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Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
A S S E T S	1	Cash – non-interest-bearing			
	2	Savings and temporary cash investments	191,855.	258,752.	258,752.
	3	Accounts receivable			
		Less: allowance for doubtful accounts ►			
	4	Pledges receivable			
		Less: allowance for doubtful accounts ►			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch) . ►			
		Less: allowance for doubtful accounts ►			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments – U.S. and state government obligations (attach schedule)			
	b	Investments – corporate stock (attach schedule). L-10b. Stmt	1,463,857.	1,420,230.	1,420,230.
	c	Investments – corporate bonds (attach schedule). L-10c. Stmt	83,789.	81,984.	81,984.
	11	Investments – land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment: basis . ►			
		Less: accumulated depreciation (attach schedule)			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers – see the instructions. Also, see page 1, item I)	1,739,501.	1,760,966.	1,760,966.
L I A B I L I T I E S	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, & other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ►)			
	23	Total liabilities (add lines 17 through 22)			
N F E U T N D A S B S A E T A S N C O R E S		Foundations that follow SFAS 117, check here ► and complete lines 24 through 26 and lines 30 and 31.			
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here ► and complete lines 27 through 31.	X		
	27	Capital stock, trust principal, or current funds	1,739,501.	1,760,966.	
	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see instructions)	1,739,501.	1,760,966.	
	31	Total Liabilities and net assets/fund balances (see instructions)	1,739,501.	1,760,966.	

Part III **Analysis of Changes in Net Assets or Fund Balances**

1	Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,739,501.
2	Enter amount from Part I, line 27a	2	221,132.
3	Other increases not included in line 2 (itemize) . . . ► <u>Rounding</u>	3	4.
4	Add lines 1, 2, and 3	4	1,960,637.
5	Decreases not included in line 2 (itemize) . . . ► <u>Unrealized Losses on Securities</u>	5	199,671.
6	Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30	6	1,760,966.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company)		(b) How acquired P — Purchase D — Donation	(c) Date acquired (mo., day, yr)	(d) Date sold (mo., day, yr)
1a Northern Trust STCG		P	various	various
b Northern Trust LTCG		P	various	various
c Capital Gain Dividends				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a 15,525.		19,643.	-4,118.	
b 218,680.		63,186.	155,494.	
c 6,993.		0.	6,993.	
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h)) gain minus col. (k), but not less than -0- or Losses (from col. (h))	
a			-4,118.	
b			155,494.	
c			6,993.	
d				
e				
2 Capital gain net income or (net capital loss).	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7		2	158,369.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):			3	
If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in Part I, line 8				

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2014	63,342.	1,626,708.	0.038939
2013	48,103.	1,334,555.	0.036044
2012	33,717.	1,059,539.	0.031822
2011	30,102.	954,531.	0.031536
2010	20,824.	721,638.	0.028857
2 Total of line 1, column (d)			2 0.167198
3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 0.033440
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.			4 1,790,823.
5 Multiply line 4 by line 3			5 59,885.
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 1,860.
7 Add lines 5 and 6.			7 61,745.
8 Enter qualifying distributions from Part XII, line 4			8 83,000.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)

1 a Exempt operating foundations described in section 4940(d)(2), check here	<input type="checkbox"/>	and enter 'N/A' on line 1.		
Date of ruling or determination letter: _____ (attach copy of letter if necessary – see Instrs)				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here	<input checked="" type="checkbox"/>	and enter 1% of Part I, line 27b	1	1,860.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			2	0.
3 Add lines 1 and 2			3	1,860.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5	1,860.
6 Credits/Payments:				
a 2015 estimated tax pmts and 2014 overpayment credited to 2015	6 a	1,585.		
b Exempt foreign organizations – tax withheld at source	6 b			
c Tax paid with application for extension of time to file (Form 8868)	6 c	1,205.		
d Backup withholding erroneously withheld	6 d			
7 Total credits and payments. Add lines 6a through 6d	7	2,790.		
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	930.		
11 Enter the amount of line 10 to be Credited to 2016 estimated tax	930.	Refunded	11	

Part VII-A Statements Regarding Activities

1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		Yes	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1 b	X	
<i>If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>			
c Did the foundation file Form 1120-POL for this year?	1 c	X	
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
(1) On the foundation	(1)		
(2) On foundation managers	(2)	\$	
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers			
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	X	
<i>If Yes, attach a detailed description of the activities.</i>			
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? <i>If Yes, attach a conformed copy of the changes</i>	3	X	
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a	X	
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	4 b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	X	
<i>If Yes, attach the statement required by General Instruction T.</i>			
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? <i>If Yes, complete Part II, col. (c), and Part XV</i>	7	X	
8 a Enter the states to which the foundation reports or with which it is registered (see instructions)	8 a		
<u>IL - Illinois</u>			
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If No, attach explanation</i>	8 b	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? <i>If Yes, complete Part XIV</i>	9	X	
10 Did any persons become substantial contributors during the tax year? <i>If Yes, attach a schedule listing their names and addresses</i>	10	X	

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11	X
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	X
Website address ► N/A			
14	The books are in care of ► MJ Harris Telephone no. ► (312) 676-0324		
Located at ► c/o Briar Hall, 200 W Madison St, #3400 Chicago IL ZIP + 4 ► 60606			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here ► 15		
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country ►			

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 b	
Organizations relying on a current notice regarding disaster assistance check here ►			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?	1 c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a	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 before 2015?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If 'Yes,' list the years ► 20 __ , 20 __ , 20 __ , 20 __ .			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions.)	2 b	
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ► 20 __ , 20 __ , 20 __ , 20 __ .		
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If 'Yes,' did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015)	3 b	
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 a	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4 b	X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5 a During the year did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?. Yes No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?. Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes?. Yes No

(4) Provide a grant to an organization other than a charitable, etc, organization described in section 4945(d)(4)(A)? (see instructions). Yes No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?. Yes No

b If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

Organizations relying on a current notice regarding disaster assistance check here

c If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If 'Yes' to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

b If 'Yes' did the foundation receive any proceeds or have any net income attributable to the transaction?

Part VIII: Information About Officers, Directors, Trustees, Foundation Managers, Highly-Paid Employees

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see Instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Jonathan C. Hamill 545 Oak Knoll Road Barrington IL 60010	Trustee 0.00	0.	0.	0.
Nancy H. Hamill 545 Oak Knoll Road Barrington IL 60010	Trustee 0.00	0.	0.	0.
Susan C.H. Simmers 353 Dutton Hill West Norwich VT 05055	Trustee 0.00	0.	0.	0.
Kimberly C.H. Dietz 1333 South Boulevard Evanston IL 60202	Trustee 0.00	0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1 – see Instructions). If none, enter 'NONE.'

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

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes:		
a Average monthly fair market value of securities	1 a	1,562,850.
b Average of monthly cash balances	1 b	255,244.
c Fair market value of all other assets (see instructions)	1 c	
d Total (add lines 1a, b, and c)	1 d	1,818,094.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1 e	
2 Acquisition indebtedness applicable to line 1 assets	2	
3 Subtract line 2 from line 1d	3	1,818,094.
4 Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	27,271.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,790,823.
6 Minimum Investment return. Enter 5% of line 5	6	89,541.

Part XI 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.)

1 Minimum investment return from Part X, line 6	1	89,541.
2a Tax on investment income for 2015 from Part VI, line 5	2 a	1,860.
b Income tax for 2015. (This does not include the tax from Part VI)	2 b	
c Add lines 2a and 2b	2 c	1,860.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	87,681.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	87,681.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	87,681.

Part XII Qualifying Distributions (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes:		
a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	83,000.
b Program-related investments — total from Part IX-B.	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3 a	
b Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	83,000.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	1,860.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	81,140.

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.

Part XIII. Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				87,681.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			78,502.	
b Total for prior years: 20 ___, 20 ___, 20 ___.				
3 Excess distributions carryover, if any, to 2015:				
a From 2010				
b From 2011				
c From 2012				
d From 2013				
e From 2014				
f Total of lines 3a through e				
4 Qualifying distributions for 2015 from Part XII, line 4 ► \$ 83,000.				
a Applied to 2014, but not more than line 2a			78,502.	
b Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2015 distributable amount				4,498.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
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 instructions				0.
f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016				83,183.
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)				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2011	0.			
b Excess from 2012	0.			
c Excess from 2013	0.			
d Excess from 2014	0.			
e Excess from 2015	0.			

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
Various Cash-See Attached 200 West Madison St #3400 Chicago IL 60606		501c3	see statement	83,000.
Total			► 3a	83,000.
<i>b Approved for future payment</i>				
Total			► 3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

(See worksheet in line 13 instructions to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service

Name of the organization

The Corwith Fund

OMB No 1545-0047

Schedule of Contributors**2015**

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

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

Organization type (check one):

Filers of:

Form 990 or 990-EZ

Section:

501(c)() (enter number) organization
 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
 527 political organization

Form 990-PF

501(c)(3) exempt private foundation
 4947(a)(1) nonexempt charitable trust treated as a private foundation
 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 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 **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ► \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer 'No' on Part IV, line 2, of its Form 990; or check the box on 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).

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

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

Name of organization

The Corwith Fund

Employer identification number

26-1393157

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Jonathan C. Hamill 200 W. Madison Street, #3400 Chicago IL 60606	\$ 115,555	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash
			(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	-	\$ -	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash
			(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	-	\$ -	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash
			(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	-	\$ -	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash
			(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	-	\$ -	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash
			(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-	-	\$ -	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash
			(Complete Part II for noncash contributions.)

Name of organization

The Corwith Fund

Employer identification number

26-1393157

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	1000 shares Hospira (HSP)	\$ 87,660.	03/03/15
1	333 shares Kraft Food Groups (KRFT)	\$ 27,895.	03/26/15
		\$	
		\$	
		\$	
		\$	
		\$	

BAA

Name	Employer Identification Number
The Corwith Fund	26-1393157
Asset Information:	
Description of Property: Northern Trust STCG	
Date Acquired:	How Acquired:
Date Sold: various	Name of Buyer:
Sales Price: 15,525.	Cost or other basis (do not reduce by depreciation) 19,643.
Sales Expense:	Valuation Method:
Total Gain (Loss): -4,118.	Accumulation Depreciation:
Description of Property: Northern Trust LTCG	
Date Acquired: various	How Acquired:
Date Sold: various	Name of Buyer:
Sales Price: 218,680.	Cost or other basis (do not reduce by depreciation) 63,186.
Sales Expense:	Valuation Method:
Total Gain (Loss): 155,494.	Accumulation Depreciation:
Description of Property: Capital Gains Dividends	
Date Acquired: various	How Acquired:
Date Sold: various	Name of Buyer:
Sales Price: 6,993.	Cost or other basis (do not reduce by depreciation) 0.
Sales Expense:	Valuation Method:
Total Gain (Loss): 6,993.	Accumulation Depreciation:
Description of Property:	
Date Acquired:	How Acquired:
Date Sold:	Name of Buyer:
Sales Price:	Cost or other basis (do not reduce by depreciation)
Sales Expense:	Valuation Method:
Total Gain (Loss):	Accumulation Depreciation:
Description of Property:	
Date Acquired:	How Acquired:
Date Sold:	Name of Buyer:
Sales Price:	Cost or other basis (do not reduce by depreciation)
Sales Expense:	Valuation Method:
Total Gain (Loss):	Accumulation Depreciation:
Description of Property:	
Date Acquired:	How Acquired:
Date Sold:	Name of Buyer:
Sales Price:	Cost or other basis (do not reduce by depreciation)
Sales Expense:	Valuation Method:
Total Gain (Loss):	Accumulation Depreciation:
Description of Property:	
Date Acquired:	How Acquired:
Date Sold:	Name of Buyer:
Sales Price:	Cost or other basis (do not reduce by depreciation)
Sales Expense:	Valuation Method:
Total Gain (Loss):	Accumulation Depreciation:
Description of Property:	
Date Acquired:	How Acquired:
Date Sold:	Name of Buyer:
Sales Price:	Cost or other basis (do not reduce by depreciation)
Sales Expense:	Valuation Method:
Total Gain (Loss):	Accumulation Depreciation:
Description of Property:	
Date Acquired:	How Acquired:
Date Sold:	Name of Buyer:
Sales Price:	Cost or other basis (do not reduce by depreciation)
Sales Expense:	Valuation Method:
Total Gain (Loss):	Accumulation Depreciation:

Form 990-PF, Page 1, Part I, Line 11

Line 11 Stmt

Other income:	Rev/Exp Book	Net Inv Inc	Adj Net Inc
Sect. 1411 Net Investment Income	12.	12.	
Non-Dividend Distributions	2,609.	0.	
Total	<u>2,621.</u>	<u>12.</u>	

Form 990-PF, Page 2, Part II, Line 10b

L-10b Stmt

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
Equity Securities-Northern Trust Corp.	1,420,230.	1,420,230.
Total	<u>1,420,230.</u>	<u>1,420,230.</u>

Form 990-PF, Page 2, Part II, Line 10c

L- 10c Stmt

Line 10c - Investments - Corporate Bonds:	End of Year	
	Book Value	Fair Market Value
Corporate Bonds-Northern Trust Corp.	81,984.	81,984.
Total	<u>81,984.</u>	<u>81,984.</u>

The Corwith Fund
2015 Charitable Contributions

Type	Date cleared	Check #	Name	Purpose	Address	City	State	Zip	Amount*
Check	01/06/15	286	Chicago Maritime Museum	Arts, Culture, Humanities	310 South Racine	Chicago	IL	60607	1,000.00
Check	01/12/15	287	Doctors without Borders	Health	P.O. Box 5030	Hagerstown	MD	21741-5030	1,000.00
Check	02/24/15	289	Neighborhood Health Clinic	Health	121 Goodlette Road North	Naples	FL	34102	5,000.00
Check	02/26/15	290	Conservancy of Southwest Florida	Environment	1450 Merrihue Drive	Naples	FL	34102	3,500.00
Check	02/27/15	288	Elgin Academy	Education	350 Park Street	Elgin	IL	60120	1,000.00
Check	03/05/15	291	Northwestern University - Kellogg School of Mgmt	Education	2001 Sheridan Road	Evanston	IL	60208-2001	1,000.00
Check	03/06/15	293	Conservancy of Southwest Florida	Environment	1450 Merrihue Drive	Naples	FL	34102	2,500.00
Check	03/09/15	292	Chicago Zoological Society	Animals	3300 Golf Road	Brookfield	IL	60513	1,000.00
Check	03/19/15	294	National Parks Conservation Assn.	Environment	8 South Michigan Ave. #2900	Chicago	IL	60603-3302	1,000.00
Check	03/25/15	295	Yale University	Education	PO Box 1844	New Haven	CT	06508-1844	1,000.00
Check	04/02/15	297	Preservation Foundation	Environment	1899 West Winchester Road	Libertyville	IL	60048	1,000.00
Check	04/03/15	299	Chicago History Museum	Arts, Culture, Humanities	1601 N. Clark St.	Chicago	IL	60614	1,000.00
Check	04/06/15	296	National Trust for Historic Preservation	Arts, Culture, Humanities	2600 Virginia Avenue NW, Suite 1000	Washington	DC	20037	1,000.00
Check	04/06/15	298	Life Flight Foundation	Health	PO Box 899	Camden	ME	04843	1,000.00
Check	04/27/15	300	Yale University	Education	PO Box 1844	New Haven	CT	06508-1844	1,500.00
Check	04/27/15	301	Rush University	Health	1700 W. Van Buren Street, Suite 250	Chicago	IL	60612	2,500.00
Check	05/04/15	303	Conservancy of Southwest Florida	Environment	1450 Merrihue Drive	Naples	FL	34102	2,500.00
Check	05/06/15	302	NCH Healthcare Foundation	Human Services	PO Box 234	Naples	FL	34106-0234	2,500.00
Check	05/07/15	304	Shedd Aquarium	Animals	1200 S Lake Shore Drive	Chicago	IL	60605	2,500.00
Check	06/01/15	305	Journey Care Foundation	Health	405 Lake Zurich Road	Barrington	IL	60010	2,500.00
Check	06/01/15	306	Barrington Area Council on Aging	Human Services	6000 Garlands Lane, Suite 100	Barrington	IL	60010	500.00
Check	06/01/15	313	Citizens for Conservation	Environment	459 W. Highway 22,	Barrington	IL	60010	1,000.00
Check	06/03/15	309	Barrington 220 Educational Foundation	Education	PO Box 262	Barrington	IL	60011	1,000.00
Check		310	CHECK VOIDED						
Check	06/04/15	311	Trust for Public Land	Environment	116 New Montgomery Street, 4th floor	San Francisco	CA	94105-3680	1,000.00
Check	06/05/15	307	Naples Historical Society	Arts, Culture, Humanities	137 12th Avenue South	Naples	FL	34102	1,000.00
Check	06/05/15	312	Student Conservation Association	Environment	224 S Michigan Ave, Suite 400	Chicago	IL	60604	1,000.00
Check	06/10/15	308	American Cancer Society	Health	PO Box 22718	Oklahoma City	OK	73123-1718	1,000.00
Check	06/15/15	314	Amazon Conservation Team	Environment	4211 N. Fairfax Drive	Arlington	VA	22203	1,000.00
Check	08/13/15	315	Land Trust Alliance	Environment	1660 L Street NW, Suite 1100	Washington	DC	20036	1,000.00
Check	08/13/15	316	Woman's Board of Rush University Medical Center	Health	1700 W. Van Buren Street, Suite 250	Chicago	IL	60612	1,000.00
Check	08/18/15	318	Garfield Farm Museum	Environment	PO Box 403	LaFox	IL	60147	1,000.00
Check	08/20/15	320	Trout Unlimited	Environment	1300 N. 17th Street, Suite 500	Arlington	VA	22203-2404	1,000.00
Check	08/24/15	317	Max McGraw Wildlife Foundation	Environment	PO Box 9	Dundee	IL	60118	1,000.00
Check	09/01/15	323	Barrington Area Conservation Trust	Environment	210 W. Main Street	Barrington	IL	60010	2,500.00

Check	09/03/15	324	Barrington Area Community Foundation	Human Services	421 N. Northwest Highway, Suite 201	Barrington	IL	60010	5,000.00
Check	09/04/15	319	Conserve Lake County	Environment	32492 N. Almond Road	Grayslake	IL	60030	1,000.00
Check	09/04/15	322	Barrington Area United Way	Human Services	200 S. Hough Street	Barrington	IL	60010-4322	2,500.00
Check	09/08/15	321	Journey Care Foundation	Health	405 Lake Zurich Road	Barrington	IL	60010	1,000.00
Check	09/17/15	325	Openlands	Environment	25 East Washington Street, Suite 1650	Chicago	IL	60602-1708	2,500.00
Check	09/28/15	326	Yale University	Education	PO Box 1844	New Haven	CT	06508-1844	1,000.00
Check	10/09/15	327	Barrington Giving Day	Human Services	201 S. Hough Street	Barrington	IL	60010	1,000.00
Check	10/27/15	329	Chicago Zoological Society	Environment	3300 Golf Road	Brookfield	IL	60513	4,000.00
Check	11/02/15	328	R.A.R.E.	Environment	1310 North Courthouse Road, Suite 110	Arlington	VA	22201	2,500.00
Check	11/03/15	330	Partners for Livable Communities	Human Services	1429 21st St NW	Washington	DC	20036	1,000.00
Check	11/25/15	331	Naples Zoo	Environment	1590 Goodlette-Frank Road	Naples	FL	34102	10,000.00
Check	12/01/15	332	Guadalupe Center of Immokalee	Human Services	509 Hope Circle	Immokalee	FL	34142	500.00
									<u><u>83,000.00</u></u>