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Form **990-PF**

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

Far attended year 2015 of tax year beginning A Employer identification number		ot enter social security numbers on bout Form 990-PF and its separate			Open to Public Inspection
Name of foundation A Employer identification number		out to the out to and the departed		s govinoimosopi	Open to Public Inspection
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Section 4-1/2(1) Improvement of content to a seas weak-level Total product to the season of th				16 500000	
2004 HENLEY ST Cry or town, state or province, control, and 27P or foreign postal code CLENVTEW, TL 60025 G Check all that apply Indian return Indian return Amended re			Doom/outo	 	
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Check all that apply		foreign postal code		C If exemption application is po	ending check here
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H. Check type of organization Section 501(x)(3) exempt private foundation If air market value of all assets at end of year Accounting method Cash Actural (from Part III, col. (c), line 15) S. 14.3, 34.7 (Part II, col. (c), line 16) S. 14.3, 34.7 (Part III, col. (cit.) line 15) S. 14.3, 34.7 (Part III, col.) collection (III) Differ (specify) S. 14.3, 34.7 (Part III, column (private be on cash basis) I Contributions, gifts, grants, etc., received Dividended and interest from securities Dividended and interest from s	Final return	Amended return		2	OF0/
X Section 48/7(a)(1) nonexempt charable trust Other taxable private foundation Under Section 507(b)(1)(A), check here I Far market value of all assets at end of year J Accounting method C Cash Accural Colin (c), line 15 S 14.3 , 34.7 . (Part I, column (c) must be on cash basis) T Analysis of Revenue and Expenses C Cash C	Address change	Name change		check here and attach co	emputation
Fair market value of all assets at end of year Check Cash Accrual If the foundation is in a 60-month termination under section 507(b)(1)(B), check here Cash Analysis of Revenue and Expenses Cash					——I
Transparent Continue Contin				under section 507(b)(1)	(A), check here
Part I Analysis of Revenue and Expenses (The statul of amountain in columns (b)) (and (c) may not income (c) must be on cash basis) I Contributions, pitts, grants, side, received 1 Contributions, pitts, grants, side, received 2 Chee-big in the leadant act sequents and the big statulation of the columns and temperature (c) Adjusted net income (c) M/A 1 Contributions, pitts, grants, side, received 2 Chee-big in the leadant act sequents are the big statulation and temperature (c) Adjusted net income (c) M/A 2 Chee-big in the leadant act sequents are the big statulation and temperature (c) Adjusted net income (c) M/A 3 Interest on average and temperature 4 Dividents and interest from securities 5 Giross rents b Not rental income or (loca) 6 Bit being and related active the big statulation (c) Adjusted net income (c) local (c) Adjusted ne	· 1		Accrual		
Part Analysis of Revenue and Expenses (a) Revenue and expenses per book (b) Net investment (c) Adjusted net (c) Adj			nacie)	under section 507(b)(1))(B), check here
1 Contributions, gifts, grants, etc., received 2 Check ▶	Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) in	(a) Revenue and	(b) Net investment		(d) Disbursements for charitable purposes
Check District the functions and request to statch Sch B totherset not south and of temporary cash investments. 3 Total Republications 5a Gross rents 9 Net ential recome or (lose) 63 Net south recome or (lose) 64 Net south recome or (lose) 65 Net south recome or (lose) 66 Net south recome or (lose) 67 Net south recome or (lose) 68 Net south recome or (lose) 68 Net south recome or (lose) 69 Net south recome or (lose) 60 Net south recome or (lose) 61 Net south recome or (lose) 62 Net south recome or (lose) 63 Net south recome or (lose) 64 Net south recome or (lose) 65 Net south recome or (lose) 65 Net south recome or (lose) 66 Net south recome or (lose) 66 Net south recome or (lose) 67 Net south recome or (lose) 68 Net south recome or (lose) 69 Net south recome or (lose) 60 Less Cost of poods and come or (lose) 60 Less Cost of poods and come or (lose) 61 Comparation or (lose) 61 Comparation or (lose) 62 Contributions 63 Net south recome or (lose) 64 Legal fees 65 A Accounting fees 65 Other professional fees 67 Interest 68 Object counting fees 68 Other professional depletion 69 Occupancy 60 Cocupancy 60 Cocupancy 60 Cocupancy 61 Travel, conferences, and meetings 62 Travel, conferences, and meetings 63 Total expenses and disbursements 64 Add (lose) 65 Add (lose) 65 Add (lose) 66 Add (lose) 66 Add (lose) 67 Add (lose) 67 Add (lose) 68 Add (lose) 68 Add (lose) 69 Occupancy 60 Occupancy 61 Occupancy 61 Occupancy 62 Occupancy 63 Occupancy 64 Occupancy 64 Occupancy 65 Occupancy 65 Occupancy 66 Occupancy 67 Occupancy 67 Occupancy 68 Occupancy 69 Occupancy 60 Occupancy 6			income		(cash basis only)
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68 Net gen or (locs) from sale of assets not on line 10					
Beside pice for all 357. Caputal gain nat income (from Peri IV, line 2) Net short-term capital gain Income modifications Coros selete less returns Discrete for income Income modifications Income modifications Discrete for income Di	b Net rental income or (loss)				
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b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A	27 Subtract line 26 from line 12:				
c Adjusted net income (if negative, enter -0-)					ļ
)	0.		
	FROSOI	lica saa instructions	<u> </u>	IN/A	Form 990-PF (2015)

Fo	m 99	00-PF (2015) GINA AND JR GONDECK FAM	ILY FOUNDATION	46-	7088837 Page 2
ſΨ	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
$\stackrel{\smile}{=}$		Column should be for end-or-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	-	6 306	5 501	
		Savings and temporary cash investments	6,326.	5,781.	5,781.
	3	Accounts receivable >			
	١.	Less; allowance for doubtful accounts			·
	4	Pledges receivable -			
		Less allowance for doubtful accounts			
	_	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons			 -
	′	Other notes and loans receivable			
	١.	Less; allowance for doubtful accounts			
ets	١.	Inventories for sale or use	ļ.,		
Assets	9	Prepaid expenses and deferred charges	-		
•	ı	Investments - U S and state government obligations			
	ı	Investments - corporate stock			
	1	Investments - corporate bonds			···
	11	Investments - land buildings and equipment basis			
	١	Less accumulated depreciation			
	l	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment, basis			
	l	Less accumulated depreciation	140 411	125 566	405 566
		Other assets (describe HIGHTOWER HOLDING,)	148,411.	137,566.	137,566.
	16	Total assets (to be completed by all filers - see the	154 535	142 245	4.40.045
_	 	instructions. Also, see page 1, item I)	154,737.	143,347.	143,347.
	ı	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers directors trustees, and other disqualified persons			
iat	21	Mortgages and other notes payable			
_	22	Other liabilities (describe			
		T W . LWW . / . L			
_	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
ß		and complete lines 24 through 26 and lines 30 and 31.			
Net Assets or Fund Balances	l	Unrestricted			
alar	25	Temporarily restricted			
ä	26	Permanently restricted			
Š		Foundations that do not follow SFAS 117, check here			
F		and complete lines 27 through 31.			
ş	27	Capital stock, trust principal, or current funds	0.	0.	
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund		0.	
¥.	29	Retained earnings, accumulated income, endowment, or other funds	154,737.	143,347.	
ž	30	Total net assets or fund balances	154,737.	143,347.	
			154 727	142 247	
_	31	Total liabilities and net assets/fund balances	154,737.	143,347.	
Р	art	Analysis of Changes in Net Assets or Fund Ba	lances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30	,	
		st agree with end-of-year figure reported on prior year's return)		1	154,737.
2	•	r amount from Part I, line 27a		2	-5,437.
3	Othe	r increases not included in line 2 (itemize)		3	0.
4	Add	lines 1, 2, and 3		4	149,300.
5	Decr	eases not included in line 2 (itemize) BOOK/TAX DIFFE	RENCES	5	5,953.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		6	143,347.
		·			Form 990-PF (2015)

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.

Form 990-PF (2015)

111,224.

46,004.

7 Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4

	990-PF (2015) GINA AND JR GONDECK FAMILY FOUNDATION 4	<u>16-708</u>	<u>8837</u>		Page 4
	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 494	18 - see	instru	ction	<u>s)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	ļ			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	ļ			_
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1			0.
	of Part I, line 27b				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).				_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0.
3	Add lines 1 and 2	3			0.
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			0.
6	Credits/Payments				
	2015 estimated tax payments and 2014 overpayment credited to 2015 6a				
	Exempt foreign organizations - tax withheld at source 6b				
	Tax paid with application for extension of time to file (Form 8868) Continue withholding expension withhold				
	Backup withholding erroneously withheld Total coddto and payments. Add keep 6e through 6d.	_			Λ
	Total credits and payments. Add lines 6a through 6d	7			0.
8 9	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	8		 -	0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	9	-		<u> </u>
	Enter the amount of line 10 to be. Credited to 2016 estimated tax	11		-	
	rt VII-A Statements Regarding Activities				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No
	any political campaign?	•	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	,	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published				
	distributed by the foundation in connection with the activities	•			
C	Did the foundation file Form 1120-POL for this year?		1c		х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ▶ \$ 0 . (2) On foundation managers. ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers ► \$0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	/	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		7,-
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		_5_		X
	If "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
0	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 land 	2144	1		
	remain in the governing instrument?	IW	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 XV		7	X	
•	and the realisation have at least \$6,000 in assets at any time during the year. If Yes, Complete Part II, Col (c), and Part XV		+	41	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		ı		
	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	х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calend	lar			
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		х
10	Did any persons become substantial contributors during the tax year? If "Yes" attach a schedule listing their names and addresses		10		X
		ţ.	orm 99 0)-PF	(2015)

orn	1990-PF (2015) GINA AND JR GONDECK FAMILY FOUNDATION 46-7088	837		Page 5
Pa	art 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	Х	
	Website address ► N/A			
14	The books are in care of ► JR & GINA GONDECK Telephone no. ► 773-96	8-1	999	
	Located at ▶ 2204 HENLEY ST, GLENVIEW, IL ZIP+4 ▶60			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			X
	and enter the amount of tax-exempt interest received or accrued during the year			0.
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	 '''-		
	foreign country			
Pε	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u>. </u>		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)	 	103	-110
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		i	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
			İ	
	(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 X 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 X No			
D	of fany 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		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2015?	1¢		<u> </u>
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))			
8	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?			
	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			
	statement - see instructions.) N/A	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?			
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) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		<u>X</u>
	Foi	m 990)-PF (2015)

Form 990-PF (2015) GINA AND JR GONDECK FAMI			46-70888	<u>3</u> 7 Page €
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Y	es X No	
(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indir	ectly,		<u> </u>
any voter registration drive?		Y	es X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
4945(d)(4)(A)? (see instructions)		Y	es X 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?		Y	es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described	in Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	ere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it mainta	uned		
expenditure responsibility for the grant?			es No	
If "Yes," attach the statement required by Regulations section 53 4945	-5(d)	_ ·		1 1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?			es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu		٠٠ لــــــــ		7b
Part VIII Information About Officers, Directors, Truste		nagers, Highly		
Paid Employees, and Contractors	·	· , · ,		
1 List all officers, directors, trustees, foundation managers and their of	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
JR GONDECK	TRUSTEE			
2204 HENLEY ST				
GLENVIEW, IL 60025	0.50	0.	0.	0.
GINA GONDECK	TRUSTEE			
2204 HENLEY ST				
GLENVIEW, IL 60025	0.50	0.	0.	0.
			:	
				
			:	
2 Compensation of five highest-paid employees (other than those incl	uded on line 1). If none,	enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	4.10	(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	account, other allowances
NONE	,	-		
		1		***
				
		<u> </u>		
		1		
Total number of other employees paid over \$50,000				0
			Form	990-PF (2015)

Form 990-PF (2015) GINA AND JR GONDECK FAMILY FOUNDATION		7088837	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Paid Employees, and Contractors (continued)	lighly		
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) Typ	pe of service	(c) Com	pensation
NONE			
		İ	
-			
		İ	
Total number of others receiving over \$50,000 for professional services		<u> </u>	0
Part IX-A Summary of Direct Charitable Activities	-		<u>_</u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as	e the		
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	5 tiie	Expenses	
1 N/A			
1 41/44			
2			
2			
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			
	···		
2		·	
			
			
All other program-related investments. See instructions.			
3			
Total. Add lines 1 through 3	•		0.
Totali Mad illies i tillough o		Form 990-F	
		101111 000-1	· (2013)

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26

b Program-related investments - total from Part IX-B

2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the:

a Suitability test (prior IRS approval required) **b** Cash distribution test (attach the required schedule)

Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions Subtract line 5 from line 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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46,004.

46,004.

46,004.

1b

2

3a

3h

6

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				7,035.
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				
d From 2013 8,930.				
e From 2014 60,557.				
f Total of lines 3a through e	69,487.			
4 Qualifying distributions for 2015 from				-
Part XII, line 4: ► \$ 46,004.				
a Applied to 2014, but not more than line 2a			0.	
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.			
d Applied to 2015 distributable amount				7,035.
e Remaining amount distributed out of corpus	38,969.			
Excess distributions carryover applied to 2015 (If an amount appears in column (d) the same amount must be shown in column (a))	0.		- 1- 22	0.
6 Enter the net total of each column as indicated below.				
2 Corpus Add lines 3f, 4c and 4e Subtract line 5	108,456.		,	
b Prior years' undistributed income. Subtract	100,1301			
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.				
Subtract lines 7 and 8 from line 6a	108,456.			
0 Analysis of line 9				
a Excess from 2011				
b Excess from 2012				
c Excess from 2013 8,930.				
d Excess from 2014 60,557.				
e Excess from 2015 38,969.	<u> </u>			
523581 11-24-15				Form 990-PF (2015)

Part XIV Private Operating Fo	D JR GONDEC	K FAMILY FO	ONDATION)88837 Page 10
			-A, question 9)	N/A	
1 a if the foundation has received a ruling of					
foundation, and the ruling is effective for	· ·	•		14040(1)(0) == []4	048(3)(5)
b Check box to indicate whether the found		ig toundation described i		4942(j)(3) or 4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year (a) 2015	(b) 2014	Prior 3 years (c) 2013	(d) 2012	- (a) Tatal
income from Part I or the minimum	(2) 2010	(0) 2014	(6) 2013	(0) 2012	(e) Total
investment return from Part X for					
each year listed			 		
b 85% of line 2a		<u> </u>	 		
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		<u></u>	 		
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)					L
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			f the foundation	had \$5,000 or mo	re in assets
at any time during the	ne year-see instri	uctions.)			
1 Information Regarding Foundation	•				
a List any managers of the foundation who	have contributed more	than 2% of the total contr	ibutions received by the	foundation before the clos	se of any tax
year (but only if they have contributed m	iore man \$5,000) (See S	ection 507(a)(2))			
SEE STATEMENT 4	··			·	
b List any managers of the foundation who other entity) of which the foundation has			or an equally large porti	on of the ownership of a pa	artnership or
• •	a 10 % of greater filteres	ι.			
NONE					····
2 Information Regarding Contribution					
Check here X if the foundation o					
the foundation makes gifts, grants, etc. (10
a The name, address, and telephone numb	er or e-mail address of the	he person to whom appli	cations should be addres	ssed.	
b. The form in which conficetions chould be	a automotical and reformat			· · · · · · · · · · · · · · · · · · ·	
b The form in which applications should b	e submitteu and miormat	aon and materials they sr	iouid include		
c Any submission deadlines:	· · · · · · · · · · · · · · · · · · ·				
d Any restrictions or limitations on awards	such as by geographics	l areas charitable fields	kinds of institutions or	other factors:	
a rang room-onorie or innitations on awards	, oadii aa ay geograpiiloo	,	amus or mstrautums, or	omor idol015.	

Part XV Supplementary Information (continued) 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 ADVOCATE CHILDREN'S HOSPITAL NONE PC CHARITABLE 4440 W. 95TH STREET OAK LAWN, IL 60453 5,000. ASSOCIATED TALMUD TORAHS OF CHICAGO NONE PC CHARITABLE 2828 W. PRATT BLVD CHICAGO, IL 60645 2,500. CHICAGO CIVIC OPERA (SHEN YUN SHOW) NONE PC CHARITABLE 20 N WACKER DR CHICAGO, IL 60606 4,365. FLOW-THROUGH FROM K-1 NONE PC CHARITABLE 200 WEST MADISON STREET, SUITE 2500 CHICAGO, IL 60606 459. JUDD GOLDMAN ADAPTIVE SAILING NONE PC CHARITABLE FOUNDATION 1362 S LINN WHITE DRIVE CHICAGO, IL 60605 1,000. SEE CONTINUATION SHEET(S) ► 3a Total 46,004. b Approved for future payment NONE Total **▶** 3b Form 990-PF (2015)

Part XVI-A	Anal	vsis of	Income	-Producing	Activities
" WILKE A	Allai	, 0.0 0.	111001110	i i Quading	ACHTICO

Enter gross amounts unless otherwise indicated.	Unrelated	business income		section 512, 513, or 514	(e)	
•	Busiliess Amount sic		(C) Exclu- sion	(d) Amount	Related or exempt function income	
1 Program service revenue:	code	Amount	code	Amount	ranction income	
a	·		 	··· · · · · · · · · · · · · · · · · ·		
b	·					
·	·					
d	1 1		 			
e	·					
<u></u>			 			
g Fees and contracts from government agencies			 			
2 Membership dues and assessments		 			·····	
3 Interest on savings and temporary cash						
Investments	 		111	2 (22		
4 Dividends and interest from securities	 		14	3,633.		
5 Net rental income or (loss) from real estate:	 		+			
a Debt-financed property	 		 			
b Not debt-financed property	 		+		···	
6 Net rental income or (loss) from personal						
property		······	01	7 700		
7 Other investment income	 			-7,709.		
8 Gain or (loss) from sales of assets other			18	257		
than inventory	 		+ 19 -	-357.		
9 Net income or (loss) from special events			+			
10 Gross profit or (loss) from sales of inventory	··-	 		.,		
11 Other revenue						
a	 		+ -			
b			+ +-			
C			 		·····	
d	 		 			
e	 -	0 .	+ + -	-4,433.		
12 Subtotal Add loss 12 columns (b), (d), and (e)		U .	• 1			
13 Total Add line 12, columns (b), (d), and (e)				13	-4,433.	
(See worksheet in line 13 instructions to verify calculations)						
Part XVI-B Relationship of Activities t	o the Accon	nplishment of Ex	empt Pur	poses		
Line No. Explain below how each activity for which inco	nme is reported in	column (e) of Part XVI-	A contributed i	mnortantly to the accomp	lichment of	
the foundation's exempt purposes (other than			r communication i	importantly to the accomp	institucint of	
		" ' ' ' " " " " " " " " " " " " " " " "				
					 	
					·	
					· · · · · · · · · · · · · · · · · · ·	

Form **990-PF** (2015)

523621 11-24-15

	90-PF (2: XVII		AND JR					46-7 hips With Nonc	088837	Pa	age 13
Part	VAII	Exempt Organ		ansiers to a	ina Transaci	dons an	u neialionsi	mps with None	nantable		
		ganization directly or indicate than section 501(c	irectly engage in a					tion 501(c) of		Yes	No
	•	from the reporting found		•		our or garner	2110110			ļ	
) Cash			, ,	,				1a(1)		x
(2) Other	assets							1a(2)		Х
b 01	ther tran	sactions									
(1) Sales	of assets to a noncharita	able exempt organ	ıızatıon					1b(1)		X
(2	!) Purch	ases of assets from a no	incharitable exemp	pt organization					1b(2)	<u></u>	X
(3) Renta	l of facilities, equipment,	, or other assets						1b(3)		X
(4) Reiml	oursement arrangements	i						1b(4)		X
(5	i) Loans	or loan guarantees							1b(5)		X
•	,	mance of services or me	•	-					1b(6)	<u> </u>	X
	-	facilities, equipment, ma	-		· -				1 <u>c</u>	L	X
		ver to any of the above is		-			-	•		sets,	
		s given by the reporting f			ed less than fair m	arket value	in any transaction	or snaring arrangeme	ent, snow in		
(a) Line) the value of the goods, (b) Amount involved		e of noncharitable	e evemnt organiza	tion	(d) Description	n of transfers transactions	and shaves or		nte
(4)		(b) Amount myored	(0) (447)	N/A	compt organiza		(b) Description	TO DATISIES DATISACTIONS	, and sharing air	angeme	115
	+-		 	II/A			-	·			
	_	· · · ·			-		· · · · · · · · · · · · · · · · · · ·				
								· · · · · · · · · · · · · · · · · · ·			
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ın	section	idation directly or indirec 501(c) of the Code (othe implete the following sch	er than section 50			npt organiza	ations described		Yes	X	No.
	,	(a) Name of or			(b) Type of orga	inization	· · ·	(c) Description of rela	tionship		
		N/A							<u></u>		
								·			
Sign Here	and be	penalties of perjury, I declare lief it is true correct, and cor	mplete Declaration of				TRUST	nas any knowledge	May the IRS return with the shown below	e prepar (see ins	er
	Sign	ature of officer or truster			Date	<u></u> т	Title	Charle Ta	TIN		
		Print/Type preparer's n	ame	Preparer's s	ignature		Date		PTIN		
Paid	1	WATMAN W	CUTNED	77 A T 34 A 3 T	T CITE		15 / 00 / 1 6	self- employed	חחחחקה	CAC	
	arer	KALMAN K. Firm's name ► OST	SHINER	KALMAN)5/08/16] TD.	Firm's EIN ► 36	P00079	71	
		Firm s name - USI	. NOW KETS	эти ориу	« ADKAM	э, ш	· U •	FIRM SEIN P 30	-23300	/ 4	

Form **990-PF** (2015)

Phone no. 312-670-7444

Firm's address ▶ 455 N CITYFRONT PLAZA DR, SUITE 1500

CHICAGO, IL 60611

Schedule B

(Form 990, 990-EZ, òr 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

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

OMB No 1545-0047

2015

Name of the organization

Employer identification number

	GINA AND JR GONDECK FAMILY FOUNDATION	46-7088837
Organization type	e (check one)	
Filers of:	Section:	
Form 990 or 990-E	EZ 501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	X 4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note. Only a section	anization is covered by the General Rule or a Special Rule . Ion 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	
	rganization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling from any one contributor. Complete Parts I and II. See instructions for determining a contributor	
Special Rules		
sections s	rganization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amoum 990-EZ, line 1 Complete Parts I and II	or 16b, and that received from
year, tota	rganization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from all contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or education of cruelty to children or animals. Complete Parts I, II, and III	
year, con is checke purpose	rganization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from ntributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled med, enter here the total contributions that were received during the year for an exclusively religious. Do not complete any of the parts unless the General Rule applies to this organization because a charitable, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000 If this box s, charitable, etc.,
but it must answei	inization that is not covered by the General Rule and/or the Special Rules does not file Schedule Eer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fishot meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	•

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

GINA	AND	JR.	CONDECK	FAMILV.	FOUNDATION
CITIV	TINIT	UK	CALINIDALA	COPLIL	PUUMIJA I IUN

<u>GINA</u>	AND JR GONDECK FAMILY FOUNDATION	4	6-7088837
Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	al space is needed	
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JR AND GINA GONDECK 2204 HENLEY ST GLENVIEW, IL 60025	\$ 45,000.	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
		\$	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 Payroil 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
E224E2 10 2		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

GINA AND JR GONDECK FAMILY FOUNDATION

46-7088837

art II	Noncash Property (see instructions) Use duplicate copies of Pa	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

INA AI	ND JR GONDECK FAMILY FO	DUNDATION	46-7088837
Part III	Exclusively religious, charitable, etc., cont	ributions to organizations described in se	ection 501(c)(7), (8), or (10) that total more than \$1,000 for line entry. For organizations
	completing Part III enter the total of exclusively religious Use duplicate copies of Part III if addition	s, charitable, etc., contributions of \$1,000 or less f al space is needed	for the year (Enter this info once) > 5
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No.			
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a	•	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<u> </u>		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
23454 10-26-1	5		Schedule B (Form 990, 990-EZ, or 990-PF) (20

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3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
KESHET	NONE	₽C	CHARITABLE	
500 ACADEMY DR #130 NORTHBROOK, IL 60062				1,80
MAX MCGRAW WILDLIFE FOUNDATION 14N322 IL-25	NONE	₽C	CHARITABLE	
DUNDEE TOWNSHIP, IL 60118				14,70
MENDED LITTLE HEARTS	NONE	₽C	CHARITABLE	
PO BOX #78 CLARENDON HILLS, IL 60514				9
OUR LADY OF PERPETUAL HELP (OLPH) 1775 GROVE ST	NONE	₽C	CHARITABLE	
GLENVIEW, IL 60025				5,00
RONALD KNOX MONTESSORI SCHOOL	NONE	PC	CHARITABLE	
2031 ELMWOOD AVE WILMETTE, IL 60091				1,09
ST. ANTHONY'S SCHOOL 253 N FRANKLIN STREET	NONE	₽C	CHARITABLE	
OCONTO FALLS, WI 54154				10,00
		-		-
				<u></u>
Total from continuation sheets		.1		32,68

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FORM 990-PF	DIVIDENDS	AND IN	TEREST	FROM SEC	URITIES	STATEMENT 1
SOURCE	GROSS AMOUNT	CAPI GAI DIVID		(A) REVENUE PER BOOK		
HIGHTOWER HOLDING	3,633.	<u> </u>	0.	3,63	3. 3,633	
TO PART I, LINE 4	3,633.		0.	3,63	3. 3,633	•
FORM 990-PF		Owne.	R INCO	ME		STATEMENT 2
		OTHE.	- INCO			SIAIEMENI Z
DESCRIPTION			RE'	(A) VENUE BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
HIGHTOWER HOLDING, LLC				-7,709.	-7,709.	
TOTAL TO FORM 990-P	F, PART I, I	LINE 11		-7,709.	-7,709.	

FORM 990-PF	OTHER ASSETS	STATEMENT 3	
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
HIGHTOWER HOLDING, LLC	148,411.	137,566.	137,566.
TO FORM 990-PF, PART II, LINE 15	148,411.	137,566.	137,566.

FORM 990-PF		PART XV -	LINE 1A		STATEMENT	4
	LIST	OF FOUNDA	TION MANAGERS	5		

NAME OF MANAGER

JR GONDECK GINA GONDECK