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Return of Private Foundation

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

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

nternal Reve	nue Service	► Information at	out Form 990-PF and its s	eparate instru	ctions is a	at www.irs.go	v/form990pf. Ope	n to Public Inspection
or caler	ndar year 2	016 or tax year be	ginning		, 2016, a	nd ending		, 20
Name of fo	undation	001111				1 '	er identification numi	
YEL	LOWI	BRICK F	OUNDATION not delivered to street address)				-860467	
					Room/suite		one number (see instru	
150	605F	IERMAN vince, country, and ZIP	AVE		40	0 (84	7) 869-1	500 XZ
					•	C If exem	ption application is per	iding, check here ▶ [
EVI	4NSTO	ON, IL.	60201			i		
	k all that ap			n of a former	public cha	rity D 1. Fore	ign organizations, chec	k here . ▶ [
		☐ Final ret	urn 🗌 Amended	return		2. Fore	ign organizations meeti	na the 85% test.
1		Address	change	inge		chec	k here and attach com	putation · ▶ [
Check	k type of org	ganization: 💢 S	section 501(c)(3) exempt p	orivate found	ation		te foundation status wa 507(b)(1)(A), check her	
Section	on 4947(a)(1) nonexempt chari	itable trust 🔲 Other ta			on_	OUT (D)(1)() (), CHOOK HO	•
		e of all assets at	J Accounting method	d:💢 Cash	Accr.	ial F if the fo	oundation is in a 60-mo	nth termination _
		n Part II, col. (c),	☐ Other (specify)			unders	section 507(b)(1)(B), che	eckhere ►
line 10	6) ►\$ 5	720	(Part I, column (d) must be	e on cash basi	s.)			
Part I			xpenses (The total of	(a) Revenue		Net investment	(c) Adjusted net	(d) Disbursements for chantable
) may not necessarily equal	expenses books	per (U	income	income	purposes
		in column (a) (see inst		1 2 2 2 2	, , , , , , , , , , , , , , , , , , ,	and a set and a beninder		(cash basis only)
1 1			received (attach schedule)	9561	4,		1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
2			not required to attach Sch. B			and the land		
3			oorary cash investments					
4		and interest from	securities					
5a		ts						
b		income or (loss)						
<u>B</u> 6a	-		of assets not on line 10	PATRON DE PART	7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			
_b		price for all assets or				getzeldwist		
b 6a b 7		ain net income (froi	•	energia de la companya de la company		S DE DAY (N. SELIK)		
- ·		term capital gain		7	مالات الاستعارات	بروانا والمالية بسياديات		
9		odifications . s less returns and allo	· · · · · · · · · · · · · · · · · · ·					HW TO THE
10a								17.5
C		_	schedule)	E STATE OF THE STA	150 C-2			
11	•		ule)		EM C/A	rasity data.	332	200 A 1
12			1	9561	14			
13			irectors, trustees, etc.	1300		· · · · · · · · · · · · · · · · · · ·		- Approximation of the contract of the contrac
14 15 16a			d wages			PEC	FIVED	
15		lans, employee be	=				LIVED	
16a	•	s (attach schedule)				0	8	
- I h		ng fees (attach sch				MUL S	19 2017 0	
Ž c	Other pro	fessional fees (atta	ach schedule)	519	0			
<u> </u>	Interest					000		
18	Taxes (atta	ich schedule) (see in	structions)	26	5. L	<u> </u>	EN, UT	
를 19	•	•	ile) and depletion					
20								
21			eetings	300	20			
22								+
<u>p</u> 23			edule)	3/3	56.			_
24			ministrative expenses.		1			
c 17 18 19 20 21 22 24 25		-		222	00	क्षा (सुरक्ष १४ सार	DATUM CHANGE COMMONE	
25 5			oaid		82			
26			nents. Add lines 24 and 25	925				
27		ine 26 from line 12		3 -				
a			nses and disbursements	30				2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
b		•	negative, enter -0-) .	A Paris				
ı C	Aujustea	TIBL INCOME (II Re	gative, enter -0-)	7	70.0		∞π C	



D.	art II	Balance Sheets Attached schedules and amounts in the description column should be for and of year amounts only (See Instructions.)	Beginning of year		End o	of year
ГС	11 L 11	should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Val	ne	(c) Fair Market Value
	1	Cash-non-interest-bearing	2699	572	0	5720
	2	Savings and temporary cash investments				
	3	Accounts receivable				
		Less: allowance for doubtful accounts ▶				
	4	Less: allowance for doubtful accounts ▶ Pledges receivable ▶ Less: allowance for doubtful accounts ▶				
		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 ▶				
ţ	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments—U.S. and state government obligations (attach schedule)				
-	b	Investments – corporate stock (attach schedule)				
	C	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment: basis		regarde s		MANAGEMENT COME
	• •	Less: accumulated depreciation (attach schedule)	State to the second second	[ref [felt of the second color of the first]		स्ति। । १ वस्य सम्बद्धाः स्थाप्ति। इ.स.च्या
	12	Investments—mortgage loans				
	13	Investments — other (attach schedule)				
	14	Land, buildings, and equipment: basis ►			74.5±1	
		Less: accumulated depreciation (attach schedule) ▶	BRY THE TREE IS			A STANSON OF THE PROPERTY OF THE
	15	OU	1			
	16	Other assets (describe ►) Total assets (to be completed by all filers—see the				
		instructions. Also, see page 1, item I)	2699	5720	,	5720
	17	Accounts payable and accrued expenses		<u> </u>		225 ND 4. V 100 S
10	18	Grants payable				
<u>ë</u>	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
ap	21	Mortgages and other notes payable (attach schedule)				
-	22	Other liabilities (describe DUE TO YELLOW BRICK)	4929	492	2	
	23	Total liabilities (add lines 17 through 22)	4929	492		
40		Foundations that follow SFAS 117, check here ▶ □		716		
Ses		and complete lines 24 through 26 and lines 30 and 31.				
JUE	24	Unrestricted				最高大學院
nd Balances	25	Temporarily restricted				
9	26	Permanently restricted				
		Foundations that do not follow SFAS 117, check here ▶ □				第一条金属
F		and complete lines 27 through 31.				
Net Assets or Fu	27	Capital stock, trust principal, or current funds				
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
SS	29	Retained earnings, accumulated income, endowment, or other funds	(2230)	(223	0)	
۲.	30	Total net assets or fund balances (see instructions)		302		200g · 100g · 1
ဍ	31	Total liabilities and net assets/fund balances (see				
		instructions)	2699	5720	2	
	rt III	Analysis of Changes in Net Assets or Fund Balances				
1	Tota	I net assets or fund balances at beginning of year-Part II, colu	mn (a), line 30 (mus	t agree with		
		of-year figure reported on prior year's return)			1	NONE
2		r amount from Part I, line 27a			2	3021
3		er increases not included in line 2 (itemize)			3	
4		lines 1, 2, and 3			4	3021.
5	Decr	reases not included in line 2 (itemize)			5	
<u> 6</u>	rota	I net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), lir	ne 30	6	3021

Part		Losses for Tax on investin		bellupas work (d)		(2.2-1
		e; or common stock, 200 shs MLC Co		P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr)
<u>1a</u>				 		
<u>b</u>	·····					
C	- <u>-</u>					
<u>d</u>			·			
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis anse of sale		in or (loss) (f) minus (g)
<u>a</u> b						
						
<u>c</u>						
<u>d</u>						
e	Complete only for assets show	wing gain in column (h) and owned	by the foundation	on 12/31/69		
	Complete only for assets siles					ol. (h) gain minus ot less than -0-) or
	(I) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	over co	ss of col (i) I (j), if any		(from col. (h))
a						
<u>b</u>		······································				
C		·				
<u>d</u>						
<u>e</u>						
2	Capital gain net income or		also enter in Pa , enter -0- in Pa		2	
3	Net short-term capital gain	or (loss) as defined in sections	s 1222(5) and (6):		
		, line 8, column (c) (see instru				
					3	
Part		er Section 4940(e) for Redu			Income	
Vas t		e this part blank. section 4942 tax on the distribu qualify under section 4940(e). D			pase period?	☐ Yes ☐ N
1		unt in each column for each ye			aking any entries	
	(a)		ar; see the instr		aking any entnes.	(d)
Cale	Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distribution	s Net value o	(c) of noncharitable-use a		stribution ratio divided by col (c))
	2015					
	2014					
	2013					
	2012					
	2011					
2	Total of line 1, column (d)					
3		or the 5-year base period—divi			l I	
	number of years the found	ation has been in existence if le	ess than 5 years		. 3	
4	Enter the net value of nonc	haritable-use assets for 2016 f	rom Part X, line	5	. 4	
5	Multiply line 4 by line 3 .				. 5	
					1 1	
6	Enter 1 % of net investmen	t income (1% of Part I, line 27b)		. 6	
7	Add lines 5 and 6				. 7	
8		ns from Part XII, line 4				
	If line 8 is equal to or great Part VI instructions.	ter than line 7, check the box in	n Part VI, line 11	o, and complete t	that part using a	1% tax rate. See th

Part					40-	306 111311	10110	115/
1a	Exempt operating foundations described in section 4940(d)(2), check here a Date of ruling or determination letter: (attach copy of letter if no							1.
b	Domestic foundations that meet the section 4940(e) requirements in Pa		•	٦,	1		نبه المستديد	
	here ► □ and enter 1% of Part I, line 27b			.		医红色		
С	All other domestic foundations enter 2% of line 27b. Exempt foreign of Part I, line 12, col. (b).	organi	zations enter 4%	of J	P. Dear			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable found	fations	only. Others enter	-0-)	2			<u> </u>
3	Add lines 1 and 2				3			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable found		-		5			┼
5 6	Tax based on investment income. Subtract line 4 from line 3. If zero of Credits/Payments:	or iess	, enter -u	• •				122
а	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	!	1				
b	Exempt foreign organizations—tax withheld at source	6b		i —		7.		
c	Tax paid with application for extension of time to file (Form 8868) .	6c			1	100		
d	Backup withholding erroneously withheld	6d						
7	Total credits and payments. Add lines 6a through 6d			•	7			
8	Enter any penalty for underpayment of estimated tax. Check here \Box if		2220 is attached		8			<u> </u>
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount of			. 🕨	9			
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the	amou			10			
	Enter the amount of line 10 to be: Credited to 2017 estimated tax > VII-A Statements Regarding Activities		Refunded		11			<u> </u>
	During the tax year, did the foundation attempt to influence any nation	nal. s	tate, or local legis	slation	or d	id it	Yes	No
	participate or intervene in any political campaign?			• •		· 1a		V
b	Did it spend more than \$100 during the year (either directly or instructions for the definition)?	indired	ctly) for political	purpo	ses	(see		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the	activ	ities and copies o	 f anv	 mate			
	published or distributed by the foundation in connection with the activit			,	,,,,,,,,			
C	Did the foundation file Form 1120-POL for this year?					. 1c	122-YECK	
đ	Enter the amount (if any) of tax on political expenditures (section 4955) (1) On the foundation. ▶ \$ (2) On foundation ma	anage	rs. ▶ \$					
е	Enter the reimbursement (if any) paid by the foundation during the year on foundation managers. ▶ \$	for po	olitical expenditure	tax i	mpos	ed		i i
2	Has the foundation engaged in any activities that have not previously b	een re	ported to the IRS	?.		. 2	200 000	X
	If "Yes," attach a detailed description of the activities.	.			4!-1-			
3	Has the foundation made any changes, not previously reported to the IRS incorporation, or bylaws, or other similar instruments? If "Yes," attach a co	onform	ed copy of the cha	anges		. 3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or	more	during the year?				↓	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	 				. 4b	 	X
5	Was there a liquidation, termination, dissolution, or substantial contract	tion at	unng the year?		• •	. 5		distant
6	If "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through	ıh 494	5) eatisfied either					
	By language in the governing instrument, or	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	o, danoned chilor.					
	By state legislation that effectively amends the governing instrument conflict with the state law remain in the governing instrument?	t so tł	nat no mandatory	direc	tions	that 6	V	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If	Yes,"	complete Part II, col.	(c), ar	nd Part	XV 7	X	-
8a	Enter the states to which the foundation reports or with which it is regis							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of (or designate) of each state as required by General Instruction G? If "No			torne	y Gen	eral 8b	A	
9	Is the foundation claiming status as a private operating foundation with 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (nin the	meaning of secti			3) or		
	complete Part XIV					. 9	ļ	X
10	Did any persons become substantial contributors during the tax year? names and addresses	If "Ye	s," attach a sched	iule li: 	sting t	heir 10		X
	<u> </u>					Form 99	10-PF	(2016)

Part	VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		\overline{X}
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address > WWW, YELLOWBRICK RECEIPTION OF THE PUBLIC CONTROLLED OF THE P	13	X	
14	The books are in care of ► SONIA MCKRELL, BUS, ADM. Telephone no. ► (847)	869	-/-	500 X 22
15	Located at ► 1560 SHERMAN AVE, STE 400 EVANSTON, TL ZIP+4 ► 6021 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	? <i>!.</i>		D
16	At any time during calendar year 2016, 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?	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	DATE: SEC.	TANIBA .	- Marie
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		4	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		¥5,34	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Ý		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here ▶□			
С	were not corrected before the first day of the tax year beginning in 2016?	1c		Z
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 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016?			
	If "Yes," list the years ► 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			# 5
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or			7.42
_	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016.)			
42	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b		Ž
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 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 2016?	4a 4b		

Part	VII-B Statements Regarding Activities	for Wh	nich Form	4720 l	May Be R	<u>equire</u>	d (continue	<u>d) </u>	
5a	During the year did the foundation pay or incur at (1) Carry on propaganda, or otherwise attempt to (2) Influence the outcome of any specific public directly or indirectly, any voter registration dri	ny amou o influen o electio	unt to: ice legislatio	n (secti on 495	ion 4945(e) 5); or to ca)? . Irry on,	☐ Yes 💆		
	, , , , , ,	a chari	table, etc., o	organiza	ation descr	ibed in		No No	
	(5) Provide for any purpose other than religious, purposes, or for the prevention of cruelty to c						☐Yes 🌋	No	
b	If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53.4945 or in a current notice in							d in	5b X
C	Organizations relying on a current notice regardir If the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility	he found for the (dation claim grant?	exemp	otion from N/A			· □ No	
6a	If "Yes," attach the statement required by Regula Did the foundation, during the year, receive any to on a personal benefit contract?	funds, d		directly,	to pay pre		☐ Yes 🛣	ľNo	
b	Did the foundation, during the year, pay premium If "Yes" to 6b, file Form 8870.	ns, direc	tly or indired	ctly, on	a personal	benefit		•	6b
	At any time during the tax year, was the foundation a If "Yes," did the foundation receive any proceeds						Yes 🔯	No	7b
	Information About Officers, Direct and Contractors								nployees,
1	List all officers, directors, trustees, foundation	n manag	gers and th				<u>·</u>		
	(a) Name and address	hours	and average s per week d to position	(If n	npensation ot paid, ter -0-)	emplo	Contributions to yee benefit plan erred compensate	S '	e) Expense account, other allowances
15	SESSE VINER O SHERMAN AVE	PRE.	5./2		0		0	_	0
EV	E 400 ANSTON, IL. 6020/		_					\dashv	
			-	, <u>-</u>				+	
2	Compensation of five highest-paid employee	es (othe	er than thos	se incli	uded on li	ne 1—:	see instruct	ions	. If none, enter
-	a) Name and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to pe	veek	(c) Comper	nsation	(d) Contribution employee ben plans and defer compensation	efit (e) Expense account, other allowances
Λ	IONE				1				
					-				
			•		L 				·
Total	number of other employees paid over \$50,000 .	<u></u>		<u> </u>	<u> </u>	• •			orm 990-PF (2016)

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Part VIII	Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	n Managers, Highly Paid Em	
3 Five	nighest-paid independent contractors for professional services (see in	nstructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
	NONE		
Total numbe	er of others receiving over \$50,000 for professional services		0
Part IX-A	· · · · · · · · · · · · · · · · · · ·		
	ndation's four largest direct charitable activities during the tax year. Include relevant statis s and other beneficiaries served, conferences convened, research papers produced, etc.	stical information such as the number of	Expenses
1			
2	NONE		
3			
4			
Part IX-B			
	two largest program-related investments made by the foundation during the tax year on li	nes 1 and 2.	Amount
1			
	NONE		
2			
-			

O Form **990-PF** (2016)

All other program-related investments. See instructions.

Total. Add lines 1 through 3 .

Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreign	gn foundations,
	see instructions.)	-
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	
	purposes:	
а	Average monthly fair market value of securities	1a
b	Average of monthly cash balances	1b
С	Fair market value of all other assets (see instructions)	1c
d	Total (add lines 1a, b, and c)	1d
е	Reduction claimed for blockage or other factors reported on lines 1a and	
	1c (attach detailed explanation)	
2	Acquisition indebtedness applicable to line 1 assets	2
3	Subtract line 2 from line 1d	3
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	
	ınstructions)	4
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5
_ 6	Minimum investment return. Enter 5% of line 5	6
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations check here ► ☐ and do not complete this part.)	oundations
1	Minimum investment return from Part X, line 6	1
2a	Tax on investment income for 2016 from Part VI, line 5	
b	Income tax for 2016. (This does not include the tax from Part VI.)	
С	Add lines 2a and 2b	2c
3	Distributable amount before adjustments. Subtract line 2c from line 1	3
4	Recoveries of amounts treated as qualifying distributions	4
5	Add lines 3 and 4	5
6	Deduction from distributable amount (see instructions)	6
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	
	line 1	7
Part	Qualifying Distributions (see instructions)	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a
b	Program-related investments—total from Part IX-B	1b
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	
	purposes	2
3	Amounts set aside for specific charitable projects that satisfy the:	
а	Suitability test (prior IRS approval required)	3a
b	Cash distribution test (attach the required schedule)	3b
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4
5	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)	5
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether the foundation
		5 000 DE

Part	Undistributed Income (see instructi	ons)		, , , , , , , , , , , , , , , , , , , 	
1	Distributable amount for 2016 from Part XI, line 7	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
2 a b 3	Undistributed income, if any, as of the end of 2016: Enter amount for 2015 only Total for prior years: 20,20,20 Excess distributions carryover, if any, to 2016:				
a b c d e	From 2011				
4 a b	Qualifying distributions for 2016 from Part XII, line 4: ► \$ Applied to 2015, but not more than line 2a. Applied to undistributed income of prior years				
c	(Election required—see instructions) Treated as distributions out of corpus (Election required—see instructions)	2.44 AC 24 TO A SA			
d e 5	Applied to 2016 distributable amount Remaining amount distributed out of corpus Excess distributions carryover applied to 2016 (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:				
a b	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 Prior years' undistributed income. Subtract line 4b from line 2b				
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 Subtract line 6c from line 6b. Taxable		The state of the s		
e	amount—see instructions				
f	Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017.				
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)				
8	Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) .				
9	Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:		17. 3		
а	Excess from 2012				
b	Excess from 2013				
c	Excess from 2014				
d	Excess from 2015				4.40
е	Excess from 2016				
					Form 990-PF (2016)

Part					9)	
1a	If the foundation has received a ruling foundation, and the ruling is effective for					
b	Check box to indicate whether the four	ndation is a private	e operating founds	ation described in s	ection 1 4942(I)	(3) or 4942(j)(5)
2a		Tax year		Prior 3 years	<u> </u>	
	income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
	investment return from Part X for	(a) 2010	(0) 2015	(6) 2014	(0) 2013	
	each year listed			 	ļ	
b	85% of line 2a				<u> </u>	
C	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
	· '		 		ļ	
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
2	"Assets" alternative test enter:					
a		ĺ				
	(1) Value of all assets		ļ	 	 	
	(2) Value of assets qualifying under					•
	section 4942(j)(3)(B)(i)			1		
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test—enter:					
-						
	(1) Total support other than gross investment income (interest.]
	dividends, rents, payments on	(1
	securities loans (section					
	512(a)(5)), or royalties)		ļ		ļ	
	(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	L	<u> </u>		1	<u>L.</u>
Part		•	•	the foundation h	nad \$5,000 or m	ore in assets at
	any time during the year-	-see instruction	ns.)			
1	Information Regarding Foundation	Managers:	· · · · · · · · · · · · · · · · · · ·			
а	List any managers of the foundation		uted more than 2	% of the total cont	tributions received	by the foundation
_	before the close of any tax year (but o					.,
	boloro ino ologo or ally last your (but o	my ir they have o		11411 40,000). (000 1	30011011 001 (0)(2)1)	
				 		
b	List any managers of the foundation			•		irge portion of the
	ownership of a partnership or other e	ntity) of which the	foundation has a	10% or greater in	terest.	
2	Information Regarding Contribution	. Grant. Gift. Lo:	an Scholarship	etc Programs:		
_	Check here ► ☐ if the foundation		• •		organizations and	I does not accent
	unsolicited requests for funds. If the fother conditions, complete items 2a,		giris, granits, etc.	. (356 111311110110118)	to individuals of O	gariizations under
а	The name, address, and telephone nub R JESSE VINER, 156	imber or e-mail ac	ddress of the pers	on to whom applic	cations should be	addressed:
	UK JESSE VINER, 136	USHERM	AN AVE, S	400, 6	VITALS I ON, I	-4, 60201
b	The form in which applications should	be submitted an	d information and	materials they sho	ould include:	4
-	WRITTEN, NAME OF	FORGANIZ	ZATION, PI	URPOSE, A	NO ANY A	MOUNT
	REQUESTED SHOULD	BESENT	TO DE JO	ESSE VINER	•	
			- 7 - 3 -			
C	Any submission deadlines:					
	NONE				 	
d	Any restrictions or limitations on av factors: AMT OF AWARD S FOR THE YEAR THE FO	vards, such as b	y geographical a	areas, charitable f	ields, kinds of ins	titutions, or other
	factors: AMT OF AWARD 5	UNICE TO	FOCUSES OF	INTICHOUS AI	ORBANIZA	TIONS WHO A
	YOUNG EMERGING A	DULTS WI	TH A MUI	TITUDE AL	ISSUES	SEE NEXT A
	THE TAX TO THE TAX THE					50m 000-DF (2016)

Part XV Supplementary Information (con				
3 Grants and Contributions Paid During			ture Payment	
Recipient	If recipient is an individual show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year SEE ATT, LIST OF CONTRIBUTIONS PAI		ARE	TO FURTHER EL TRAINING AND RES FOR YOUNG EMERG A DULTS WHO EXHIB A MULTITUDE OF EMOTIONAL, AND I ISSUES,	SEARCH ING BIT PYCHOLOGICA
Total				3a 456/
b Approved for future payment				
Tabel	<u> </u>		<u> </u>	
Total	<u> </u>	<u></u>	<u> ▶ _ </u>	3b

nte	r gro	ss amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by secti	on 512, 513, or 514	(0)
		gram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)
•	a	ram service revertue.			 		
	b -				 		
	c	· · · · · · · · · · · · · · · · · · ·			<u> </u>		
	ď			-			
	e ¯						
	f				 		
	g i	ees and contracts from government agencies			 		
2		bership dues and assessments					
3		est on savings and temporary cash investments			 		
4		dends and interest from securities					
5		rental income or (loss) from real estate:					
_		Debt-financed property	F 77 47 34 47 3	2			195 1951 19 19 19 19 19 19 19 19 19 19 19 19 19
		Not debt-financed property				,	
6		rental income or (loss) from personal property					
7		er investment income					
8		or (loss) from sales of assets other than inventory					
		income or (loss) from special events					
10		ss profit or (loss) from sales of inventory					
							
	b				 		 -
	c .						<u> </u>
	ď				 		
		··			· 		
	e		1				
12	e _	total Add columns (b) (d) and (e)					-
		total. Add columns (b), (d), and (e)				13	
13	Tota	al. Add line 12, columns (b), (d), and (e)				13	
13 See	Tota	al. Add line 12, columns (b), (d), and (e)	 ns.)		ot Purposes	13	
13 See Par	Tota work	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			importantly to the
13 See Par Line	Tota work t XV	al. Add line 12, columns (b), (d), and (e)	 ns.) Accomplishm	ent of Exemp			mportantly to the
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the ctions.)
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the ctions.)
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the ctions.)
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the ctions.)
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the ctions.)
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the ctions.)
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the ctions.)
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the ctions.)
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the ctions.)
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the ctions.)
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the ctions.)
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the ctions.)
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the ctions.)
13 See Par Line	Tota work t XV • No.	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation Relationship of Activities to the A	 ns.) Accomplishm	ent of Exemp			mportantly to the ctions.}

Part	XVII		n Regarding Tran ganizations	sfers T	o and Tran	sacti	ons and f	Relationshi	ips With	Noncha	ritable	
	in se	he organization d	lirectly or indirectly e e Code (other than s	engage i section (n any of the f 501(c)(3) orga	ollowi nizati	ing with any ons) or in s	y other organ ection 527, r	nization de relating to	escribed political	Y	s No
а		sfers from the rep Cash	oorting foundation to	a nonc	haritable exe	npt o	rganization 	of:			1a(1)	
	(2) C	Other assets .									1a(2)	
b	Othe	r transactions:										
	(1) S	ales of assets to	a noncharitable exe	mpt org	anization .						1b(1)	
			ts from a noncharita		. •						1b(2)	
			equipment, or othe								1b(3)	
			rangements								1b(4)	
		oans or loan gua									1b(5)	
			rvices or membersh	•	_						1b(6)	
			quipment, mailing lis							• • •	1c	 _
d			of the above is "Yes									
			ther assets, or servi on or sharing arrang									
(a) Line		(b) Amount involved	(c) Name of nonch					ription of transfe				
(a) Line	110.	(b) Amount involved	(c) Name of nonci	IAI KADIO O	kempt organizatio	<i>)</i> 1	(d) Desc	ription of Bariste	ns, uansacu	0113, 2110 511	aring arrang	- Indrite
							-					
					<u> </u>							
												
	-		-							· · · · · · · · · · · · · · · · · · ·		
	_						+					
	1						 					
										, <u>-</u>		
-												
	desc	ribed in section 5 es," complete the	ectly or indirectly af 501(c) of the Code (c of following schedule	ther tha	n section 50°	(c)(3)	or in secti				☐ Yes [
		(a) Name of organ	ization		(b) Type of org	anizatıo	n		(c) Descript	ion of relation	nship	
								<u> </u>				
Cian			declare that I have examine aration of preparer (other the							of my knowle	dge and beli	ef, it is true,
Sign Here		nature of officer or trus			5.8.17	•	PRES	•		with the	RS discuss preparer should be considered by the constant of th	wn below
	Joigi	Print/Type preparer		Prepare	y's #gnature			Date /	,		PTIN	
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Prepa			CUTTERSC			_				<i>36</i>		
Use (צוחכ	Firm's address	155 REVERE	DO	STE / A/A	011	18 8 004	X IL	Phone no.		656 E	
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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.

OMB No. 1545-0047

Employer identification number

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

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 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. 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. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

Caution: An organization that Isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

Part I	Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
-/	YELLOW BRICK CONSULTATION § TREATMENT CENTER 1560 SHERMAN AVE STE 400 EVANSTON, IL 60201	\$ 95614.	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) N o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			

Name of organization

Employer identification number

YELLOWBRICK FOUNDATION

20-8604672 Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (c) FMV (or estimate) from Description of noncash property given **Date received** Part I (See instructions) (a) No. (c) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions) (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given **Date received** Part I (See Instructions) (a) No. (c) FMV (or estimate) (d) (b) from Description of noncash property given **Date received** Part I (See instructions) (a) No. (c) (d) (b) from FMV (or estimate) Description of noncash property given **Date received** Part I (See instructions) (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions)

Schedule B (Form 990, 990-EZ, or 990-PF) (2016) **Employer identification number** Name of organization YELLOWBRICK FOUNDATION

art III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ Use duplicate copies of Part III if additional space is needed. (a) No. (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift from Part I (b) Purpose of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Yellowbrick Foundation

EXPENSES BY VENDOR SUMMARY

January - December 2016

Alayanda Milla	TOTAL
Alexandra Wills	300.00
Ashley Foster	85.00
Austen Riggs	1,000.00
Chicago Center for Torah & Chesed	500.00
Chicago Institute for Psychoanalysis, ASAP	5,100.00
Christopher Stanley	85.00
Citibusiness Card	47,962.03
Cutler Financial Services	2,550.00
Department of Financial and Professional	250.00
Regulation	
Ember Foundation	12,500.00
Emily Lippman	65.00
Eric Kammerer	85.00
Evanston Postmaster	1,158.07
Sabriel Berenson	85.00
Hayden Stern	85.00
Heifer International	750.00
Housing Options	500.00
Howard Brown Clinic	550.00
Ilinois Charity Bureau Fund	15.00
saac Dayton	85.00
Jeff Konecki	75.00
Jennifer Brandt	85.00
Julie Kimani	300.00
auren Howell	85.00
Lindsay Apatow	85.00
Madi Greer	85.00
Melody Hill	85.00
Menninger	5,000.00
Mike Rotsch	85.00
Naomi Ruth Cohen Institute	1,000.00
Nefesh	3,000.00
No Shame On U	1,000.00
Philadelphia Insurance Companies	1,182.00
Project Extreme	2,500.00
Rabbi Meir Hecht	2,500.00
RegOnline	-1,114.15
Ruth Shorr	100.00
Samantha Jentgen	85.00
Secretary of State	250.00
Fannenbaum Chabad House	14,550.00
The Joseph Palombo Center for	1,000.00
Neuroscience and Psychoanalytic Social Work	1,000.00

	TOTAL
Torahub at The Ember Foundation	360.00
Tysha Fore	85.00
Xannie Baker	85.00
Zoe Beyer	75.00
TOTAL	\$106,252.95

Yellowbrick Foundation

Vendor	Address	Phone	Open Balance
active Network			\$0.00
Active Transportation Alliance	9 W Hubbard St Suite 402 Chicago IL 60654-6545		\$0.00
Agudath Israel of Illinois	3542 W. Peterson Avenue Chicago IL 60659		\$0.00
Allan Schore, PhD	9817 Sylvia Avenue Northridge CA 91324		\$0.00
American Cancer Society			\$0.00
American Chartered Bank			\$0.00
American Psychoanalytic Association	309 East 49th Street New York NY 10022		\$0.00
American Psychological Association			\$0.00
Andrew Klafter, MD			\$0.00
Aramark Services, Inc.	1560 Sherman Ave Evanston IL 60201		\$0.00
Aron Tendler, MD			\$0.00
Ashley Foster			\$0.00
Austen Riggs			\$0.00
Barr-Harris Children's Grief Center			\$0.00
Betty Wolff			\$0.00
Camp Kupugani	6903W White Eagle Road Lead River IL 60147	(815) 713-4110	\$0.00
Carol Irons	652 Golf Lane Lake Barrington IL 60010		\$0.00
Center for Global Initiatives	22918 N Woodcrest Ln Kildeer IL 60047		\$0.00
Chairmanship Fund John Csernansky MD	446 E Ontario 7th floor, Suite 200 Chicago IL 60611		\$0.00
Chicago Center for Torah & Chesed	6333 N. Troy Street Chicago IL 60659	(773) 761-7603	\$0.00
chicago Chesed Fund			\$0.00
Chicago Institute for	122 S Michigan Ave #1300		\$0.00
Psychoanalysis, ASAP	Chicago IL 60602		ቅ ህ,ህህ
Chicago Loop Synagogue	16 South Clark Street Chicago IL 60603	(312) 346-7330	\$0.00

Vendor	Address	Phone	Open Balance
Chicago Mitzvah Campaign	2939 W. Touhy Ave Chicago IL 60645		\$0.00
Chicago Psychoanalysis Institute			\$0.00
Chicago Torah Network	Rabbi Moshe Katz 2832 W. Tou Chicago IL 60645	hy Ave (773) 761-0400	\$0.00
Chicagoland Bicycle Federation	9 W. Hubbard Suite 402 Chicago IL 60654-6545		\$0.00
Christopher Stanley			\$0.00
Cincinnati Psychoanalytic Institute			\$0.00
Citibusiness Card	PO Box 78045 Phoenix AZ 85062-8045		\$0.00
CJBS, LLC	2100 Sanders Road, Suite 200 Northbrook IL 60062-6141		\$0.00
Congregation Sar Shalom	c/o Graber Family 1504-40th St Apt 5 Brooklyn NY 11218	reet	\$0.00
Cornerstone Counseling	Eva Ponder LCSW, PsyD - Clin Director 1111 N. Wells, Suite 40 Chicago IL 60610		\$0.00
CRC Health Group	20400 Stevens Creek Blvd, Suite Cupertino CA 95014	e 600	\$0.00
Cutler Financial Services			\$0.00
Dane Joy Entertainment	2044 W. Chicago Avenue #189 Chicago IL 60622		\$0.00
Deluxe Bus			\$0.00
Department of Financial and Professional Regulation			\$0.00
Diana Hunt			\$0.00
Dr. Arthur Nielsen	333 E Ontario St Apt 4209 B Chicago IL 60611		\$0.00
Dr. Bessel van der Kolk	16 Braddock Park Boston MA 021106		\$0.00
Dr. Jack Graller			\$0.00
Efrat Ginot	1200 1		\$0.00
Elizabeth Ellman	1308 Judson Evanston IL 60201		\$0.00
Ember Foundation	3553 W Peterson Ave Suite 208 Chicago IL 60659		\$0.00

Vendor	Address	Phone	Open Balance
Emily Lippman			\$0.00
ENTI Department of Psychiatry	2650 Ridge Avenue Evanston IL 60201		\$0.00
Eric Kammerer			\$0.00
Eric Plakun			\$0.00
Evanston Community Foundation	1007 Church Street Suite 108 Evanston IL 60201		\$0.00
Evanston Postmaster			\$0.00
Family Focus, Inc.	310 S. Peoria Suite 301 Chicago IL 60607		\$0.00
Foundation for Madison's Public Schools	455 Science Drive Madison WI 53711		\$0.00
Fran Teller			\$0.00
Gabriel Berenson			\$0.00
Geneva Foundation	3800 W. Grand Chicago IL 60651	(773) 782-9373	\$0.00
Girl Scouts			\$0.00
Giving Back to Africa	5745 Union Valley Rd Bloomington IN 47404		\$0.00
Haiti Relief Fund			\$0.00
Harold Bendicsen, PhD			\$0.00
Hayden Stern			\$0.00
Heifer International	1 World Avenue Little Rock AR 72202		\$0.00
Hinsdale Hospital Foundation			\$0.00
Housing Options	1132 Florence Avenue		\$0.00
	Evanston IL 60202		
Human Rights Campaign Illinois Charity Bureau Fund	100 West Pandalah St 11th Flags		\$0.00
Office of the Attorney General	100 West Randolph St 11th Floor Chicago IL 60601-3175		\$0.00
Illinois Group Psychotherapy Society	PO Box 28538		
Illinois Group Psychotherapy Society	Green Bay WI 54324-0538		\$0.00
Illinois Group Therapy			
Association Illinois Group Therapy	1418 W. Bryn Mawr, Suite One Chicago IL 60660		\$0.00
Association Isaac Dayton			\$0.00

Vendor	Address	Phone	Open Balance
Jeff Konecki	2728 Marlin Court Homewood IL 60430		\$0.00
Jeffrey Arnett, PhD			\$0.00
Jeffrey Stern			\$0.00
Jennifer Brandt			\$0.00
Jennifer L. Tanner, PhD	10 Valley Road Mountain Lakes NJ 07026		\$0.00
Jesse Viner.			\$0.00
Jewish Learning Institute			\$0.00
Jewish National Fund	2 Reservoir Circle Suite 203 Baltimore MD 21208		\$0.00
Kehillah Jewish Education Fund	8180 McCormick Blvd Skokie IL 60076		\$0.00
Kelsey Adams			\$0.00
Lauren Howell			\$0.00
Lauren Kern, MD	The Institute for Psychoanalysis 122 S Michigan Ave Suite 1300 Chicago IL 60603		\$0.00
Lebow, Malecki & Tasch, LLC	PO BOX 92170 Elk Grove IL 60009		\$0.00
Libby Rosencrans	2314 Swainwood Drive Glenview II 60025		\$0.00
Linda H. Kelly	9805 Hillview Drive Fox River Grove IL 60021	(847) 829-4049	\$0.00
Linda Rudy PsyD			\$0.00
Lindsay Apatow			\$0.00
Lisa Shives			\$0.00
Lubavitch Mesivta	2756 W Morse Ave Chicago IL 60645		\$0.00
Madi Greer			\$0.00
Madraigos Midwest	3557 W Peterson Ave, Suite 128 Chicago IL 60659	(o) 773-478-6000 x23	\$0.00
MANN. WEITZ & ASSOCIATES, LLC	111 DEER LAKE ROAD, STE 125 DEERFIELD IL 60015		\$0.00
Mel Viner			\$0.00
Melody Hill			\$0.00
Menninger Clinic	12301 Main Street Houston TX 77035		\$0.00

Vendor	Address	Phone	Open Balance
Menninger Clinic Foundation	2801 Gessner Drive Houston TX 77080		\$0.00
MHANS	2120 Lincoln Evanston IL 60201	(847) 859-2469	\$0.00
Mike Rotsch			\$0.00
NAMI	218 West Lawrence Springfield IL 62704		\$0.00
NAMI CCNS NAMI CCNS	8324 Skokie Blvd Skokie IL 60077		\$0.00
Naomi Ruth Cohen Institute	NRC Institute 325 N Wells St. Chicago IL 60654		\$0.00
National Career Development Association			\$0.00
Naturalsoft Nefesh			\$0.00 \$0.00
New Foundation of Hope Inc.	8144 S. Kedzie Ave Chicago IL 60652	(773) 424-4773	\$0.00
Northshore University Dept. of Psychiatry	Chairman's Fund Dr. Fred Miller 2650 Ridge Ave Evanston IL 60201		\$0.00
Northwestern University Medical School Chairman's	c/o Dr. Czernansky Feinberg School 750 N Lake Shore Dr. Chicago IL 60611		\$0.00
Parents Against Drugs	1319 1/2 Estes Suite 26 Chicago IL 60626		\$0.00
Paul Hollinger, MD			\$0.00
PayPal			\$0.00
Philadelphia Insurance Companies			\$0.00
Press America	661 Fargo Ave Elk Grove Village IL 60007		\$0.00
Project Extreme	335 Central Avenue Lawrence NY 11559		\$0.00
Project Realize	Mark Smaller 633 S. Plymouth Court #705 Chicago IL 60605		\$0.00
Prudence Gourgeschon MD			\$0.00
Purim Fund-Matanos	2949 W Greenleaf Ave		\$0.00
L'evyonim Rabbi Moshe Katz	Chicago IL 60645-2915		\$0.00
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Vendor	Address	Phone	Open Balance
Rabbi Weinberg			\$0.00
Rainbows	1007 Church Street, Suite 408 Evanston IL 60201	(847) 952-1770	\$0.00
Rebecca McCasland			\$0.00
Refoenu Refoenu	Attn: Rabbi Yisroel Matzliach 6333 N. Troy Street Chicago IL 60659	(773) 761-4005	\$0.00
RegOnline			\$0.00
Rotary Evanston Catering			\$0.00
Ruth Shorr	122 S. Michigan Avenue, #1300 Chicago IL 60603		\$0.00
Secretary of State			\$0.00
Shattered Globe Theatre			\$0.00
Sonia Shankman Orthogenic School			\$0.00
Southwest Airlines			\$0.00
Springer			\$0.00
Stephen O'Toole			\$0.00
Steve Porges, PhD			\$0.00
	Northwestern Jewish Center 2014		
Tannenbaum Chabad House	Orrington Evanston IL 60201		\$0.00
Telshe Yeshiva Chicago	3535 W. Foster Avenue Chicago IL 60625		\$0.00
The Ark	The Seymour H. Persky Building 6450 N. California Chicago IL 60645		\$0.00
The Barr-Harris Children's Grief Center	122 S. Michigan Ave Suite 1300 Chicago IL 60603		\$0.00
The Family Institute	8 South Michigan Avenue Suite 500 Chicago IL 60603		\$0.00
The Institute for Psychoanalysis	122 S Michigan Ave Suite 1300 Chicago IL 60603		\$0.00
The Leah Esther Isaacs Gemack Fund	c/o Ahuva Horowitz 3136 West Sherwin Chicago IL 60645		\$0.00
The Viti Companies	445 Sheridan Road PO Box 699 Highwood IL 60040	(847) 432-1000	\$0.00
Thompson Coburn LLP	PO Box 18379M St. Louis MO 63195		\$0.00

Vendor	Address	Phone	Open Balance
Thresholds	4101 N. Ravenswood Chicago IL 60613		\$0.00
Top Cats Charity Ride for NISRA	c/o Don Schaffer 2100 Sanders Rd. Suite 200 Northbrook IL 60062-6141		\$0.00
Torah Outreach Program Y. Fogelman			\$0.00
Torahub at The Ember Foundation Rabbi Yehuda Albin	3553 W. Peterson Ave Chicago IL 60659		\$0.00
TORAHUB Purim Fund	3553 W. Peterson Avenue, Suite 208 Chicago IL 60659		\$0.00
Tracey Family Foundation	PO Box 2579 Glenview IL 60026		\$0.00
Tracy Pollack			\$0.00
transfered from YB CTC			\$0.00
Tysha Fore			\$0.00
Ulmer & Berne LLP	PO Box 74529 Cleveland OH 44194		\$0.00
United Airlines			\$0.00
USPS			\$0.00
void			\$0.00
World Vision	PO BOX 70200 Tacoma WA 98481-0200		\$0.00
Xannie Baker			\$0.00
Yaakov Fogelman			\$0.00
Yellowbrick CTC			\$0.00
Yeshiva Migdal Torah	2728 West Pratt Blvd. Chicago IL 60645		\$0.00
Young Israel of West Rogers Park	2706 W. Touhy Avenue Chicago IL 60645		\$0.00
Zoe Beyer			\$0.00