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Form **990-PF**

Department of the Treasury  
Internal Revenue Service

Return of Private Foundation

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

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

OMB No 1545-0052

**2015**

Open to Public Inspection

For calendar year 2015, or tax year beginning 10-01-2015

, and ending 09-30-2016

Name of foundation SAM & SARAH GROSSINGER FOUNDATION		<b>A Employer identification number</b> 36-6108185	
Number and street (or P O box number if mail is not delivered to street address) 6900 NORTH MCCORMICK BLVD		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code LINCOLNWOOD, IL 60712		<b>B</b> Telephone number (see instructions) (847) 675-8300	
<b>G</b> Check all that apply <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Initial return of a former public charity</div> <div><input type="checkbox"/> Final return</div> <div><input type="checkbox"/> Amended return</div> <div><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div>		<b>C</b> If exemption application is pending, check here <input type="checkbox"/> <b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> <b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> <b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
<b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation			
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 3,817,375		<b>J</b> Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis )	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	<b>1</b> Contributions, gifts, grants, etc , received (attach schedule) . . . . .				
	<b>2</b> Check ▶ <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	<b>3</b> Interest on savings and temporary cash investments				
	<b>4</b> Dividends and interest from securities . . . . .	101,841	101,841		
	<b>5a</b> Gross rents . . . . .				
	<b>b</b> Net rental income or (loss) _____				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10 _____	75,605			
	<b>b</b> Gross sales price for all assets on line 6a _____ 75,605				
	<b>7</b> Capital gain net income (from Part IV, line 2) . . . .		75,605		
	<b>8</b> Net short-term capital gain . . . . .				
	<b>9</b> Income modifications . . . . .				
	<b>10a</b> Gross sales less returns and allowances				
Operating and Administrative Expenses	<b>b</b> Less Cost of goods sold . . . . .				
	<b>c</b> Gross profit or (loss) (attach schedule) . . . . .				
	<b>11</b> Other income (attach schedule) . . . . .	5,979	0		
	<b>12 Total.</b> Add lines 1 through 11 . . . . .	183,425	177,446		
	<b>13</b> Compensation of officers, directors, trustees, etc	0	0		0
	<b>14</b> Other employee salaries and wages . . . . .				
	<b>15</b> Pension plans, employee benefits . . . . .				
	<b>16a</b> Legal fees (attach schedule). . . . .				
	<b>b</b> Accounting fees (attach schedule). . . . .	6,450	1,612		4,838
	<b>c</b> Other professional fees (attach schedule) . . . . .	23,230	23,230		0
	<b>17</b> Interest . . . . .				
	<b>18</b> Taxes (attach schedule) (see instructions) . . . .	1,500	0		0
	<b>19</b> Depreciation (attach schedule) and depletion . . .				
	<b>20</b> Occupancy . . . . .				
	<b>21</b> Travel, conferences, and meetings . . . . .				
	<b>22</b> Printing and publications . . . . .				
	<b>23</b> Other expenses (attach schedule). . . . .	8,455	0		8,455
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	39,635	24,842		13,293
	<b>25</b> Contributions, gifts, grants paid . . . . .	173,167			173,167
	<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	212,802	24,842		186,460
	<b>27</b> Subtract line 26 from line 12				
	<b>a Excess of revenue over expenses and disbursements</b>	-29,377			
	<b>b Net investment income</b> (if negative, enter -0-)		152,604		
	<b>c Adjusted net income</b> (if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing . . . . .	121,778	54,990	54,990
	2	Savings and temporary cash investments . . . . .	11,903	47,386	47,386
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .	57,050	57,050	112,043
	c	Investments—corporate bonds (attach schedule) . . . . .			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .	3,451,559	3,453,487	3,602,956
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
Liabilities	15	Other assets (describe ▶ _____)			
	16	Total assets(to be completed by all filers—see the instructions Also, see page 1, item I)	3,642,290	3,612,913	3,817,375
	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable . . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule) . . . . .			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities(add lines 17 through 22) . . . . .	0	0	
Net Assets or Fund Balances		Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
		Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds . . . . .	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	3,642,290	3,612,913	
	30	Total net assets or fund balances(see instructions) . . . . .	3,642,290	3,612,913	
	31	Total liabilities and net assets/fund balances(see instructions) . .	3,642,290	3,612,913	

Part III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . .	1 3,642,290
2	Enter amount from Part I, line 27a . . . . .	2 -29,377
3	Other increases not included in line 2 (itemize) ▶ _____	3 0
4	Add lines 1, 2, and 3 . . . . .	4 3,612,913
5	Decreases not included in line 2 (itemize) ▶ _____	5 0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6 3,612,913

Part IV

Capital Gains and Losses for Tax on Investment Income

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

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a 75,605			75,605
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) (l)
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
a			75,605
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	75,605
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 . . . . .		3	

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )  
If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No  
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	190,871	3,697,781	0 051618
2013	196,118	4,115,557	0 047653
2012	128,178	3,692,404	0 034714
2011	147,324	3,629,199	0 040594
2010	139,218	3,401,972	0 040923

2 Total of line 1, column (d). . . . .	2	0 215502
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 043100
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5. . . . .	4	3,649,445
5 Multiply line 4 by line 3. . . . .	5	157,291
6 Enter 1% of net investment income (1% of Part I, line 27b). . . . .	6	1,526
7 Add lines 5 and 6. . . . .	7	158,817
8 Enter qualifying distributions from Part XII, line 4. . . . .	8	186,460

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See  
the Part VI instructions

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> 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 <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	1	1,526
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2. . . . .	3	1,526
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	5	1,526
6	Credits/Payments		
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	64
b	Exempt foreign organizations—tax withheld at source . . . . .	6b	
c	Tax paid with application for extension of time to file (Form 8868). . . . .	6c	1,500
d	Backup withholding erroneously withheld . . . . .	6d	
7	Total credits and payments. Add lines 6a through 6d. . . . .	7	1,564
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	40
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	9	2
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	10	
11	Enter the amount of line 10 to be <b>Credited to 2015 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>	11	

Part VII-A Statements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .		Yes	No
		1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities			No
		1b		No
c	Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ 0 (2) On foundation managers <input type="checkbox"/> \$ _____ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . If "Yes," attach a detailed description of the activities	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes . . . . .	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	4a		No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . If "Yes," attach the statement required by General Instruction T	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV . . . . .	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> IL _____			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV . . . . .	9		No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .	10		No

**Part VII-A Statements Regarding Activities (continued)**

<b>11</b> 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). . . . .	<b>11</b>		<b>No</b>
<b>12</b> 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) . . . . .	<b>12</b>		<b>No</b>
<b>13</b> Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>N/A</u>	<b>13</b>	<b>Yes</b>	
<b>14</b> The books are in care of ► <u>CAROLINE GROSSINGER</u> Telephone no ► <u>(847) 675-8300</u> Located at ► <u>6900 N MCCORMICK BLVD LINCOLNWOOD IL</u> ZIP +4 ► <u>60712</u>			
<b>15</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . ► <input type="checkbox"/>	<b>15</b>		
<b>16</b> At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ►	<b>16</b>	<b>Yes</b>	<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

<b>File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.</b>			<b>Yes</b>	<b>No</b>
<b>1a</b> During the year did the foundation (either directly or indirectly)				
<b>(1)</b> Engage in the sale or exchange, or leasing of property with a disqualified person? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>				
<b>(2)</b> Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>				
<b>(3)</b> Furnish goods, services, or facilities to (or accept them from) a disqualified person? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>				
<b>(4)</b> Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>				
<b>(5)</b> Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>				
<b>(6)</b> Agree to pay money or property to a government official? ( <b>Exception.</b> 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 ). . . . . <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>				
<b>b</b> If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)? . . . . . <span style="float: right;"><input type="checkbox"/></span>	<b>1b</b>			
<b>c</b> 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? . . . . .	<b>1c</b>			<b>No</b>
<b>2</b> 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))				
<b>a</b> 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? . . . . . <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span> If "Yes," list the years ► 20____, 20____, 20____, 20____				
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions ). . . . .	<b>2b</b>			
<b>c</b> If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____				
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <span style="float: right;"><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</span>				
<b>b</b> If "Yes," did it have excess business holdings in 2015 as a result of <b>(1)</b> any purchase by the foundation or disqualified persons after May 26, 1969, <b>(2)</b> 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 <b>(3)</b> the lapse of the 10-, 15-, or 20-year first phase holding period? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015</i> ). . . . .	<b>3b</b>			
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>			<b>No</b>
<b>b</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?	<b>4b</b>			<b>No</b>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)**

<b>5a</b> During the year did the foundation pay or incur any amount to				
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b> If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?			<b>5b</b>	<b>No</b>
Organizations relying on a current notice regarding disaster assistance check here.		<input type="checkbox"/>		
<b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?		<input type="checkbox"/> Yes <input type="checkbox"/> No		
If "Yes," attach the statement required by Regulations section 53.4945–5(d)				
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		<b>6b</b>	<b>No</b>
If "Yes" to 6b, file Form 8870				
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<b>b</b>	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		<b>7b</b>	

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
CAROLINE GROSSINGER 6900 N MCCORMICK BLVD LINCOLNWOOD, IL 60712	PRESIDENT 0 50	0	0	0
GARY GROSSINGER 6900 N MCCORMICK BLVD LINCOLNWOOD, IL 60712	VICE PRESIDENT 0 50	0	0	0
SHARON GROSSINGER 6900 N MCCORMICK BLVD LINCOLNWOOD, IL 60712	VICE PRESIDENT 0 50	0	0	0
SUZANNE GROSSINGER-GOULD 6900 N MCCORMICK BLVD LINCOLNWOOD, IL 60712	VICE PRESIDENT 0 50	0	0	0

**2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				

**Total** number of other employees paid over \$50,000. 0

**Part VIII**

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

<b>3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".</b>		
<b>(a)</b> Name and address of each person paid more than \$50,000	<b>(b)</b> Type of service	<b>(c)</b> Compensation
NONE		

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

0

**Part IX-A**

**Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
<b>1</b> NONE	0
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B**

**Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b> NONE	0
<b>2</b>	
All other program-related investments. See instructions.	
<b>3</b>	

**Total.** Add lines 1 through 3 . . . . . ▶

0



Part X

**Minimum Investment Return**  
(All domestic foundations must complete this part. Foreign foundations,see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	3,699,592
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	5,428
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	3,705,020
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	3,705,020
<b>4</b>	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	55,575
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	<b>5</b>	3,649,445
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	182,472

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.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	182,472
<b>2a</b>	Tax on investment income for 2015 from Part VI, line 5. . . . .	<b>2a</b>	1,526
<b>b</b>	Income tax for 2015 (This does not include the tax from Part VI ). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	1,526
<b>3</b>	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	<b>3</b>	180,946
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	0
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	180,946
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	<b>7</b>	180,946

Part XII

**Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
<b>a</b>	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	<b>1a</b>	186,460
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	186,460
<b>5</b>	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . .	<b>5</b>	1,526
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	184,934
<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years			

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				180,946
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only. . . . .			177,078	
b Total for prior years 20____, 20____, 20____		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 ► \$ 186,460				
a Applied to 2014, but not more than line 2a			177,078	
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. . . . .				9,382
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
6 Enter the net total of each column as indicated below:	0			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
b Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
d Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015 . . . . .				171,564
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 (see instructions). . .	0			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a. . . . .	0			
10 Analysis of line 9				
a Excess from 2011. . . .				
b Excess from 2012. . . .				
c Excess from 2013. . . .				
d Excess from 2014. . . .				
e Excess from 2015. . . .				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

\_\_\_\_\_

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

Tax year	Prior 3 years			(e) Total
(a) 2015	(b) 2014	(c) 2013	(d) 2012	

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**Part XV** **Supplementary Information** (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

**1 Information Regarding Foundation Managers:**

Contributed more than 2% of the total contributions received by the foundation  
or have contributed more than \$5,000) (See section 507(d)(2) )

10% or more of the stock of a corporation (or an equally large portion of the stock of a partnership) in which the foundation has a 10% or greater interest

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Contributions to preselected charitable organizations and does not accept  
makes gifts, grants, etc. (see instructions) to individuals or organizations under

-mail address of the person to whom applications should be addressed

mitted and information and materials they should include

as by geographical areas, charitable fields, kinds of institutions, or other

Part XV

Supplementary Information(continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<div>a Paid during the year</div> <div>See Additional Data Table</div>				
<div>Total . . . . .</div>			<div>▶ 3a</div>	173,167
<div>b Approved for future payment</div>				
<div>Total . . . . .</div>			<div>▶ 3b</div>	0

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount		
<b>1</b> Program service revenue						
<b>a</b> _____						
<b>b</b> _____						
<b>c</b> _____						
<b>d</b> _____						
<b>e</b> _____						
<b>f</b> _____						
<b>g</b> Fees and contracts from government agencies						
<b>2</b> Membership dues and assessments. . . . .						
<b>3</b> Interest on savings and temporary cash investments . . . . .						
<b>4</b> Dividends and interest from securities. . . . .			14	101,841		
<b>5</b> Net rental income or (loss) from real estate						
<b>a</b> Debt-financed property. . . . .						
<b>b</b> Not debt-financed property. . . . .						
<b>6</b> Net rental income or (loss) from personal property . . . . .						
<b>7</b> Other investment income. . . . .						
<b>8</b> Gain or (loss) from sales of assets other than inventory . . . . .			18	75,605		
<b>9</b> Net income or (loss) from special events						
<b>10</b> Gross profit or (loss) from sales of inventory . . . . .						
<b>11</b> Other revenue <b>a</b> <u>OTHER INCOME</u>			01	5,979		
<b>b</b> _____						
<b>c</b> _____						
<b>d</b> _____						
<b>e</b> _____						
<b>12</b> Subtotal Add columns (b), (d), and (e). . . . .		0		183,425		0
<b>13</b> <b>Total.</b> Add line 12, columns (b), (d), and (e). . . . .			<b>13</b>			183,425

(See worksheet in line 13 instructions to verify calculations )

[illegible]

**Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

<b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			<b>Yes</b>	<b>No</b>
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of				
<b>(1)</b> Cash. . . . .		<b>1a(1)</b>		<b>No</b>
<b>(2)</b> Other assets. . . . .		<b>1a(2)</b>		<b>No</b>
<b>b</b> Other transactions				
<b>(1)</b> Sales of assets to a noncharitable exempt organization. . . . .		<b>1b(1)</b>		<b>No</b>
<b>(2)</b> Purchases of assets from a noncharitable exempt organization. . . . .		<b>1b(2)</b>		<b>No</b>
<b>(3)</b> Rental of facilities, equipment, or other assets. . . . .		<b>1b(3)</b>		<b>No</b>
<b>(4)</b> Reimbursement arrangements. . . . .		<b>1b(4)</b>		<b>No</b>
<b>(5)</b> Loans or loan guarantees. . . . .		<b>1b(5)</b>		<b>No</b>
<b>(6)</b> Performance of services or membership or fundraising solicitations. . . . .		<b>1b(6)</b>		<b>No</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .		<b>1c</b>		<b>No</b>
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received				

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes  
☒ No

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

<b>Sign Here</b>	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge				
	***** _____ Signature of officer or trustee	2017-06-06 _____ Date	***** _____ Title	<div style="border: 1px solid black; padding: 5px;">           May the IRS discuss this return with the preparer shown below            (see instr )? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No         </div>	
<b>Paid Preparer Use Only</b>	Print/Type preparer's name PAUL M BLAKEY	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P00419017
	Firm's name ▶ RSM US LLP			Firm's EIN ▶ 42-0714325	
	Firm's address ▶ 1 S WACKER DRIVE STE 800 CHICAGO, IL 60606			Phone no (312) 634-3400	

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
AM SHALOM 840 VERNON AVE GLENCOE,IL 60022	NONE	PC	GENERAL OPERATING SUPPORT	2,950
AMERICAN LUNG ASSOCIATION 55 W WACKER DRIVE SUITE 1150 CHICAGO,IL 60601	NONE	PC	GENERAL OPERATING SUPPORT	250
AUTISM SPEAKS 2700 RIVER ROAD DES PLAINES,IL 60018	NONE	PC	GENERAL OPERATING SUPPORT	250
BENNINGTON COLLEGE 1 COLLEGE DR NORTH BENNINGTON,VT 05257	NONE	PC	GENERAL OPERATING SUPPORT	500
BIG BROTHERS BIG SISTERS 560 W LAKE STREET 5TH FLOOR CHICAGO,IL 60661	NONE	PC	GENERAL OPERATING SUPPORT	250
<b>Total . . . . . ▶ 3a</b>				173,167

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
CAMP NAGEELA-MIDWEST 3542 W PETERSON AVE CHICAGO, IL 60659	NONE	PC	GENERAL OPERATING SUPPORT	1,000
CHICAGO CHESED FUND INC 7045 N RIDGEWAY AVE LINCOLNWOOD, IL 60712	NONE	PC	GENERAL OPERATING SUPPORT	250
CHICAGO COALITION FOR THE HOMELESS 70 E LAKE ST 720 CHICAGO, IL 60601	NONE	PC	GENERAL OPERATING SUPPORT	875
CHICAGO CHILDREN'S CHOIR 78 E WASHINGTON ST 5 CHICAGO, IL 60115	NONE	PC	GENERAL OPERATING SUPPORT	6,000
CONGREGATION KINS OF WEST ROGERS PARK 2800 W NORTH SHORE AVE CHICAGO, IL 60645	NONE	PC	GENERAL OPERATING SUPPORT	375
<b>Total . . . . . ▶ 3a</b>				173,167



**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ESOPHAGEAL CANCER ACTION NETWORK PO BOX 243 STEVENSON,MD 21153	NONE	PC	GENERAL OPERATING SUPPORT	500
GREATER CHICAGO FOOD DEPOSITORY 4100 WANN LURIE PLACE CHICAGO,IL 60632	NONE	PC	GENERAL OPERATING SUPPORT	10,000
COMMUNITY PARTNERS FOR AFFORDABLE HOUSING PO BOX 23206 TIGARD,OR 97281	NONE	PC	GENERAL OPERATING SUPPORT	250
COMMUNITY FOUNDATION OF GREATER MUSCATINE 208 WEST 2ND STREET MUSCATINE,IA 52761	NONE	PC	GENERAL OPERATING SUPPORT	8,497
DEBORAH'S PLACE 2822 W JACKSON BLVD CHICAGO,IL 60612	NONE	PC	GENERAL OPERATING SUPPORT	1,500
<b>Total . . . . . ▶ 3a</b>				173,167

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
FRIENDS OF ACHEINU 212 2ND STREET LAKEWOOD,NJ 08701	NONE	PC	GENERAL OPERATING SUPPORT	880
FRIENDS OF THE ISRAEL DEFENSE FORCES 29 E MADISON ST CHICAGO,IL 60602	NONE	PC	GENERAL OPERATING SUPPORT	5,000
GUARDIAN ANGEL COMMUNITY SERVICES ILLINOIS MICHIGAN CANAL STATE TRAIL JOLIET,IL 60432	NONE	PC	GENERAL OPERATING SUPPORT	500
HOLY APOSTOLIC CATHOLIC ASSYRIAN CHURCH OF THE EAST - ST ANDREW'S PARISH 901 N MILWAUKEE AVE GLENVIEW,IL 60025	NONE	PC	GENERAL OPERATING SUPPORT	300
HORIZONS FOR YOUTH 703 W MONROE ST CHICAGO,IL 60661	NONE	PC	GENERAL OPERATING SUPPORT	2,500
<b>Total . . . . . ▶ 3a</b>				173,167

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
ILLINOIS BASEBALL ACADEMY 164 NORTHFIELD ROAD NORTHFIELD,IL 60093	NONE	PC	GENERAL OPERATING SUPPORT	250
JEWISH COUNCIL FOR YOUTH SERVICES 150 N MICHIGAN AVE 640 CHICAGO,IL 60601	NONE	PC	GENERAL OPERATING SUPPORT	1,000
JEWISH UNITED FUND OF METROPOLITAN CHICAGO 30 S WELLS ST CHICAGO,IL 60606	NONE	PC	GENERAL OPERATING SUPPORT	21,200
KESHET 284 AMORY STREET JAMAICA PLAIN,MA 02130	NONE	PC	GENERAL OPERATING SUPPORT	1,000
KNIGHTS OF COLUMBUS ONE COLUMBUS PLAZA NEW HAVEN,CT 06510	NONE	PC	GENERAL OPERATING SUPPORT	100
<b>Total . . . . .</b> ▶ <b>3a</b>				173,167

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
KAUAI'S FIRE NON-PROFIT 2710 W TOUHY AVE CHICAGO,IL 60645	NONE	PC	GENERAL OPERATING SUPPORT	250
LAKE FOREST ACADEMY 1500 WEST KENNEDY ROAD LAKE FOREST,IL 60045	NONE	PC	GENERAL OPERATING SUPPORT	10,000
LINCOLNWOOD BASEBALL ASSOCIATION PO BOX 46443 CHICAGO,IL 60646	NONE	PC	GENERAL OPERATING SUPPORT	600
LURIE CHILDREN'S HOSPITAL OF CHICAGO 225 E CHICAGO AVE CHICAGO,IL 60611	NONE	PC	GENERAL OPERATING SUPPORT	10,000
MACLEAN CENTER FOR CLINCIAL MEDICAL ETHICS 5841 S MARYLAND AVE CHICAGO,IL 60637	NONE	PC	GENERAL OPERATING SUPPORT	10,000
<b>Total . . . . . ▶ 3a</b>				173,167

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
MISERICORDIA HOME 6300 N RIDGE AVE CHICAGO,IL 60660	NONE	PC	GENERAL OPERATING SUPPORT	3,000
MUJERES LATINAS EN ACCION 2124 W 21ST PL CHICAGO,IL 60608	NONE	PC	GENERAL OPERATING SUPPORT	1,000
MULTIPLE MYELOMA RESEARCH FOUNDATION 383 MAIN AVE NO 5TH FL NORWALK,CT 06851	NONE	PC	GENERAL OPERATING SUPPORT	250
MUTUAL GROUND 418 OAK AVE AURORA,IL 60506	NONE	PC	GENERAL OPERATING SUPPORT	450
NATIONAL MULTIPLE SCLEROSIS SOCIETY 525 W MONROE ST 1510 CHICAGO,IL 60661	NONE	PC	GENERAL OPERATING SUPPORT	250
<b>Total . . . . .</b> ► <b>3a</b>				173,167

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
ONE MILLION DEGREES 226 W JACKSON BLVD 528 CHICAGO, IL 60606	NONE	PC	GENERAL OPERATING SUPPORT	7,750
PEOPLE'S RESOURCE CENTER 201 S NAPERVILLE ROAD WHEATON, IL 60187	NONE	PC	GENERAL OPERATING SUPPORT	5,000
RONALD MCDONALD HOUSE CHARITIES ONE KROC DRIVE OAK BROOK, IL 60523	NONE	PC	GENERAL OPERATING SUPPORT	200
SARAH'S CIRCLE 4838 N SHERIDAN ROAD CHICAGO, IL 60640	NONE	PC	GENERAL OPERATING SUPPORT	2,500
TEMPLE JEREMIAH 937 HAPP RD NORTHFIELD, IL 60093	NONE	PC	GENERAL OPERATING SUPPORT	10,980
<b>Total . . . . . ▶ 3a</b>				173,167

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
THE BABY FOLD 108 E WILLOW ST NORMAL,IL 61761	NONE	PC	GENERAL OPERATING SUPPORT	3,000
THE CHICAGO LIGHTHOUSE 1850 W ROOSEVELT RD CHICAGO,IL 60608	NONE	PC	GENERAL OPERATING SUPPORT	5,600
TURNING POINTE AUTISM FOUNDATION 1500 OGDEN AVE NAPERVILLE,IL 60540	NONE	PC	GENERAL OPERATING SUPPORT	500
UNITED STATES HOLOCAUST MEMORIAL MUSEUM 100 RAOUL WALLENBERG PLACE WASHINGTON,DC 20024	NONE	PC	GENERAL OPERATING SUPPORT	2,500
UNIVERSITY OF CHICAGO 5801 S ELLIS AVE CHICAGO,IL 60637	NONE	PC	GENERAL OPERATING SUPPORT	10,000
<b>Total . . . . . ▶ 3a</b>				173,167

**Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
UNIVERSITY OF ILLINOIS-SPRINGFIELD 1 WILLIAM MAXWELL LN SPRINGFIELD,IL 62703	NONE	PC	GENERAL OPERATING SUPPORT	2,500
WELLESLEY COLLEGE 106 CENTRAL ST WELLESLEY,MA 02481	NONE	PC	GENERAL OPERATING SUPPORT	15,125
WHITNEY M YOUNG MAGNET HIGH SCHOOL 211 S LAFLIN ST CHICAGO,IL 60607	NONE	PC	GENERAL OPERATING SUPPORT	5,035
YOUNG WOMENS LEADERSHIP CHRTR SCHOOL 2641 S CALUMET AVE CHICAGO,IL 60616	NONE	PC	GENERAL OPERATING SUPPORT	500
<b>Total . . . . . ▶ 3a</b>				173,167



## TY 2015 Accounting Fees Schedule

**Name:** SAM & SARAH GROSSINGER FOUNDATION

**EIN:** 36-6108185

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
RSM US LLP	6,450	1,612		4,838

## TY 2015 Investments Corporate Stock Schedule

**Name:** SAM & SARAH GROSSINGER FOUNDATION

**EIN:** 36-6108185

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ISHARES S&P 500	57,050	112,043

**TY 2015 Investments - Other Schedule****Name:** SAM & SARAH GROSSINGER FOUNDATION**EIN:** 36-6108185

<b>Category/ Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
AMERICAN FUNDS EURO-PACIFIC GROWTH F-1	FMV	124,717	162,914
CREDIT SUISSE COMMODITY RETURN INSTL	FMV	240,065	158,546
DELAWARE EMERGING MARKETS - I	FMV	450,255	459,395
DODGE & COX INTL STOCK FUND	FMV	178,355	225,513
DODGE & COX STOCK FUND	FMV	166,551	188,354
HARBOR CAPITAL APPRECIATION FUND - INST	FMV	123,321	171,086
MANNING & NAPIER EQUITY SERIES FUND	FMV	137,759	86,892
NUVEEN REAL ESTATE SECURITIES CLASS I	FMV	125,247	171,652
STEELPATH MLP SELECT 40 FUND - INST. SHRS	FMV	294,804	249,135
VANGUARD SMALL-CAP GR IDX ADM #5861	FMV	35,534	117,651
VANGUARD SMALL-CAP GR IDX ADM #5860	FMV	37,049	88,947
VOYA GLOBAL REAL ESTATE I	FMV	63,083	74,430
DODGE & COX INCOME FUND	FMV	448,005	447,359
PIMCO EMERGING LOCAL BOND FUND	FMV	93,632	70,654
PIMCO FOREIGN BOND FUND	FMV	187,097	183,346
PIMCO HIGH YIELD INSTL FUND	FMV	409,370	399,669
VANGUARD INFLATION PROT. SEC. ADM. #5119	FMV	188,691	205,377
WELLS FARGO ADVANTAGE INT'L BOND FUND INST.	FMV	149,952	142,036

**TY 2015 Other Expenses Schedule****Name:** SAM & SARAH GROSSINGER FOUNDATION**EIN:** 36-6108185

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
BANK FEES	60	0		60
SECRETARY OF THE STATE FILING FEE	5	0		5
DONATION EXPENSES	8,390	0		8,390

**TY 2015 Other Income Schedule****Name:** SAM & SARAH GROSSINGER FOUNDATION**EIN:** 36-6108185

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
OTHER INCOME	5,979		5,979

**TY 2015 Other Professional Fees Schedule****Name:** SAM & SARAH GROSSINGER FOUNDATION**EIN:** 36-6108185

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FIRST BANK & TRUST - INVESTMENT MNGT FEES	17,825	17,825		0
DIMEO SCHNEIDER & ASSOCIATES, L L C - INVESTMENT MANAGEMENT FEES	5,405	5,405		0

**TY 2015 Taxes Schedule****Name:** SAM & SARAH GROSSINGER FOUNDATION**EIN:** 36-6108185

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INTERNAL REVENUE SERVICE	1,500	0		0