'sorm 990-PF

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

OMB No 1545-0052 2016

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.
 Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

2016
Open to Rublic Inspection

For ca	lendar year 2016 or tax year beginning	, 2016 ,	, and ending	,	
Name of	foundation		A	Employer Identification num	nber
The	Allyn Foundation, Inc.			23-7025589	
Number a	and street (or P O box number if mail is not delivered to street a	ddress)	Room/suite B	Telephone number (see instri	uctions)
539	Princeton Road			(978) 887-246	<u> </u>
	wn, state or province, country, and ZIP or foreign postal code			(f	
<u> Hins</u>	dale	IL	60521 C	If exemption application is	pending, check here.
G Ch	eck all that apply Initial return	Initial return of a forme	er public chanty D	1 Foreign organizations, che	ck hore
	Final return	Amended return	· b	i roleigh organizations, the	CK Here
	Address change	Name change		2 Foreign organizations mee	ting the 85% test, check
H Ch		<u> </u>	-ndation	here and attach computation	on ĭ ▶
H Ch	_ `` -	(c)(3) exempt private for			
	Section 4947(a)(1) nonexempt charitable trus		rivate foundation E	If private foundation status	
		ounting method $ \chi $ C	ash Accrual	under section 507(b)(1)(A),	crieck nere
(fro	m Part II, column (c), line 16)	Other (specify)	_F	If the foundation is in a 60-	month termination —
► \$	6,293,169. (Part I, d	column (d) must be on c		under section 507(b)(1)(B)	
Part		`			
1. 4		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces-	expenses per books	income	income	for charitable purposes
3 60	sanly equal the amounts in column (a)				(cash basis only)
	(see instructions))				(02011 02010 0111)
~ 3	1 Contributions, gifts, grants, etc., received (attach schedule) • •	0.	,	\$ 4 P A	
कुब्द	2 Check X If the foundation is not required to attach Sch. B				· · · · · · · · · · · · · · · · · · ·
(4)					
	3 Interest on savings and temporary cash investments · · · ·	493.	493.		, with a second
፟	4 Dividends and interest from securities	186,576.	186,576.	186,576.	
MAY	5 a Gross rents	0.	0.	0.	
	b Net rental income or (loss) 0 .	5g1 (737) 185	NAME OF ACT OF	100 M W W	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
$\Omega_{\mathbf{p}}$	6 a Net gain or (loss) from sale of assets not on line 10	\w/ 62460049 8E 885000			
ЩÈ	b Gross sales price for all				. 9 . 300
Zν	assets on line 6a			* As	**************************************
ZΈ	7 Capital gain net income (from Part IV, line 2)		93,524.		*
≪ N	8 Net short-term capital gain	3 \$ 118 , 1s	,	0.	
SCANNED	9 Income modifications	· \$ 66 3 20%	· ,	0.	Open to the first
(A)	10 a Gross sales less returns and				
	allowances 0.		<u> </u>		
	b Less Cost of goods sold . 0.		, *		
	C Gross profit or (loss) (attach schedule)	0.	1 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		2 July 2 3 3 4 3
	11 Other income (attach schedule)			-	4. 4. 8. 8. 8.
	NONE	0.	0.	0.	
	12_Total. Add-lines 1 through 11	187,069.	280,593	187,069.	
	13 Compensation of officers, directors, trustees, etc.	0.	200,353	0.	0.
	14 Other employee salaries and wages				
	11 - 101	0.	0.	0.	0.
	15 Pension plans, employee benefits.	0.	0.	0.	0.
A	16a Legalyees ((attach schedule) 17 . O	0.	0.	0.	0.
D M	Accounting fees (attach sch).	0.	0.	0.	0.
1	c Other-professional fees (attach sch) — 166 Stmt.	652.	0.	0.	652.
O N	17 Interest C.D.E.N. I.I.T.	0.	0	0.	0.
PS	18 Taxes (attach schedule) (see insus) See Line 18 Stmt		148		0.
RR	19 Depreciation (attach	2,999.	140	. 140.	<u> </u>
RRAATT	schedule) and depletion	0.	0		1 4
1 1	20 Occupancy	0.	0	0.	0.
N V	21 Travel, conferences, and meetings	0.	0		0.
	22 Printing and publications	798.	798		
A E N X D P	23 Other expenses (attach schedule)	/98.	/98	/98.	0.
υP			225	205	305
E N	See Line 23 Stmt	570.	285	. 285.	285.
S	24 Total operating and administrative				
Š	expenses Add lines 13 through 23	5,019.	1,231	1,231.	937.
	25 Contributions, gifts, grants paid	305,000.		i vic zabili sibo	305,000.
	26 Total expenses and disbursements				
	Add lines 24 and 25	310,019.	1,231	. 1,231.	305,937.
	27 Subtract line 26 from line 12		TO THE REST OF THE PARTY OF THE	(*) (*) (*) (*) (*) (*) (*)	1 1/2 1/3 1/2 1/3
	a Excess of revenue over expenses				
	and disbursements	-122,950.		<u> </u>	transit in the state of
	b Net investment income (if negative, enter -0-)	ta + 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	279,362		
	C Adjusted net income (if negative, enter -0-)		5.65 8.7 180	185,838.	100 1 % 10 m



'art	··· .	Attached schedules and amounts in the description	Beginning of year		f year
	<u> </u>	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
- 1	1	Cash – non-interest-bearing	. 2,612.	2,576.	2,576
	2	Savings and temporary cash investments	. 55,582.	64,458.	64,458
	3	Accounts receivable	2 () () () ()	The second second	
		Less allowance for doubtful accounts	ō. o.	0.	(
- [4		0.		
			0.	0.	,
	5	Grants receivable	. 0.	0.	(
ĺ	6	Receivables due from officers, directors, trustees, and other		· · · · · · · · · · · · · · · · · · ·	
		disqualified persons (attach schedule) (see instructions)	·0.	0.	C
	7	Other notes and loans receivable (attach sch)			25
A		Less allowance for doubtful accounts	00.	0.	
S S E T	8	Inventories for sale or use	. 0.	0.	
E	9	Prepaid expenses and deferred charges	. 0.	0.	
s	10 a	Investments – U S and state government			
		obligations (attach schedule)		0.	(
		Investments — corporate stock (attach schedule) . L = 1.0b. Stmt .		911,398.	4,797,615
		: Investments — corporate bonds (attach schedule) . $L=10.c$. Stmt	1,275,390.	1,249,159.	1,428,520
-	11	Investments — land, buildings, and	o.		
			<u>0</u> .		
		Less accumulated depreciation (attach schedule)	0. 0.	0.	
	12	Investments – mortgage loans		0.	
İ	13	Investments — other (attach schedule)	. 0.	0.	
	14	Land, buildings, and equipment basis	0.		**************************************
		Less. accumulated depreciation	<u></u>	'A- 1382 : :885a a	
			0. 0.	0.	
		Other assets (describe	0.	0.	
	16	Total assets (to be completed by all filers — see the instructions Also, see page 1, item I)	2 257 017	2 227 501	6 202 16
+	17	Accounts payable and accrued expenses	2,257,017.	2,227,591.	6,293,16
	18	Grants payable	. 0.	0.	
1	19	Deferred revenue	. 0.	0.	
	20	Loans from officers, directors, trustees, & other disqualified persons		0.	
-	21	Mortgages and other notes payable (attach schedule)		0.	
٠	22	Other liabilities (describe) 0.	0.	
:			-' 	0.	
	23	Total liabilities (add lines 17 through 22)	· 0.	0.	
I		Foundations that follow SFAS 117, check here	[] []		
- [and complete lines 24 through 26 and lines 30 and 31.	∐		
	0.4	and complete lines 24 through 26 and lines 30 and 31.			
		Unrestricted			
۱	25	Unrestricted			
۱ ۱		Unrestricted			
3	25	Unrestricted	\[\text{\texicl{\text{\ti}\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\ti}\xi\text{\text{\text{\text{\text{\text{\text{\text{\text{\tinint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tinit}\\ \tinit}\\ \tittt{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\texi}\text{\text{\tex{\text{\texi}\text{\text{\text{\text{\text{\text{\text{\text{\tett{\texi}\tint{\text{\texi}\text{\texi}\text{\text{\text{\texi}\tittt{\text{\texi}\text{\texitit{\texit{\texi}\tint{\text{\texititt{\tinit}\text{\texit{\texit{\texi{\texi{\texi{\texi{\tet		
J D B A	25 26	Unrestricted		2 227 501	
J D B A LA	25 26 27	Unrestricted	. 2,257,017.	2,227,591.	
DZD ma lazo	25 26 27 28	Unrestricted	. 2,257,017.	0.	
FUND BALANCES	25 26 27 28 29	Unrestricted	. 2,257,017. . 0.	0.	
170 ma 1470m	25 26 27 28	Unrestricted	. 2,257,017. . 0.	0.	
J A A A A A A A A A A A A A A A A A A A	25 26 27 28 29 30 31	Unrestricted	. 2,257,017. . 0. . 0. . 2,257,017. . 2,257,017.	0.	
JAD BA ANGES	25 26 27 28 29 30 31	Unrestricted	. 2,257,017. . 0. . 0. . 2,257,017. . 2,257,017.	0. 0. 2,227,591.	
NO BA	25 26 27 28 29 30 31	Unrestricted Temporarily restricted Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see instructions) Total liabilities and net assets/fund balances (see instructions) Analysis of Changes in Net Assets or Fund Bala	2,257,017. 0. 0. 2,257,017. 2,257,017.	0. 0. 2,227,591. 2,227,591.	
JND BAAANCES	25 26 27 28 29 30 31 Total	Unrestricted Temporarily restricted Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see instructions) Total liabilities and net assets/fund balances (see instructions) Analysis of Changes in Net Assets or Fund Bala net assets or fund balances at beginning of year — Part II, columpf-year figure reported on prior year's return)	2,257,017. 0. 0. 2,257,017. 2,257,017. 1nces mn (a), line 30 (must agree	0. 0. 2,227,591. 2,227,591.	2,257,01
JND BAAANCES	25 26 27 28 29 30 31 Total	Unrestricted	2,257,017. 0. 0. 2,257,017. 2,257,017. 1nces mn (a), line 30 (must agree	0. 0. 2,227,591. 2,227,591.	2,257,01 -122,95
UND BAANCES art	25 26 27 28 29 30 31 Total end-oc	Unrestricted Temporarily restricted Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds Total net assets or fund balances (see instructions) Total liabilities and net assets/fund balances (see instructions) Analysis of Changes in Net Assets or Fund Bala net assets or fund balances at beginning of year — Part II, columpf-year figure reported on prior year's return)	2,257,017. 0. 0. 2,257,017. 2,257,017. nnces mn (a), line 30 (must agree	0. 0. 2,227,591. 2,227,591.	
UND BALANCES art.	25 26 27 28 29 30 31 Total end-o	Unrestricted Temporarily restricted Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. Capital stock, trust principal, or current funds	2,257,017. 0. 2,257,017. 2,257,017. 2,257,017. nnces mn (a), line 30 (must agree with the content of the conten	0. 0. 2,227,591. 2,227,591. with 1	-122,95
NO BA ANCES Int.	27 28 29 30 31 Total end-c Enter Other I	Unrestricted	2,257,017. 0. 2,257,017. 2,257,017. 2,257,017. Inces mn (a), line 30 (must agree with the content of the conten	0. 0. 2,227,591. 2,227,591. with 1 2 3	-122,95 93,52

Par	t-IV≨∥Capital Gains and I	Losses for Tax on Investme	nt Income				
	(a) List and describe 2-story brick wareho	the kind(s) of property sold (e g , real suse, or common stock, 200 shares M	estate, LC Company)	(b) How acc P — Purch D — Dona	ase	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	200 shs Vanguard 50	0 Index Trust		₽		07/01/89	11/15/16
b	3082.47 shs Vanguar	d Long-Term Invest Gra	ide Bond Fund	P		07/01/89	11/15/16
C	200 shs Time Warner	Cable common		Þ		12/08/93	04/08/16
d	Apartment Invest &	Mgmt cap gain distrib	· · · · · · · · · · · · · · · · · · ·	₽			11/30/16
е	Vanquard Long-Term	Invest Grade Bond Fund					12/27/16
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other base			(h) Gain or (e) plus (f) mi	
a				7,434.			32,944.
b			2	7,116.			4,418.
<u>c</u>				8,798.			32,088.
d				0.			3,576.
e	20/130.	1 (1)		0.			20,498.
	(i) F M V as of 12/31/69	ng gain in column (h) and owned by the (j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any			(f) Gains (Col ain minus col. (k), b an -0-) or Losses (fr	ut not less
а							32,944.
b							4,418.
c							32,088.
d							3,576.
e						,	20,498.
2	Capital gain net income or (net o		enter in Part I, line 7 er -0- in Part I, line 7		2		93,524.
	If gain, also enter in Part I, line 8 in Part I, line 8	ss) as defined in sections 1222(5) ar 3, column (c) (see instructions) if (los 	s), enter -0-		3		
		foundations subject to the section 494	•		DILLE		
Was t	s,' the foundation does not qualify Enter the appropriate amount in (a)	s part blank on 4942 tax on the distributable amou y under section 4940(e) Do not comp each column for each year, see the i (b)	olete this part			Yes (d)	X No
	Base periód years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use as:	sets		Distribution (col (b) divided	
	2015	303,126.	6,09	0,242.			0.049772
	2014	298,168.	6,01	7,555.			0.049550
	2013	273,141.		9,996.			0.049393
	2012	253,592.		5,051.			0.049098
	2011	235,854.	4,80	8,555.			0.049049
2	Total of line 1, column (d)				2		0.246862
3	Average distribution ratio for the number of years the foundation	5-year base period — divide the tota has been in existence if less than 5 y	on line 2 by 5, or by the ears		3		0.049372
4	Enter the net value of noncharita	able-use assets for 2016 from Part X,	line 5		4		6,226,737.
5	Multiply line 4 by line 3				5		307,426.
6	Enter 1% of net investment inco	me (1% of Part I, line 27b)			6	1	2,794.
7	Add lines 5 and 6				7		310,220.
8	Enter qualifying distributions from	,			8		305,937.
	If line 8 is equal to or greater that	an line 7, check the box in Part VI, line	e 1b, and complete that part	using a 1%	tax	rate See the	

Form	1990-PF (2016) The Allyn Foundation, Inc.		7025		. 	P	age 4
	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	– see	instr	uction	s)	2. 46	\$860 ·
1 2	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.			ککنشند		.S	
	Date of ruling or determination letter (attach copy of letter if necessary – see instructions)	_	۱.				
D	Domestic foundations that meet the section 4940(e) requirements in Part V,		1	 	-	5,5	87.
_	check here . All other demonstrations onto 20% of lane 27b			54an	,	F # .	
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		and the National	[4.080040.v000	Carrio C. 20000400		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2				
3	Add lines 1 and 2.		3	<u> </u>			<u>0.</u> 87.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4			5,5	0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		5	<u> </u>		5 5	
6	Credits/Payments	• •	3	- 788		درد	87.
٠,)	1		3
	Exempt foreign organizations — tax withheld at source	100.			·	23 j	\$ \ \
	Tax paid with application for extension of time to file (Form 8868) 6 c			%	. '' ≫		
	Backup withholding erroneously withheld						. R
7	Total credits and payments Add lines 6a through 6d		t ",		*		300.
8	Enter any penalty for underpayment of estimated tax. Check here		8	 		2,0	100.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9			2 7	787.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10			2,1	0.
11	Enter the amount of line 10 to be. Credited to 2017 estimated tax	· •					
	t.VII.A Statements Regarding Activities	···		·			
				_	90	Yes	No
1 a	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?				1 a	163	X
_							┝奎
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?				16		x
			,			۵.	
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials public or distributed by the foundation in connection with the activities	nsnec	,			4	
c	Did the foundation file Form 1120-POL for this year?				1 c		x
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				3,	i.	
	(1) On the foundation . * \$ (2) On foundation managers * \$,		
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed of	n				7	
_	foundation managers \$						1
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2	Wall . 1	X
	If 'Yes,' attach a detailed descπption of the activities				i i		}
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				Car		نىشىداد
	•			• •	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	• • •			4a		X
	olf 'Yes,' has it filed a tax return on Form 990-T for this year?				4 b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
_	If 'Yes,' attach the statement required by General Instruction T				1.00	: 4	£ 7
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						14
	By language in the governing instrument, or				3"	2.1	
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that co 						: 5
_	with the state law remain in the governing instrument?				6	X	├
	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col (c), and Part XV				7	X	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)	-		_		, (68	
	See States Registered In			_		,	
b	o 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 ⁵ If 'No,' attach explanation	•	• • •		8 b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	4942(<u>(5)</u>		i.		
	for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' complete	rail.	AIV .		9	l	X

BAA

Form 990-PF (2016)

	1990-Pr (2016) The Allyn Foundation, Inc.	23-70255	89	P8	age 5
Rai	rt VII-A Statements Regarding Activities (continued)			T 12 T	 _
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	Yes	No X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified pe advisory privileges? If "Yes," attach statement (see instructions).	rson had	. 12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applic	cation?	. 13	Х	
14	Website address	no (978)	887	-246	4
15	Located at 119 Bare Hill Road, Boxford, MA ZIP+4 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	01921			
	and enter the amount of tax-exempt interest received or accrued during the year				니 ——
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority bank, securities, or other financial account in a foreign country?	overa	. 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				
Pa	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		>36'7,	Yes	No
1 a	During the year did the foundation (either directly or indirectly)				ĝ`:
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No		-	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes XNo	150	, . <u>,</u> ,	, š
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No			S
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes X No) 		3 Å
	(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		******		ěž.
	of government service, if terminating within 90 days)	Yes X No)
ı	o 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)?		. 1 b	. X.	D2 _3
	Organizations relying on a current notice regarding disaster assistance check here	► 📗		6.3	. 1
(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 2016?		1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		,		
á	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?	Yes X No	ek.		
	If 'Yes,' list the years ▶ 20 _ , 20 _ , 20 _ , 20			= 3	,
ı	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)	0	. 2 b	[X
(the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			3	<u> </u>
•	► 20 _ , 20 _ , 20				Ĭ.
3 8	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X No			
ı	o If 'Yes,' did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to	- -		نفد	
	determine if the foundation had excess business holdings in 2016)		. 3 b		X
4 :	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		. 4a	- Q D.C.C.	х
ı	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 2016?		. 4b		Х
BAA		<u> </u>	Form 99		
	•	,		~ /,	_~ .~)

Form 990-PF (2016) The Allyn Foundat: Part VII-B Statements Regarding Activit	ion, Inc.	A720 May Be Ren	23-702	25589	Page 6
5a During the year did the foundation pay or incur a		1 47 20 May De Neg	unea (continuea)	3.00	
(1) Carry on propaganda, or otherwise attempt t	•	ection 4945(e))?	Yes X	No	
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registratio	election (see section 495	55), or to carry	Yes X	No No	
(3) Provide a grant to an individual for travel, stu	idy, or other similar purp	oses?	Yes X	No ,	
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions).	n a chantable, etc , organ	zation described	Yes X	No A	
(5) Provide for any purpose other than religious educational purposes, or for the prevention of	, charitable, scientific, lite of cruelty to children or a	erary, or nimals?	Yes X	No .	
b If any answer is 'Yes' to 5a(1)—(5), did any of the described in Regulations section 53 4945 or in a (see instructions)?	e transactions fail to qual current notice regarding	disaster assistance		5	à À
Organizations relying on a current notice regardi				1	7 1 7
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	foundation claim exempt	tion from the	 ∏Yes	No .	
If 'Yes,' attach the statement required by Regula	•			1	
6 a Did the foundation, during the year, receive any on a personal benefit contract?	funds, directly or indirect	y, to pay premiums	Yes X	No	
b Did the foundation, during the year, pay premiun	ns, directly or indirectly, o	n a personal benefit con	tract?	6	b X
If 'Yes' to 6b, file Form 8870				,	× , (
7 a At any time during the tax year, was the foundati				No	
b if 'Yes,' did the foundation receive any proceeds					
Part VIII Information About Officers, D and Contractors	irectors, i rustees,	Foundation Manag	gers, Hignly Paid i	=mploye	es,
1 List all officers, directors, trustees, foundation	n managers and their c	ompensation (see inst	ructions)	 	
	(b) Title, and average	(c)Compensation	(d)Contributions to	T.,_	
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	émployee benefit plans and deferred compensation	(e) Exper other	nse account, allowances
Cynthia A. Stuhley					
2110 Casey Key Road	President, Dir.				
Nokomis FL 34275	4.00	0.	0.	<u> </u>	0.
John_WAllyn, Jr					
119 Bare Hill Road Boxford MA 01921	Vice Pres., Dir.	•			•
Boxford MA 01921 Sharon A. Taylor	3.00	0.	0.		0.
539 Princeton Road	Director				
Hinsdale IL 60521	2.00	0.	0.		0.
12 0032	2.00	- 0.			
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1 – see ir	nstructions). If none, e	nter 'NONE	E.'
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Exper other	nse account, allowances
None					
		. <u></u>		 	
				 	
				<u> </u>	
Total number of other employees paid over \$50,000.		<u> </u>	· · · · · · · · · · · · · · · · · · ·		None
BAA	TEEA0306 12	16/16		Form 9	90-PF (2016)

Form	990-PF (2016) The Allyn Foundation, Inc.	23-7025589 Pa	ge 7
Pař	Information About Officers, Directors, Trustees, Foundation Managers, High and Contractors (continued)	lly Paid Employees,	
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter 'N	IONE.'	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensatio	n
Non	e		
		ļ	
Total	number of others receiving over \$50,000 for professional services	No	one
		110	JIIC
Par	t IX-A Summary of Direct Charitable Activities		
l ist the	of foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of		
organi	e foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of zations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses	
1	None		
			0.
2			
3			
4			
Dar	IX-B Summary of Program-Related Investments (see instructions)		
_	chbe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount	
1	None	7 1110411	
•	MOTE		
			0
2			
All o	ther program-related investments. See instructions		

TEEA0307 12/16/16

None

Form 990-PF (2016)

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Form **990-PF** (2016)

Pai	see instructions)	gn foui	ndations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes Average monthly fair market value of securities	1	
		1 a	6,197,242.
	Average of monthly cash balances	1 b	124,318.
•	Fair market value of all other assets (see instructions)	1 c	0.
•	Total (add lines 1a, b, and c)	1 d	6,321,560.
•	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	6,321,560.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	94,823.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	6,226,737.
6	Minimum investment return. Enter 5% of line 5	6	311,337.
Pai	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here and do not complete this part.)	found	lations
1	Minimum investment return from Part X, line 6	1	311,337.
2 a	Tax on investment income for 2016 from Part VI, line 5	. 17	
	Income tax for 2016 (This does not include the tax from Part VI)	S	
	Add lines 2a and 2b	2 c	5,587.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	305,750.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	305,750.
6	Deduction from distributable amount (see instructions)	6	33377301
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	305,750.
Pai	t XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	,، دُدُّ 1 a	305,937.
ı	Program-related investments — total from Part IX-B	1 b	0.
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 Suitability test (prior IRS approval required)	У. За	
t	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	305,937.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	305,937.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the forgualities for the section 4940(e) reduction of tax in those years	undatio	n

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
Distributable amount for 2016 from Part XI, line 7				205 750
2 Undistributed income, if any, as of the end of 2016				305,750.
a Enter amount for 2015 only				
b Total for prior years 20 , 20 , 20	***			
3 Excess distributions carryover, if any, to 2016	· 3	<i>} ∭"</i> .	χ	
a From 2011 0 .				
b From 2012 0 .				
c From 2013 0 .				
d From 2014 0 .	-			
6 From 2015				
f Total of lines 3a through e	6,333.			
XII, line 4 \$ 305, 937.				
a Applied to 2015, but not more than line 2a			0	
		* 48** 10.38%/s		35 8 8
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus		3 3 3		
(Election required — see instructions) d Applied to 2016 distributable amount	0.			
e Remaining amount distributed out of corpus	- A - A			299,417.
5 Excess distributions carryover applied to 2016	6,520. 6,333.			<u> </u>
(If an amount appears in column (d), the	0,333.		-	0,333.
same amount must be shown in column (a))				
6 Enter the net total of each column as				
indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	6,520.	· • · · · · · · · · · · · · · · · · · ·		
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 ` `	<u> </u>	0.		
d Subtract line 6c from line 6b Taxable				
amount – see instructions		0.		
Undistributed income for 2015. Subtract line 4a from line 2a. Taxable amount — see instructions			2	
ine 20. Taxable diffount — See Institutions.		& 3. {	0.	<u> </u>
f Undistributed income for 2016 Subtract lines				
4d and 5 from line 1 This amount must be distributed in 2017				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required — see instructions)	0.			
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions)				
applied on line 5 or line 7 (see instructions)	0.	* * * * * * * * * * * * * * * * * * * *		
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	6,520.			
10 Analysis of line 9			U 78 W .	
a Excess from 2012 0.	· · · · · .		***	
b Excess from 2013 0.] 🕌 🖔		į X	
c Excess from 2014 0.			\$ * \bar{\bar{\bar{\bar{\bar{\bar{\bar{	
d Excess from 2015 . 0.		. *	- **	
e Excess from 2016 6,520.	<u>[</u>		*	* * * ***
DAA				Form 990-PF (2016)

Form 990-PF (2016) The Allyn Foundat	ion, Inc.			23-7025589	9 Page 10
Part XIV Private Operating Foundati					N/A
1 a If the foundation has received a ruling or dete is effective for 2016, enter the date of the rulin	-				
b Check box to indicate whether the foundation		ing foundation descri		4942(J)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	 	Prior 3 years		(e) Total
investment return from Part X for each year listed	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)		<u> </u>			
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalities)					
			 	 	
(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			<u></u>		<u> </u>
Part XV Supplementary Information (assets at any time during the			foundation ha	d \$5,000 or more	e in
Information Regarding Foundation Manage a List any managers of the foundation who have close of any tax year (but only if they have conversely to the second second second second second second second second second sec	e contributed more	than 2% of the total n \$5,000) (See secti	contributions receive on 507(d)(2))	ed by the foundation t	pefore the
		_			
b List any managers of the foundation who own a partnership or other entity) of which the four None	10% or more of the ndation has a 10%	ne stock of a corporat or greater interest	ion (or an equally la	rge portion of the own	nership of
2 Information Regarding Contribution, Grant Check here X if the foundation only mal requests for funds if the foundation makes gr complete items 2a, b, c, and d	kes contributions to	preselected chanta	ble organizations an	d does not accept un ions under other cond	solicited litions,
a The name, address, and telephone number o	r e-mail address of	f the person to whom	applications should	be addressed	
N/A					
b The form in which applications should be sub-	mitted and informa	tion and materials th	ey should include		
N/A					
c Any submission deadlines					
N/A					
d Any restrictions or limitations on awards, such	as by geographic	al areas, charitable f	ields, kınds of ınstitu	itions, or other factors	
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	- 11	EEA0310 12/16/16		r	VIIII 220-77 (2010)

3 Grants and Contributions Paid During the Yo	ear or Approved for Fut	ure Paymen	t	
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	ТООГРІОТІК	ļ	
a Paid during the year			Į į	
American Cancer Society				
P.O. Box 22178				0.000
Oklahoma City OK 73123		Exempt	Medical research	8,000.
American Heart Association				
208 S. LaSalle St., Suite 1500 Chicago IL 60604		Time - many to	Madia-1 manages	10 000
American Lung Association		Exempt	Medical research	10,000.
55 W. Wacker Drive, Suite 800				
Chicago IL 60601		Evennt	Medical research	3,000.
American Red Cross		DACINE	Tescaren	5,000.
P.O. Box 37839				
Boone IA 50037		Exempt	Family services	8,000.
Americares	İ			
88 Hamilton Ave.				
Stamford CT 06902		Exempt	Family services	5,000.
Appalachian Mountain Club			1	
5 Joy Street				
Boston MA 02108		Exempt	Environmental programs	1,000.
Art Institute of Chicago				
111 S. Michigan Ave.				
Chicago IL 60603	1	Exempt	Museum programs	5,000.
Associated Colleges of Illinois			i	
70 E. Lake St., Suite 1418				
Chicago IL 60601	1	Exempt	Education programs	3,000.
Assoc for Prevention of Family Violence	1			
735 N. Wisconsin St., Suite 101				
Elkhorn WI 53121 See Line 3a statement		Exempt	Family services	1,000.
See Line 3a statement				
			Į į	261,000.
				201,000.
		ļ	,	
Total			> 3a	305,000.
b Approved for future payment			T	
None		ŀ		
		l	}	
		ļ		
			ļ	
	}		1	
			1	
]		
Total				0.

Program service revenue a b	(a)	d business income	L'ACIDUCU L	y section 512, 513, or 514	(e)
a	Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions)
	—		code		-
V	 		 		-
	 		 	<u>-</u>	
d	 		+		
			│		
•	 		 		
g Fees and contracts from government agencies	 		 		
-					
2 Membership dues and assessments			-		· · · · · · · · · · · · · · · · · · ·
Interest on savings and temporary cash investments Dividends and interest from securities.			14	493.	
Dividends and interest from securities Net rental income or (loss) from real estate			14	186,576.	
• • •	<u> </u>		1. 1.	* * * * * * * * * * * * * * * * * * * *	
a Debt-financed property					
b Not debt-financed property	J				
6 Net rental income or (loss) from personal property	<u> </u>		↓		
7 Other investment income	L				
8 Gain or (loss) from sales of assets other than inventory			_		
9 Net income or (loss) from special events			_		
O Gross profit or (loss) from sales of inventory			1		
1 Other revenue				§	,
a					
b					
C					=.
d					
е					
2 Subtotal Add columns (b), (d), and (e)	,			187,069.	
3 Total. Add line 12, columns (b), (d), and (e)				13	187,069
ee worksheet in line 13 instructions to verify calculations	s)			-	
art XVI-B Relationship of Activities to the	e Accomp	lishment of Exem	pt Purpo	ses	
ine No. Explain below how each activity for which inc	ome is report	ed in column (e) of Part	XVI-A cont	ributed importantly to t	he
ine No. Explain below how each activity for which inc accomplishment of the foundation's exempt p	urposes (other	er than by providing fun	ds for such	purposes) (See instru	ctions)
one N/A					
		· · · ·			
				·	 · · · · · · · · · · · · · · · · · ·

Form 990 PF (2016) The Allyn Foundation, Inc. 23-7025589 Pair XVII | Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

			
Did the organization directly or indirectly eng described in section 501(c) of the Code (other relating to political organizations?	age in any of the following with any er than section 501(c)(3) organization	other organization ons) or in section 527,	Yes No
a Transfers from the reporting foundation to a	noncharitable exempt organization	of	
(1) Cash			1a(1) X
(2) Other assets			1 a (2) X
b Other transactions			
(1) Sales of assets to a noncharitable exem	pt organization		1 b (1) X
(2) Purchases of assets from a noncharitab	le exempt organization		1 b (2) X
(3) Rental of facilities, equipment, or other a	. •		1 b (3) X
			
(4) Reimbursement arrangements			1 b (4) X
(-,			1 b (5) X
(6) Performance of services or membership	•		1 b (6) X
c Sharing of facilities, equipment, mailing lists,	other assets, or paid employees.		1c X
d If the answer to any of the above is 'Yes,' co the goods, other assets, or services given by any transaction or sharing arrangement, sho	the reporting foundation if the four	ndation received less than fair mark	et value in
(a) Line no. (b) Amount involved (c) Name	of noncharitable exempt organization	(d) Description of transfers, transact	tions, and sharing arrangements
			
			
			
			
			
			
 2a Is the foundation directly or indirectly affiliate described in section 501(c) of the Code (other bif 'Yes,' complete the following schedule 	ed with, or related to, one or more ta er than section 501(c)(3)) or in secti	x-exempt organizations on 527?	Yes XNo
(a) Name of organization	(b) Type of organization	(c) Description	n of relationship
	 		
	 		
I lister and the state of a series is dealers that I have a series			and and below to an
Under penalties of penury, I declare that I have examine correct, and complete Declaration of preparer (other the	an taxpayer) is based on all information of which	•	May the IRS discuss this return with the
- Month	1 4/5/17	Vice President	preparer shown below (see instructions)?
Signature of officer or trustee	Date /	Title	Yes No
Print/Type preparer's \mathbe{4}me	Preparer's signature	Date Check self-emp	oved PTIN
Paid Non-D	aid Prepare		
Preparer Firm's name $\rightarrow Non-P$	ard LIEhal	Firm's EIN	
Jse Only Firm's address -			
		Phone no	
BAA			Form 990-PF (2016)

Form 990-PF, Page 1, Part I, Line 18 Line 18 Stmt

Taxes	Rev/Exp Book	Net Inv inc	Adj Net Inc	Charity Disb
2016 Form 990-PF estimated tax	2,800.	0.	0.	0.
2016 Delaware franchise tax	25.	0.	0.	0.
2016 Foreign taxes on dividends	148.	148.	148.	0.
2015 Form 990-PF final payment	26.	0.	0.	0.

Total 2,999. 148. 148. 0.

Form 990-PF, Page 1, Part I, Line 23 Line 23 Stmt

Other expenses	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Mail	258.	129.	129.	129.
Office supplies	174.	87.	87.	87.
Filing fees	25.	13.	13.	13.
Investment fees	113.	56.	56.	56.
Total	570.	285.	285.	285.

Form 990-PF, Page 4, Part VII-A, Line 8a States Registered In

ILLINOIS DELAWARE

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Recipient	If recipient is	Foun-	Purpose of	Person or
Name and address	an individual, show any	status	grant or contribution	Business Checkbox
(home or business)	relationship to any foundation manager or substantial contributor	of re- cipient		Amount
a Paid during the year				
Aurora Lakeland Medical Center				Person or
W3985 County Road NN				Business X
Elkhorn WI 53121		Exempt	Medical services	5,000.
Aurora University				Person or
347 S. Gladstone Ave.				Business X
Aurora IL 60506		Exempt	Education programs	5,000.
Big Brothers Big Sisters of Chicago				Person or
560 W. Lake St.				Business X
Chicago IL 60661		Exempt	Youth programs	3,000.
Boston Health Care for the Homeless				Person or
780 Albany Street				Business X
Boston MA 02118		Exempt	Medical services	1,000.

Name and address	If recipient is an individual, show any	Foun- dation status	Purpose of grant or contribution	Person or Business Checkbox
(home or business)	relationship to any foundation manager or substantial contributor	of re- cipient		Amount
a Paid during the year Boys & Girls Clubs of Chicago 550 W. Van Buren St , Suite 350				Person or Business X
Chicago IL 60607		Exempt	Youth programs	3,000.
Brigham & Women's Hospital			Pagame	Person or
116 Huntington Ave., 3rd Floor				Business X
Boston MA 02116		Exempt	Medical services	1,000.
Brookfield Zoo				Person or
3300 Golf Road				Business X
Brookfield IL 60513		Exempt	Zoo programs	2,000.
Chicago Botanic Garden				Person or
1000 Lake Cook Road				Business X
Glencoe IL 60022		Exempt	Environmental programs	5,000.
Chicago History Museum				Person or
1601 N. Clark St.				Business X
Chicago IL 60614		Exempt	Museum programs	3,000.
Chicago Symphony Orchestra				Person or
220 S. Michigan Ave.			Music programs	Business X
Chicago IL 60604 Children's Home & Aid Society		Exempt	Music programs	3,000. Person or
125 S Wacker Dr., 14th Floor				Business X
Chicago IL 60606		Exempt	Youth services	5,000.
Citizens for Adequate Housing		Ditempe	Toden Bervices	Person or
40 Washington St.				Business X
Peabody MA 01960		Exempt	Family services	1,000.
Community Giving Tree				Person or
P.O. Box 508				Business X
West Boxford MA 01885		Exempt	Family services	3,000.
Daniel Murphy Scholarship Fund				Person or
309 West Washington Street, Suite 1250				Business X
Chicago IL 60606		Exempt	Scholarships	1,000.
Doctors Without Borders				Person or
P.O. Box 5030				Business X
Hagerstown MD 21741		Exempt	Medical services	2,000.
Emmaus House				Person or
P.O. Box 568 Haverhill MA 01831		Exempt	Individual services	Business X
Evans Scholars Foundation		EXCUIPE	individual services	2,000. Person or
1 Brian Road				Business X
Golf IL 60029		Exempt	Scholarships	1,000.
Friends of Kishwauketoe		1		Person or
P.O. Box 580				Business X
Williams Bay WI 53191		Exempt	Environmental programs	1,000.
Fund for Johns Hopkins Medicine				Person or
750 E. Pratt St , 17th Floor				Business X
Baltimore MD 21202		Exempt	Medical research	3,000.

Recipient Name and address	If recipient is an individual, show any	Foun- dation status	Purpose of grant or contribution	Person or Business Checkbox
(home or business)	relationship to	of re-		
	any foundation	cipient		Amount
	manager or			
	substantial			
	contributor			
a Paid during the year				
Girl Scouts of Chicago				Person or
20 S. Clark St., Suite 200				Business X
Chicago IL 60603		Exempt	Youth programs	3,000.
Girls Inc of the Seaport Area			<u> </u>	Person or
2 Harris Street				Business X
Newburyport MA 01950		Exempt	Youth services	1,000.
Greater Boston Food Bank				Person or
70 South Bay Avenue				Business X
Boston MA 02118		Exempt	Community services	1,000.
Greater Chicago Food Depository				Person or
4100 W. Ann Lurie Place				Business X
Chicago IL 60632		Exempt	Community services	5,000.
Hadley Institute for the Blind				Person or
700 Elm St.				Business X
Winnetka IL 60093	·	Exempt	Programs for the blind	8,000.
Harbor/COV				Person or
P.O. Box 505754				Business X
Chelsea MA 02150		Exempt	Social services	1,000.
Heartland_Alliance				Person or
208 S LaSalle St , Suite 1300				Business X
Chicago IL 60604		Exempt	Social services	5,000.
Hermitage Artist Retreat	 -			Person or
6660 Manasota Key Road				Business X
Englewood FL 34223	-	Exempt_	Performing arts programs	7,500.
Hinsdale Hospital Foundation				Person or
P.O. Box 130		<u> -</u>		Business X
Hinsdale IL 60522		Exempt	Medical services	2,000.
Illinois Institute of Technology				Person or
10 W. 35th St., Suite 1700				Business X
<u>Chicago</u> <u>IL</u> 60616 Illinois Masonic Medical Center		Exempt	Education programs	3,000. Person or
3075 Highland Parkway, Suite 600				l —
Downers Grove IL 60515		 Exempt	Medical services	Business X
Infant Welfare Society of Evanston		Exempt	Medical services	3,000. Person or
2200 Main St.				Business X
Evanston IL 60202			Youth services	5,000.
Jeanne Geiger Crisis Center		Exempt	TOUCH SELVICES	Person or
2 Harris Street				Business X
Newburyport MA 01950		Exempt	Adult services	1,000.
JourneyCare Foundation		DACINDE	AMULE BELVICES	Person or
2050 Claire Ct.				Business X
GlenviewIL 60025		Exempt	Elderly services	3,000.
Junior Achievement of Chicago			cci_	Person or
651 W Washington St , Suite 404				Business X
Chicago IL 60661		Exempt	Youth programs	3,000.
<u> </u>		- BACILIPE	Touch programs	3,000.

Recipient Name and address	if recipient is an individual, show any	Foun- dation status	Purpose of grant or contribution	Person or Business Checkbox
(home or business)	relationship to any foundation manager or substantial contributor	of re- cipient		Amount
a Paid during the year	in		;	
Juvenile Diabetes Research Foundation				Person or
1 N. La Salle St., Suite 1200				Business X
Chicago IL 60603		Exempt	Medical research	4,000.
Lincoln Park Zoo				Person or
2001 N. Clark St.				Business X
Chicago IL 60614		Exempt	Zoo programs	3,000.
Lucy's Love Bus				Person or
P.O. Box 464				Business X
Amesbury MA 01913		Exempt	Cancer services	1,000.
Lurie Children's Hospital				Person or
225 E. Chicago Ave.				Business X
Chicago IL 60611		Exempt	Medical services	5,000.
MSPCA - Nevins Farm				Person or
400 Broadway			Animal protection	Business X
Methuen MA 01844 MSPCC		Ехещри	Animal protection	2,000. Person or
3815 Washington Street				Business X
Boston MA 02130		Evennt	Youth services	1,000.
Make A Wish of Central and No Florida		Exempt	TOUCH SELVICES	Person or
3430 Magic Oak Lane				Business X
Sarasota FL 34232		Exempt	Family programs	1,000.
Make A Wish Foundation	 	Ditcpc	ramily programs	Person or
640 N. LaSalle Drive				Business X
Chicago IL 60654		Exempt	Family programs	1,000.
Make A Wish Foundation				Person or
One Bullfinch Place, 2nd Floor				Business X
Boston MA 02114		Exempt	Family programs	1,000.
Merrimack Valley Habitat for Humanity				Person or
60 Island Street, 2nd Floor				Business X
Lawrence MA 01840		Exempt	Community services	
Misericordia Home				Person or
6300 N. Ridge Avenue				Business X
Chicago IL 60660		Exempt	Disability services	2,000.
Morton Arboretum				Person or
4100 Illinois 53				Business X
<u>Lisle</u> <u>IL</u> 60532		Exempt	Environmental programs	2,000.
Museum of Science and Industry				Person or
5700 S. Lake Shore Drive				Business X
Chicago IL 60637		Exempt	Museum programs	3,000.
Music Institute of Chicago				Person or
300 Green Bay Road			Music program	Business X
Winnetka IL 60093		Exempt	Music programs	1,000. Person or
National Forest Foundation Building 27, Suite 3, Fort Missoula Road				Business X
Missoula MT 59804		Event	Environmental programs	7,500.
FIESSOULA FIE 59804	l	Evenibr	I minationmental brodiging	1,500.

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to	Foun- dation status of re-	Purpose of grant or contribution	Person or Business Checkbox
(nome of business)	any foundation manager or substantial contributor	cipient		Amount
a Paid during the year				
National Multiple Sclerosis Society				Person or
P.O. Box 4527				Business X
New York NY 10163		Exempt	Medical research	3,000.
North Shore Senior Center				Person or
161 Northfield Rd.				Business X
Northfield IL 60093	····	Exempt	Elderly services	1,000.
NorthShore University HealthSystem				Person or
1033 University Place, Suite 450				Business X
Evanston IL 60201		Exempt	Medical services	10,000.
Northwestern Settlement				Person or
1400 W. Augustana Blvd.				Business X
Chicago IL 60642 Parkinson's Disease Foundation		Exempt	Family services	4,000. Person or
1359 Broadway Ave., Suite 1509				I_
New York NY 10018			Medical research	Business X 3,000.
Pettengill House		EXCILIPE	Medical research	Person or
13 Lafayette Road				Business X
Salisbury MA 01952		Exempt	Family services	1,000.
Pillars Community Services		Бистре	ruminy bervices	Person or
333 N. LaGrange Rd.				Business X
LaGrange Park IL 60526		Exempt	Family services	5,000.
Pine Street Inn			1	Person or
444 Harrison Avenue				Business X
Boston MA 02118		Exempt	Individual services	1,000.
Project Bread				Person or
145 Border Street				Business X
East Boston MA 02128		Exempt	Community services	1,000.
Purdue Foundation				Person or
625 Harrison Street, Room 1177				Business X
West Lafayette IN 47907		Exempt	Animal services	2,000.
Ravinia Festival Association				Person or
200 Ravinia Park Road				Business X
Highland Park IL 60035		Exempt	Music programs	5,000.
Ray Graham Association				Person or
901 Warrensville Road, Suite 500			Di-11111	Business X
Lisle IL 60532	_	Exempt	Disability services	5,000.
Reading Is Fundamental 1730 Rhode Island Ave NW, Suite 1100				Person or
Washington DC 20036		Exempt	Education programs	Business X
Rehabilitation Institute of Chicago		EXCILIPL	Education programs	2,000. Person or
345 E. Superior St.				Business X
Chicago IL 60611		Exempt	Medical services	6,000.
Ringling College of Art and Design		DACINGE	BCIVICES	Person or
2700 North Tamiami Trail				Business X
Sarasota FL 34234		Exempt	Educational services	5,000.
Darasoca F1 34234	<u> </u>	Pyembr	Ladeactonal Services	5,000.

Form 990-PF, Page 11, Part XV, line 3a Line 3a statement

Recipient Name and address	If recipient is an individual, show any	Foun- dation status	Purpose of grant or contribution	Person or Business Checkbox
(home or business)	relationship to any foundation manager or substantial contributor	of re- cipient		Amount
a Paid during the year				
Rodman Ride For Kids				Person or
10 Lincoln Road				Business X
Foxborough MA 02035	_	Exempt	Youth services	6,000.
Rosie's Place				Person or
889 Harrison Avenue				Business X
Boston MA 02118		Exempt	Individual services	1,000.
Rush University Medical Center				Person or
1700 W Van Buren St., Suite 250				Business X
Chicago IL 60612		Exempt	Medical services	5,000.
Save The Children				Person or
501 King's Highway East				Business X
Fairfield CT 06825	·- <u>-</u> -	Exempt	Child poverty programs	5,000.
Sierra Club Foundation				Person or
85 Second St., 2nd Floor		<u> -</u>		Business X
San Francisco CA 94105		Exempt	Environmental programs	10,000.
Talk About Curing Autism				Person or
2222 Martin, Suite 140		<u> -</u>		Business X
<u>Irvine</u> <u>CA</u> 92612		Exempt	Family services	10,000.
Teach For America				Person or
25 Broadway, 12th Floor				Business X
New York NY 10004		Exempt	Education programs	5,000. Person or
The Boston Foundation 75 Arlington St., 10th Floor				1_ —
Boston MA 02116		Exempt	Community services	
The Community House - Charlie's Gift	 	EXCIIDE	Community services	3,000. Person or
415 W. 8th St.				Business X
Hinsdale IL 60521		Exempt	Community services	5,000.
The Field Museum		BACILIPE	Community Services	Person or
1400 S. Lake Shore Dr.				Business X
Chicago IL 60605		Exempt	Museum programs	3,000.
The Wetlands Initiative		DACINGE	Museum programs	Person or
53 W Jackson Blvd., Suite 1015				Business X
Chicago IL 60604		Exempt	Environmental programs	1,000.
United Cerebral Palsy		231011190	Environmental programs	Person or
547 W. Jackson Blvd., Suite 225				Business X
Chicago IL 60661		Exempt	Medical research	2,000.
University of Michigan Trauma Burn Center		1		Person or
1500 E Medical Center Dr , Room UH-1C435				Business X
Ann Arbor MI 48109		Exempt	Medical services	2,000.
Urban Gateways		1		Person or
205 W Randolph St , Suite 1700				Business X
Chicago IL 60606		Exempt	Education programs	3,000.
Volunteer Center of the New Trier Township	<u> </u>		1	Person or
520 Glendale Ave , Suite 211				Business X
Winnetka IL 60093		Exempt	Community services	1,000.

Continued

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foun- dation status of re- cipient	Purpose of grant or contribution	Person or Business Checkbox Amount
Walworth County Arts Council P.O. Box 446 Delavan WI 53115 Wellness House 131 N. County Line Road		Exempt	Community services	Person or Business X 1,000. Person or Business X
Hinsdale IL 60521 Year Up 45 Milk Street, 9th Floor Boston MA 02109		Exempt Exempt	Individual services Youth services	5,000. Person or Business X 1,000.

Total

261,000.

Form 990-PF, Page 1, Part I
Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CT Corporation System	Representation	652.	0.	0.	652.
Total		652.	<u> </u>	0.	652.

Form 990-PF, Page 2, Part II, Line 10b L-10b Stmt

	End of	Year
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value
2100 shs Altria Group common	9,146.	142,002.
9290 shs America Movil SAB common	23,836.	116,775.
4848 shs Apartment Investment & Management Co. common	72,978.	220,342.
4460 shs BP PLC common	15,772.	166,715.
1800 shs Bank of New York Mellon Corp. common	15,712.	85,284.
502 shs ConocoPhillips common	11,768.	25,170.
600 shs International Business Machines common	8,063.	99,594.
484 shs Kraft Heinz common	2,124.	42,263.
365 shs Pepsico common	2,056.	38,190.
9000 shs Pfizer Inc. common	30,188.	292,320.
2100 shs Philip Morris International common	20,842.	192,129.

Form 990-PF, Page 2, Part II, Line 10b

L-10b Stmt

Continued

Line 10b - Investments - Corporate Stock:	End of Year	
	Book Value	Fair Market Value
251 shs Phillips 66 common	3,497.	21,689
9290 Telesites SAB DE CV Series L common	5,365.	4,459
800 shs Time Warner Inc. common	23,939.	77,224
15500 shs Vanguard 500 Index Fund	576,112.	3,201,835
2908.016 shs Vanguard Total International Stock Fund	90,000.	71,624

Form 990-PF, Page 2, Part II, Line 10c

L-10c Stmt

Line 10c - Investments - Corporate Bonds:	End of Year	
	Book Value	Fair Market Value
142000 shs Vanguard Long-Term Investment Grade Bond Fund	1,249,159.	1,428,520.
Total	1,249,159.	1,428,520.