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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.

OMB No 1545-0052

Department of the Treasury ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Internal Revenue Service For calendar year 2015 or tax year beginning , and ending Name of foundation A Employer identification number 47-1645999 JULIAN GRACE FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 202 847-254-6149 1700 GREEN BAY ROAD City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here HIGHLAND PARK IL 60035 G Check all that apply: Initial return of a former public charity D 1. Foreign organizations, check here Initial return X Amended return Final return 2. Foreign organizations meeting the 85% check here and attach computation Address change Name change H Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method; | X Cash F If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here ▶\$ 49,468,126. (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (d) Disbursements (c) Adjusted net (b) Net investment (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purpos (cash basis only) expenses per books income ıncome N/A 31,699,617 Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch. B. 879 Interest on savings and temporary cash investments STATEMENT 879 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) STATEMENT 588,100 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 22, 206, 772. 21,333,275 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications c Gress profit or (loss) 8 11 Other incompeAY 16 2017 RS-32,288,596. 21,334,154 Add lines 1 through 11 0. 14 Pension plans, employee benefits 6,063. 16a Legal fees STMT - 3 6,063 STMT 4 3,350 0. 3,350. **b** Accounting fees 16,399 16,399 STMT 5 c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses
24 Total operating and a dm
expenses. Add lines 13 t **N** 733. 733 0 STMT 6 24 Total operating and a dministrative 16,399 10,146. 26,545 expenses. Add lines 13 through 23 1,967,582. 1,967,582 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 1,977,728. 1,994,127 16,399 Add lines 24 and 25 Subtract line 26 from line 12: 30,294,469 8 Excess of revenue over expenses and disbursements

LHA For Paperwork Reduction Act Notice, see instructions.

b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-)

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21,317,755

N/A

For	m 99	00-PF (2015) JULIAN GRACE FOUNDATION		47-	1645999 Page 2
_		Attached ashedulas and amounts in the desertation	Beginning of year	End o	
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments		20,647,619.	20,647,619.
	3	Accounts receivable -			
		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 _			
	7	Other notes and loans receivable		{	
		Less; allowance for doubtful accounts			
şţ	8	Inventories for sale or use			
Assets	,	Prepaid expenses and deferred charges			
⋖	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock STMT 8	20,633,313.	30,280,163.	28,820,507.
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	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			
_		instructions. Also, see page 1, item I)	20,633,313.	50,927,782.	49,468,126.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
e l	21	Mortgages and other notes payable			
_	22	Other liabilities (describe >)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
S		and complete lines 24 through 26 and lines 30 and 31.		!	
Ce	24	Unrestricted			
alar	25	Temporarily restricted			
ë P	26	Permanently restricted			
Š		Foundations that do not follow SFAS 117, check here			
卢		and complete lines 27 through 31.			
ts	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets or Fund Balances	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
t A	29	Retained earnings, accumulated income, endowment, or other funds	20,633,313.	50,927,782.	
ž	30	Total net assets or fund balances	20,633,313.	50,927,782.	
	31	Total liabilities and net assets/fund balances	20,633,313.	50,927,782.	
P	art				
_		net assets or fund batances at beginning of year - Part II, column (a), line			
		t agree with end-of-year figure reported on prior year's return)	••] 1 }	20,633,313.
	-	amount from Part I, line 27a		2	30,294,469.
		increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	50,927,782.
		eases not included in line 2 (itemize)		5	0.

523511 11-24-15 50,927,782. Form **990-PF** (2015)

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

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1,977,728.

8

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.

8 Enter qualifying distributions from Part XII, line 4

	n 990-PF (2015) JULIAN GRACE FOUNDATION		<u> 1645999</u>		Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see instr	uctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🛄 and enter "N/A" on line 1.		}		
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🔀 and enter 1%	1	2.	13,1	78.
	of Part I, line 27b	- }	1		
C	: 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	2:	3,1	78.
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	2:	[3,1]	78.
6	Credits/Payments:		i		
а	2015 estimated tax payments and 2014 overpayment credited to 2015	- 1]		
	Exempt foreign organizations - tax withheld at source 6b				
	Tax paid with application for extension of time to file (Form 8868)		1		
	I Backup withholding erroneously withheld 6d 6d		ŀ		
	Total credits and payments. Add lines 6a through 6d TAX PAID W/ O.R. 10,067	7.	1	10.0	67.
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	20	3.1	11.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	,		
	Enter the amount of line 10 to be: Credited to 2016 estimated tax				
	art 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 interve	ne in		Yes	No
-	any political campaign?		1a	 	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definiti	on)?	1b	1	X
_	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publis		<u></u>		
	distributed by the foundation in connection with the activities.		1		1
c	Did the foundation file Form 1120-POL for this year?		1c		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			†	 -
•		•		ł	ł
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
•	managers. > \$ 0.			1	1
9	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	1	x
_	If "Yes," attach a detailed description of the activities.		-	+-	
2	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	n or			
·	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	., 01	3	1	x
1-	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a	 	X
	of "Yes," has it filed a tax return on Form 990-T for this year?	N	/A 4b	 	-21
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. *'	5		X
J	If "Yes," attach the statement required by General Instruction T.		-3-	 	-42
c	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			-	ļ
6	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 st 	ata law	í		ĺ
		atc idw	6	1	X
7	remain in the governing instrument?	vi,	7	X	
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	^V		<u> </u>	
0.	Enter the states to which the foundation counts or with which it is requested (see instructions)				1
oa	Enter the states to which the foundation reports or with which it is registered (see instructions)			1	
	III				
D	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		0.5	\ v	
_	of each state as required by General Instruction G? If "No," attach explanation	olonda-	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 c	aitilual			v
40	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10 Form 99	O DE	

Pa	rt 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	ł	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory priv	ileges?		
	If "Yes," attach statement (see instructions)	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14		847-254-6		
	Located at ▶ 1700 GREEN BAY ROAD, NO. 202, HIGHLAND PARK, IL Z	IP+4 ▶ 60035	<u> </u>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			· 🔲
	and enter the amount of tax-exempt interest received or accrued during the year	15 1	1/A	
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	1
	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			}
Da	foreign country Tt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			L
F 6			Yes	No
1.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	 	162	NU
ıa	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	X No	1	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	22 140	i	1
		X No		
		X No		
		X No		}
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
		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			
		X No	1	
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)?	N/A 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?	10_		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation]]
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	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	[52]		}
	before 2015? Yes	LXL No		
	If "Yes," list the years ▶,,,,,			
D	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	valuation of assets) to the year's unconsulbuted income? (if applying section 4942(a)(2) to an year's listed, answer No and attach	N/A 2b		
•	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	N/A (20	\vdash	
·	in the provisions of section 4342(a)(2) are being applied to any of the years listed in 2a, list the years here.	ļ	1	İ
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
-	during the year?	□ No Ì	1	
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 disp	ose		
	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,	1		
	Form 4720, to determine if the foundation had excess business holdings in 2015.)	3b	<u> </u>	X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose the	at		
	had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		X_
		Form 99	0-PF	(2015)

orm 990-PF (2015) JULIAN GRACE FOUNDATION			<u>47-16459</u>	99	Page 6
Part VII-B Statements Regarding Activities for Which I	Form 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	n 4945(e))?	. 🗀 Ye	es X No		1
(2) Influence the outcome of any specific public election (see section 4955); of	r to carry on, directly or indire	ectly,			
any voter registration drive?			es X No	-	
(3) Provide a grant to an individual for travel, study, or other similar purposes	· ·		es X No		
(4) Provide a grant to an organization other than a charitable, etc., organizatio					
4945(d)(4)(A)? (see instructions)	.,		es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or adjustional nurnosas, or f	=	3 22 110	1	
the prevention of cruelty to children or animals?	or concanonal purposes, or i		es X No]
• • • • • • • • • • • • • • • • • • • •	Har tha avaantiana dagarihad i	_	is Lal NU		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		iii negulations	NT / N	E .	
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h				İ	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for					ļ
expenditure responsibility for the grant?		I/A L Ye	es L No		1
If "Yes," attach the statement required by Regulations section 53.494	• •		ļ	1	ļ
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?		Y€	es X No	1	}
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		L	6b	X
If "Yes" to 6b, file Form 8870				1	1
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es 🗶 No 💄		
b If "Yes," did the foundation receive any proceeds or have any net income attribu		·		7b	<u> </u>
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highl	у		
Paid Employees, and Contractors					
1 List all officers, directors, trustees, foundation managers and their					
() Nows and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Ex	pense t other
(a) Name and address	to position	enter -0-)	compensation	allowa	inces
STEVEN I. SAROWITZ	PRESIDENT				
9855 WOODS DRIVE, SUITE G100					
SKOKIE, IL 60677	5.00	0.	0.	1	0.
JESSICA P. SAROWITZ	VICE PRESIDEN	T & SECRE	TARY		
9855 WOODS DRIVE, SUITE G100					
SKOKIE, IL 60677	10.00	0.	0.		0.
DANIEL MILLER	TREASURER				
9855 WOODS DRIVE, SUITE G100		}			
SKOKIE, IL 60677	5.00	0.	o.		0.
SHORED, IB 00077	3,00		<u> </u>	 	
				1	
		1			
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."	·	<u> </u>	
	(b) Title and average		(d) Contributions to employee benefit plans and deferred	(e) Ex	репѕе
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	accoun allowa	t, other
NONE	devoted to position		compensation	unove	
NOTATE		1		1	
					
	ļ- 	-		 	
				 	
				1	
	<u> </u>			 	
				}	
5 1 1 a supplied of other analysis and are \$50,000		L		L	
otal number of other employees paid over \$50,000	 	· · · · · · · · · · · · · · · · · · ·	<u> </u>	000 DE	(0015)
			Form	990-PF	(2015)

Total. Add lines 1 through 3

Form 990-PF (2015) 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: 17,576,055. a Average monthly fair market value of securities 1a 7,923,174. b Average of monthly cash balances 1b c Fair market value of all other assets 10 25,499,229. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 25,499,229. 3 Subtract line 2 from line 1d 3 382,488. 4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 25,116,741. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 1,255,837. Minimum investment return Enter 5% of line 5 6 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.) ,255,837. Minimum investment return from Part X, line 6 Tax on investment income for 2015 from Part VI, line 5 213,178 2b Income tax for 2015. (This does not include the tax from Part VI.) Add lines 2a and 2b 3 042,659. 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 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 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 1b b Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a b Cash distribution test (attach the required schedule) 3Ь 1,977,728. 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 213,178. 5 income. Enter 1% of Part I, line 27b 1,764,550. 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

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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,	Образ	10010 \$1101 10 20 14	2017	2010
line 7				1,042,659.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			115,011.	
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				
e From 2014				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ▶ \$ 1,977,728.				
a Applied to 2014, but not more than line 2a			115,011.	
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				1,042,659.
e Remaining amount distributed out of corpus	820,058.			
5 Excess distributions carryover applied to 2015	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e. Subtract line 5	820,058.			
b Prior years' undistributed income. Subtract	02070001			
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 Tine 6a	820,058.			
10 Analysis of line 9:				
a Excess from 2011				
b Excess from 2012	1	[ĺ	
c Excess from 2013				
d Excess from 2014	ļ			
e Excess from 2015 820,058.			l	5 000 DT (00/5)

Form 990-PF (2015) JULIAN Part XIV Private Operating F	GRACE FOUND		A guestion 9)	M/A	545999 Page 10
	······		-A, question 9)	N/A	
1 a If the foundation has received a ruling		, , ,			
foundation, and the ruling is effective for	•		▶ ∟	1404043403	0.404.453
b Check box to indicate whether the four		ng foundation described i		4942(J)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	T	<u> </u>
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					
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 Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets					1
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					<u> </u>
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties) (2) Support from general public					
and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	ormation (Comple	te this part only	if the foundation	had \$5,000 or m	ore in assets
at any time during					
1 Information Regarding Foundati	on Managara	•		· · · · · · · · · · · · · · · · · · ·	
 Information Regarding Foundation a List any managers of the foundation w 	-	thee OO/ of the total pant	whitener recovered by the	foundation before the ele	an of any toy
year (but only if they have contributed			ributions received by the	s touttuation before the cic	ise of any tax
SEE STATEMENT 9					
b List any managers of the foundation with other entity) of which the foundation has			or an equally large porti	on of the ownership of a p	artnership or
SEE STATEMENT 10					
2 Information Regarding Contribution Check here ► X If the foundation	only makes contributions t	to preselected charitable	organizations and does i		
the foundation makes gifts, grants, etc.				· · · · · · · · · · · · · · · · · · ·	3 d.
a The name, address, and telephone nun	nber or e-mail address of t	he person to whom appli	cations should be addre	ssed:	
b The form in which applications should	be submitted and informat	tion and materials they st	nould include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	Js, such as by geographica	al areas, charitable fields,	kınds of institutions, or	other factors:	

523611 11-24-15

Total

Part XVI-A	Analysis of	Income-Producing	Activities
------------	-------------	------------------	-------------------

Enter gross amounts unless otherwise indicated.	Unrelated business income Excluded I			y section 512, 513, or 514	(e)	
ther gross amounts unless otherwise managed.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income	
1 Program service revenue:	code	Amount	code	Amount	Tunction income	
a	_		_			
b	_		_			
C	_		_ _		-	
d	_	<u></u>				
e	_					
f						
g Fees and contracts from government agencies					 	
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments			14	879.		
4 Dividends and interest from securities						
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						
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory			18	588,100.		
9 Net income or (loss) from special events					_	
O Gross profit or (loss) from sales of inventory						
11 Other revenue:						
a						
b						
C						
d						
e						
12 Subtotal. Add columns (b), (d), and (e)			0.	588,979.		
13 Total. Add line 12, columns (b), (d), and (e)				13	588,979	
See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accom	nlichment of	Evennt P	irnoses		

Line No ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).						
r	N/A						

Form **990-PF** (2015)

523621 11-24-15

Form 990-P				'ION and Transactions a	nd Relations		645999 charitable		age 13
1 Did the	organization directly or ind		v of the followin	og with any other organization	n described in secti	on 501(c) of		Yes	No
	de (other than section 501(o								
	ers from the reporting found								
(1) Ca	· · · · · · · · · · · · · · · · · · ·			5			1a(1)	[]	X
	ther assets	•			•		1a(2)		Х
1.5	transactions;			•	•				
(1) Sa	ales of assets to a noncharit	able exempt organiz	zation				15(1)		Х
(2) Pt	urchases of assets from a no	oncharitable exempt	t organization				1b(2)		Х
(3) Re	ental of facilities, equipment,	, or other assets					1b(3)		X
(4) Re	eimburserment arrangements	3		•			1b(4)		X
(5) Lo	oans or Ioan guarantees						1b(5)		X
(6) Pe	erformance of services or m	embership or fundra	aising solicitatio	ons			1b(6)		X
	g of facilities, equipment, m			• •			1c		X
or serv	inswer to any of the above is vices given by the reporting in (d) the value of the goods, (b) Amount involved	foundation. If the fo other assets, or se	oundation receivervices received.	ed less than fair market valu	e in any transaction	or sharing arrangem	ent, show in		
(a) Line no	(b) Arrioditt involved	(C) Name	N/A	s exempt organization	(u) Description	of transfers, transactions	, and sharing a	rangeme	ints
		 	M/A		 				
		 			<u> </u>				
		 							
		 		···	1				
	·	<u> </u>							
							<u></u>		
					1				
									
ın sect	foundation directly or indired ion 501(c) of the Code (othe ,"complete the following sch	er than section 501(nedule.	-	tion 527?	ations described		Yes	X	□ No
	(a) Name of or	ganization		(b) Type of organization		(c) Description of relat	tionship		
	N/A_								
									
									
Lin	ider penalties of perjury, I declar	that have examined the	this letter include	ng accompanying schedules and s	statements and to the	heet of my knowledge			
Sign Here	d belief, it is true, correct, and on	mplete Declaration of	greparer (other than	n taxpayer) is based on all inform	ation of which preparer	has any knowledge	May the IRS return with the shown below	e prepar (see insi	er
	Signature of officer or truster			Date	Title				
	Print/Type preparer's n		Preparer's si	ignature	Date	L	TIN		
De: J	MICHELLE I	ر	المرا	(1) & 8 and		self- employed			
Paid	PROSECKY		1 ruelly		05/04/17		<u> 200967</u>		
Prepare Use On	ly			PFC, ()	_	Firm's EIN ► 36	-40492	82	
	Firm's address ► 58	S BANK T.	A NTP:			I			

523622 11-24-15

LAKE FOREST, IL 60045

Phone no. 847 234-5000 Form **990-PF** (2015)

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

Department of the Treasury Internal Revenue Service

Name of the organization

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.lrs.gov/form990 .

OMB No 1545-0047

Employer identification number

JU	47-1645999						
JULIAN GRACE FOUNDATION 47-1645999 Organization type (check one):							
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						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
Note. Only a section 501 (c) General Rule	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, (8), or (10) organization can check boxes for both the General Rule and a Special Rule, (8), or (10) organization can check boxes for both the General Rule and a Special Rule, (9), (8), or (10) organization can check boxes for both the General Rule and a Special Rule.						
	one contributor. Complete Parts I and II See instructions for determining a contributor						
Special Rules							
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount, line 1. Complete Parts I and II.	or 16b, and that received from					
year, total contribu	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$\Bigsim \frac{1}{2} \int \frac{1}{2}							
but it must answer "No" on certify that it does not meet	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B. Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 1990; the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	orm 990-PF, Part I, line 2, to					

Name of organization

Employer identification number

JULIAN GRACE FOUNDATION

47-1645999

<u>n OTLT W</u>	N GRACE FOUNDATION	4/	-1645999
Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	STEVEN I. AND JESSICA P. SAROWITZ 281 ROGER WILLIAMS AVENUE HIGHLAND PARK, IL 60035	\$ <u>30,415,095</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	STEVEN I. AND JESSICA P. SAROWITZ 281 ROGER WILLIAMS AVENUE HIGHLAND PARK, IL 60035	\$ <u>431,330.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	STEVEN I. AND JESSICA P. SAROWITZ 281 ROGER WILLIAMS AVENUE HIGHLAND PARK, IL 60035	\$ 161,259.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	STEVEN I. AND JESSICA P. SAROWITZ 281 ROGER WILLIAMS AVENUE HIGHLAND PARK, IL 60035	\$ 307,5 41.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	STEVEN I. AND JESSICA P. SAROWITZ 281 ROGER WILLIAMS AVENUE HIGHLAND PARK, IL 60035	\$ <u>217,388.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	STEVEN I. AND JESSICA P. SAROWITZ 281 ROGER WILLIAMS AVENUE HIGHLAND PARK, IL 60035	\$ 167,004.	Person Payroll Noncash (Complete Part II for noncash contributions.)
523452 10-20	3-15	Schedule B (Form	990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

JULIAN GRACE FOUNDATION

47-1645999

Part II	Noncash Property (see instructions). Use duplicate copies of Part li	I 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	
<u>1</u>	700,000 SHARES OF PAYLOCITY HOLDING CORPORATION			
		\$ <u>29,981,000.</u>	12/29/15	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
2	3,343 SHARES OF APPLE	_		
		\$\$431,330.	06/05/15	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
3	1,608 SHARES OF CVS HEALTH	_		
_ 		\$\$\$	06/05/15	
(a) No. rom art i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
4	2,712 SHARE OF GILEAD SCIENCES	-		
-		\$ 307,541.	06/05/15	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
5	2,356 SHARE OF MASTERCARD	_	· · · · · · · · · · · · · · · · · · ·	
			06/05/15	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
6	1,439 SHARES OF UNITEDHEALTH GROUP	_		
			06/05/15 90, 990-EZ, or 990-PF) (2	

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

(e) Transfer of gift

PART IV JULIAN GRACE FOUNDATION Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase (a) List and describe the kind(s) of property sold, e.g., real estate, (c) Date acquired (d) Date sold (mo., day, yr.) 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo., day, yr.) D - Donation 1a 700,000 SHS PAYLOCITY HOLDING CORP D 11/20/1409/30/15 b 30,000 SHS PAYLOCITY HOLDING CORP 11/20/1406/15/15 D c CAPITAL GAIN DISTRIBUTIONS P 06/05/1506/08/15 d 3.343 SHS APPLE D e 1,608 SHS CVS HEALTH D |06/05/15|06/08/15 712 D |06/05/15|06/08/15 SHS GILEAD SCIENCES 06/05/1506/08/15 2,356 SHS MASTERCARD D 06/05/1506/08/15 h 1,439 SHS UNITEDHEALTH GROUP D k ١ m п 0 (g) Cost or other basis (f) Depreciation allowed (h) Gain or (loss) (e) Gross sales price (e) plus (f) minus (g) plus expense of sale (or allowable) 19,835,813. 19,835,813 a 1,085,686. 1,085,686. b 13. 13. C 272,686 429,073 156,387. d 160,296. 113,331_. 46,965. е 212,960. 96,555. 309,515. 217,792. 164,649. 53,143. 168,584 109,871 58,713. h k m n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col. (h)) Gains (excess of col. (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (i) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any 19,835,813. a 1,085,686. b 13. 156,387**.** d 46,965. 96,555. f 53,143. g 58,713. h m n 0 { If gain, also enter in Part I, line 7 } If (loss), enter "-0-" in Part I, line 7 } 2 21,333,275. Capital gain net income or (net capital loss)

If (loss), enter "-0-" in Part I, line 8

If gain, also enter in Part I, line 8, column (c).

Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):

N/A

47-1645999

JULIAN	GRACE	FOUNDATIO	V
ודטדנוטט	GIVACE	LOCKIDATIO	

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	_
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
CHAI LIFELINE INC. 151 WEST 30TH STREET NEW YORK, NY 10001	N/A	PC	GENERAL OPERATING SUPPORT	100,00
WORLD CHICAGO 72 EAST RANDOLPH CHICAGO, IL 60601	n/A	PC	GENERAL OPERATING SUPPORT	88,00
VIRTU INC. 6 BLACKWOOD STREET, SUITE #430 BOSTON, MA 02115	N/A	PC	GENERAL OPERATING SUPPORT	48,00
RIVER TRAIL SCHOOL DISTRICT 26/EUCLID SCHOOL 1900 EAST KENSIGTON MOUNT PROSPECT, IL 60056	N/A	PC	GENERAL OPERATING SUPPORT	10,00
LAKE COUNTY COMMUNITY FUND/ZION SCHOOL DISTRICT 6 330 SOUTH GREENLEAF STREET GURNEE, IL 60031	N/A	PC	GENERAL OPERATING SUPPORT	257,19
BLITSTEIN TEACHER'S INSTITUTE 2606 WEST TOUHY AVENUE CHICAGO, IL 60645	N/A	PC	GENERAL OPERATING SUPPORT	60,00
Total from continuation sheets				563 191

FORM 990-PF	GAIN OR (LOSS)	FROM SALE	OF F	ASSETS		STATEMENT 1
(A) DESCRIPTION OF PROPERT	YY			MANNER CQUIRED	DATE ACQUIR	
700,000 SHS PAYLOCITY	HOLDING CORP		DC	ONATED	11/20/	14 09/30/15
(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E) DEPRE	C. G	(F) AIN OR LOSS
19,835,813.	19,498,500.		0.		0.	337,313.
(A) DESCRIPTION OF PROPERT	Y			MANNER CQUIRED	DATE ACQUIR	
30,000 SHS PAYLOCITY H	OLDING CORP		DC	ONATED	11/20/	14 06/15/15
(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E) DEPRE	C. G	(F) AIN OR LOSS
1,085,686.	835,650.		0.		0.	250,036.
(A) DESCRIPTION OF PROPERT	Y			MANNER CQUIRED	DATE ACQUIR	
CAPITAL GAIN DISTRIBUT	TIONS		PUF	RCHASED		
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	C. G	(F) AIN OR LOSS
13.	0.	 _	0.		0.	13.

DESCRI	(A) PTION OF PROPERTY			Z	MANNER ACQUIRED	DA ACQU		DATE SOLD
3,343	SHS APPLE	_		Ī	OONATED	06/0	5/15	06/08/15
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E) DEPRE	c.		(F)
	429,073.	431,330.		0.	•	0.		-2,257.
DESCRI	(A) PTION OF PROPERTY			F	MANNER ACQUIRED	DA ACQU	TE IRED	DATE SOLD
1,608	SHS CVS HEALTH	_		Ī	OONATED	06/0	5/15	06/08/15
	(B) GROSS SALES PRICE	(C) VALUE AT TIME OF ACQ.	(D) EXPENSE SALE	OF	(E) DEPRE	C		(F)
	160,296.	161,259.		0.		0.	GAIN	-963.
DESCRI	(A) PTION OF PROPERTY			Z.	MANNER ACQUIRED	DA ACQU	TE IRED	DATE SOLD
2,712	SHS GILEAD SCIENC	ES		Ī	OONATED	06/0	5/15	06/08/15
	(B) GROSS	(C) VALUE AT	(D) EXPENSE	OF	(E)			(F)
	SALES PRICE	TIME OF ACQ.	SALE	<u>.</u>	DEPRE	с. ——	GAIN	OR LOSS
	309,515.	307,541.		0.	·	0.		1,974.
DESCRI	(A) PTION OF PROPERTY			P	MANNER ACQUIRED	DA ACQU		DATE SOLD
2,356	SHS MASTERCARD	_			OONATED	06/0	5/15	06/08/15
	(B) GROSS	(C) VALUE AT	(D) EXPENSE	OF	(E)	~		(F)
	SALES PRICE	TIME OF ACQ.	SALE		DEPRE	 -	GAIN	OR LOSS
	217,792.	217,388.		0.	•	0.		404.

(A) DESCRIPTION OF PROPERTY					NNER UIRED	DA ACQU		DATE S	SOLD
1,439 SHS UNITEDHEALTH GROUP	•			DON	ATED	06/0	5/15	06/08	3/15
	(C) ALUE A E OF A		(D) KPENSE SALE	OF	(E) DEPRE		GAIN	(F) I OR LOS	SS
168,584.	167,	004.		0.		0.		1,5	580.
CAPITAL GAINS DIVIDENDS FROM	1 PART	IV	-	-					0.
TOTAL TO FORM 990-PF, PART I	I, LIN	E 6A						588,1	L00.
FORM 990-PF INTEREST ON SAV	/INGS	AND TEM	PORARY	CASH	INVEST	MENTS	STA	TEMENT	2
SOURCE		(A) REVEN PER BO	WE	NET	(B) INVEST INCOME			(C) DJUSTEI T INCOM	
DEUTSCHE BANK NORTHERN TRUST	_		48. 831.			48. 831.			
TOTAL TO PART I, LINE 3	_		879.			879.			
FORM 990-PF		LEGAL	FEES				STA	TEMENT	3
DESCRIPTION	EXP	(A) ENSES BOOKS	() NET II MENT I			(C) JUSTE		(D) CHARITA PURPOS	
BURKE, WARREN, MACKAY & SERRITELLA		6,063.		0	•			6,0	063.
TO FM 990-PF, PG 1, LN 16A		6,063.		0	•			6,0	063.

FORM 990-PF	ACCOUNTI	NG FEES	S'	STATEMENT		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABL PURPOSES		
RSM US LLP	3,350.	0.		3,350.		
TO FORM 990-PF, PG 1, LN 16B	3,350. 0.			3,350.		
FORM 990-PF (THER PROFES	SIONAL FEES	S	ratement 5		
DESCRIPTION	(A) EXPENSES PER BOOKS		ADJUSTED	(D) CHARITABLE PURPOSES		
NORTHERN TRUST - INVESTMENT MANAGEMENT FEES	16,399.	16,399.		0.		
TO FORM 990-PF, PG 1, LN 16C	16,399.	16,399.		0.		
FORM 990-PF	OTHER E	XPENSES	S	PATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES		
OFFICE EXPENSES	733.	0.		733.		
TO FORM 990-PF, PG 1, LN 23	733. 0.					
	FOOTN	OTES	S'	PATEMENT 7		

THE FOUNDATION IS AMENDING THE 2015 FORM 990-PF TO REPORT SEVERAL ACCOUNTING ADJUSTMENTS THAT WERE DISCOVERED BY THE FOUNDATION WHILE PREPARING THE 2016 FORM 990-PF. THE TWO LARGEST ADJUSTMENTS REPORTED ARE AS FOLLOWS:

- 1. CONTRIBUTIONS RECEIVED INCREASED BY \$11,439,204. IN THE ORIGINAL RETURN, THE STOCK CONTRIBUTED TO THE FOUNDATION WAS NOT VALUED APPROPRIATELY USING THE AVERAGE OF THE HIGH AND LOW PRICES ON THE DATE OF CONTRIBUTION. THE AMENDED RETURN REFLECTS THE APPROPRIATE VALUE.
- 2. THE GAIN FOR NET INVESTMENT INCOME INCREASED

SUBSTANTIALLY. THE FOUNDATION'S PRIOR ACCOUNTANT REPORTED THE SALES USING THE COST PER THE BOOKS AND NOT THE DONOR'S COST BASIS WHICH WAS SIGNIFICANTLY LOWER.

IN ADDITION TO THE THE TWO ITEMS NOTED ABOVE, THERE WERE SEVERAL SMALLER ADJUSTMENTS THAT CORRECTED THE INCOME AND EXPENSES TO AGREE TO THE FOUNDATION'S SUPPORTING DOCUMENTATION. DESCRIPTIONS OF THESE ITEMS HAVE BEEN INCLUDED IN THE SUPPORTING STATEMENTS AND SCHEDULES.

FORM 990-PF	CORPORATE STOCK	CORPORATE STOCK		
DESCRIPTION		BOOK VALUE	FAIR MARKET	T
PAYLOCITY HOLDING C	ORPORATION 710,740 SHARES	30,280,163.	28,820,507.	
TOTAL TO FORM 990-P	F, PART II, LINE 10B	30,280,163.		
FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAG	GERS	STATEMENT	9

NAME OF MANAGER

STEVEN I. SAROWITZ JESSICA P. SAROWITZ

PART XV - LINE 1B FORM 990-PF STATEMENT 10 LIST OF FOUNDATION MANAGERS

NAME OF MANAGER

STEVEN I. SAROWITZ JESSICA P. SAROWITZ