 2015                                 |                                       |  |                  | *                                  |
| a Enter amount for 2014 only  |                                       |  | 0.               | *                                  |
| <b>b</b> Total for prior years:   |                                       | 0.                                       | ^ "              | . 4 \$ 3 4                         |
| 3 Excess distributions carryover, if any, to 2015:                                    | · 3                                   | €>                                       |                  | ** 3 4 %                           |
| a From 2010 72,067.   |                                       | 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1 | * ,              |                                    |
| <b>b</b> From 2011  |                                       |  | , ,              |                                    |
| © From 2012 531,323.  |                                       |  |                  |                                    |
| d From 2013 501,032.  |                                       |  |                  |                                    |
| e From 2014 555, 207.   |                                       |  |                  |                                    |
| f Total of lines 3a through e   | 1,659,629.                            |  |                  |                                    |
| 4 Qualifying distributions for 2015 from  | - , ,                                 |  |                  |                                    |
| Part XII, line 4: ►\$ 809,200.  |                                       |  |                  |                                    |
| a Applied to 2014, but not more than line 2a  |                                       |  | 0.               |                                    |
| <b>b</b> Applied to undistributed income of prior                                     | W (1)                                 | *  |                  |                                    |
| years (Election required - see instructions)  |                                       | 0.                                       |                  |                                    |
| c Treated as distributions out of corpus  |                                       |  |                  | No. 18.                            |
| (Election required - see instructions)  | 0.1                                   |  |                  |                                    |
| d Applied to 2015 distributable amount  | * * * * * * * * * * * * * * * * * * * |  |                  | 300,712.                           |
| e Remaining amount distributed out of corpus  | 508,488.                              | W 1 12                                   |                  | 300,712.                           |
| 5 Excess distributions carryover applied to 2015                                      | 0.                                    |  |                  | 0.                                 |
| (If an amount appears in column (d), the same amount must be shown in column (a) )    | * **                                  | : <u>4</u> % 17 %                        | N. S. W. S.      |                                    |
| 6 Enter the net total of each column as   |                                       |  |                  |                                    |
| indicated below;  |                                       |  |                  |                                    |
| 8 Corpus Add lines 3f, 4c, and 4e Subtract line 5                                     | 2,168,117.                            |  |                  |                                    |
| b Prior years' undistributed income. Subtract   |                                       |  | m': iii          |                                    |
| line 4b from line 2b  | <u> </u>                              | 0.                                       |                  |                                    |
| c Enter the amount of prior years'  |                                       |  |                  |                                    |
| undistributed income for which a notice of<br>deficiency has been issued, or on which |                                       |  |                  |                                    |
| the section 4942(a) tax has been previously   |                                       |  |                  |                                    |
| assessed  |                                       | 0.                                       |                  |                                    |
| d Subtract line 6c from line 6b. Taxable  |                                       |  |                  |                                    |
| amount - see instructions   |                                       | 0.                                       |                  |                                    |
| e Undistributed income for 2014. Subtract line  |                                       |  |                  |                                    |
| 4a from line 2a. Taxable amount - see instr.  |                                       |  | 0.               |                                    |
| f Undistributed income for 2015. Subtract   |                                       |  | 42 vi i          |                                    |
| lines 4d and 5 from line 1. This amount must  |                                       |  |                  |                                    |
| be distributed in 2016  |                                       |  | 11 7 7 7         | 0.                                 |
| 7 Amounts treated as distributions out of   |                                       |  |                  |                                    |
| corpus to satisfy requirements imposed by   |                                       |  |                  |                                    |
| section 170(b)(1)(F) or 4942(g)(3) (Election  |                                       |  |                  |                                    |
| may be required - see instructions)   | 0.                                    | <u> </u>                                 |                  |                                    |
| 8 Excess distributions carryover from 2010  | 72 067                                |  |                  |                                    |
| not applied on line 5 or line 7   | 72,067.                               |  |                  |                                    |
| 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a         | 2 006 050                             |  |                  |                                    |
| 10 Analysis of line 9:  | 2,096,050.                            |  |                  |                                    |
| a Excess from 2011  |                                       |  |                  |                                    |
| b Excess from 2012 531,323.   |                                       |  |                  |                                    |
| c Excess from 2013 501,032.   |                                       |  |                  |                                    |
| d Excess from 2014 555, 207.  |                                       |  |                  |                                    |
| e Excess from 2015 508, 488.  |                                       |  |                  |                                    |
| 523581 11-24-15   | _11n                                  | <u> </u>                                 | 4. 27 1/2007 400 | Form <b>990-PF</b> (2015)          |
|   |                                       |  |                  | rorm <b>330-PF</b> (20 <b>1</b> 5) |

| Part XIV Private Operating For  | oundations (see in  | structions and Part V       | II-A, question 9)        | N/A                     | J-3029397 Fage 10         |  |  |  |
|---|---|-----------------------------|--------------------------|-------------------------|---------------------------|--|--|--|
| 1 a If-the foundation has received a ruling or  | determination letter tha  | t it is a private operating |                          |                         |                           |  |  |  |
| foundation, and the ruling is effective for   | 2015, enter the date of   | the ruling                  | ▶                        |                         |                           |  |  |  |
| <b>b</b> Check box to indicate whether the found  | ation is a private operati  | ng foundation described     | ın section               | 4942(j)(3) or           | 4942(j)(5)                |  |  |  |
| 2 a Enter the lesser of the adjusted net  | Tax year  | <u> </u>                    | Prior 3 years            |                         |                           |  |  |  |
| income from Part I or the minimum   | (a) 2015  | (b) 2014                    | (c) 2013                 | (d) 2012                | (e) Total                 |  |  |  |
| investment return from Part X for   |   |                             |                          |                         |                           |  |  |  |
| each year listed  | <u></u>   |                             |                          |                         |                           |  |  |  |
| <b>b</b> 85% of line 2a   | <u></u>   | <u></u>                     |                          |                         |                           |  |  |  |
| c Qualifying distributions from Part XII,   | 1   |                             | <b>\</b>                 |                         | 1                         |  |  |  |
| line 4 for each year listed   | <u></u> _   | <u> </u>                    | <u> </u>                 |                         |                           |  |  |  |
| d Amounts included in line 2c not   | 1   | •                           | <b>+</b>                 |                         | 1                         |  |  |  |
| used directly for active conduct of   | l   | <b>\</b>                    | 1                        | <b>[</b>                | 1                         |  |  |  |
| exempt activities   | <u></u>   | <u> </u>                    | 4                        |                         |                           |  |  |  |
| e Qualifying distributions made directly  | 1   | 1                           | 1                        | ļ.                      | }                         |  |  |  |
| for active conduct of exempt activities.  |   | 1                           |                          | 1                       | }                         |  |  |  |
| Subtract line 2d from line 2c   | <u> </u>  | <u> </u>                    |                          |                         |                           |  |  |  |
| 3 Complete 3a, b, or c for the alternative test relied upon:                            |   |                             |                          |                         |                           |  |  |  |
| a "Assets" alternative test - enter:  |   |                             |                          | ì                       | ł                         |  |  |  |
| (1) Value of all assets   |   | <u> </u>                    |                          |                         |                           |  |  |  |
| (2) Value of assets qualifying under section 4942(i)(3)(B)(i)                           | 1   |                             |                          |                         |                           |  |  |  |
| <b>b</b> "Endowment" alternative test - enter   |   | <del> </del>                | <del> </del>             |                         |                           |  |  |  |
| 2/3 of minimum investment return<br>shown in Part X, line 6 for each year<br>listed     |   |                             |                          |                         |                           |  |  |  |
| c "Support" alternative test - enter:   |   | <del></del>                 | 1                        |                         |                           |  |  |  |
| (1) Total support other than gross investment income (interest,                         | 1   |                             |                          |                         |                           |  |  |  |
| dividends, rents, payments on<br>securities loans (section<br>512(a)(5)), or royalties) | <u> </u>  | <u> </u><br>                |                          |                         |                           |  |  |  |
| (2) Support from general public   |   |                             |                          |                         |                           |  |  |  |
| and 5 or more exempt<br>organizations as provided in<br>section 4942(j)(3)(B)(iii)      |   |                             |                          |                         |                           |  |  |  |
| (3) Largest amount of support from  |   |                             | 1                        |                         |                           |  |  |  |
| an exempt organization  |   | 1                           | 1                        |                         | 1                         |  |  |  |
| (4) Gross investment income   |   |                             |                          |                         |                           |  |  |  |
| Part XV Supplementary Infor   |   |                             | if the foundation        | on had \$5,000 o        | r more in assets          |  |  |  |
| at any time during th   | ie year-see instr   | uctions.)                   | <del> </del>             |                         |                           |  |  |  |
| 1 Information Regarding Foundation  | n Managers:   |                             |                          |                         |                           |  |  |  |
| a List any managers of the foundation who<br>year (but only if they have contributed m  |   |                             | tributions received by   | the foundation before   | the close of any tax      |  |  |  |
| NONE  | ore than \$5,000). (See S   | 6011011 307 (u)(z).)        |                          |                         |                           |  |  |  |
| b List any managers of the foundation who   | own 10% or more of th   | e stock of a corporation    | (or an equally large p   | ortion of the ownership | o of a partnership or     |  |  |  |
| other entity) of which the foundation has   |   |                             | , , ,, 3º F              | · · · · · ·             | , ,                       |  |  |  |
| NONE  |   |                             |                          |                         |                           |  |  |  |
| 2 Information Regarding Contribution  | on, Grant, Gift, Loan,  | Scholarship, etc., P        | rograms:                 |                         |                           |  |  |  |
| Check here 🕨 🗓 if the foundation of   |   |                             |                          | es not accept unsolicit | ed requests for funds. If |  |  |  |
| the foundation makes gifts, grants, etc. (  | see instructions) to indiv  | iduals or organizations     | under other conditions   | s, complete items 2a, b | o, c, and d.              |  |  |  |
| a The name, address, and telephone numb   | er or e-mail address of t   | he person to whom app       | ications should be add   | dressed:                |                           |  |  |  |
| <b>b</b> The form in which applications should be                                       | b The form in which applications should be submitted and information and materials they should include: |                             |                          |                         |                           |  |  |  |
| c Any submission deadlines:   |   | <del></del>                 |                          |                         |                           |  |  |  |
| · · · · · · · · · · · · · · · · · · ·   | <del></del>   |                             | <del></del>              |                         |                           |  |  |  |
| d Any restrictions or limitations on awards   | , such as by geographica  | al areas, charitable fields | , kınds of ınstıtutıons, | or other factors:       |                           |  |  |  |
|   |   |                             |                          |                         |                           |  |  |  |

523601 11-24-15

Form **990-PF** (2015)

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager or substantial contributor Name and address (home or business) recipient a Paid during the year ADOPT A HUSKY, INC. N/A GENERAL SUPPORT P.O. BOX 87226 CAROL STREAM, IL 60188 10,000. AEI SENERAL SUPPORT N/A 1789 MASSACHUSETTS AVE. NW WASHINGTON, DC 20036 25,000. BEST FRIENDS ANIMAL SOCIETY N/A GENERAL SUPPORT bc 5001 ANGEL CANYON RD. KANAB, UT 84741 1,000. CHARLIE TROTTER CULINARY EDUCATION N/A ÞС GENERAL SUPPORT FOUNDATION 40 E. CHICAGO AVE. SUITE 418 CHICAGO, IL 60611 2,000. CHICAGO JAZZ PHILHARMONIC N/A GENERAL SUPPORT 1111 N. WELLS ST. SUITE 501 CHICAGO, IL 60610 10,000. SEE CONTINUATION SHEET(S) 809,200. ▶ 3a b Approved for future payment NONE Total

Form 990-PF (2015)

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

| Enter gross amounts unless otherwise indicated.                | Unrelated b                                       | iusiness income                       | Exclu  | ded by section 512, 513, or 514       | /2                                    |
|--|---|---------------------------------------|--|---------------------------------------|---------------------------------------|
| -  | (a)<br>Business                                   | (b)<br>Amount                         | (C)<br>Exclu-<br>sion                            | (d)<br>Amount                         | (e) Related or exempt function income |
| 1 Program service revenue:                                     | code  | Amount                                | code   | Amount                                | iniction income                       |
| a  | <del>-                                    </del>  |                                       | ┼  |                                       |                                       |
| b  |   | <del></del>                           | <del> </del>                                     |                                       |                                       |
| <u> </u>   | (* * * * * * * * * * * * * * * * * * *            | <del></del>                           | +  | <del></del>                           |                                       |
| <u> </u>   | 1 ' 1'  | <del></del>                           | +  |                                       | <del></del>                           |
| e  | -   |                                       | +  |                                       |                                       |
| g Fees and contracts from government agencies                  | -   | <del></del>                           | <del>                                     </del> |                                       |                                       |
| 2 Membership dues and assessments                              |   |                                       | +  | <del></del>                           |                                       |
| 3 Interest on savings and temporary cash                       | <del></del>                                       | <del></del>                           | +  |                                       |                                       |
| investments  |   |                                       | 14   | 8.479.                                |                                       |
| 4 Dividends and interest from securities                       |   |                                       | 14   |                                       |                                       |
| 5 Net rental income or (loss) from real estate:                | 16.41   |                                       |  | 201141414                             | 747346639                             |
| a Debt-financed property                                       |   |                                       |  |                                       |                                       |
| b Not debt-financed property                                   |   |                                       |  |                                       |                                       |
| 6 Net rental income or (loss) from personal                    |   |                                       |  |                                       |                                       |
| property   |   |                                       | { ·  |                                       |                                       |
| 7 Other investment income                                      |   |                                       | 14   | -76.                                  |                                       |
| 8 Gain or (loss) from sales of assets other                    |   |                                       |  | - <del></del>                         |                                       |
| than inventory   |   |                                       | 14   | 38,894.                               |                                       |
| 9 Net income or (loss) from special events                     |   |                                       |  |                                       |                                       |
| 10 Gross profit or (loss) from sales of inventory              |   |                                       |  |                                       |                                       |
| 11 Other revenue:  |   |                                       |  |                                       |                                       |
| a  | _   | <del></del>                           |  | · · · · · · · · · · · · · · · · · · · |                                       |
| b  | _   | <del></del>                           | <u> </u>   | ·                                     |                                       |
| c  | _   | · · · · · · · · · · · · · · · · · · · | <u> </u>   | <br>                                  |                                       |
| d  | _   |                                       |  |                                       |                                       |
| e  | - <del>                                    </del> |                                       | L  |                                       |                                       |
| 12 Subtotal, Add columns (b), (d), and (e)                     |   | 0.                                    | 3 1  | 165,198.                              | 0.                                    |
| 13 Total. Add line 12, columns (b), (d), and (e)               |   |                                       |  | 13                                    | 165,198.                              |
| (See worksheet in line 13 instructions to verify calculations. |   | <del></del>                           |  |                                       |                                       |
| Part XVI-B Relationship of Activities                          | to the Accom                                      | plishment of Ex                       | empt   | Purposes                              |                                       |
| Line No. Explain below how each activity for which in          | ncome is reported in co                           | olumn (e) of Part XVI-A               | contrib  | uted importantly to the accord        | nolishment of                         |
| the foundation's exempt purposes (other the                    | an by providing funds                             | for such purposes).                   |  | oted importantly to the doorn         | iphomnonic of                         |
|  | <del></del>                                       |                                       |  |                                       | <del> </del>                          |
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| 523621 11-24-15  |   |                                       |  |                                       |                                       |

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

| the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?  Transfers from the reporting foundation to a noncharitable exempt organization of:  (1) Cash (2) Other assets  b Other transactions:  (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets |  |  |                           |                   |                                    |  |                              | 1a(1)<br>1a(2)<br>1b(1)<br>1b(2)<br>1b(3)<br>1b(4) | Yes     | X<br>X<br>X<br>X<br>X |
|---|--|--|---------------------------|-------------------|------------------------------------|--|------------------------------|--|---------|-----------------------|
| ٠,  |  | s or loan guarantees<br>ormance of services or mei       | imherchin or fundraic     | una colicitatio   | nc                                 |  |                              | 1b(5)<br>1b(6)                                     |         | X                     |
|   |  | f facilities, equipment, mai                             |                           | _                 |                                    |  |                              | 16   |         | X                     |
|   | _                                      |  | •                         |                   | dule. Column (b) should alv        | ways show the fair                               | market value of the go       | ods, other ass                                     | ets,    |                       |
|   |  |  |                           |                   | ed less than fair market valu      | e in any transactior                             | or sharing arrangeme         | ent, show in                                       |         |                       |
|   | <del></del>                            | 1) the value of the goods, o                             |                           |                   |                                    | 1 (4)  |                              |  |         |                       |
| a)Line n  | <u>-</u>                               | (b) Amount involved                                      | (c) Name of               | N/A               | exempt organization                | (0) Descriptio                                   | n of transfers, transactions | s, and sharing arra                                | ngemen  | ts                    |
|   | +                                      |  | <del></del>               | N/A               | <del></del>                        | <del></del>                                      |                              |  |         |                       |
|   | †                                      |  | <del></del>               |                   |                                    | <del> </del>                                     |                              |  | _       |                       |
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|   |  |  |                           |                   | or more tax-exempt organiz         | zations described                                |                              |  | T       | No                    |
|   |  | 501(c) of the Code (other<br>complete the following sche |                           | (3)) 01 111 5860  | IUII 327 *                         |  |                              | Yes  | (A      | 7 140                 |
| <u> </u>  | 100, 00                                | (a) Name of orga   |                           |                   | (b) Type of organization           |  | (c) Description of rela      | itionship  |         |                       |
|   |  | N/A  |                           |                   |                                    |  |                              |  |         |                       |
|   |  |  |                           |                   |                                    |  |                              |  |         |                       |
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|   | Under                                  | penalties of perjury, I declare the                      | hat I have examined this  | return, includina | accompanying schedules and sta     | atements, and to the be                          | est of my knowledge          |  |         |                       |
| Sign<br>Here  | and be                                 | Bleef, it is true, correct, and comp                     | plete Declaration of prep | parer (other than | taxpayer) is based on all informat | DIRECT   | _                            | May the IRS d<br>return with the<br>shown below (  | prepare | y I                   |
|   | Sign                                   | nature of officer or trustee                             | 1                         |                   | Date                               | Title  |                              |  |         | ==                    |
| 1   |  |  |                           |                   | gnature                            | Date   | <b>└</b>                     | PTIN   |         |                       |
| Paid  |  | JOSE ALBERT  | ro                        | 1                 | was                                | 11/9/10  | self- employed               | D01000   | 750     |                       |
| Paid<br>Prepa   | arer                                   | ALVAREZ Firm's name ► DEL                                | ለተመመው መንሄ                 |                   |                                    | 11/8/16  | Firm's EIN ► 86              | P01276   |         |                       |
| Use (   |  | Film S name PDEL   | OLITE TAX                 | אחת               |                                    |  | FIRM'S EIN P 86              | -T002\   | , 4     |                       |
|   |  | Firm's address ▶ 11:                                     | 1 S. WACKI                | BR DR             | <del></del> -                      | <del></del>                                      | +                            |  |         |                       |
|   |  |  | ICAGO, IL                 |                   |                                    |  | Phone no. (31                | 2) 486-  | -100    | 00                    |
|   |  |  |                           |                   |                                    | <del></del>                                      | ,                            | Form <b>990</b>                                    |         |                       |

#### Schedule B

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

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2015

Name of the organization

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

| RC  | BERT AND MAYARI PRITZKER FAMILY FNDN  | 20-3829597          |  |  |  |  |  |
|---|---|---------------------|--|--|--|--|--|
| Organization type (check one)   |   |                     |  |  |  |  |  |
| Filers of:  | Section:  |                     |  |  |  |  |  |
| Form 990 or 990-EZ  | 501(c)( ) (enter number) organization   |                     |  |  |  |  |  |
|   | 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation  |                     |  |  |  |  |  |
|   | 527 political organization  |                     |  |  |  |  |  |
| Form 990-PF   | X 501(c)(3) exempt private foundation   |                     |  |  |  |  |  |
|   | 4947(a)(1) nonexempt charitable trust treated as a private foundation   |                     |  |  |  |  |  |
|   | 501(c)(3) taxable private foundation  |                     |  |  |  |  |  |
| Note. Only a section 501(c)   | s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule                            | e See instructions. |  |  |  |  |  |
| General Rule  |   |                     |  |  |  |  |  |
|   | n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II See instructions for determining a contributor's |                     |  |  |  |  |  |
| Special Rules   |   |                     |  |  |  |  |  |
| For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II   |   |                     |  |  |  |  |  |
| For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.  |   |                     |  |  |  |  |  |
| For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year |   |                     |  |  |  |  |  |
| Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)  |   |                     |  |  |  |  |  |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Name of organization

Employer identification number

#### ROBERT AND MAYARI PRITZKER FAMILY FNDN

20-3829597

| KODBK      | T AND MATAKE FREEZONS FAMILE FINDIN   |                            | 7-3049391   |
|------------|---|----------------------------|---|
| Part I     | Contributors (see instructions). Use duplicate copies of Part I if addition                                       | nal space is needed        |   |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c) Total contributions    | (d)<br>Type of contribution   |
| 1          | R.A. PRITZKER REV TR U/A/D 4/17/82 COLSON ASSOCIATES, C/O L.  ONE NORTH FRANKLIN ST, SUITE 2420 CHICAGO, IL 60606 | \$ <u>24,038.</u>          | Person X Payroll  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c) Total contributions    | (d)<br>Type of contribution   |
|            |   | - \\                       | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c) Total contributions    | (d)<br>Type of contribution   |
|            |   | -  <br>-   \$              | Person Payroll Oncash Complete Part II for noncash contributions.)  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d)<br>Type of contribution   |
|            |   | .   \$                     | Person Payroll Oncash Complete Part II for noncash contributions )  |
| (a)<br>No. | (b) Name, address, and ZIP + 4  | (c) Total contributions    | (d)<br>Type of contribution   |
|            |   | .   \$                     | Person Payroll Noncash Complete Part II for noncash contributions.) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions | (d) Type of contribution  |
|            |   | .   \$<br>.   \$           | Person Payroll Noncash Complete Part II for noncash contributions ) |

Name of organization

Employer identification number

#### ROBERT AND MAYARI PRITZKER FAMILY FNDN

20-3829597

| ODBK1                        | AND MAYARI PRITZKER FAMILY FNDN                                  |  | 0-3829597            |
|------------------------------|--|--|----------------------|
| art II                       | Noncash Property (see instructions). Use duplicate copies of Par | t II if additional space is needed.      |                      |
| (a)<br>No.<br>from<br>Part i | (b)<br>Description of noncash property given                     | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                              |  | <br><br>\$                               |                      |
| (a)<br>No.<br>rom            | (b)  Description of noncash property given                       | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                              |  | s  |                      |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given                       | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                              |  | s  |                      |
| (a)<br>No.<br>From<br>Part I | (b)<br>Description of noncash property given                     | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                              |  |  |                      |
| (a)<br>No.<br>From           | (b)<br>Description of noncash property given                     | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                              |  | <br>  \$                                 |                      |
| (a)<br>No.<br>rom            | (b)  Description of noncash property given                       | (c) FMV (or estimate) (see instructions) | (d)<br>Date received |
|                              |  | <br><br>\                                |                      |

| Name of org               | ganization  |   |                   |                             | Employer identification number      |
|---------------------------|---|---|-------------------|-----------------------------|-------------------------------------|
| ROBERT                    | r and mayarı pritzker fi  | AMILY FNDN                                    |                   | }                           | 20-3829597                          |
| Part III                  | Exclusively religious, charitable, etc., cont the year from any one contributor. Complete | ributions to organizations describe           | d in section      | 501(c)(7), (8), or (1       | 0) that total more than \$1,000 for |
|                           | completing Part III, enter the total of exclusively religious                             | s, charitable, etc., contributions of \$1,000 | or less for the y | year (Enter this info once) | <b>\$</b>                           |
| (a) No.                   | Use duplicate copies of Part III if addition  | al space is needed.                           | <del></del> -     |                             |                                     |
| from<br>Part I            | (b) Purpose of gift   | (c) Use of gift                               |                   | (d) Descr                   | iption of how gift is held          |
|                           |   |   |                   |                             |                                     |
|                           |   |   |                   |                             |                                     |
| į                         |   |   |                   |                             |                                     |
|                           |   | (e) Transfer of g                             | jift              |                             |                                     |
|                           | Transferee's name, address, a   | nd ZIP + 4                                    | Rel               | lationship of tran          | sferor to transferee                |
| Ī                         |   |   |                   |                             |                                     |
|                           |   |   |                   |                             |                                     |
|                           |   |   |                   |                             |                                     |
| (a) No.<br>from<br>Part I | (b) Purpose of gift   | (c) Use of gift                               |                   | (d) Descr                   | iption of how gift is held          |
|                           |   |   |                   |                             |                                     |
|                           |   |   |                   |                             |                                     |
|                           |   |   |                   |                             |                                     |
|                           |   | (e) Transfer of g                             | ift               |                             |                                     |
|                           | Transferee's name, address, a   | nd ZIP + 4                                    | Rel               | lationship of trans         | sferor to transferee                |
| Ī                         |   |   |                   |                             |                                     |
|                           |   |   |                   |                             |                                     |
|                           |   |   |                   |                             |                                     |
| (a) No.<br>from<br>Part I | (b) Purpose of gift   | (c) Use of gift                               |                   | (d) Descr                   | iption of how gift is held          |
| 1                         |   | <del></del>                                   |                   |                             |                                     |
|                           |   |   |                   |                             |                                     |
| -                         |   |   |                   |                             |                                     |
| ì                         |   | (e) Transfer of g                             | jift              |                             |                                     |
| 1                         | Transferee's name, address, ar  | nd ZIP + 4                                    | Rel               | ationship of tran           | sferor to transferee                |
| 1                         |   |   |                   |                             |                                     |
| 1                         |   |   |                   |                             | <del>-,</del>                       |
| (2) \$1.                  |   |   |                   |                             |                                     |
| (a) No.<br>from<br>Part I | (b) Purpose of gift   | (c) Use of gift                               |                   | (d) Descr                   | iption of how gift is held          |
| 1                         |   |   |                   |                             |                                     |
| \                         |   |   |                   |                             |                                     |
| }                         |   | <u> </u>                                      | <u> </u>          |                             |                                     |
| ł                         |   | (e) Transfer of g                             | μπt               |                             |                                     |
|                           | Transferee's name, address, ar  | nd ZIP + 4                                    | Rel               | ationship of tran           | sferor to transferee                |
| ł                         |   | <del></del>                                   |                   |                             |                                     |
| {                         |   |   |                   |                             |                                     |
|                           |   |   |                   |                             |                                     |

| Capital Gains and Loss  | ses for lax on investment income   |   |  |  |                                  |
|---|--|---|--|--|----------------------------------|
| (a) List and  | describe the kind(s) of property solo<br>ck warehouse; or common stock, 20 |   | (b) How acquired<br>P - Purchase<br>D - Donation | (c) Date acquired (mo., day, yr.)                | (d) Date sold<br>(mo., day, yr.) |
| 1a JPMORGAN #6007   | <del></del>  | <del></del>                                     | P  | <del></del>                                      | <del></del>                      |
| b JPMORGAN #0002  |  |   | P  | <del> </del>                                     |                                  |
| c BMO HARRIS #036   | · A  |   | P  | <del>                                     </del> |                                  |
|   | PARTNERS, LLC  |   | P  | <del> </del>                                     |                                  |
|   | PARTNERS, LLC  |   | P  | <del></del>                                      |                                  |
| f JPMORGAN #7008  | PARTNERS, LLC  | <del></del>                                     |  | <del> </del>                                     |                                  |
|   |  | <del></del>                                     | P  | <del> </del>                                     |                                  |
| <u>g</u>  |  | <del></del>                                     | <del></del>                                      | <del> </del>                                     |                                  |
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| 0   | <del></del>  |   |  |  | <del></del>                      |
| (e) Gross sales price   | (f) Depreciation allowed<br>(or allowable)                                 | (g) Cost or other basis plus expense of sale    | (e) r  | ) Gain or (loss)<br>lus (f) minus (g)            |                                  |
| a 1,005,462.  |  | 923,180.  |  |  | 82,282.                          |
| b 114,109.  |  | 118,672.  |  | -  | -4,563.                          |
| c 1,711,960.  |  | 1,750,698.                                      |  |  | -38,738.                         |
| d 16.   |  |   |  |  | 16.                              |
| e 117.  |  |   |  |  | 117.                             |
| f   |  | 220.  |  |  | -220.                            |
| 9   |  |   |  |  |                                  |
| h   |  |   |  |  |                                  |
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| <u>`</u>  |  |   |  |  |                                  |
| <del></del>   |  |   |  |  | <del> </del>                     |
| <u>m</u>  |  |   |  |  | <del></del>                      |
| <u>n</u>  |  |   |  |  | <del></del>                      |
| Complete only for accets chowing  | gain in column (h) and owned by t  | he foundation on 12/21/60                       | // / · · ·                                       | (6   |                                  |
| Complete drily for assets showing   | <del>``</del>  |   | (I) LOS<br>Gains (eycess d                       | ises (from col. (h))<br>of col. (h) gain over    | cal (k)                          |
| (i) F.M.V. as of 12/31/69   | (j) Adjusted basis<br>as of 12/31/69                                       | (k) Excess of col. (i)<br>over col. (j), if any | but n  | ot less than "-0-")                              |                                  |
| a   |  |   |  |  | 82,282.                          |
| b   |  |   |  |  | -4,563.                          |
| С   |  |   |  |  | -38,738.                         |
| đ   |  |   |  |  | 16.                              |
| е   |  |   |  |  | 117.                             |
| f   |  |   |  |  | -220.                            |
| g   |  |   |  |  |                                  |
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| 2 Capital gain net income or (net cap   | ortal loss) { If gain, also enter "-0                                      | ın Part I, line 7<br>-" ın Part I, line 7       | 2  |  | 38,894.                          |
| 3 Net short-term capital gain or (loss If gain, also enter in Part I, line 8, c | column (c).  | d (6):  |  |  |                                  |
| If (locs) enter "-n-" in Part I line 8  |  | 1 1   | ا م  | NT/Z   |                                  |

| Recipient   Sail individual   Foundation   Saltis of   Purpose of grant or   Amount   Saltis of   Saltis of   Contribution   Contribution   Saltis of   Contribution     | Part XV Supplementary Informati 3 Grants and Contributions Paid During the |   |              |  | <del></del>        |
|--|--|---|--------------|--|--------------------|
| Show any idelicosing to any foundation any foundation and address (home or business) any foundation manage or substantial contribution frequent (CAGEL)  WIA PC DEMERAL SUPPORT  EMANUEL CONGREGATION N/A PC DEMERAL SUPPORT  STATE TO THE A CHANCE FOUNDATION N/A PC DEMERAL SUPPORT  STATE TO THE A CHANCE FOUNDATION N/A PC DEMERAL SUPPORT  STATE TO THE A CHANCE FOUNDATION N/A PC DEMERAL SUPPORT  STATE TO THE A CHANCE FOUNDATION N/A PC DEMERAL SUPPORT  WILLINOIS INSTITUTE OF TECHNOLOGY N/A PC DEMERAL SUPPORT  LILINOIS INSTITUTE OF TECHNOLOGY N/A PC DEMERAL SUPPORT  LILINOIS PARK ZOOLOGICAL SOCIETY N/A PC DEMERAL SUPPORT  LINCOLN PARK ZOOLOGICAL SOCIETY N/A PC DEMERAL SUPPORT  DATA THE A CHANCE ST. CHICAGO, IL 60614  PARTNERS ASIA (BURMA LIFELINE) N/A PC DEMERAL SUPPORT  DATA THE A CHANCE ST. CHICAGO N/A PC DEMERAL SUPPORT  DATA THE A CHICAGO N/A PC DEMERAL SUPPORT  1110 W. 3578 ST. CHICAGO N/A PC DEMERAL SUPPORT  1110 W. 3578 ST. CHICAGO N/A PC DEMERAL SUPPORT  1110 W. 3578 ST. CHICAGO N/A PC DEMERAL SUPPORT  112, 50  PREVENT CHILD ABUSE ILLINOIS N/A PC DEMERAL SUPPORT  113, 0  PRITTIERE MILITARY LIEBRARY N/A PC DEMERAL SUPPORT  13, 0  PRITTIERE MILITARY LIEBRARY N/A PC DEMERAL SUPPORT  |  |   | <del></del>  | <del></del>                                      | <del> </del>       |
| CHINESE AMERICAN SERVICE LEAGUE  (CASL)  1141 S TAN CT.  CHICAGO, IL 60616  12,7  EMANUEL CONGREGATION  9595 N. SHERIDAN ND.  CHICAGO, IL 60660  CIVE ME A CHANCE FOUNDATION  7,5  REMINGTON ELDY.  20LINGIBROOK, IL 60440  7,5  ILLINOIS INSTITUTE OF TECHNOLOGY  10 W. 357H ST.  CHICAGO, IL 60614  PC  DENERAL SUPPORT  7,5  CHICAGO, IL 60616  20,0  LINCOLN PARK ZOOLOGICAL SOCIETY  2001 N. CLARK ST.  CHICAGO, IL 60614  PC  DENERAL SUPPORT  220,0  PARTHERS ASIA (BURNA LIFELINE)  1999 HARRISON ST., 18TH FLR  OAKLAND, CA 94612  100,0  PARTHERS ASIA (BURNA LIFELINE)  110 W. 357H ST.  CHICAGO, IL 60609  N/A  PC  DENERAL SUPPORT  17,5  DENERAL SUPPORT  110,0  DENERAL SUPPORT  17,5  DENERAL SUPPORT  13,0  DENERAL SUPPORT  13,0  DENERAL SUPPORT   | <del></del>  | show any relationship to any foundation manager | status of    | Purpose of grant or contribution                 | Amount             |
| (CASL)   | <del></del>  | or substantial contributor                      | recipient    | <del></del>                                      | <del> </del>       |
| 2141 S TAN CT. CHICAGO, IL 60616  EMANUEL CONGREGATION S959 N. SHERIDAN RD. CHICAGO, IL 60660  10,0  GIVE ME A CHANCE FOUNDATION 755 REMINSTON BLDV. BOLINGEROOK, IL 60440  7,5  ILLINOIS INSTITUTE OF TECHNOLOGY 10 W. 35TH ST. CHICAGO, IL 60616  20,0  LINCOLN PARK ZOOLOGICAL SOCIETY 201 N. CLARK ST. CHICAGO, IL 60614  PARTHERS ASIA (BURMA LIFELINE) 1939 RARRISON ST., 18TH FLR OAKLAND, CA 94612  PART CHICAGO 110 W. 35TH ST. CHICAGO, IL 60609  N/A PC SENERAL SUPPORT  100,0  20 SENERAL SUPPORT  117,5  PREVENT CHICAGO 11, 60609  17,5  PREVENT CHICAGO IL 60609  17,5  | CHINESE AMERICAN SERVICE LEAGUE  | N/A   | PC           | GENERAL SUPPORT                                  |                    |
| CHICAGO, IL 60616  EMANUEL CONGREGATION 5959 N. SHERIDAN RD. CHICAGO, IL 60660  GIVE ME A CHANCE FOUNDATION 7,5 SHENINGTON BLDV. BOLINGBROOK, IL 60440  7,5 ILLINOIS INSTITUTE OF TECHNOLOGY 10 W. 357H ST. CHICAGO, IL 60616  LINCOLN PARK ZOOLOGICAL SOCIETY 2001 N. CLARK ST. CHICAGO, IL 60614  PARTHERS ASIA (BURMA LIFELINE) 1999 HARRISON ST., 18TH FLR DAKLAND, CA 94612  PARMS CHICAGO 1110 W. 357H ST. CHICAGO, IL 60609  N/A PC DENERAL SUPPORT  100,0  PARMS CHICAGO 1110 W. 357H ST. CHICAGO, IL 60609  N/A PC DENERAL SUPPORT  117,5  PREVENT CHILD ABUSE ILLINOIS 528 S. 5TH ST., SUITE 211 5PRINGFIELD, IL 62701  PRITZEER MILITARY LIBRARY N/A PC DENERAL SUPPORT  SENERAL SUPPORT  13,00  PRITZEER MILITARY LIBRARY N/A PC DENERAL SUPPORT  SENERAL SUPPORT  13,00  PRITZEER MILITARY LIBRARY N/A PC DENERAL SUPPORT  SENERAL SUPPORT  | (CASL)   |   |              |  | ļ                  |
| EMANUEL CONGREGATION S555 N. SHERIDAN RD. CHICAGO, IL 60660  SIVE ME A CHANCE FOUNDATION N/A PC SIVE ME A CHANCE FOUNDATION N/A PC SIVE ME A CHANCE FOUNDATION N/A PC SILLINGIS INSTITUTE OF TECHNOLOGY N/A PC SENERAL SUPPORT  LILINOIS INSTITUTE OF TECHNOLOGY N/A PC SENERAL SUPPORT  CHICAGO, IL 60616  LINCOLN PARK ZOOLOGICAL SOCIETY 2001 N. CLARK ST. CHICAGO, IL 60614  PARTNERS ASIA (BURMA LIFELINE) 1999 HARRISON ST., 18TH FLR DAKLAND, CA 94612  PAWS CHICAGO N/A PC SENERAL SUPPORT  100,0  PARTNERS ASIA (BURMA LIFELINE) 1999 HARRISON ST., 18TH FLR DAKLAND, CA 94612  PAWS CHICAGO N/A PC SENERAL SUPPORT  100,0  PREVENT CHICAGO, IL 60609  17,5  PREVENT CHILDABUSE ILLINOIS S28 S. 5TH ST., SUITE 211 SPRINGFIELD, IL 62701  13,0  PRITZIKER MILITARY LIBRARY N/A POF SENERAL SUPPORT  | 2141 S TAN CT.   |   |              |  | }                  |
| S959 N. SHERIDAN RD. CRICAGO, IL 60660  10,0  GIVE ME A CHANCE FOUNDATION N/A  PC  GENERAL SUPPORT  T/55 REMINOTON BLDV,  BOLINGBROOK, IL 60440  7,5  LILINOIS INSTITUTE OF TECHNOLOGY N/A  PC  JENERAL SUPPORT  CRICAGO, IL 60616  20,0  LINCOIN PARK ZOOLOGICAL SOCIETY N/A  PC  JENERAL SUPPORT  CRICAGO, IL 60614  PARTNERS ASIA (BURMA LIFELINE) PAPRINERS ASIA (BURMA LIFELINE) N/A  PC  JENERAL SUPPORT  220,0  ANA  PC  JENERAL SUPPORT  100,0  PAWS CHICAGO N/A  PC  JENERAL SUPPORT  1010,0  TA,5  PREVENT CHILD ABUSE ILLINOIS N/A  PC  JENERAL SUPPORT  17,5  CHICAGO, IL 60609  N/A  PC  JENERAL SUPPORT  17,5  PREVENT CHILD ABUSE ILLINOIS N/A  PC  JENERAL SUPPORT  13,0  PRITZERE MILITARY LIBRARY N/A  POF  JENERAL SUPPORT  | CHICAGO, IL 60616  |   |              | <u> </u>   | 12,700.            |
| S959 N. SHERIDAN RD. CRICAGO, IL 60660  GIVE ME A CHANCE FOUNDATION N/A  PC  GENERAL SUPPORT  JELINOIS INSTITUTE OF TECHNOLOGY N/A  LILLINOIS INSTITUTE OF TECHNOLOGY N/A  LINCOIN PARK ZOOLOGICAL SOCIETY N/A  PC  JENERAL SUPPORT  CRICAGO, IL 60616  LINCOIN PARK ZOOLOGICAL SOCIETY N/A  PC  JENERAL SUPPORT  CRICAGO, IL 60614  PARTNERS ASIA (BURMA LIFELINE) N/A  PC  JENERAL SUPPORT  JENERAL SUPPORT  ANA  PC  JENERAL SUPPORT  JOO., O  JENERAL SUPPORT  ANA  PC  JENERAL SUPPORT  JOO., O  JENERAL SUPPORT  JOO., O  JENERAL SUPPORT  JOO., O  JENERAL SUPPORT  JOO., O  JENERAL SUPPORT  JENERAL SUPPORT  JOO., O  JO |  |   |              |  | ]                  |
| S959 N. SHERIDAN RD. CRICAGO, IL 60660  GIVE ME A CHANCE FOUNDATION N/A  PC  GENERAL SUPPORT  JELINOIS INSTITUTE OF TECHNOLOGY N/A  LILLINOIS INSTITUTE OF TECHNOLOGY N/A  LINCOIN PARK ZOOLOGICAL SOCIETY N/A  PC  JENERAL SUPPORT  CRICAGO, IL 60616  LINCOIN PARK ZOOLOGICAL SOCIETY N/A  PC  JENERAL SUPPORT  CRICAGO, IL 60614  PARTNERS ASIA (BURMA LIFELINE) N/A  PC  JENERAL SUPPORT  JENERAL SUPPORT  ANA  PC  JENERAL SUPPORT  JOO., O  JENERAL SUPPORT  ANA  PC  JENERAL SUPPORT  JOO., O  JENERAL SUPPORT  JOO., O  JENERAL SUPPORT  JOO., O  JENERAL SUPPORT  JOO., O  JENERAL SUPPORT  JENERAL SUPPORT  JOO., O  JO | FMANTIFI. CONGREGATION   | N/A   | BC.          | GENERAL CURROR                                   | 1                  |
| CHICAGO, IL 60660  GIVE ME A CHANCE FOUNDATION N/A PC SEMERAL SUPPORT  SEMENTOTION BLDV, BOLLINGBROOK, IL 60440  7,5  LILLINGIS INSTITUTE OF TECHNOLOGY 10 W. 35TH ST. CHICAGO, IL 60616  LINCOLN PARK ZOOLOGICAL SOCIETY N/A PC SEMERAL SUPPORT  CHICAGO, IL 60614  220,0  PARTNERS ASIA (BURMA LIFELINE) N/A PC SEMERAL SUPPORT  SEMERAL SUPPORT  DENERAL SUPPORT  100,0  PARTNERS ASIA (BURMA LIFELINE) N/A PC SEMERAL SUPPORT  100,0  PARTNERS ASIA (BURMA LIFELINE) N/A PC SEMERAL SUPPORT  100,0  PAWS CHICAGO N/A PC SEMERAL SUPPORT  110,0  PAWS CHICAGO N/A PC SEMERAL SUPPORT  110,0  PAWS CHICAGO SEMERAL SUPPORT  110,0  PREVENT CHILD ABUSE ILLINGIS N/A PC SEMERAL SUPPORT  113,0  PRITZERER MILITARY LIBRARY N/A POF SEMERAL SUPPORT  |  | M/A   | FC           | SEMERAL SUFFORT                                  | j                  |
| GIVE ME A CHANCE FOUNDATION 755 REMINSTON BLDV.  BOLINGBROOK, IL 60440  7,5  ILLINOIS INSTITUTE OF TECHNOLOGY 10 W. 35TH ST. CHICAGO, IL 60616  LINCOLN PARK ZOOLOGICAL SOCIETY 2001 N. CLARK ST. CHICAGO, IL 60614  PARTNERS ASIA (BURNA LIFELINE) 1999 HARRISON ST., 18TH FLR OAKLAND, CA 94612  PARTNERS ASIA (BURNA LIFELINE) 100,0  PAWS CHICAGO 1110 W. 35TH ST. CHICAGO, IL 60609  N/A  PC  BENERAL SUPPORT  100,0  DENERAL SUPPORT  17,5  DENERAL SUPPORT  17,5  PREVENT CHILD ABUSE ILLINOIS N/A PC  BENERAL SUPPORT  13,0  PRITZKER MILITARY LIBRARY N/A POF  BENERAL SUPPORT  |  |   |              | į  | 10,000.            |
| 7.5 REMINGTON BLDV. BOLINGBROOK, IL 60440  7.5  ILLINOIS INSTITUTE OF TECHNOLOGY 10 W. 35TH ST. CHICAGO, IL 60616  20,0  LINCOLN PARK ZOOLOGICAL SOCIETY 2001 N. CLARK ST. CHICAGO, IL 60614  220,0  PARTNERS ASIA (BURMA LIFELINE) 1099 HARRISON ST., 18TH FLR 20AKLAND, CA 94612  100,0  PAWS CHICAGO 1110 W. 35TH ST. CHICAGO, IL 60609  N/A  PC BENERAL SUPPORT  17.5:  PERVENT CHILD ABUSE ILLINOIS 528 S. 5TH ST., SUITE 211 SPRINGFIELD, IL 62701  13,0  PRITZKER MILITARY LIBRARY 610 N. FAIRBANKS CT,   |  |   | 1            |  | 1                  |
| 7.5 REMINGTON BLDV. BOLINGBROOK, IL 60440  7.5  ILLINOIS INSTITUTE OF TECHNOLOGY 10 W. 35TH ST. CHICAGO, IL 60616  LINCOLN PARK ZOOLOGICAL SOCIETY 2001 N. CLARK ST. CHICAGO, IL 60614  PARTNERS ASIA (BURNA LIFELINE) 100,0  PARTNERS ASIA (BURNA LIFELINE) 100,0  PAWS CHICAGO 1110 W. 35TH ST. CHICAGO 1110 W. 35TH ST. CHICAGO, IL 60609  N/A  PC  GENERAL SUPPORT  100,0  FRIENDAM, CA 94612  100,0  FRIENDAM, CA 94612  113,0  PRITZKER MILITARY LIBRARY 610 N. PAIRBANKS CT,  |  |   | }            | }  | 1                  |
| BOLINGBROOK, IL 60440 7,5  ILLINOIS INSTITUTE OF TECHNOLOGY N/A PC SEMERAL SUPPORT 20,0  LINCOLN PARK ZOOLOGICAL SOCIETY N/A PC SEMERAL SUPPORT 2001 N. CLARK ST.  CHICAGO, IL 60614 220,0  PARTNERS ASIA (BURMA LIFELINE) N/A PC SEMERAL SUPPORT 1999 HARRISON ST., 18TH FLR OAKLAND, CA 94612 100,0  PAWS CHICAGO N/A PC SEMERAL SUPPORT 110 N, 35TH ST.  CHICAGO, IL 60609 7, 55TH ST.  CHICAGO, IL 60609 17,55  PREVENT CHILD ABUSE ILLINOIS N/A PC SEMERAL SUPPORT 528 S. 5TH ST., SUITE 211  SPRINGFIELD, IL 62701 13,0  PRITZKER MILITARY LIBRARY N/A POF SEMERAL SUPPORT 13,0  | GIVE ME A CHANCE FOUNDATION  | N/A   | PC           | GENERAL SUPPORT                                  | }                  |
| ILLINOIS INSTITUTE OF TECHNOLOGY  10 W. 35TH ST. CHICAGO, IL 60616  20,0  LINCOLN PARK ZOOLOGICAL SOCIETY  N/A  PC  BENERAL SUPPORT  220,0  PARTNERS ASIA (BURMA LIFELINE)  PARTISON ST., 18TH FLR  OAKLAND, CA 94612  PARTS CHICAGO  1110 W. 35TH ST. CHICAGO, IL 60609  N/A  PC  BENERAL SUPPORT  100,0  TA  PC  BENERAL SUPPORT  107,50  PREVENT CHILD ABUSE ILLINOIS  N/A  PC  BENERAL SUPPORT  17,50  PREVENT CHILD ABUSE ILLINOIS  N/A  PC  BENERAL SUPPORT  13,00  PRINTSFIELD, IL 62701  13,00  PRINTSFIELD, IL 62701  PRINTSPANKS CT,   |  |   |              |  | l                  |
| 10 W. 35TH ST. CHICAGO, IL 60616  LINCOLN PARK ZOOLOGICAL SOCIETY N/A  PC SENERAL SUPPORT  220,0  PARTNERS ASIA (BURNA LIFELINE) PARRISON ST., 18TH FLR OAKLAND, CA 94612  PAWS CHICAGO 1110 W. 35TH ST. CHICAGO, IL 60609  N/A  PC SENERAL SUPPORT  17,50  PREVENT CHILD ABUSE ILLINOIS SENERAL SUPPORT  13,00  PRITZKER MILITARY LIBRARY N/A  POF SENERAL SUPPORT  13,00  PRITZKER MILITARY LIBRARY N/A  POF SENERAL SUPPORT  SENERAL SUPPORT  13,00  PRITZKER MILITARY LIBRARY N/A  POF SENERAL SUPPORT   | BOLINGBROOK, IL 60440  | <del></del>                                     | <del> </del> | <del></del>                                      | 7,500.             |
| 10 W. 35TH ST. CHICAGO, IL 60616  LINCOLN PARK ZOOLOGICAL SOCIETY N/A  PC SENERAL SUPPORT  220,0  PARTNERS ASIA (BURMA LIFELINE) PARRISON ST., 18TH FLR OAKLAND, CA 94612  PAWS CHICAGO 1110 W. 35TH ST. CHICAGO, IL 60609  N/A  PC SENERAL SUPPORT  17,50  PREVENT CHILD ABUSE ILLINOIS SERIORAL SUPPORT  13,00  PRITZKER MILITARY LIBRARY N/A  POF SENERAL SUPPORT  13,00  PRITZKER MILITARY LIBRARY N/A  POF SENERAL SUPPORT  SENERAL SUPPORT   |  | 1   | 1            |  | 1                  |
| 10 W. 35TH ST. CHICAGO, IL 60616  LINCOLN PARK ZOOLOGICAL SOCIETY N/A  PC SENERAL SUPPORT  220,0  PARTNERS ASIA (BURMA LIFELINE) PARTNERS ASIA (BURMA LIFEL | ILLINOIS INSTITUTE OF TECHNOLOGY   | N/A   | PC           | GENERAL SUPPORT                                  |                    |
| LINCOLN PARK ZOOLOGICAL SOCIETY  N/A  PC  SEMERAL SUPPORT  220.0  PARTNERS ASIA (BURMA LIFELINE)  1999 HARRISON ST., 18TH FLR  OAKLAND, CA 94612  N/A  PC  SEMERAL SUPPORT  100,0  PAWS CHICAGO  N/A  PC  SEMERAL SUPPORT  1110 W. 35TH ST.  CHICAGO, IL 60609  N/A  PC  SEMERAL SUPPORT  17,50  PREVENT CHILD ABUSE ILLINOIS  N/A  PC  SEMERAL SUPPORT  17,50  PREVENT CHILD ABUSE ILLINOIS  N/A  PC  SEMERAL SUPPORT  13,00  PRITZKER MILITARY LIBRARY  N/A  POF  SEMERAL SUPPORT  |  |   |              |  |                    |
| LINCOLN PARK ZOOLOGICAL SOCIETY  N/A  PC  GENERAL SUPPORT  220,0  PARTNERS ASIA (BURMA LIFELINE)  1999 HARRISON ST., 18TH FLR  OAKLAND, CA 94612  PAWS CHICAGO  1110 W. 35TH ST.  CHICAGO, IL 60609  N/A  PC  GENERAL SUPPORT  17,50  PREVENT CHILD ABUSE ILLINOIS  PREVENT CHILD ABUSE ILLINOIS  SPRINGFIELD, IL 62701  PRITZKER MILITARY LIBRARY  N/A  POF  GENERAL SUPPORT  13,00  PRITZKER MILITARY LIBRARY  N/A  POF  GENERAL SUPPORT   | CHICAGO, IL 60616  |   |              |  | 20,000.            |
| LINCOLN PARK ZOOLOGICAL SOCIETY  N/A  PC  GENERAL SUPPORT  220,0  PARTNERS ASIA (BURMA LIFELINE)  1999 HARRISON ST., 18TH FLR  OAKLAND, CA 94612  PAWS CHICAGO  1110 W. 35TH ST.  CHICAGO, IL 60609  PREVENT CHILD ABUSE ILLINOIS  PRITZKER MILITARY LIBRARY  N/A  POF  GENERAL SUPPORT  13,00  PRITZKER MILITARY LIBRARY  N/A  POF  GENERAL SUPPORT   |  |   | 1            | 1  |                    |
| 2001 N. CLARK ST. CHICAGO, IL 60614  220.0  PARTNERS ASIA (BURMA LIFELINE) 1999 HARRISON ST., 18TH FLR OAKLAND, CA 94612  PAWS CHICAGO 1110 W. 35TH ST. CHICAGO, IL 60609  PREVENT CHILD ABUSE ILLINOIS 528 S. 5TH ST., SUITE 211 SPRINGFIELD, IL 62701  PRITZKER MILITARY LIBRARY N/A POF GENERAL SUPPORT  13,00  PRITZKER MILITARY LIBRARY N/A POF GENERAL SUPPORT   |  | [   | · l          | 1  | Ì                  |
| CHICAGO, IL 60614  220,0  PARTNERS ASIA (BURMA LIFELINE)  1999 HARRISON ST., 18TH FLR  OAKLAND, CA 94612  PAWS CHICAGO  1110 W. 35TH ST.  CHICAGO, IL 60609  N/A  PC  SENERAL SUPPORT  17,50  PREVENT CHILD ABUSE ILLINOIS  N/A  PC  SENERAL SUPPORT  13,00  PRITZKER MILITARY LIBRARY  N/A  POF  SENERAL SUPPORT  13,00   |  | N/A   | ₽C           | GENERAL SUPPORT                                  |                    |
| PARTNERS ASIA (BURMA LIFELINE)  1999 HARRISON ST., 18TH FLR  OAKLAND, CA 94612  100,0  PAWS CHICAGO  1110 W. 35TH ST.  CHICAGO, IL 60609  PREVENT CHILD ABUSE ILLINOIS  PREVENT CHILD ABUSE ILLINOIS  SENERAL SUPPORT  13,00  PRITZKER MILITARY LIBRARY  N/A  POF  SENERAL SUPPORT  SENERAL SUPPORT  34,00   |  |   | 1            | 1  | 222 222            |
| 1999 HARRISON ST., 18TH FLR  OAKLAND, CA 94612  PAWS CHICAGO 1110 W. 35TH ST. CHICAGO, IL 60609  PREVENT CHILD ABUSE ILLINOIS PREVENT CHILD ABUSE ILLINOIS S. 5TH ST., SUITE 211 SPRINGFIELD, IL 62701  PRITZKER MILITARY LIBRARY N/A POF GENERAL SUPPORT  13,00   | CHICAGO, IL 60614  | <del>-  </del>                                  | <del>}</del> | <del></del>                                      | 220,000.           |
| 1999 HARRISON ST., 18TH FLR  OAKLAND, CA 94612  PAWS CHICAGO 1110 W. 35TH ST. CHICAGO, IL 60609  PREVENT CHILD ABUSE ILLINOIS PREVENT CHILD ABUSE ILLINOIS SPRINGFIELD, IL 62701  PRITZKER MILITARY LIBRARY N/A POF GENERAL SUPPORT  13,00   |  |   |              |  | ļ                  |
| DAKLAND, CA 94612  PAWS CHICAGO 1110 W. 35TH ST. CHICAGO, IL 60609  PREVENT CHILD ABUSE ILLINOIS 528 S. 5TH ST., SUITE 211 SPRINGFIELD, IL 62701  PRITZKER MILITARY LIBRARY N/A POF GENERAL SUPPORT  13,00   | PARTNERS ASIA (BURMA LIFELINE)   | N/A   | ₽C           | GENERAL SUPPORT                                  | ļ                  |
| PAWS CHICAGO  1110 W. 35TH ST.  CHICAGO, IL 60609  PREVENT CHILD ABUSE ILLINOIS  528 S. 5TH ST., SUITE 211  SPRINGFIELD, IL 62701  PRITZKER MILITARY LIBRARY  N/A  POF  GENERAL SUPPORT  13,00   | 1999 HARRISON ST., 18TH FLR  |   | 1            |  |                    |
| 1110 W. 35TH ST. CHICAGO, IL 60609  PREVENT CHILD ABUSE ILLINOIS 528 S. 5TH ST., SUITE 211 SPRINGFIELD, IL 62701  PRITZKER MILITARY LIBRARY N/A POF GENERAL SUPPORT  13,00   | OAKLAND, CA 94612  |   | <u> </u>     |  | 100,000.           |
| 1110 W. 35TH ST. CHICAGO, IL 60609  PREVENT CHILD ABUSE ILLINOIS 528 S. 5TH ST., SUITE 211 SPRINGFIELD, IL 62701  PRITZKER MILITARY LIBRARY N/A POF GENERAL SUPPORT  13,00   |  |   |              |  |                    |
| 1110 W. 35TH ST. CHICAGO, IL 60609  PREVENT CHILD ABUSE ILLINOIS 528 S. 5TH ST., SUITE 211 SPRINGFIELD, IL 62701  PRITZKER MILITARY LIBRARY N/A POF GENERAL SUPPORT  13,00   | DAME OUTCACO   | 7/3   |              | CHANDAI GUNDODE                                  | {                  |
| CHICAGO, IL 60609  PREVENT CHILD ABUSE ILLINOIS  N/A  PC  GENERAL SUPPORT  528 S. 5TH ST., SUITE 211  SPRINGFIELD, IL 62701  PRITZKER MILITARY LIBRARY  N/A  POF  GENERAL SUPPORT  610 N. FAIRBANKS CT,  |  | N/A   |              | GENERAL SUPPORT                                  | 1                  |
| PREVENT CHILD ABUSE ILLINOIS  528 S. 5TH ST., SUITE 211  SPRINGFIELD, IL 62701  PRITZKER MILITARY LIBRARY  N/A  POF  GENERAL SUPPORT  610 N. FAIRBANKS CT,   |  |   |              |  | 17,500.            |
| 528 S. 5TH ST., SUITE 211  SPRINGFIELD, IL 62701  PRITZKER MILITARY LIBRARY  N/A  POF  GENERAL SUPPORT  610 N. FAIRBANKS CT,   | <del></del>  | <del>-  </del>                                  | †            | <del> </del>                                     |                    |
| 528 S. 5TH ST., SUITE 211  SPRINGFIELD, IL 62701  PRITZKER MILITARY LIBRARY  N/A  POF  GENERAL SUPPORT  610 N. FAIRBANKS CT,   |  |   | }            |  | 1                  |
| PRITZKER MILITARY LIBRARY N/A POF GENERAL SUPPORT 610 N. FAIRBANKS CT,   |  | N/A   | ₽C           | GENERAL SUPPORT                                  |                    |
| PRITZKER MILITARY LIBRARY N/A POF GENERAL SUPPORT 610 N. FAIRBANKS CT,   | •  |   | ł.           |  |                    |
| 610 N. FAIRBANKS CT,   | SPRINGFIELD, IL 62701  | - <del></del>                                   | <b></b>      | <del>                                     </del> | 13,000.            |
| 610 N. FAIRBANKS CT,   |  | 1   | 1            |  |                    |
| 610 N. FAIRBANKS CT,   | PRITZKER MILITARY LIBRARY  | N/A   | POF          | GENERAL SUPPORT                                  |                    |
|  |  |   | <b>[</b>     |  | ļ                  |
|  |  |   | }            |  | 30,000.            |
| 1 1  |  |   | 1            |  |                    |
|  |  |   | ]            |  |                    |
| REDMOON THEATRE N/A PC GENERAL SUPPORT   |  | N/A   | PC           | GENERAL SUPPORT                                  |                    |
| 2120 S. JEFFERSON ST.  |  |   | }            |  | 2 522              |
|  | <del></del>  |   | <del></del>  |  | 2,500.<br>761,200. |

| Part XV Supplementary Information          | <del></del> _                                   |                      |                                  | ·            |
|--|---|----------------------|----------------------------------|--------------|
| 3 Grants and Contributions Paid During the | If recipient is an individual.                  | <del>,</del>         | <del></del>                      | <del> </del> |
| Name and address (home or business)        | show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount       |
| realite and address (fights of pusitiess)  | or substantial contributor                      | recipient            | <del></del>                      | <del> </del> |
|  |   |                      |                                  | }            |
| REHAB INSTITUTE OF CHICAGO                 | N/A   | ₽C                   | GENERAL SUPPORT                  | }            |
| 345 E. SUPERIOR ST.                        |   | li .                 |                                  | 10.000       |
| CHICAGO, IL 60611                          |   | <del></del>          | <del> </del>                     | 10,000.      |
| RUSH UNIVERSITY MEDICAL CENTER ~           | N/A   | PC                   | GENERAL SUPPORT                  | l            |
| PARKINSONS STUDY                           |   | 1                    |                                  | 1            |
| 1725 W. HARRISON ST., SUITE 755            | }   | 1                    |                                  |              |
| CHICAGO, IL 60612                          |   | <del> </del>         | <del> </del>                     | 10,000.      |
|  |   |                      |                                  |              |
| SALVATION ARMY                             | N/A   | PC                   | GENERAL SUPPORT                  |              |
| P.O.BOX 1428                               | {   | }                    |                                  | }            |
| ALEXANDRIA, VA 22313                       |   | <del> </del>         | <del></del>                      | 10,000.      |
|  |   |                      |                                  |              |
| ST. MICHAEL'S PARISH                       | N/A   | PC                   | GENERAL SUPPORT                  |              |
| 1633 N. CLEVELAND AVE.                     |   | Į.                   |                                  | 1            |
| CHICAGO, IL 60612                          | _ <del></del>                                   | <u> </u>             | <del></del>                      | 2,000.       |
|  |   | 1                    |                                  | 1            |
| THE GREG JENNINGS FOUNDATION               | N/A   | POF                  | GENERAL SUPPORT                  | ł            |
| 141 W. MICHIGAN AVE. SUITE 203             |   |                      |                                  | 1            |
| KALAMAZOO, MI 49007                        |   |                      |                                  | 10,000.      |
|  |   |                      |                                  |              |
| THE JOFFREY BALLET                         | N/A   | PC                   | GENERAL SUPPORT                  |              |
| 10 E. RANDOLPH ST.                         | ,,,,  | ľ                    | SINDRAL BUITORI                  |              |
| CHICAO , IL 60601                          |   | <u> </u>             |                                  | 5,000.       |
|  |   |                      |                                  |              |
| THE NIGHT MINISTRY                         | N/A   | PC                   | GENERAL SUPPORT                  | •            |
| 4711 N. RAVENSWOOD AVENUE                  | ,   | Ĭ                    | SENERAL SOLIORI                  |              |
| CHICAGO, IL 60640                          |   |                      |                                  | 10,000.      |
|  |   |                      |                                  |              |
| THE WILD ANIMAL SACTUARY                   | N/A   | PC                   | GENERAL SUPPORT                  |              |
| 1946 CO RD. 53                             |   |                      |                                  |              |
| KEENESBURG, CO 80643                       |   | <u> </u>             |                                  | 5,000.       |
| <del></del>                                |   |                      |                                  |              |
| USO  | N/A   | PC                   | GENERAL SUPPORT                  |              |
| 333 S. WABASH AVENUE,                      | [   |                      | 5011001                          |              |
| CHICAGO, IL 60604                          |   |                      | <u> </u>                         | 66,000.      |
| - <del></del>                              |   |                      |                                  |              |
| WORLD WILDLIFE FUND                        | N/A   | ₽C                   | GENERAL SUPPORT                  |              |
| 1250 24TH ST NW                            | [ · · ·   | [ -                  | 5011001                          | }            |
| WASHINGTON, DC 20037                       |   |                      |                                  | 200,000.     |
| Total from continuation sheets             |   |                      |                                  |              |

| FORM 990-PF | INTEREST ( | ON SAVINGS | AND | TEMPORARY | CASH | INVESTMENTS | STATEMENT | 1 |
|-------------|------------|------------|-----|-----------|------|-------------|-----------|---|
|-------------|------------|------------|-----|-----------|------|-------------|-----------|---|

| SOURCE                       | (A)       | (B)            | (C)        |
|------------------------------|-----------|----------------|------------|
|                              | REVENUE   | NET INVESTMENT | ADJUSTED   |
|                              | PER BOOKS | INCOME         | NET INCOME |
| BMO HARRIS                   | 8,418.    | 8,418.         |            |
| FROM K-1 - TIG PARTNERS, LLC | 30.       | 30.            |            |
| JPMORGAN #0989 - CHECKING    | 8.        | 8.             |            |
| JPMORGAN #6007               | 23.       | 23.            |            |
| TOTAL TO PART I, LINE 3      | 8,479.    | 8,479.         |            |

| FORM 990-PF                          | DIVIDENDS       | AND INTEREST                  | FROM SECUR                  | ITIES ST                          | TATEMENT 2                    |
|--------------------------------------|-----------------|-------------------------------|-----------------------------|-----------------------------------|-------------------------------|
| SOURCE                               | GROSS<br>AMOUNT | CAPITAL<br>GAINS<br>DIVIDENDS | (A)<br>REVENUE<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME |
| BMO HARRIS                           | 77,111.         | 0.                            | 77,111.                     | 77,111.                           |                               |
| FROM K-1 - EAGLE<br>PINES INVESTORS, |                 |                               |                             |                                   |                               |
| L.L.C.<br>FROM K-1 -                 | 1.              | 0.                            | 1.                          | 1.                                |                               |
| SANDBURG VILLAGE                     |                 |                               |                             |                                   |                               |
| ASSOCIATES, LLC                      | 1.              | 0.                            | 1.                          | 1.                                |                               |
| FROM K-1 - TIG<br>PARTNERS, LLC      | 1.              | 0.                            | 1.                          | 1.                                |                               |
| JPMORGAN #0002                       | 10,468.         | 0.                            | 10,468.                     |                                   |                               |
| JPMORGAN #6007                       | 29,782.         | 0.                            | 29,782.                     | =                                 |                               |
| JPMORGAN #7008                       | 537.            | 0.                            | 537.                        | -                                 |                               |
| TO PART I, LINE 4                    | 117,901.        | 0.                            | 117,901.                    | 117,901.                          |                               |

| FORM 990-PF OTHER                     | INCOME                      |                                   | STATEMENT 3                   |
|---------------------------------------|-----------------------------|-----------------------------------|-------------------------------|
| DESCRIPTION                           | (A)<br>REVENUE<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME |
| FROM K-1 - SANDBURG VILLAGE LLC       | -76.                        | -76.                              |                               |
| TOTAL TO FORM 990-PF, PART I, LINE 11 | -76.                        | -76.                              |                               |

| FORM, 990-PF                            | ACCOUNTI                     | NG FEES                           | STATEMENT 4                   |                               |  |
|---|------------------------------|-----------------------------------|-------------------------------|-------------------------------|--|
| DESCRIPTION                             | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLI<br>PURPOSES |  |
| DELOITTE TAX                            | 10,650.                      | 10,650.                           |                               | 0 .                           |  |
| TO FORM 990-PF, PG 1, LN 16B            | 10,650.                      | 10,650.                           |                               | 0.                            |  |
| FORM 990-PF (                           | OTHER PROFES                 | SIONAL FEES                       |                               | STATEMENT 5                   |  |
| DESCRIPTION                             | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVEST-<br>MENT INCOME | (C)<br>ADJUSTED<br>NET INCOME | (D)<br>CHARITABLE<br>PURPOSES |  |
| REED SMITH<br>BMO HARRIS<br>JPMORGAN    | 31,140.<br>13,428.<br>9,622. | 13,428.                           |                               | 0.0                           |  |
| TO FORM 990-PF, PG 1, LN 16C            | 54,190.                      | 54,190.                           |                               | 0.                            |  |
| FORM 990-PF                             | TAX (A) EXPENSES             | (B) NET INVEST-                   | (C)<br>ADJUSTED               | (D) CHARITABLE                |  |
| DESCRIPTION                             | PER BOOKS                    | MENT INCOME                       | NET INCOME                    |                               |  |
| STATE TAX<br>FEDERAL TAX<br>FOREIGN TAX | 115.<br>12,328.<br>2,653.    | 115.<br>12,328.<br>2,653.         |                               | 0 .<br>0 .                    |  |
| TO FORM 990-PF, PG 1, LN 18             | 15,096.                      | 15,096.                           |                               | 0                             |  |
| =                                       | <del></del>                  |                                   |                               |                               |  |
| FORM 990-PF                             | CORPORAT                     | E STOCK                           |                               | STATEMENT 7                   |  |
| FORM 990-PF DESCRIPTION                 | CORPORAT                     | вос                               | OK VALUE                      | FAIR MARKET<br>VALUE          |  |
|   |                              | BO0                               | OK VALUE<br>5,069,442.        | FAIR MARKET                   |  |