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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

OMB No 1545-0052

▶ 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.

**ZU15**Open to Public Inspection

For calendar year 2015 or tax year beginning , and ending Name of foundation Employer identification number THE PETER WHINFREY FAMILY FOUNDATION 46-5344264 Number and street (or P O box number if mail is not delivered to street address) Room/suite Telephone number (see instructions) 200 HAWLEY LANE 630-482-5995 City or town, state or province, country, and ZIP or foreign postal code If exemption application is pending, check here **GENEVA** 60134-3209 IL G Check all that apply X Initial return Initial return of a former public charity 1 Foreign organizations, check here Final return Amended return Foreign organizations meeting the Address change Name change 85% test, check here and attach computation Check type of organization X Section 501(c)(3) exempt private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation I Fair market value of all assets at J Accounting method Cash X Accrual If the foundation is in a 60-month termination end of year (from Part II, col (c), under section 507(b)(1)(B), check here Other (specify) 525 (Part I, column (d) must be on cash basis ) line 16) ▶ \$ Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per books income income purposes the amounts in column (a) (see instructions) ) (cash basis only) 50,000 1 Contributions, gifts, grants, etc., received (attach schedule) If the foundation is not required to attach Sch B 2 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 0 Я Net short-term capital gain 0 q Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 50,000 0 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. perating and Administrative Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Accounting fees (attach schedule) Other professional fees (attach schedule) 17 18 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 19 20 Occupancy Travel, conferences, and meetings 21 22 Printing and publications 23 Other expenses (att sch) STMT 1 1,404 1,404 24 Total operating and administrative expenses. Add lines 13 through 23 1,404 1,404 25 48,071 Contributions, gifts, grants paid 48,071 Total expenses and disbursements. Add lines 24 and 25 49,475 1,404 0 26 48,071 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements 525 0 Net investment income (if negative, enter -0-) 0 Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

Form 990-PF (2015)

Part	Balance Sheets Attached schedules and amounts in the description column		Beginning of year	End o	f year
-	Should be for end-or-year amounts only (See instructions )		(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash – non-interest-bearing				
2	Savings and temporary cash investments			525	525
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)		ļ		TT. 1
7	Other notes and loans receivable (att schedule)	_			
	Less allowance for doubtful accounts	0			
sts 8	Inventories for sale or use				
Assets 6 8	Prepaid expenses and deferred charges				
<b>⋖</b>   10a					
6	(2.1.2.7)				
C	Investments – corporate bonds (attach schedule)				
11	Investments – land, buildings, and equipment basis				
	Less accumulated depreciation (attach sch.)				
12	Investments – mortgage loans				
13	Investments – other (attach schedule)				
14	Land, buildings, and equipment basis				
	Less accumulated depreciation (attach sch.)				
15	Other assets (describe ▶	)			
16	Total assets (to be completed by all filers – see the				
	instructions Also, see page 1, item l)		0	525	525
17	Accounts payable and accrued expenses				
σ 18	Grants payable				
19	Deferred revenue				
⊒ 20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities 19 20 21 23	Mortgages and other notes payable (attach schedule)				
22	Other liabilities (describe ►	)			
23	Total liabilities (add lines 17 through 22)		0	0	
	Foundations that follow SFAS 117, check here	X			
24	and complete lines 24 through 26 and lines 30 and 31.				
E 24	Unrestricted			525	
25	Temporarily restricted				
Net Assets or Fund Bala 25 26 22 8 20 31	Permanently restricted		-		
킖	Foundations that do not follow SFAS 117, check here	. П			
뒴	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				
8 29	Retained earnings, accumulated income, endowment, or other funds				
를 30	Total net assets or fund balances (see instructions)		0	525	
2 31	Total liabilities and net assets/fund balances (see		_ :		
	instructions)		0	525	
Part					
	al net assets or fund balances at beginning of year – Part II, column (a), line 3	0 (mu	st agree with		
	l-of-year figure reported on prior year's return)			1	0
	er amount from Part I, line 27a			2	525
	er increases not included in line 2 (itemize)			3	
	d lines 1, 2, and 3			4	525
	creases not included in line 2 (itemize)			5	
<u>6</u> Tot	al net assets or fund balances at end of year (line 4 minus line 5) – Part II, col	umn (l	b), line 30	6	525

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 VII-A Statements Regarding Activities (continued)			
At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11	<u> </u>	<u> </u>
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
Website address ► N/A			
14 The books are in care of ▶ PETER WHINFREY Telephone no ▶ 63	0-482-	-599	5
200 HAWLEY LANE			
Located at ▶ GENEVA IL ZIP+4 ▶ 60	134-32	209	
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			
At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority		Yes	No
over a bank, securities, or other financial account in a foreign country?	16		_X_
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
the foreign country ▶			
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	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			
	No	1	
(9) 1 41111111 34441 441111111111111111111	No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	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			
• • • • • • • • • • • • • • • • • • • •	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	/=	1	Ì
	/A 1b	-	
Organizations relying on a current notice regarding disaster assistance check here	$\sqcup$		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	/A 1c	1	ŀ
	/A 1c	<del>  -</del>	<del>                                     </del>
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?	No.		
, · · · · · · · · · · · · · · · ·	No	1	
If "Yes," list the years > 20 , 20 , 20 , 20		1	
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	/A 2b	1	İ
	7 1 20	+	_
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		1	
	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		1	
		1	
Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of		1	
the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	<b>√A</b> 3b	1	1
,	4a	$\overline{}$	x
<ul> <li>Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?</li> <li>Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its</li> </ul>	140	1	<del> </del>
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	Ī	x
Chantable purpose that had not been removed from jeopardy before the hist day of the tax year beginning in 2010.		90-PI	

orm	990-PF (2015) THE PEIER			344204			Page <b>b</b>
Pa	rt VII-B Statements Rega	rding Activities for Which Fe	<u>orm 4720 May Be R</u>	equired (conti	nued)		
ба	During the year did the foundation pa	y or incur any amount to .				1	
	(1) Carry on propaganda, or otherwi	se attempt to influence legislation (se	ction 4945(e))?	_ Y	es 🗶 No	1	
	(2) Influence the outcome of any spe	ecific public election (see section 495	5), or to carry on,			- [	
	directly or indirectly, any voter re	gistration drive?		_ Y	es 🛚 X No	l	
	(3) Provide a grant to an individual for	or travel, study, or other similar purpo	ses?	Y	es 🗓 No	I	
	(4) Provide a grant to an organization	n other than a charitable, etc., organi:	zation described in			1	
	section 4945(d)(4)(A)? (see instr	uctions)			es 🛚 X No		
	(5) Provide for any purpose other than	an religious, charitable, scientific, liter	ary, or educational	_		ł	
	purposes, or for the prevention of	f cruelty to children or animals?			es X No	1	
b	If any answer is "Yes" to 5a(1)-(5), d	•	fy under the exceptions d	escribed in		- 1	
	Regulations section 53 4945 or in a	•	•		N/A	5b	ĺ
	Organizations relying on a current no				▶ □		
С	If the answer is "Yes" to question 5ai						
	because it maintained expenditure re	•	• • • • • • • • • • • • • • • • • • • •	N/A 🗌 Y	es No	- 1	
	If "Yes," attach the statement require	· · · · · ·	d)	•		- 1	
ša	Did the foundation, during the year, r	• •	•			Ī	
_	on a personal benefit contract?		,, to pay promising		es X No	- 1	
b	Did the foundation, during the year, p	pay premiums, directly or indirectly, or	n a personal benefit contr	ل		6ь ]	x
~	If "Yes" to 6b, file Form 8870	ray promiumo, anoday or manoday, or	n a personal benefit contr	400			
7a		the foundation a party to a prohibited	tay shelter transaction?	Пу	es X No	1	
	•				N/A	7b	
* *	and Contractors	Omoro, Birotoro, Tractor	o, i candation man	agoro, riigiiij	· uiu Empioy	,	
1 [		foundation managers and their con	npensation (see instruc	tions).			
					(d) Contributions to	l	
	(a) Name	and address			employee benefit		nse account,
	(4)		devoted to position	enter -0-)	plans and deferred compensation	other a	allowances
	TER WHINFREY	GENEVA	PRESTDENT		<u>-</u>		
	O HAWLEY LANE	(a) Name and address  (b) Title, and average hours per week devoted to position  (GENEVA IL 60134  (b) Title, and average hours per week devoted to position  (If not paid, enter -0-)	اه	0		0	
	NE DAVISON WHINFREY					<del> </del>	<del>_</del> _
	O HAWLEY LANE	IL 60134	1.00	ol	0		0
	CHAEL MCALISTER	GENEVA	DIRECTOR				
					0		0
_20	0 HAWLEY LANE	IL 60134	1.00	0			
		1 1 1 1 1 1 1 1 1 1 1 1 1 1					
2	Compensation of five highest-paid "NONE."	i employees (other than those incit	Jaea on line 1 – see insi	tructions). If none	e, enter		
_	NONE.		<del></del>		4 D Contributors to	Γ	
	(a) Name and address of a short and	250 000	(b) Title, and average	(c) Compensation	<ul><li>(d) Contributions to employee benefit</li></ul>	(e) Expe	nse account,
	(a) Name and address of each emplo	yee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred	other a	allowances
			<del>-  </del>		compensation	<del></del>	
NC	NE						
			<del></del>			<del> </del> -	
			1				
						<del> </del> -	
					<del></del>	<b> </b>	
						<u> </u>	
				]		]	
						<u> </u>	
ota	I number of other employees, paid over	r \$50 000	<del>-</del>			•	0

Form **990-PF** (2015)

orm 990-PF (2015) <b>T</b>	HE PETER WHINFREY FAMILY	46-5344264	Page <b>7</b>
	mation About Officers, Directors, Trustees Contractors (continued)	, Foundation Managers, Highly Paid E	
	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			
	<del></del>		
Total number of others re	eceiving over \$50,000 for professional services		<b>&gt;</b>
Part IX-A Sun	nmary of Direct Charitable Activities		
	st direct charitable activities during the tax year. Include relevant statistical ciaries served, conferences convened, research papers produced, etc.	I information such as the number of	Expenses
1 N/A			
2			
2			
3			
4			
•			
		·	
	nmary of Program-Related Investments (se		
1 N/A	am-related investments made by the foundation during the tax year on line	s 1 and 2	Amount
1 21/22			
2			
All other program-related inves	stments See instructions		
3			
			i

Total. Add lines 1 through 3

Pa	Art X Minimum Investment Return (All domestic foundations must complete this part Foreig	n foun	dations,
	see instructions )	····	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes .		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	17,798
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	17,798
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0	]	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	17,798
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	267
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	17,531
6	Minimum investment return. Enter 5% of line 5	6	<u>877</u>
Pa	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	founda	ations
	and certain foreign organizations check here ▶ and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	877
2a	Tax on investment income for 2015 from Part VI, line 5	1 1	
b	Income tax for 2015 (This does not include the tax from Part VI)	] [	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	877
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	877
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	877
P	art XII Qualifying Distributions (see instructions)		
		Г	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		40 071
а	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	1a	48,071
b	Program-related investments – total from Part IX-B	1b	<del></del>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	<del></del>
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	40 004
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	48,071
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	1	_
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	48,071
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found	ation	
	qualifies for the section 4940(e) reduction of tax in those years		

47,194

47,194

10

C

to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be

Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)
 Excess distributions carryover to 2016.
 Subtract lines 7 and 8 from line 6a

required-see instructions)

Analysis of line 9 Excess from 2011 Excess from 2012 Excess from 2013

Excess from 2014

Excess from 2015

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

factors N/A

Any submission deadlines

Part XV Supplementary Information (Co 3 Grants and Contributions Paid During the	ontinued)			
3 Grants and Contributions Paid During th		Future Payment	<del></del>	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
VARIOUS		}		
		Ì		48,07
				40,07
			1	
			}	
	ļ			
			1	
		i	1	
		<u></u>	<u> </u>	
Total			<b>&gt;</b> 3a	48,07
b Approved for future payment				
N/A				
		1	1	
		1		
	<u> </u>	<u></u>	<del></del>	
Total			▶ 3b	

FAILAVI-A AII	lalysis of fileoffie-i roducing Activ			r		
Enter gross amounts unle	ess otherwise indicated	Unrelate (a) Business code	d business income (b) Amount	(c) Exclusion code	d by section 512, 513, or 514 (d) Amount	(e) Related or exempt function income
1 Program service reve	nue					(See instructions )
a						
b						
c					-	
d						
e f			-			
g Fees and contract	cts from government agencies					
2 Membership dues an	_					
3 Interest on savings a	nd temporary cash investments					
4 Dividends and interes						
5 Net rental income or	(loss) from real estate					
a Debt-financed pro						
b Not debt-financed						
	(loss) from personal property					
7 Other investment inco						
	ales of assets other than inventory					
9 Net income or (loss)						
10 Gross profit or (loss)						
•			-			
e						
12 Subtotal Add column	ns (b) (d) and (e)		0		0	0
					1	
			<u> </u>	1	13	0
13 Total. Add line 12, co	olumns (b), (d), and (e)			1	1	
13 Total. Add line 12, co (See worksheet in line 13	olumns (b), (d), and (e) 3 instructions to verify calculations )	complishm			13 _	
13 Total. Add line 12, co (See worksheet in line 13 Part XVI-B Re Line No. Explair	blumns (b), (d), and (e) B instructions to verify calculations ) Belationship of Activities to the Activities have below how each activity for which income is	s reported in c	nent of Exempt P	urpose	13	0
13 Total. Add line 12, co (See worksheet in line 13 Part XVI-B Re Line No. Explair accom	olumns (b), (d), and (e) B instructions to verify calculations ) elationship of Activities to the Ac	s reported in c	nent of Exempt P	urpose	13	0
13 Total. Add line 12, co (See worksheet in line 13 Part XVI-B Re Line No. Explair	blumns (b), (d), and (e) B instructions to verify calculations ) Belationship of Activities to the Activities have below how each activity for which income is	s reported in c	nent of Exempt P	urpose	13	0
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13 Total. Add line 12, co (See worksheet in line 13 Part XVI-B Re Line No. Explair accom	blumns (b), (d), and (e) B instructions to verify calculations ) Belationship of Activities to the Activities have below how each activity for which income is	s reported in c	nent of Exempt P	urpose	13	0
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13 Total. Add line 12, co (See worksheet in line 13 Part XVI-B Re Line No. Explair accom	blumns (b), (d), and (e) B instructions to verify calculations ) Belationship of Activities to the Activities have below how each activity for which income is	s reported in c	nent of Exempt P	urpose	13	0
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13 Total. Add line 12, co (See worksheet in line 13 Part XVI-B Re Line No. Explair accom	blumns (b), (d), and (e) B instructions to verify calculations ) Belationship of Activities to the Activities have below how each activity for which income is	s reported in c	nent of Exempt P	urpose	13	0
13 Total. Add line 12, co (See worksheet in line 13 Part XVI-B Re Line No. Explair accom	blumns (b), (d), and (e) B instructions to verify calculations ) Belationship of Activities to the Activities have below how each activity for which income is	s reported in c	nent of Exempt P	urpose	13	0
13 Total. Add line 12, co (See worksheet in line 13 Part XVI-B Re Line No. Explair accom	blumns (b), (d), and (e) B instructions to verify calculations ) Belationship of Activities to the Activities have below how each activity for which income is	s reported in c	nent of Exempt P	urpose	13	0
13 Total. Add line 12, co (See worksheet in line 13 Part XVI-B Re Line No. Explair accom	blumns (b), (d), and (e) B instructions to verify calculations ) Belationship of Activities to the Activities have below how each activity for which income is	s reported in c	nent of Exempt P	urpose	13	0
13 Total. Add line 12, co (See worksheet in line 13 Part XVI-B Re Line No. Explair accom	blumns (b), (d), and (e) B instructions to verify calculations ) Belationship of Activities to the Activities have below how each activity for which income is	s reported in c	nent of Exempt P	urpose	13	0
13 Total. Add line 12, co (See worksheet in line 13 Part XVI-B Re Line No. Explair accom	blumns (b), (d), and (e) B instructions to verify calculations ) Belationship of Activities to the Activities have below how each activity for which income is	s reported in c	nent of Exempt P	urpose	13	0
13 Total. Add line 12, co (See worksheet in line 13 Part XVI-B Re Line No. Explair accom	blumns (b), (d), and (e) B instructions to verify calculations ) Belationship of Activities to the Activities have below how each activity for which income is	s reported in c	nent of Exempt P	urpose	13	0
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Form 99	0-PF (201	15) <b>THE P</b>	ETER	WHINE	REY	FAMI	LY		46-	5344264			Pag	ge <b>13</b>
Part :	XVII	Information Exempt Ord	Rega	arding Tra				ctions and	d Relat	ionships Wi	th Noncha	aritable		
1 Die	d the orga	anization directly	y or indi	rectly engag	e in any	of the fo	llowing with	any other org	janizatior	described		1	Yes	No
		01(c) of the Coo	de (othe	r than section	on 501(c	)(3) orga	nızatıons) or	ın section 52	?7, relatin	g to political				
	ganization		_											ĺ
		om the reporting	g found	ation to a no	ncharita	ble exem	npt organizat	ion of				t		
	Cash											1a(1)		X
(2)	Othera	ssets										1a(2)		X
<b>b</b> Ot	her transa	actions.												į
(1)	Sales o	f assets to a no	ncharita	able exempt	organiza	ation						1b(1)		<u>X</u>
(2)	Purchas	ses of assets fro	om a no	ncharitable i	exempt (	organiza	tion					1b(2)		X
(3)	Rental	of facilities, equi	ipment,	or other ass	ets							1b(3)		X
(4)	Reimbu	rsement arrang	ements	i								1b(4)		X
(5)	Loans	or loan guarante	es									1b(5)		X
		nance of service		embership or	r fundrai:	sına solıc	citations					1b(6)		X
		acilities, equipm		•		•		es.				1c		X
		er to any of the							should alv	vavs show the fa	air market	(		
		goods, other as		•	•		-	, ,		•				
		transaction or		_	-		-							
	ine no	(b) Amount inve					mpt organization	de of the goo		ription of transfers, tra			nts	
N/A		(0,7.5	-	(4)			p. organizzaren		(-,,					
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2a Is	the found	lation directly or	r indirec	tly affiliated	with. or	related to	o. one or mo	re tax-exemp	t organiza	ations				
		section 501(c)		•				•	3			T Ye	s X	No
		mplete the follow					(0)(0)) 0:							]
		a) Name of organiza		iloddio		(b) Type of	organization			(c) Descrip	otion of relationsh	110		
N/		-,				(=7.5)000	ganization			(0)				
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	Under no	naities of perjury, I o	doctoro the	at I have exami	nod this ro	tum includ	100 0000mp304	a schodules and	d statement	e and to the best of	my knowledge a	and belief it is true		
		nd complete Declar									·			
		(										e IRS discuss this re e preparer shown be		
Sign		0. r										structions)?		No
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ĺ		-						5/8/201	7_	PRES	IDENT			
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#### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

THE PETER WHINFREY FAMILY

### **Schedule of Contributors**

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

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

OMB No 1545-0047

Employer identification number

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

2015

FOUNDATION		46-5344264
Organization type (check of	nne)	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	ation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	ı
	501(c)(3) taxable private foundation	
	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a	Special Rule See
General Rule		
or more (in money	filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution property) from any one contributor Complete Parts I and II See instructions	
contributor's total co	ontributions	
	described in section 501(c)(3) filing Form 990 or 990-EZ that met the $33^{1/3}$ % ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or	
	d that received from any one contributor, during the year, total contributions of	
\$5,000 or (2) 2% of	the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Cor	nplete Parts I and II
For an organization	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece	eived from any one
-	he year, total contributions of more than \$1,000 exclusively for religious, char	
literary, or educatio	nal purposes, or for the prevention of cruelty to children or animals. Complete	Parts I, II, and III
For an organization	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece	erved from any one
· •	he year, contributions exclusively for religious, charitable, etc., purposes, but i	
	d more than \$1,000. If this box is checked, enter here the total contributions the	
• •	an exclusively religious, charitable, etc , purpose. Do not complete any of the ples to this organization because it received nonexclusively religious, charitable	
	nore during the year	<b>&gt;</b> \$
Caution. An organization th	nat is not covered by the General Rule and/or the Special Rules does not file S	Schedule B (Form 990.
990-EZ, or 990-PF), but it n	nust answer "No" on Part IV, line 2, of its Form 990, or check the box on line h	H of its Form 990-EZ or on its

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

Name of organization

THE PETER WHINFREY FAMILY

Employer identification number 46-5344264

Part I	Contributors (see instructions). Use duplicate copies of Pa	art I if additional space is ne	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	PETER WHINFREY 200 HAWLEY LANE GENEVA IL 60134-3209	\$ 50,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
No.		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

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	Statement 1 - Form 990-PF, Part I, Line 23 - Other Expenses	اً بــــ	404	404
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