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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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. OMB No 1545-0052

For cal	endar year 2015 or tax year beginning		, and ending		
Name	of foundation			A Employer identification	on number
IG	LEWSKI FAMILY FOUNDATION	,			
_C/0	D DOROTHY JURS			36-610949	0
Numbe	and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
97	9 E. GULF DRIVE #462			239-466-1	<u>871</u>
City or	town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is	pending, check here
_SAI	NIBEL, FL 33957				
G Che	ck all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organization	ns, check here 🕨 🔙
	Final return	Amended return		2 5	
	Address change	Name change		Foreign organizations n check here and attach or	computation
H Che	ck type of organization: X Section 501(c)(3) ex			E If private foundation st	atus was terminated
<u></u> :	Section 4947(a)(1) nonexempt charitable trust	Other taxable private found	ation	under section 507(b)(1)(A), check here 🕨 🖳
l Fair i	market value of all assets at end of year J Accounti	ng method: 🔼 Cash	Accrual	F If the foundation is in a	a 60-month termination
(fron	n Part II, col. (c), line 16)	her (specify)		under section 507(b)(1)(B), check here 🕨 🗀
▶\$	1,010,557. (Part I, colu	mn (d) must be on cash	basis)		
Part	The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
	necessarily equal the amounts in column (a))	expenses per books	income	income	(cash basis only)
	Contributions, gifts, grants, etc., received	\$		N/A	* * * * * * * * * * * * * * * * * * * *
I.	Check X If the foundation is not required to attach Sch. 8 Interest on savings and temporary		, , , , , , , , , , , , , , , , , , ,	£ *	
3	cash investments	12 125	42.406		
4		43,126.	43,126		STATEMENT 1
'	5a Gross rents		*`	1.4.4	
	b Net rental income or (loss)		*		
_g [€]	2 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all			[4,	<u> </u>
Ę.	D assets on line 6a			<u> </u>	
۳Ľ.	Capital gain net income (from Part IV, line 2)	***************************************	0.	`*	
	· ·				
	Gross sales less returns		<u> </u>	\$	
10	Ja and allowances		<u> </u>	1 3 A	
	b Less Cost of goods sold				
	c Gross profit or (loss)				
11		43,126.	43,126	1	
12		2,000.	43,126	 	2,000
13		2,000.	0	•	2,000
	4 0 1				
S 1	5 Peasion plans, employee benefits				
šį"	Ba Legal fees MAY 16 2016 SEMT 2	2,475.	0.		2,475
Expens		2,413.	0.	•	2,4/3
	c Other professional fees, UT			-	
1 at 1	11101001		<u> </u>		
11 Ist					-
E 2					
P 2					
P 2					
B 2		378.	350		28
ati.	•	3,0.	330	<u> </u>	20
Operating and Administrative	expenses. Add lines 13 through 23	4,853.	350		4.503
ŏ ,	5 Contributions, gifts, grants paid	47,612.	330		4,503 47,612
	5 Total expenses and disbursements.	1,,012.			1,012
2	Add lines 24 and 25	52,465.	350	.	52,115
	7 Subtract line 26 from line 12:	52,403.			32,113
	Excess of revenue over expenses and disbursements	-9,339.		•	
	b Net investment income (if negative enter -0-)	5,555.	42,776		
	C Adjusted net income (if negative, enter -0-)			N/A	

Form 990-PF (2015) C/O DOROTHY JURS 36-6109490 Balance Sheets Attached schedules and amounts in the description Beginning of year End of year (a) Book Value (b) Book Value (c) Fair Market Value 47,596 33,748 33,748. 1 Cash - non-interest-bearing 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 7 Other notes and loans receivable 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 324,925. 323,644. STMT 4 849,662. b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans STMT 5 130,152 134,606 127,147. 13 Investments - other 14 Land, buildings, and equipment; basis Less accumulated depreciation 15 Other assets (describe ▶ 16 Total assets (to be completed by all filers - see the 502,673. 491,998. instructions. Also, see page 1, item 1) 1,010,557. Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 0. 0. 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. Net Assets or Fund Balances 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31 502,673 27 Capital stock, trust principal, or current funds 0. 0. 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 0. 502,673 491,998 30 Total net assets or fund balances 502,673. 491.998 31 Total Irabilities and net assets/fund balances **Analysis of Changes in Net Assets or Fund Balances** Part III 1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 <u>502,67</u>3. (must agree with end-of-year figure reported on prior year's return) 2 Enter amount from Part I, line 27a 2 <u>-9,339.</u>

> 491,998. Form **990-PF** (2015)

493,334.

1,336.

3

4

4 Add lines 1, 2, and 3

3 Other increases not included in line 2 (itemize)

5 Decreases not included in line 2 (itemize) ► ADJUSTMENT TO COST BASIS

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Page 3

F		Losses for Tax on In	vestmen	t Income		·		0 010	Jajo rage i
_	(a) List and describe t 2-story brick wareho	the kind(s) of property sold (e.g. suse; or common stock, 200 sha	., real estate, s. MLC Co.)		(b) H	ow acquired Purchase Donation	(c) Date a		(d) Date sold (mo., day, yr.)
18	1					_			
_ <u>t</u>	NONE NONE				ļ				
_(<u> </u>	m			<u> </u>				
_(
_5	<u> </u>				<u> </u>				
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				ain or (loss) (f) minus (
	1	4							
_ <u>t</u>	-								
	<u> </u>								
_9									
_6	Complete only for assets showing ga	in in column (h) and owned by	the foundation	n nn 12/31/69		41)	Cause (C	ol (b) goin	minus
_	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (i)		col.	(k), but n	ol. (h) gain i lot less than (from col. (t	-0-) or
_									
t									
_	c								,,,
_	t								
_6	9								
2	Capital gain net income or (net capital	loss) { If gain, also enter If (loss), enter -0			}[2			
3	Net short-term capital gain or (loss) as If gain, also enter in Part I, line 8, colu	s defined in sections 1222(5) ar			3				
	If (loss), enter -0- in Part I, line 8	er Section 4940(e) for	Dodugod	l Toy on Not	1	3			
_							ine		
(Ի	or optional use by domestic private fou	ndations subject to the section 4	4940(a) tax on	net investment ii	ncome	.)			
lf	section 4940(d)(2) applies, leave this p	art blank.							
۱۸/	as the foundation liable for the section	4942 tay on the distributable am	nount of any w	ear in the hase ne	rınd?				Yes X No
	"Yes," the foundation does not qualify u			•	i iou				103 22 110
1	Enter the appropriate amount in each				entries.				
_	(a)	(b)			(c)			Dietrib	(d) ution ratio
	Base periód years Calendar year (or tax year beginning in	Adjusted auglifung die	tributions	Net value of no		table-use assets	(col. (b) divi	ded by col. (c))
_	2014	5	1,264.		1	,030,308			.04975
	2013		4,933.			981,912			.045761
_	2012		0,199.			985,595			.050933
_	2011		1,185.			932,351			.054899
_	2010	4	5,183.			849,216	·		.053206
2	Total of line 1, column (d)						2		.25455
3	Average distribution ratio for the 5-year the foundation has been in existence in	•	on line 2 by 5,	or by the number	r of yea	ars	3		.050911
		•							-
4	Enter the net value of noncharitable-u	se assets for 2015 from Part X,	line 5				4		1,009,108
5	Multiply line 4 by line 3						5		51,375
6	Enter 1% of net investment income (1	% of Part I, line 27b)					6		428
7	Add lines 5 and 6						7	············	51,803
8	Enter qualifying distributions from Par	rt XII, line 4					8		52,115
	If line 8 is equal to or greater than line See the Part VI instructions	7, check the box in Part VI, line	e 1b, and comp	olete that part usin	ng a 1%	6 tax rate.			

	1 990-PF (2015) C/O DOROTHY JURS	<u> 36-</u>	<u>6109</u>	<u>490</u>		<u> Page 4</u>
P	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	1948	- see i	nstru	uctio	ns)
18	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)					
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🗓 and enter 1%	1			4	<u> 28.</u>
	of Part I, line 27b		43.			
	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				<u>0.</u>
3	Add lines 1 and 2	3			4	28.
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	<u> </u>		4	<u> 28.</u>
6	Credits/Payments:					
	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 420.	-				
	Exempt foreign organizations - tax withheld at source	-				
	Tax paid with application for extension of time to file (Form 8868) 6c	-				
	Backup withholding erroneously withheld 6d 6	-				
	Total credits and payments. Add lines 6a through 6d	7	ļ		4	<u> 20.</u>
8	Enter any penalty for underpayment of estimated tax. Check here 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				8.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	<u> </u>			
	Enter the amount of line 10 to be: Credited to 2016 estimated tax	11	<u> </u>			
	art VII-A Statements Regarding Activities				V	NI
12	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven-	: in			Yes	
	any political campaign?	٠.		1a		X
. [Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	•		1 <u>b</u>		<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ed or				
_	distributed by the foundation in connection with the activities.				-	3.7
	Did the foundation file Form 1120-POL for this year?			10		<u>X</u>
•	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. \$\begin{align*} 0 \cdot \text{(2)} On foundation managers. \$\begin{align*} 0 \cdot \text{(2)} \text{(2)} \text{(2)} On foundation managers. \$\beg	-				
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
2	managers. ► \$ 0 . Has the foundation engaged in any activities that have not previously been reported to the IRS?					v
2				2		<u>X</u>
2	If "Yes," attach a detailed description of the activities Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,					
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	ונ		,		v
A:	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			3 4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
5		- 11	/ 11	5		X
Ū	If "Yes," attach the statement required by General Instruction T.			<u> </u>		
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 	e law				
	remain in the governing instrument?			6	х	
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 XI	/		7	X	
	(a), and (b), and (c), and (c)					
88	Enter the states to which the foundation reports or with which it is registered (see instructions)					
	IL					
t	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	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cal	endar				
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		<u>X</u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X

Form 990-PF (2015) C/O DOROTHY JURS 36-6109490 Page 5 Part 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 Х 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) 12 X 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A 14 The books are in care of ▶ DOROTHY JURS Telephone no. $\triangleright 239 - 466 - 1871$ Located at ▶ 979 EAST GULF DRIVE #462, SANIBEL, ZIP+4 **►**33957 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 N/A No 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 securities, or other financial account in a foreign country? Х 16 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 Yes No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies, 1a During the year did the foundation (either directly or indirectly); Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? X Yes [(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after Yes X No termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Х 1b 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? 1c Х 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(1)(3) or 4942(1)(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 Yes X No before 2015? If "Yes," list the years ▶ 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 N/A 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. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X 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, N/A Form 4720, to determine if the foundation had excess business holdings in 2015) 3b Х 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a 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?

' ' IGLEWSKI FAMILY FOUNDATI	ON	-		1	
orm 990-PF (2015) C/O DOROTHY JURS Part VII-B Statements Begarding Activities for Which	Form 4720 May Bo F	Poguirod (seeting	36-61094	90 P	age €
Part VII-B Statements Regarding Activities for Which 5a During the year did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section (2) Influence the outcome of any specific public election (see section 4955); any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes (4) Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary the prevention of cruelty to children or animals?	on 4945(e))? or to carry on, directly or indirectly s? on described in section	ectly, Ye	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un section 53.4945 or in a current notice regarding disaster assistance (see instri		n Regulations	N/A	5b	
Organizations relying on a current notice regarding disaster assistance check is a lift the answer is "Yes" to question 5a(4), does the foundation claim exemption to expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.494 6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?	here from the tax because it maintai N 15-5(d).	I/A □ Y€			
\boldsymbol{b} Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6ь	Х
If "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax belief "Yes," did the foundation receive any proceeds or have any net income attriberat VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	utable to the transaction? tees, Foundation Ma			7b	
List all officers, directors, trustees, foundation managers and their	compensation. (b) Title, and average	(c) Compensation	(d) Contributions to	(a) Eyna	
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expe account, o allowan	other ces
OOROTHY JURS	PRESIDENT				
979 EAST GULF DRIVE #462	F 00	2 000			^
SANIBEL, FL 33957 JANICE MADER	5.00 SECRETARY	2,000.	0.		0.
799 BIRDIE VIEW PT. SANIBEL, FL 33957	0.00	0.	0.		0.
2 Compensation of five highest-paid employees (other than those in	······································	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	(e) Expe	nse other
NONE	αενοιεα το μοσιτιοπ		compensation	allowan	<u> </u>

Form **990-PF** (2015)

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

· IGLEWSKI FAMILY FOUNDATION		
Form 990-PF (2015) C/O DOROTHY JURS	36-6	109490 Page 7
Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	\neg	
	7	
	 	
	\dashv	
	\dashv	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
	had reference and a such as Abs	*****
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist number of organizations and other beneficiaries served, conferences convened, research papers produced.		Expenses
27/2	3000, 510.	
1 N/A		
2		
	-	
0		
3		
4		
4		
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 1 and 2	Amount
1 N/A	illes railez.	Amount
N/A		

2		
All other angular colored an anthony of the colored co		
All other program-related investments. See instructions.		
3		
Tatal Add bass 1 Abras ab 2		
Total. Add lines 1 through 3		O.

C/O DOROTHY JURS

36-6109490 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: a Average monthly fair market value of securities <u>981,833.</u> 1a Average of monthly cash balances 1b 42,642. c Fair market value of all other assets 1c d Total (add lines 1a, b, and c) 1,024,475. 1d Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 0. 1e Acquisition indebtedness applicable to line 1 assets Subtract line 2 from line 1d 3 475. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 367. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4 1,009,108. 5 Minimum investment return. Enter 5% of line 5 6 50.455. 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.) Minimum investment return from Part X, line 6 50,455. Tax on investment income for 2015 from Part VI, line 5 428 2a Income tax for 2015. (This does not include the tax from Part VI.) 2b Add lines 2a and 2b 428. 50,027. Distributable amount before adjustments. Subtract line 2c from line 1 3 Recoveries of amounts treated as qualifying distributions 4 5 Add lines 3 and 4 50 027. 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 7 50 027 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes; 52,115. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 2 3 Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b 52,115. Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation gualifies for the section

Form **990-PF** (2015)

428.

687.

5

6

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

Adjusted qualifying distributions Subtract line 5 from line 4

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	,		,	50,027.
2 Undistributed income, if any, as of the end of 2015	`			*
a Enter amount for 2014 only			0.	
b Total for prior years:		,		, ,
, ,	, .	0.		· · · · · · · · · · · · · · · · · · ·
3 Excess distributions carryover, if any, to 2015:				
a From 2010			·	
b From 2011				
c From 2012 627.	<i>*</i>			, ,
d From 2013				, "
e From 2014 571.				
f Total of lines 3a through e	1,198.	·		; ;
4 Qualifying distributions for 2015 from	1,150.	3		
Part XII, line 4: ►\$ 52,115.				
a Applied to 2014, but not more than line 2a	,	1	0.	<u> </u>
b Applied to undistributed income of prior	· · · · · · · · · · · · · · · · · · ·			***
•	· · · · ·	^		'
years (Election required - see instructions)	,	0.		***************************************
c Treated as distributions out of corpus		,		* **
(Election required - see instructions)	0.			F 0 00 0
d Applied to 2015 distributable amount	0.000			50,027.
e Remaining amount distributed out of corpus	2,088.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:	,		.	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,286.	* * *	* \$	4
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	,	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				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016				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.			
8 Excess distributions carryover from 2010	``			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016	J •			
Subtract lines 7 and 8 from line 6a	3,286.			
	3,200.			
10 Analysis of line 9.				
a Excess from 2011 b Excess from 2012 627.				
c Excess from 2013				
d Excess from 2014 571.				
e Excess from 2015 2,088.	<u> </u>			<u> </u>

523601 11-24-15

	OTHY JURS				.09490 Page 10
Part XIV Private Operating For	·		I-A, question 9)	<u> </u>	
1 a If the foundation has received a ruling or					
foundation, and the ruling is effective for	•	-	▶└┌		
b Check box to indicate whether the found		ig foundation described i		4942(j)(3) or49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	41.0044	Prior 3 years	44,0040	
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 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
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					<u> </u>
an exempt organization					
(4) Gross investment income					1
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundati	on had \$5,000 or m	ore in assets
at any time during t				• •	
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation wh	•	than 2% of the total cont	ributions received by	the foundation before the clo	se of any tax
year (but only if they have contributed m	nore than \$5,000). (See s	ection 507(d)(2).)			·
NONE					
b List any managers of the foundation wh other entity) of which the foundation has			(or an equally large p	ortion of the ownership of a p	artnership or
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pr	rograms:		
<u> </u>		• • • • • • • • • • • • • • • • • • • •	=	es not accept unsolicited requ	uests for funds. If
the foundation makes gifts, grants, etc.	-		-		
a The name, address, and telephone num	ber or e-mail address of t	he person to whom appl	ications should be ad	dressed:	
DOROTHY JURS, IGLEWS					
979 EAST GULF DRIVE			57		
b The form in which applications should b				· · · · · · · · · · · · · · · · · ·	
WRITTEN STATEMENT OF		•			
c Any submission deadlines:					
NONE	a such as by a second a	al arong obsertable totals	lundo of restautes	or other feeters	
d Any restrictions or limitations on awards NONE	s, such as by geographica	ai areas, charnable neios,	. หมนร บา เมรนเบนิยกร,	or other factors.	
1101111					

Form **990-PF** (2015)

36-6109490 Page 11

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year CHILDREN'S HOSPITAL N/A SUPPORT CHARITABLE 9000 W. WISCONSIN AVE WAUWATOSA, WI 53226 1,000. CHRISTMAS COMMANDOS N/A CHARITABLE SUPPORT P.O. BOX 2131 MOUNT PLEASANT, SC 29464 5,000. DANNY DID FOUNDATION N/A CHARITABLE SUPPORT PO BOX 46576 1,500. CHICAGO, IL 60646 DONORS CHOOSE, ORG N/A CHARITABLE SUPPORT 134 WEST 37TH . 11TH FLR NEW YORK, NY 10018 1,112. F.I.S.H. OF SANIBEL N/A CHARITABLE SUPPORT 1630 PERIWINKLE WAY, UNIT B 3,000. SANIBEL, FL 33957 SEE CONTINUATION SHEET(S ▶ 3a Total 47,612. b Approved for future payment NONE **▶** 3b Total

C/O DOROTHY JURS

Enter gross	amounts unless otherwise indicated.	Unrelated	business income		by section 512, 513, or 514	(e)
1 Drogram	reading revenue.	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
-	service revenue:	code		Code		
	-	_			-	
		i i				<u>-</u>
		1 1		_ _		
ř				- 		·
	and contracts from government agencies	-				
=	ship dues and assessments					****
	on savings and temporary cash					
ınvestme						
4 Dividend	ls and interest from securities			14	43,126.	
5 Net renta	al income or (loss) from real estate:				, , , , , , , , , , , , , , , , , , , ,	
	-financed property					
	lebt-financed property					
	al income or (loss) from personal					
property					İ	
	vestment income		<u>-</u>			
8 Gain or (loss) from sales of assets other					
than inve	•					
	me or (loss) from special events					
	rofit or (loss) from sales of inventory					
I 1 Other rev						
a						
						——·—
		I I				
е			•			
12 Subtotal	. Add columns (b), (d), and (e)		().	43,126.	0
13 Total. A	dd line 12, columns (b), (d), and (e)				13	43,126
(See workst	neet in line 13 instructions to verify calculations.))				
Part XV	/I-B Relationship of Activities	to the Acco	mplishment of	Exempt F	Purnoses	
	······································					
Line No	Explain below how each activity for which in	come is reported in	column (e) of Part XV	I-A contribute	d importantly to the accomp	lishment of
▼	the foundation's exempt purposes (other that	an by providing fun	ds for such purposes).			
			 			
						
	<u></u>					
	<u> </u>			-		<u> </u>
	<u> </u>					
						· · · · · · · · · · · · · · · · · · ·
				-		
						·

NORTHBROOK, IL 60062

Form 990		15) C/O D	OROTHY J	JURS			36-610	<u>9490</u>	Pa	ge 13
Part >	XVII	Information Re	egarding Tra	ansfers To a	and Transactions a	nd Relationsh	ips With Noncha	ritable)	
		Exempt Organ	izations							
1 Did	the orga	nization directly or indi	rectly engage in a	ny of the followin	g with any other organizatio	n described in section	on 501(c) of	7	Yes	No
					7, relating to political organi					
	•	•	,, ,	•	, , ,	izations.				
		om the reporting found	ation to a nonchar	uranie exempt ori	ganization of.					••
	Cash							1a(1)		<u>X</u> _
(2)	Other a	ssets						1a(2)		_X
b Oth	er transa	actions:							-	
(1)	Sales o	f assets to a noncharita	ble exempt organ	ızatıon				1b(1)		X
		ses of assets from a no						1b(2)		X
٠,		of facilities, equipment,	•	pr or gameanon				1b(3)		X
										X
		irsement arrangements	1					1b(4)		
		or loan guarantees						1b(5)		X
(6)	Perform	nance of services or me	mbership or fund	Iraising solicitatio	ins			1b(6)		_X_
c Sha	aring of t	acılıtıes, equipment, ma	uling lists, other as	ssets, or paid em	ployees			1c		<u> X</u>
d If th	ne answe	er to any of the above is	"Yes," complete th	he following sche	dule. Column (b) should alw	vays show the fair ma	arket value of the goods,	other ass	ets,	
or s	services	given by the reporting fo	oundation. If the f	oundation receive	ed less than fair market valu	e in any transaction	or sharing arrangement, s	show in		
		the value of the goods,				,	,			
(a) Line no) Amount involved			e exempt organization	(d) Description	of transfers, transactions, and	charing an	20 G0 M0	
(4) 2.110 110	,	, ranount involved	(0)		, oxompt or gamzation	(b) besamplient	n dalisiers, transactions, and	31411941	angeme	
			 	N/A						
			·							
			l							
										
	-	··								
			 							
				· · · · · · · · · · · · · · · · · · ·						
					<u>.</u>					
			1							
	+		+			-				
	-	-36								
	i									
		•	•	·	or more tax-exempt organiz	zations described	_			_
ın s	section 5	01(c) of the Code (othe	r than section 501	1(c)(3)) or in sect	tion 527 ?		L	Yes	X	No
b If "Y	Yes," cor	nplete the following sch	edule.							
		(a) Name of org	janization		(b) Type of organization	(c) Description of relations	hip		
		N/A								
							· · · · · · · · ·			
				 						
	T					<u> </u>				
					ng accompanying schedules and a n taxpayer) is based on all inform		Ma	y the IRS c	liscuss t	his
Sign	and bein	er, it is true, correct, and cor	. /			hattor of writer preparer	1610	urn with the own below	e prepare (see inst	er (r)?
Here	l ▶×	(ED-		10/	x 5/12/16	TRESID	ENT [X Yes		No
	Signa	ture of officer or trustee	,0		Date	Title				
	<u> </u>	Print/Type preparer's na	ame	Preftarer's s	ignature,	Date .	Check If PTIN			
	- 1	State about 200		///	12/11/11	/ 1	self- employed			
Paid		ב דידואור	WOLE	Wand	<i>y 1</i> 4, WW.	3/3/16	, , ,	0000	C 0 F	
Prepa	aror	DANIEL A.		Wanne	~ · · · · · · · · · · · · · · · · · · ·	010114		0806		
-		Fırm's name ►WIP	ът грБ		V		Firm's EIN ► 39-0	/584	49	
Use (- L									
	1	Firm's address 🕨 5	REVERE I	DRIVE						

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient FIRST LOVE INTERNATIONAL N/A CHARITABLE SUPPORT P.O. BOX 15836 LOVES PARK, IL 61132 2,000. FISHER HOUSE FOUNDATION N/A CHARITABLE SUPPORT 111 ROCKVILLE PIKE STE 201 ROCKVILLE MD 20850 1,000. GO BO FOUNDATION N/A CHARITABLE SUPPORT C/O DOOR CTY FDN, PO BOX 802 STURGEON BAY, WI 54235 2,000. GOLISANO CHILDREN'S HOSPITAL N/A CHARITABLE SUPPORT LEE MEMORIAL HEALTH SYSTEM, PO BOX 2218 FORT MEYERS, FL 33902 1,000. HARRY CHAPIN FOOD BANK N/A CHARITABLE SUPPORT 3760 FOWLER STREET FORT MYERS, FL 33901 1,000. HISTIOCYTOSIS ASSOC OF AMERICA N/A CHARITABLE SUPPORT 332 NORTH BROADWAY PITMAN, NJ 08071 2,000. N/A CHARITABLE SUPPORT HUMAN TRAFFICKING PARTNERSHIPS PO BOX 1113 SANIBEL, FL 33957 1,000. INTERNATIONAL ESSENTIAL TREMOR FD N/A CHARITABLE SUPPORT PO BOX 14005 LENEXA, KS 66285 1,000. LET'S TALK ABOUT CHILDREN CHARITABLE SUPPORT N/A 6773 CANTON ST FORT MYERS FL 33966 1,000. LURIE CHILDREN'S HOSPITAL OF CHICAGO N/A CHARITABLE SUPPORT 225 E CHICAGO CHICAGO IL 6011 2,000. Total from continuation sheets 36 000

MELODEERS CHORUS P.O. BOX 2112 NORTHBROOK, IL 60055 1,0 NICK TRAINA FOUNDATION PO BOX 70427 SAN FRANCISCO, CA 94147 PEDIATRIC BRAIN TUMOR FOUNDATION N/A CHARITABLE SUPPORT CHARITABLE SUPPORT SUPPORT CHARITABLE SUPPORT 1,0 PIZZA 4 PATRIOTS P.O. BOX 542 ELK GROVE VILLAGE, IL 60009 PLAY FOR JAKE FOUNDATION N/A CHARITABLE SUPPORT CHARITABLE SUPPORT 1,0 PIZZA 1 PATRIOTS P.O. BOX 542 ELK GROVE VILLAGE, IL 60009 PLAY FOR JAKE FOUNDATION N/A CHARITABLE SUPPORT 1,0 REIGNS OF LIFE STORM UNIONE ST LAPORTE, IN 46350 ROMALD MORDER FOLD SOUTH BERD, IN 46519 ROMALD MORDINERS IN 10 HOUSE CHICAGOLAND AND N/A NORTHWEST INDIANA 1900 SPRING ROAD, SUITE 300 OAK BROOK, IL 60523 1,0 SANIBEL SCHOOL PO BOX 412	Part XV Supplementary Information				
Show any relationship to Shibles of Sh	3 Grants and Contributions Paid During the Y				
MARKE A WISH AMERICA MAXE A WISH AMERICA MAYA2 N 247H ST PHOENIX, AZ 85016 MELODEERS CHORUS P.O. BOX 2112 NORTHBROOK, IL 60055 N/A CHARITABLE SUPPORT T.O. MICK TRAINA POUNDATION PO BOX 70427 SAN FRANCISCO, CA 94147 PEDIATRIC BRAIN TUMOR FOUNDATION N/A CHARITABLE SUPPORT CHARITABLE SUPPORT 1.0 PIZZA 4 PATRIOTS P.O. BOX 542 PLAY FOR JAKE FOUNDATION N/A CHARITABLE SUPPORT CHARITABLE SUPPORT ASHEVILLE, NC 28806 1.0 PIZZA 4 PATRIOTS P.O. BOX 542 PLAY FOR JAKE FOUNDATION N/A CHARITABLE SUPPORT CHARITABLE SUPPORT ACHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT ACHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT ACHARITABLE SUPPORT CHARITABLE CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE CHARITABLE SUPPORT CHARITABLE CHARITABLE SUPPORT CHARITABLE CH		show any relationship to		Purpose of grant or	Amount
4742 N 24TH ST PROBRIX, AZ 85016 MELODEERS CHORUS F.O. BOX 2112 NORTHEROOK, IL 60065 N/A CHARITABLE SUPPORT TO BOX 70427 SAN FRANCISCO, CA 94147 PEDIATRIC BRAIN TUMOR FOUNDATION N/A CHARITABLE SUPPORT 1.0 PEDIATRIC BRAIN TUMOR FOUNDATION N/A CHARITABLE SUPPORT 1.0 PIZZA 4 PATRIOTS P.O. BOX 542 ELK GROVE VILLAGE, IL 60009 PLAY FOR JAKE FOUNDATION N/A CHARITABLE SUPPORT 1.0 PEDIATRIC BRAIN TUMOR FOUNDATION N/A CHARITABLE SUPPORT 1.0 PEDIATRIC BRAIN TUMOR FOUNDATION N/A CHARITABLE SUPPORT 1.0 REIGNS OF LIFE S1200 QUINCE ROAD SOUTH BRND. IN 46519 RONALD MCDORALD HOUSE CHICAGOLAND AND N/A CHARITABLE SUPPORT N/A CHARITA	Name and address (home or business)	or substantial contributor		337111341371	
4742 N 24TH ST PHORNIX, AZ 85016 MELODEERS CHORUS F.O. BOX 2112 NORTHEROOK, IL 60065 N/A CHARITABLE SUPPORT NICK TRAINA FOUNDATION FO BOX 70427 SAN FRANCISCO, CA 94147 1.0 PEDIATRIC BRAIN TUMOR FOUNDATION 302 RIDGEFIELD COURT ASHEVILLE, NC 28806 1.0 PIZZA 4 PATRIOTS F.O. BOX 542 ELK GROVE VILLAGE, IL 60009 PLAY FOR JAKE FOUNDATION A12 MONROE ST LAPORTE, IN 46350 N/A CHARITABLE SUPPORT CHARITABLE SUPPORT 1.0 REIGNS OF LIFE 55200 QUINCE ROAD SOUTH BRND, IN 46619 RONALD MCDONALD HOUSE CHICAGOLAND AND NORTHWEST INDIANA 1900 SPRING ROAD, SUITE 300 OAK BROOK, IL 60523 1.0 SANIBEL SCHOOL PO BOX 412					
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P.O. BOX 2112 NORTHEROOK, IL 60065 NICK TRAINA FOUNDATION PO BOX 70427 SAN FRANCISCO, CA 94147 PEDIATRIC BRAIN TUMOR FOUNDATION 302 RIDGEFIELD COURT ASHEVILLE, NC 26806 PIZZA 4 PATRIOTS P.O. BOX 542 ELK GROVE VILLAGE, IL 60009 PLAY FOR JAKE FOUNDATION N/A CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT 1.0 CHARITABLE SUPPORT CHARITABLE SUPPORT 1.0 CHARITABLE SUPPORT CHARITABLE SUPPORT 1.0 REIGNS OF LIFE N/A CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT ACHARITABLE SUPPORT CHARITABLE SUPPORT	PHOENIX, AZ 85016				1,000.
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SAN FRANCISCO, CA 94147 PEDIATRIC BRAIN TUMOR FOUNDATION 302 RIDGEFIELD COURT ASHEVILLE, NC 28806 PIZZA 4 PATRIOTS P.O. BOX 542 ELK GROVE VILLAGE, IL 60009 PLAY FOR JAKE FOUNDATION 612 MONROE ST LAPORTE, IN 46350 REIGNS OF LIFE 55200 QUINCE ROAD SOUTH BEND, IN 46619 ROAD ROAD SPING ROAD, SUITE 300 OAK BROOK, IL 60523 SANIBEL SCHOOL PO BOX 432	NICK TRAINA FOUNDATION	N/A	CHARITABLE	SUPPORT	
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302 RIDGEFIELD COURT ASHEVILLE, NC 28806 PIZZA 4 PATRIOTS P.O. BOX 542 ELK GROVE VILLAGE, IL 60009 PLAY FOR JAKE FOUNDATION 612 MORROE ST LAPORTE, IN 46350 REIGNS OF LIFE 55200 QUINCE ROAD SOUTH BEND, IN 46619 RONALD MCDONALD HOUSE CHICAGOLAND AND N/A NORTHWEST INDIANA 1900 SPRING ROAD, SUITE 300 OAK BROOK, IL 60523 N/A CHARITABLE SUPPORT SANIBEL SCHOOL PO BOX 432	SAN FRANCISCO, CA 94147				1,000.
302 RIDGEFIELD COURT ASHEVILLE, NC 28806 PIZZA 4 PATRIOTS P.O. BOX 542 ELK GROVE VILLAGE, IL 60009 PLAY FOR JAKE FOUNDATION 612 MORROE ST LAPORTE, IN 46350 REIGNS OF LIFE 55200 QUINCE ROAD SOUTH BEND, IN 46619 RONALD MCDONALD HOUSE CHICAGOLAND AND N/A NORTHWEST INDIANA 1900 SPRING ROAD, SUITE 300 OAK BROOK, IL 60523 N/A CHARITABLE SUPPORT SANIBEL SCHOOL PO BOX 432					!
ASHEVILLE, NC 28806 1,0 PIZZA 4 PATRIOTS N/A CHARITABLE SUPPORT P.O. BOX 542 ELK GROVE VILLAGE, IL 60009 2,0 PLAY FOR JAKE FOUNDATION N/A CHARITABLE SUPPORT 612 MONROE ST LAPORTE, IN 46350 1,0 REIGNS OF LIFE N/A CHARITABLE SUPPORT 55200 QUINCE ROAD SOUTH BEND, IN 46619 2,0 RONALD MCDONALD HOUSE CHICAGOLAND AND N/A CHARITABLE SUPPORT NORTHWEST INDIANA 1900 SPRING ROAD, SUITE 300 OAK BROOK, IL 60523 1,0 SANIBEL SCHOOL N/A CHARITABLE SUPPORT	PEDIATRIC BRAIN TUMOR FOUNDATION	N/A	CHARITABLE	SUPPORT	
PIZZA 4 PATRIOTS P.O. BOX 542 ELK GROVE VILLAGE, IL 60009 PLAY FOR JAKE FOUNDATION 612 MONROE ST LAPORTE, IN 46350 REIGNS OF LIFE 55200 QUINCE ROAD SOUTH BEND, IN 46619 RONALD MCDONALD HOUSE CHICAGOLAND AND N/A NORTHWEST INDIANA 1900 SPRING ROAD, SUITE 300 OAK BROOK, IL 60523 N/A CHARITABLE SUPPORT	302 RIDGEFIELD COURT				
P.O. BOX 542 ELK GROVE VILLAGE, IL 60009 PLAY FOR JAKE FOUNDATION N/A CHARITABLE SUPPORT LAPORTE, IN 46350 1,0 REIGNS OF LIFE SOUTH BEND, IN 46619 RONALD MCDONALD HOUSE CHICAGOLAND AND N/A RONALD MCDONALD HOUSE CHICAGOLAND AND N/A CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT SANIBEL SCHOOL N/A CHARITABLE SUPPORT CHARITABLE SUPPORT	ASHEVILLE, NC 28806		 		1,000.
P.O. BOX 542 ELK GROVE VILLAGE, IL 60009 PLAY FOR JAKE FOUNDATION 612 MONROE ST LAPORTE, IN 46350 REIGNS OF LIFE 55200 QUINCE ROAD SOUTH BEND, IN 46619 RONALD MCDONALD HOUSE CHICAGOLAND AND NA NORTHWEST INDIANA 1900 SPRING ROAD, SUITE 300 OAK BROOK, IL 60523 NA CHARITABLE SUPPORT CHARITABLE SUPPORT SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT					
ELK GROVE VILLAGE, IL 60009 PLAY FOR JAKE FOUNDATION 612 MONROE ST LAPORTE, IN 46350 REIGNS OF LIFE 55200 QUINCE ROAD SOUTH BEND, IN 46619 RONALD MCDONALD HOUSE CHICAGOLAND AND N/A NORTHWEST INDIANA 1900 SPRING ROAD, SUITE 300 OAK BROOK, IL 60523 N/A CHARITABLE SUPPORT	PIZZA 4 PATRIOTS	N/A	CHARITABLE	SUPPORT	
PLAY FOR JAKE FOUNDATION 612 MONROE ST LAPORTE, IN 46350 REIGNS OF LIFE 55200 QUINCE ROAD SOUTH BEND, IN 46619 RONALD MCDONALD HOUSE CHICAGOLAND AND N/A NORTHWEST INDIANA 1900 SPRING ROAD, SUITE 300 OAK BROOK, IL 60523 N/A CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT	P.O. BOX 542				
612 MONROE ST LAPORTE, IN 46350 REIGNS OF LIFE N/A CHARITABLE SUPPORT 55200 QUINCE ROAD SOUTH BEND, IN 46619 RONALD MCDONALD HOUSE CHICAGOLAND AND N/A CHARITABLE SUPPORT NORTHWEST INDIANA 1900 SPRING ROAD, SUITE 300 OAK BROOK, IL 60523 SANIBEL SCHOOL PO BOX 432	ELK GROVE VILLAGE, IL 60009				2,000.
612 MONROE ST LAPORTE, IN 46350 REIGNS OF LIFE N/A CHARITABLE SUPPORT 55200 QUINCE ROAD SOUTH BEND, IN 46619 RONALD MCDONALD HOUSE CHICAGOLAND AND N/A CHARITABLE SUPPORT NORTHWEST INDIANA 1900 SPRING ROAD, SUITE 300 OAK BROOK, IL 60523 SANIBEL SCHOOL PO BOX 432					
LAPORTE, IN 46350 REIGNS OF LIFE N/A SOUTH BEND, IN 46619 RONALD MCDONALD HOUSE CHICAGOLAND AND N/A NORTHWEST INDIANA 1900 SPRING ROAD, SUITE 300 OAK BROOK, IL 60523 N/A CHARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT	PLAY FOR JAKE FOUNDATION	N/A	CHARITABLE	SUPPORT	
REIGNS OF LIFE 55200 QUINCE ROAD SOUTH BEND, IN 46619 RONALD MCDONALD HOUSE CHICAGOLAND AND N/A NORTHWEST INDIANA 1900 SPRING ROAD, SUITE 300 OAK BROOK, IL 60523 N/A CHARITABLE SUPPORT TO HARITABLE SUPPORT CHARITABLE SUPPORT CHARITABLE SUPPORT 1,0	612 MONROE ST				
SOUTH BEND, IN 46619 RONALD MCDONALD HOUSE CHICAGOLAND AND N/A CHARITABLE SUPPORT NORTHWEST INDIANA 1900 SPRING ROAD, SUITE 300 OAK BROOK, IL 60523 SANIBEL SCHOOL PO BOX 432 N/A CHARITABLE SUPPORT	LAPORTE, IN 46350				1,000.
SOUTH BEND, IN 46619 RONALD MCDONALD HOUSE CHICAGOLAND AND N/A CHARITABLE SUPPORT NORTHWEST INDIANA 1900 SPRING ROAD, SUITE 300 OAK BROOK, IL 60523 SANIBEL SCHOOL PO BOX 432 N/A CHARITABLE SUPPORT					
SOUTH BEND, IN 46619 RONALD MCDONALD HOUSE CHICAGOLAND AND N/A CHARITABLE SUPPORT NORTHWEST INDIANA 1900 SPRING ROAD, SUITE 300 OAK BROOK, IL 60523 1,0 SANIBEL SCHOOL PO BOX 432	REIGNS OF LIFE	N/A	CHARITABLE	SUPPORT	
RONALD MCDONALD HOUSE CHICAGOLAND AND N/A CHARITABLE SUPPORT NORTHWEST INDIANA 1900 SPRING ROAD, SUITE 300 OAK BROOK, IL 60523 1,0 SANIBEL SCHOOL PO BOX 432	_				
NORTHWEST INDIANA 1900 SPRING ROAD, SUITE 300 OAK BROOK, IL 60523 SANIBEL SCHOOL PO BOX 432 N/A CHARITABLE SUPOPRT	SOUTH BEND, IN 46619				2,000.
NORTHWEST INDIANA 1900 SPRING ROAD, SUITE 300 OAK BROOK, IL 60523 SANIBEL SCHOOL PO BOX 432 N/A CHARITABLE SUPOPRT	RONALD MCDONALD HOUSE CHICAGOLAND AND	N/A	CHARITABLE	SUPPORT	
OAK BROOK, IL 60523 1,0 SANIBEL SCHOOL N/A CHARITABLE SUPOPRT PO BOX 432	NORTHWEST INDIANA				
SANIBEL SCHOOL PO BOX 432 N/A CHARITABLE SUPOPRT					
PO BOX 432	OAK BROOK, IL 60523				1,000.
PO BOX 432					
	SANIBEL SCHOOL	N/A	CHARITABLE	SUPOPRT	
SANIBEL, FL 33957 5,0					
	SANIBEL, FL 33957				5,000.
SISTERS OF NOTRE DAME DENAMUR N/A CHARITABLE SUPPORT	SISTERS OF NOTRE DAME DENAMUR	N/A	CHARITABLE	SUPPORT	
701 E. COLUMBIA AVENUE					
CINCINNATI OH 45215 1 0 Total from continuation sheets	• • • • • • • • • • • • • • • • • • • •	<u> </u>	<u></u>		1,000.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation status of Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) or substantial contributor recipient SPECIAL OLYMPICS N/A SUPPORT CHARITABLE 1133 19TH ST, NW, 12TH FLOOR WASHINGTON, DC 20036 1,000. ST JUDE'S CHILDREN'S RESEARCH N/A CHARITABLE SUPPORT HOSPITAL 501 ST JUDE PLACE MEMPHIS TN 38105 1,000. THE PREGNANCY CENTER N/A CHARITABLE SUPPORT 4921 E. STATE STREET ROCKFORD, IL 61108 1,000. N/A TOUR DE LAPORTE/LAPORTE HOSPITAL CHARITABLE SUPPORT FOUNDATION 1007 LINCOLNWAY LAPORTE IN 46360 1 000. ZACH'S FRIENDSHIP HOUSE N/A CHARITABLE SUPPORT 140 JAYCEE LIONS DRIVE LABELLE, FL 33935 2,000. Total from continuation sheets

FORM 990-PF	DIVIDENDS	S AND INTER	EST	FROM SECUR	ITIES	ST	ATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS				
MESIROW FINANCIAL	43,126	•	0.	43,126.	43,12	26.		
TO PART I, LINE 4	43,126.		0.	43,126.	43,12	26. ====================================		— —
FORM 990-PF		ACCOUNTI	NG	FEES		ST	ATEMENT	2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTEI NET INCOM		(D) CHARITAI PURPOSI	
STEINBERG ADVISORS	_	2,475.		0.			2,4	75.
TO FORM 990-PF, PG	1, LN 16B	2,475.	_	0.		 -	2,47	75 .
FORM 990-PF		OTHER E	XPE	NSES		ST	ATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTEI NET INCOM		(D) CHARITAI PURPOSI	
FILING FEES BROKER FEES	_	28. 350.		0. 350.			2	28.
TO FORM 990-PF, PG	1, LN 23 =	378.		350.			-	28.
FORM 990-PF		CORPORAT	E S	TOCK		ST	ATEMENT	4
DESCRIPTION				вос	K VALUE	FA	IR MARKET	r
VERIZON AMEREN DUKE ENERGY SPECTRA ENERGY DNP SELECT INCOME F PACIFIC GAS & ELECT AT&T					10,000. 63,076. 34,087. 24,571. 16,847. 17,777. 18,991.		65,39 96,66 92,80 46,68 18,19 106,38 126,93	62. 07. 83. 98.

IGLEWSKI FAMILY FOUNDATION C/O D	OCROTHY J		36-6109 4 90
EXELON HEALTH CARE PROPERTY INVESTORS INC FRONTIER COMMUNICATIONS CORP AGL RESOURCES INC		22,511. 54,563. 117. 61,104.	48,598. 86,040. 1,583. 160,418.
TOTAL TO FORM 990-PF, PART II, LIN	IE 10B	323,644.	849,662.
FORM 990-PF OTH	IER INVESTMENTS		STATEMENT 5
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
PRUDENTIAL SHORT-TERM CORPORATE	COST		
BOND PIMCO TOTAL RETURN FUND CL C	COST	63,602. 71,004.	61,168. 65,979.
TOTAL TO FORM 990-PF, PART II, LIN	JE 13	134,606.	127,147.
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