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Form

990-PF

Department of the Treasury  
Internal Revenue Service

Return of Private Foundation

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

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▶ Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).






OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015, and ending 12-31-2015

Name of foundation ALBEN F & CLARA G BATES FOUNDATION		A Employer identification number  36-6081072	
Number and street (or P O box number if mail is not delivered to street address) 159 COTTAGE HILL ROAD APT 113		Room/suite	B Telephone number (see instructions)  (630) 832-1070
City or town, state or province, country, and ZIP or foreign postal code ELMHURST, IL 60126			
G Check all that apply <div><input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here  2. Foreign organizations meeting the 85% test, check here and attach computation	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ 4,627,869		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	
J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule) . . . . .				
	2 Check ▶ <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments	180	180		
	4 Dividends and interest from securities . . . . .	123,652	123,652		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10 	50,839			
	b Gross sales price for all assets on line 6a 172,492				
	7 Capital gain net income (from Part IV, line 2) . . . .		37,492		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .				
	12 Total.Add lines 1 through 11 . . . . .	174,671	161,324		
	13 Compensation of officers, directors, trustees, etc	10,786	5,393		5,393
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule). . . . .				
	b Accounting fees (attach schedule). . . . . 	2,975	2,975		
	c Other professional fees (attach schedule) . . . . .				
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . . . 	2,213	2,213		
	19 Depreciation (attach schedule) and depletion . . . 	118	118		
	20 Occupancy . . . . .	5,063	2,532		2,531
	21 Travel, conferences, and meetings. . . . .				
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule). . . . . 	6,383	6,355		28
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	27,538	19,586		7,952
	25 Contributions, gifts, grants paid . . . . .	257,000			257,000
	26 Total expenses and disbursements.Add lines 24 and 25	284,538	19,586		264,952
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-109,867			
	b Net investment income (if negative, enter -0-)		141,738		
	c Adjusted net income(if negative, enter -0-) . . . .				

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
Assets	1	Cash—non-interest-bearing . . . . .	137,704	53,556	53,556
	2	Savings and temporary cash investments . . . . .			
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions). . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	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) . . . . .	3,353,558	3,327,824	4,571,307
	c	Investments—corporate bonds (attach schedule) . . . . .			
	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 ▶ _____ 4,922 Less accumulated depreciation (attach schedule) ▶ 1,916	3,124	3,006	3,006
15	Other assets (describe ▶ _____)				
16	Total assets(to be completed by all filers—see the instructions Also, see page 1, item I)		3,494,386	3,384,386	4,627,869
Liabilities	17	Accounts payable and accrued expenses . . . . .	781	648	
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule). . . . .			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities(add lines 17 through 22) . . . . .		781	648
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted . . . . .	3,493,605	3,383,738	
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds . . . . .			
	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) . . . . .		3,493,605	3,383,738
31	Total liabilities and net assets/fund balances(see instructions) . . . . .		3,494,386	3,384,386	

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	3,493,605
2	Enter amount from Part I, line 27a . . . . .	2	-109,867
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3 . . . . .	4	3,383,738
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	6	3,383,738

Part IV

Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co )		How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr )	Date sold (d) (mo , day, yr )
1a				
b				
c				
d				
e				

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or (l) Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
a			
b			
c			
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	37,492
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 . . . . . }		3	

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 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	417,854	5,193,160	0 080462
2013	356,100	4,794,798	0 074268
2012	331,675	4,378,041	0 075759
2011	317,500	4,397,641	0 072198
2010	373,000	4,343,940	0 085867

2	Total of line 1, column (d). . . . .	2	0 388554
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 077711
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5. . . . .	4	4,937,015
5	Multiply line 4 by line 3. . . . .	5	383,660
6	Enter 1% of net investment income (1% of Part I, line 27b). . . . .	6	1,417
7	Add lines 5 and 6. . . . .	7	385,077
8	Enter qualifying distributions from Part XII, line 4. . . . .	8	264,952

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 page 18 of the instructions)

1a

Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1  
Date of ruling or determination letter \_\_\_\_\_  
(attach copy of letter if necessary—see instructions)

b

Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b . . . . .

c

All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)

2

Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

2

3

Add lines 1 and 2. . . . .

3

2,835

4

Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

4

5

**Tax based on investment income.** Subtract line 4 from line 3. If zero or less, enter -0- . . . . .

5

2,835

6

Credits/Payments

a

2015 estimated tax payments and 2014 overpayment credited to 2015

6a

1,459

b

Exempt foreign organizations—tax withheld at source . . . . .

6b

c

Tax paid with application for extension of time to file (Form 8868). . . . .

6c

6,000

d

Backup withholding erroneously withheld . . . . .

6d

7

Total credits and payments. Add lines 6a through 6d. . . . .

7

7,459

8

Enter any **penalty** for underpayment of estimated tax. Check here ☒ if Form 2220 is attached

8

2

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

4,622

11

Enter the amount of line 10 to be **Credited to 2015 estimated tax** 4,622 **Refunded**

11

Part VII-A

Statements Regarding Activities

1a

During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .

1a

No

b

Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . .

1b

No

If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.

c

Did the foundation file **Form 1120-POL** for this year? . . . . .

1c

No

d

Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  
(1) On the foundation \$ \_\_\_\_\_ (2) On foundation managers \$ \_\_\_\_\_

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? . . . . .  
If "Yes," attach a detailed description of the activities.

2

No

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

No

4a

Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .

4a

No

b

If "Yes," has it filed a tax return on **Form 990-T** for this year? . . . . .

4b

5

Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . .  
If "Yes," attach the statement required by General Instruction T.

5

No

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

Yes

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

Yes

8a

Enter the states to which the foundation reports or with which it is registered (see instructions)  
 IL \_\_\_\_\_

b

If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .

8b

Yes

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)?  
If "Yes," complete Part XIV . . . . .

9

No

10

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses. . . . .

10

No

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	Yes	
14	The books are in care of JOSEPHINE PRASIL Telephone no (630) 832-1070 Located at 159 COTTAGE HILL RD ELMHURST IL ZIP+4 60126			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year.	15		
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? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country	16	Yes	No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	No	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	No	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	No	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	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)?	Yes	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).	Yes	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)?	1b		
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?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?	Yes	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).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes	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).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
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?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a

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)?

5b

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?

☐ Yes

☐ No

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?

☐ Yes

☒ No

b

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

6b

No

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?

☐ Yes

☒ No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

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	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

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	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				

Total

number of other employees paid over \$50,000.

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Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services. ▶

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 ALL INCOME RECEIVED WAS DISTRIBUTED DIRECTLY TO CHARITABLE ORGANIZATIONS AS LISTED ON THE ATTACHMENT TO THIS RETURN AND AS SHOWN ON PART 1, LINE 25. NO CONFERENCES, RESEARCH PAPERS, ETC. WERE INVOLVED. ALL DISTRIBUTIONS WERE SIMPLY MAILED OUT TO RECIPIENT ORGANIZATIONS.	
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3. ▶	



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. . . . .	1a	4,980,924
b	Average of monthly cash balances. . . . .	1b	31,274
c	Fair market value of all other assets (see instructions). . . . .	1c	0
d	Total (add lines 1a, b, and c). . . . .	1d	5,012,198
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	
3	Subtract line 2 from line 1d. . . . .	3	5,012,198
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	75,183
5	Net value of noncharitable-use assets.Subtract line 4 from line 3 Enter here and on Part V, line 4	5	4,937,015
6	Minimum investment return.Enter 5% of line 5. . . . .	6	246,851

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	246,851
2a	Tax on investment income for 2015 from Part VI, line 5. . . . .	2a	2,835
b	Income tax for 2015 (This does not include the tax from Part VI ). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	2,835
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	244,016
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	
5	Add lines 3 and 4. . . . .	5	244,016
6	Deduction from distributable amount (see instructions). . . . .	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	244,016

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. . . . .	1a	264,952
b	Program-related investments—total from Part IX-B. . . . .	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required). . . . .	3a	
b	Cash distribution test (attach the required schedule). . . . .	3b	
4	Qualifying distributions.Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	264,952
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . .	5	
6	Adjusted qualifying distributions.Subtract line 5 from line 4. . . . .	6	264,952

**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				244,016
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.				
b Total for prior years 20__, 20__, 20__				
3 Excess distributions carryover, if any, to 2015				
a From 2010.	157,535			
b From 2011.	100,608			
c From 2012.	115,012			
d From 2013.	118,861			
e From 2014.	161,370			
f Total of lines 3a through e.	653,386			
4 Qualifying distributions for 2015 from Part XII, line 4	\$ 264,952			
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2015 distributable amount.				244,016
e Remaining amount distributed out of corpus	20,936			
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	674,322			
b Prior years' undistributed income Subtract line 4b from line 2b.				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions.				
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions.				
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015.				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions).	157,535			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a.	516,787			
10 Analysis of line 9				
a Excess from 2011.	100,608			
b Excess from 2012.	115,012			
c Excess from 2013.	118,861			
d Excess from 2014.	161,370			
e Excess from 2015.	20,936			

## Part XIV

**b** Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

**b** 85% of line 2a . . . . .

**d** Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .

**3** Complete 3a, b, or c for the alternative test relied upon

**a** "Assets" alternative test—enter

(1) Value of all assets . . . . .

(2) Value of assets qualifying  
under section 4942(j)(3)(B)(i)

**b** "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .

**c** "Support" alternative test—enter

**(1)** Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . .

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .

**(3)** Largest amount of support from an exempt organization

**(4) Gross investment income**

## Part XV

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

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

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

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed

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

**c** Any submission deadlines

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

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)				
a Paid during the year See Additional Data Table				
Total . . . . .			3a	257,000
b Approved for future payment				
Total . . . . .			3b	

Enter gross amounts unless otherwise indicated

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

Form **990-PF** (2015)



Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
JOSEPHINE B PRASIL	VP/SEC/ASST 10 00	10,786	0	0
159 COTTAGE HILL AVENUE 113 ELMHURST,IL 60126				
ROBERT WIER	DIRECTOR 1 00	0	0	0
159 COTTAGE HILL AVENUE 113 ELMHURST,IL 60126				
HENRY G BATES	TREASURER 1 00	0	0	0
159 COTTAGE HILL AVENUE 113 ELMHURST,IL 60126				
CHRISTINE B CRUM	PRESIDENT 1 00	0	0	0
159 COTTAGE HILL AVENUE 113 ELMHURST,IL 60126				
JILL E DICKENS	VP 1 00	0	0	0
159 COTTAGE HILL AVENUE 113 ELMHURST,IL 60126				

Form 990PF Part XV Line 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)				
<b>a</b> Paid during the year				
1ST CONGREGATIONAL CHURCH ELMHURST 235 S KENILWORTH ELMHURST,IL 60126	NONE		UNRESTRICTED	3,000
ACADEMY AT OCEAN REEF 395 S HARBOR DRIVE KEY LARGO,FL 33037	NONE		UNRESTRICTED	150
ADVENTIST LA GRANGE MEMORIAL HOSP 5101 S WILLOW SPRINGS RD LA GRANGE,IL 60525	NONE		UNRESTRICTED	1,000
ALAN GUTTMACHER INSTITUTE 125 MAIDEN LANE NEWYORK,NY 10038	NONE		UNRESTRICTED	150
AMERICAN CANCER SOCIETY 1801 S MEVERS RD SUITE 1 OAK BROOK,IL 60181	NONE		UNRESTRICTED	1,000
AMERICAN DIABETES ASSOCIATION 55 E MONROE SUITE 3420 CHICAGO,IL 60603	NONE		UNRESTRICTED	1,000
AMERICAN HEART ASSOCIATION 208 S LASALLE CHICAGO,IL 60604	NONE		UNRESTRICTED	1,000
AMERICAN RED CROSS 2025 E STREET NW WASHINGTON,DC 20006	NONE		UNRESTRICTED	1,000
ART INSTITUTE OF CHICAGO 111 S MICHIGAN AVENUE CHICAGO,IL 606036110	NONE		UNRESTRICTED	250
ASSEMBLY BD OF HINSDALE HOSPITALFTN 120 N OAK STREET 5TH FLOO HINSDALE,IL 60521	NONE		UNRESTRICTED	1,000
AURORA UNIVERSITY - MUSIC ON THE LA 350 CONSTANCE BOULEVAARD WILLIAMS BAY,WI 53191	NONE		UNRESTRICTED	1,000
BAPTIST HOSPITAL FOUNDATION 8900 N KENDALL DRIVE MIAMI,FL 331762197	NONE		UNRESTRICTED	10,000
BRAIN RESEARCH FOUNDATION 111 W WASHINGTON SUITE 17 CHICAGO,IL 60602	NONE		UNRESTRICTED	250
BROOKFIELD ZOO 3300 GOLF ROAD BROOKFIELD,IL 60513	NONE		UNRESTRICTED	500
BSA THREE FIRES COUNCIL 415 N 2ND STREET ST CHARLES,IL 60174	NONE		UNRESTRICTED	750
<b>Total . . . . .</b>				257,000



Form 990PF Part XV Line 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)				
<b>a</b> Paid during the year				
CAMP EDWARDS N8901 ARMY LAKE ROAD EAST TROY,WI 531202181	NONE		UNRESTRICTED	6,000
CARDINAL BERNADIN CANCER CENTER 2160 W FIRST AVENUE MAYWOOD,IL 60153	NONE		UNRESTRICTED	10,000
CENTRAL IOWA SYMPHONY PO BOX 1080 AMES,IA 500141080	NONE		UNRESTRICTED	1,000
CHICAGO HISTORY MUSEUM 1601 N CLARK ST CHICAGO,IL 60614	NONE		UNRESTRICTED	250
CHICAGO KENT ALUMNI BD SCHOLARSHIP 565 W ADAMS SUITE 310 CHICAGO,IL 606613691	NONE		UNRESTRICTED	1,000
CHRISTOPHER & DANA REEVE FOUNDATION 636 MORRIS TURNPIKE SUITE SHORT HILLS,NJ 07078	NONE		UNRESTRICTED	2,000
CORNELL UNIVERSITY ANNUAL FUND P O BOX 223623 PITTSBURG,PA 152512623	NONE		UNRESTRICTED	9,000
CURE ALZHEIMER'S FUND 34 WASHINGTON STREET SUITE WELLESLEY HILLS,MA 02481	NONE		UNRESTRICTED	4,000
CYSTIC FIBROSIS FOUNDATION 6931 ARLINGTON ROAD BETHESDA,MD 20814	NONE		UNRESTRICTED	1,250
DUPAGE CHILDRENS MUSEUM 301 N WASHINGTON STREET NAPERVILLE,IL 60540	NONE		UNRESTRICTED	5,500
DUPAGE COUNTY HISTORICAL SOCIETY PO BOX 1460 WHEATON,IL 60189	NONE		UNRESTRICTED	500
ELGIN ACADEMY 350 PARK AVENUE ELGIN,IL 60120	NONE		UNRESTRICTED	2,000
ELMHURST ART MUSEUM 150 COTTAGE HILL AVENUE ELMHURST,IL 60126	NONE		UNRESTRICTED	2,250
ELMHURST COLLEGE 190 S PROSPECT AVENUE ELMHURST,IL 60126	NONE		UNRESTRICTED	20,000
ELMHURST FAMILY YMCA 211 W FIRST STREET ELMHURST,IL 60126	NONE		UNRESTRICTED	10,000
<b>Total . . . . .</b>				257,000

Form 990PF Part XV Line 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)				
<b>a</b> Paid during the year				
ELMHURST HERITAGE FOUNDATION 120 E PARK ELMHURST,IL 60126	NONE		UNRESTRICTED	20,000
ELMHURST MEMORIAL HEALTHCARE 155 E BRUSH HILL ROAD ELMHURST,IL 60126	NONE		UNRESTRICTED	20,000
ELMHURST SYMPHONY ASSOCIATION PO BOX 345 ELMHURST,IL 60126	NONE		UNRESTRICTED	1,000
EMERGENCY RESIDENCE PROJECT 225 S KELLOGG AMES,IA 50010	NONE		UNRESTRICTED	1,200
EPISCOPAL CHURCH OF OUR SAVIOR 116 E CHURCH STREET ELMHURST,IL 60126	NONE		UNRESTRICTED	500
EVANS SCHOLARSHIP FOUNDATION 1 BRIAR ROAD GOLF,IL 60029	NONE		UNRESTRICTED	500
FIELD MUSEUM OF NATURAL HISTORY 1400 S LAKE SHORE DRIVE CHICAGO,IL 606052496	NONE		UNRESTRICTED	250
FONTANA PUBLIC LIBRARY 166 2ND AVENUE FONTANA,WI 53125	NONE		UNRESTRICTED	500
FRIENDS OF ELMHURST PUBLIC LIBRARY 125 S PROSPECT ELMHURST,IL 60126	NONE		UNRESTRICTED	3,000
FRIENDS OF YOUNG LIFE-DUPAGE COUNTY 533 N GRANT STREET HINSDALE,IL 60521	NONE		UNRESTRICTED	150
GENEVA LAKE ASSOCIATION PO BOX 412 LAKE GENEVA,WI 53147	NONE		UNRESTRICTED	1,000
GENEVA LAKE CONSERVATORY PO BOX 588 398 MILL STREE FONTANA,WI 53125	NONE		UNRESTRICTED	1,000
GENEVA LAKE ENVIRONMENTAL AGENCY PO BOX 914 WILLIAMS BAY,WI 531910914	NONE		UNRESTRICTED	2,000
GENEVA LAKE LEVEL CORPORATION PO BOX 656 LAKE GENEVA,WI 53147	NONE		UNRESTRICTED	1,000
GENEVA LAKE WATER SAFETY COMMITTEE PO BOX 98 LAKE GENEVA,WI 53147	NONE		UNRESTRICTED	2,000
<b>Total . . . . .</b>			<b>3a</b>	257,000

Form 990PF Part XV Line 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)				
<b>a</b> Paid during the year				
GIGI'S PLAYHOUSE - CHICAGO 3948 N LINCOLN AVENUE CHICAGO,IL 60613	NONE		UNRESTRICTED	4,000
GLENWOOD ACADEMY 500 W 187TH STREET GLENWOOD,IL 60425	NONE		UNRESTRICTED	500
GOODWILL INDUSTRIES 6050 S WESTERN CHICAGO,IL 60636	NONE		UNRESTRICTED	100
GRAUE MILL AND MUSEUM 3800 S YORK ROAD OAK BROOK,IL 60523	NONE		UNRESTRICTED	500
GUIDING EYES FOR THE BLIND 611 GRANITE SPRINGS RD YORKTOWN HEIGHTS,NY 10598	NONE		UNRESTRICTED	500
HABITAT FOR HUMANITY 1600 ROOSEVELT RD WHEATON,IL 60187	NONE		UNRESTRICTED	500
HINSDALE COMMUNITY HOUSE 415 WEIGHTH STREET HINSDALE,IL 60521	NONE		UNRESTRICTED	1,000
HINSDALE HISTORICAL SOCIETY 15 S CLAY STREET HINSDALE,IL 60521	NONE		UNRESTRICTED	500
HINSDALE HOSPITAL FOUNDATION 120 N OAK STREET HINSDALE,IL 60521	NONE		UNRESTRICTED	1,500
HOLIDAY HOME 361 N LAKE SHORE DRIVE P WILLIAMS BAY,WI 53191	NONE		UNRESTRICTED	2,000
HORTICULTURAL HALL FOUNDATION PO BOX 71 LAKE GENEVA,WI 53147	NONE		UNRESTRICTED	1,000
IOWA ENVIRONMENTAL COUNCIL 521 E LOCUST ST SUITE 220 DES MOINES,IA 50309	NONE		UNRESTRICTED	1,000
IOWA ENVIRONMENTAL WILDLIFE CENTER 328 MAIN ST SUITE 208 AMES,IA 50010	NONE		UNRESTRICTED	1,000
KEYS CHILDREN FOUNDATION 24 DOCKSIDE LANE PMB 139 KEY LARGO,FL 330375267	NONE		UNRESTRICTED	4,000
KHOI-FM RADIO 410 DOUGLAS AVE AMES,IA 50010	NONE		UNRESTRICTED	1,500
<b>Total . . . . .</b>				257,000

Form 990PF Part XV Line 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)				
<b>a</b> Paid during the year				
LA RABIDA CHILDREN'S HOSPITAL E 65TH STREET AT LAKE MIC CHICAGO,IL 606499980	NONE		UNRESTRICTED	500
LAKE GENEVA FRESH AIR ASSOCIATION PO BOX 10 361 N LAKE SHO WILLIAMS BAY,WI 53191	NONE		UNRESTRICTED	2,000
LAKE GENEVA PUBLIC LIBRARY FTN 918 W MAIN LAKE GENEVA,WI 53147	NONE		UNRESTRICTED	500
LAKE GENEVA YMCA 203 WELLS STREET LAKE GENEVA,WI 53147	NONE		UNRESTRICTED	1,000
LEAGUE OF WOMEN VOTERS OF US 2130 DUFF AVENUE AMES,IA 50010	NONE		UNRESTRICTED	1,000
LINCOLN PARK ZOOLOGICAL SOCIETY 2001 N CLARK STREET CHICAGO,IL 60614	NONE		UNRESTRICTED	250
LIVING WELL CANCER RESEARCH CENTER 1803 W STATE STREET GENEVA,IL 60134	NONE		UNRESTRICTED	2,500
LIZZADRO MUSEUM OF LIPIDARY ARTS 220 COTTAGE HILL AVENUE ELMHURST,IL 60126	NONE		UNRESTRICTED	3,000
LURIE CHILDRENS HOSPITAL FOUNDATION 225 W CHICAGO AVE BOX 4 CHICAGO,IL 606112605	NONE		UNRESTRICTED	5,000
MARINERS HOSPITAL FOUNDATION 91500 OVERSEAS HIGHWAY TAVERNIER,FL 33070	NONE		UNRESTRICTED	1,500
MAYO FOUNDATION 200 FIRST STREET SW ROCHESTER,MN 55905	NONE		UNRESTRICTED	500
MCLEAN HOSPITAL 115 MILL STREET BELMONT,MA 024789106	NONE		UNRESTRICTED	2,000
MERCY WALWORTH MEDICAL CENTER 1000 MINERAL POINT AVENUE JANESVILLE,WI 535475003	NONE		UNRESTRICTED	2,000
MORTON ARBORETUM 4100 ILLINOIS ROUTE 53 LISLE,IL 605321293	NONE		UNRESTRICTED	500
MUSEUM OF SCIENCE AND INDUSTRY 57TH STREET LAKE SHORE CHICAGO,IL 60637	NONE		UNRESTRICTED	250
<b>Total . . . . .</b>			<b>3a</b>	257,000

Form 990PF Part XV Line 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)				
<b>a</b> Paid during the year				
NATIONAL ALOPECIA AREATA FOUNDATION 14 MITCHELL BOULEVARD SAN RAFAEL,CA 94903	NONE		UNRESTRICTED	3,000
NORTH CAROLINA BOTANICAL GARDEN CB3375 TOTTEN CENTER CHAPEL HILL,NC 275993375	NONE		UNRESTRICTED	5,000
OCEAN REEF MEDICAL CENTER FDN 50 BARRACUDA LANE KEY LARGO,FL 33037	NONE		UNRESTRICTED	1,000
ONE HUNDRED CLUB OF CHICAGO 875 N MICHIGAN AVENUE SUITE 1351 CHICAGO,IL 60611	NON		UNRESTRICTED	500
ONE THOUSAND FRIENDS OF IOWA 3850 MERLE HAY ROAD 605 DES MOINES,IA 503101300	NONE		UNRESTRICTED	1,500
PARALYZED VETERANS OF AMERICA 801 EIGHTEENTH STREET NW WASHINGTON,DC 200063517	NONE		UNRESTRICTED	250
PLANNED PARENTHOOD OF ILLINOIS 18 S MICHIGAN AVE 6TH FLO CHICAGO,IL 60610	NONE		UNRESTRICTED	11,000
PLANNED PARENTHOOD OF THE HEARTLAND PO BOX 4557 DES MOINES,IA 503054557	NONE		UNRESTRICTED	1,000
PROTESTANT FDN OF OCEAN REEF CHAPEL 23 OCEAN REEF DRIVE KEY LARGO,FL 33037	NONE		UNRESTRICTED	500
RAY GRAHAM ASSOCIATION 901 WARRENVILLE RD LISLE,IL 60532	NONE		UNRESTRICTED	1,000
ROBERT CROWN CENTER FOR HEALTH 21 SALT CREEK LANE HINSDALE,IL 60521	NONE		UNRESTRICTED	150
SALVATION ARMY 1S 415 SUMMIT AVENUE OAK BROOK TERRACE,IL 601813906	NONE		UNRESTRICTED	200
SHEDD AQUARIUM 1200 S LAKE SHORE DRIVE CHICAGO,IL 60605	NONE		UNRESTRICTED	250
SHRINERS HOSPITAL FOR CHILDREN 2900 ROCKY POINT DRIVE TAMPA,FL 33607	NONE		UNRESTRICTED	500
THE SMILE TRAIN PO BOX 96231 WASHINGTON,DC 200906231	NONE		UNRESTRICTED	1,000
<b>Total . . . . .</b>				257,000

Form 990PF Part XV Line 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)				
<b>a</b> Paid during the year				
SMITH COLLEGE P O BOX 340029 NORTHAMPTON,MA 01063	NONE		UNRESTRICTED	4,000
SMITHSONIAN INSTITUTE PO BOX 9016 PITTSFIELD,MA 012029016	NONE		UNRESTRICTED	150
SPECIAL KIDS DAY 533 SPRING ROAD ELMHURST,IL 60126	NONE		UNRESTRICTED	250
ST CHARLES SINGERS 311 N 2ND STREET ST CHARLES,IL 60174	NONE		UNRESTRICTED	3,500
ST IGNATIUS COLLEGE PREP 1076 W ROOSEVELT ROAD CHICAGO,IL 60608	NONE		UNRESTRICTED	3,000
ST JOHNS NORTHWESTERN MILITARY ACAD 1101 GENESEE STREET DELAFIELD,WI 530181498	NONE		UNRESTRICTED	500
THE CONSERVATION FUND 1655 N FT MEYERS DRIVE ARLINGTON,VA 22209	NONE		UNRESTRICTED	4,500
THE ENVIORNMENTAL EDUCATION FDN P O BOX 244 FONTANA,WI 531250244	NONE		UNRESTRICTED	700
THE MAGIC FOUNDATION 6645 W NORTH AVENUE OAK PARK,IL 60302	NONE		UNRESTRICTED	250
TRI CITY FAMILY SERVICES 1120 RANDALL COURT GENEVA,IL 60134	NONE		UNRESTRICTED	1,000
TRI CITY HEALTH PARTNERSHIP 318 WALNUT ST CHARLES,IL 60174	NONE		UNRESTRICTED	500
UNITED CEREBRAL PALSY SEQUIN-CHGO 3100 S CENTRAL AVENUE CICERO,IL 60804	NONE		UNRESTRICTED	500
UNITED WAY OF DUPAGEWEST COOK PO BOX 5317 OAK BROOK,IL 60522	NONE		UNRESTRICTED	1,500
US FUND FOR UNICEF 125 MAIDEN LANE NEW YORK,NY 10038	NONE		UNRESTRICTED	1,500
VASSAR COLLEGE BOX 14-124 RAYMOND AVENUE POUGHKEEPSIE,NY 126040014	NONE		UNRESTRICTED	2,800
<b>Total . . . . .</b>				257,000

Form 990PF Part XV Line 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)				
<b>a</b> <i>Paid during the year</i>				
WELLNESS HOUSE 131 N COUNTY LINE ROAD HINSDALE,IL 60521	NONE		UNRESTRICTED	1,500
WM GUY FORBECK RESEARCH FOUNDATION 23 PENISULA DRIVE HILTON HEAD ISLAND,SC 29926	NONE		UNRESTRICTED	1,500
AURORA LAKELAND MEDICAL CENTER W3985 COUNTY ROAD NN ELKHORN,WI 53121	NONE		UNRESTRICTED	3,000
KIWANIS CLUB OF ELMHURST FOUNDATION PO BOX 729 ELMHURST,IL 60126	NONE		UNRESTRICTED	500
NORTHWESTERN MEMORIAL FOUNDATION 300 S RANDALL ROAD GENEVA,IL 60134	NONE		UNRESTRICTED	5,000
NWM HOME HEALTH & HOSPICE 690 E NORTH AVENUE CAROL STREAM,IL 60188	NONE		UNRESTRICTED	1,000
<b>Total . . . . .</b>			<b>3a</b>	257,000

TY 2015 Accounting Fees Schedule

**Name:** ALBEN F & CLARA G BATES FOUNDATION

**EIN:** 36-6081072

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL FEES	2,975	2,975		



Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2015 Depreciation Schedule

Name: ALBEN F & CLARA G BATES FOUNDATION

EIN: 36-6081072

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
LEASEHOLD IMPROVEMENTS	2002-06-30	4,602	1,481	STRAIGHT LINE	39 0000	118	118		
COMPUTER (1/3 SHARE)	2011-06-30	317	317	200% DB	5 0000				

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2015 Gain/Loss from Sale of Other Assets Schedule

Name: ALBEN F & CLARA G BATES FOUNDATION

EIN: 36-6081072

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
1370 614 SHS AMERICAN MUTUAL FUND	2006-01	PURCHASE	2015-12		50,000	42,209			7,791	
1447 49 SHS CAPITAL INCOME BUILDER	2006-01	PURCHASE	2015-12		85,000	79,444			5,556	

TY 2015 Investments Corporate Stock Schedule

**Name:** ALBEN F & CLARA G BATES FOUNDATION  
**EIN:** 36-6081072

Name of Stock	End of Year Book Value	End of Year Fair Market Value
FRANKLIN INVS SECS TR	389,162	422,211
CAPITAL WORLD GROWTH & INCOME	314,781	354,828
WASHINGTON MUTUAL INV.	231,632	242,813
INCOME FUND OF AMERICA	280,832	278,347
CAPITAL INCOME BUILDER FUND	194,046	201,552
FRANKLIN TEMPLETON FOUNDING FD	274,797	303,347
FRANKLIN UTILITIES	179,767	213,138
FRANKLIN RISING DIVIDENDS	156,287	203,241
AMERICAN MUTUAL FUND	67,105	73,517
AMERICAN INTERNATIONAL GRW & INC	121,570	112,935
CAPITAL WORLD BOND FUND	107,736	99,589
FRANKLIN INCOME FUND	92,395	89,321
3M	64,281	128,044
WALMART	32,153	42,910
JOHNSON & JOHNSON	45,460	77,040
PROCTOR & GAMBLE	44,427	59,557
MICROSOFT	40,580	83,220
BANK OF AMERICA	39,244	16,830
AT&T	38,852	51,615
SCHLUMBERGER LIMITED	33,495	154,287
ORACLE	24,901	45,662
AUTOMATIC DATA PROCESSING	18,289	42,360
LINCOLN NATIONAL	6,614	113,990
CITIGROUP	5,478	4,450
CURTISS WRIGHT	3,738	68,500
JPMORGAN CHASE	2,388	215,918
WELLS FARGO	2,439	17,178
HONEYWELL	1,756	80,992
UNION PACIFIC	1,504	153,898
ANADARKO PETROLEUM	1,272	18,363

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ILLINOIS TOOL WORKS	26	92,680
INVESCO SHORT TERM BOND FUND	508,182	501,094
CDK GLOBAL INC	2,635	7,880

**TY 2015 Land, Etc.  
Schedule**

**Name:** ALBEN F & CLARA G BATES FOUNDATION  
**EIN:** 36-6081072

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
IMPROVEMENTS	4,922	1,916	3,006	3,006

**TY 2015 Other Expenses Schedule****Name:** ALBEN F & CLARA G BATES FOUNDATION**EIN:** 36-6081072

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
SAFETY DEPOSIT BOX RENTAL	60	60		
POSTAGE & DELIVERY	57	29		28
INSURANCE	350	350		
FINES & PENALTIES	100	100		
BASIS RECONCILIATION	5,816	5,816		

**TY 2015 Taxes Schedule****Name:** ALBEN F & CLARA G BATES FOUNDATION**EIN:** 36-6081072

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ANNUAL FILING FEE	10	10		
PAYROLL TAXES	885	885		
FOREIGN TAX	803	803		
990 PF TAXES	500	500		
IL AG REGISTRATION FEE	15	15		

**Additional Data**

**Software ID:**  
**Software Version:**  
**EIN:** 36-6081072  
**Name:** ALBEN F & CLARA G BATES FOUNDATION