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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491123007317

2016

OMB No 1545-0052

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation Do not enter social security numbers on this form as it may be made public.
 Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

Open to Public Inspection

		ndar year 2016, or tax year beginning 01-01-20	16 , a	nd er	nding 12-31-			
		indation H & LOIS J MCESSY FOUNDATION			A Employer Id	entification numbe	er	
Num	her and	street (or P O box number if mail is not delivered to street address)	Room/suite					
		VERETT ROAD		B Telephone number (see instructions)				
		, state or province, country, and ZIP or foreign postal code	<u> </u>		(847) 234-3427			
LAKE	FORES	6T, IL 60045			C If exemption	application is pendir	ig, check here	
G Cł	neck all	l that apply \square Initial return \square Initial return of a	former public charity		D 1. Foreign or	ganızatıons, check h	ere 🕨 🔲	
		☐ Final return ☐ Amended return				rganizations meeting k here and attach co		
u		Pe of organization ✓ Section 501(c)(3) exempt private f	Fa			undation status was		
_	•	pe or organization Section 501(c)(3) exempt private in 4947(a)(1) nonexempt charitable trust Section 501(c)			under sectio	n 507(b)(1)(A), che	ck here ► L	
			✓ Cash ☐ Accru	ıal	F If the founda	ation is in a 60-mont	h termination	
		from Part II, col (c), \$ 2,937,870	be on cash basis)		under sectio	n 507(b)(1)(B), ched	ck here	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and				(d) Disbursements	
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	expenses per books	(b)	Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)	
	1	Contributions, gifts, grants, etc , received (attach schedule)	500,000					
	2	Check ► ☐ If the foundation is not required to attach						
	_	Sch B						
	3	Interest on savings and temporary cash investments Dividends and interest from securities	20.165		39,165			
	4 5a	Gross rents	39,165		39,103			
	ь	Net rental income or (loss)						
ri e	6a	Net gain or (loss) from sale of assets not on line 10	99,615					
Revenue	ь	Gross sales price for all assets on line 6a 5,907,832						
2	7	Capital gain net income (from Part IV, line 2)			99,615			
	8	Net short-term capital gain						
	10a	Gross sales less returns and allowances						
	b	Less Cost of goods sold						
	С	Gross profit or (loss) (attach schedule)						
	11	Other income (attach schedule)						
	12	Total. Add lines 1 through 11	638,780		138,780			
	13	Compensation of officers, directors, trustees, etc	С		0		(
	14	Other employee salaries and wages						
ses	15 16a	Legal fees (attach schedule)	2,336		0			
E E	ь	Accounting fees (attach schedule)						
Ĕ	c	Other professional fees (attach schedule)	9,868		9,868		(
Operating and Administrative Expenses	17	Interest					1	
tra	18	Taxes (attach schedule) (see instructions)						
<u> </u>	19	Depreciation (attach schedule) and depletion						
Ę	20	Occupancy						
Ψ D	21	Travel, conferences, and meetings						
a .	22	Printing and publications	06-1 10		0		,	
Ę	23	Other expenses (attach schedule)	9 15					
era	24	Total operating and administrative expenses. Add lines 13 through 23	12,219		9,868			
o	25	Contributions, gifts, grants paid	279,750	-			279,750	
	26	Total expenses and disbursements. Add lines 24 and 25	291,969		9,868		279,750	
	27	Subtract line 26 from line 12	,		,		,	
	a	Excess of revenue over expenses and disbursements	346,811					
	ь	Net investment income (If negative, enter -0-)			128,912			
	С	Adjusted net income(If negative, enter -0-)						
or	Paner	work Reduction Act Notice, see instructions.			Cat No. 11280)	/ Fo	m QQ0-PF (2016	

0 **%**J

2,500,097

15

2,500,082

2,500,097

2,500,097

2,571,007

2,846,908

2,846,893

2,846,908

2,846,908

2

3

4

5

6

2,500,097

2,846,908

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

0

346,811

2,661,969

2,937,870

8 Assets 9 10a b C

11

12

13

14

15

16

17

18

19

20

21 22

23

24

25

26

28

29

31

Part III

2

Liabilities

Balances

Fund

ŏ

Assets 27

Net 30 Prepaid expenses and deferred charges

Investments—land, buildings, and equipment basis ▶ _

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

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) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

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

Analysis of Changes in Net Assets or Fund Balances

Less accumulated depreciation (attach schedule) ▶

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -_

Unrestricted . . .

Permanently restricted

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) .

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) -

Temporarily restricted

Investments—U S and state government obligations (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

(f)

Depreciation allowed

(or allowable)

(j)

te, o)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
Cost or	(g) other basis ense of sale	(h) Gain or (loss) (e) plus (f) minus (g)			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (k) Adjusted basis Excess of col (1) as of 12/31/69 over col (j), if any

(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h)) 2 99,615

Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0-

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

Net value of noncharitable-use assets

If gain, also enter in Part I, line 7

If (loss), enter -0- in Part I, line 7

3

1 193586

683 165955

136 633191

349,966,107

349,967,396

2,561,355

1,289

279,750

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Yes 🗸 No

Page 3

Capital gain net income or (net capital loss)

` ' '		•	•
Nas the foundation	n liable for	the section	4942 tax or

n the distributable amount of any year in the base period?

6

b C d e

b c d е

2

Part V

(e)

Gross sales price

(i)

FMV as of 12/31/69

a See Additional Data Table

in Part I, line 8

2011

2 Total of line 1, column (d)

5 Multiply line 4 by line 3

7 Add lines 5 and 6 .

instructions

a See Additional Data Table

f section 4940(d)(2) applies, leave this part	blank	
Vas the foundation liable for the section 494	2 tax o	

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part 1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a)

Base period years Calendar Adjusted qualifying distributions year (or tax year beginning in)

2015 2014 2013 2012

6 Enter 1% of net investment income (1% of Part I, line 27b)

8 Enter qualifying distributions from Part XII, line 4

1,236,950

number of years the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5

164,786 113,450

124,750

126,260

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

1,460 5,422 3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the

104,517

2,260

4,896

2

3

4

5

6

7

8

(d)

Distribution ratio

(col (b) divided by col (c))

547 323009 33 657271 77 705479 23 286610 **5a** During the year did the foundation pay or incur any amount to

Page **6**

	(1) Carry on propaganda, or otherv	•	. , , , ,	∐ Yes 🗹	No			
	(2) Influence the outcome of any s		• • • • • • • • • • • • • • • • • • • •					
	on, directly or indirectly, any vo			·· 🗌 Yes 🗸	No			
	(3) Provide a grant to an individual	☐ Yes 🗸	No					
	(4) Provide a grant to an organization							
	ın section 4945(d)(4)(A)? (see i	· · 🗌 Yes 🗸	No					
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or							
	educational purposes, or for the prevention of cruelty to children or animals?							
b	If any answer is "Yes" to 5a(1)-(5),	=						
	Regulations section 53 4945 or in a		·	·	5b	-		
	Organizations relying on a current r]			
С	If the answer is "Yes" to question 5		•					
	tax because it maintained expenditu			·· Yes	No			
	If "Yes," attach the statement requi	· -	* *					
6 a	Did the foundation, during the year,			ıms on				
	a personal benefit contract?			¹ Yes ✓	No			
b	Did the foundation, during the year,	, pay premiums, directly or ind	irectly, on a personal be	nefit contract?	6b		No	
	If "Yes" to 6b, file Form 8870							
7a	At any time during the tax year, wa	• • • •		∟ Yes 💌	No			
ь	If yes, did the foundation receive ar	· · · · · · · · · · · · · · · · · · ·			7b			
Pa		Officers, Directors, Trust	ees, Foundation Ma	ınagers, Highly Paid Eı	mployees	,		
	and contractors							
1	List all officers, directors, truste	es, foundation managers ar	d their compensation		_			
		Title, and average	(c) Compensation (If	(d) Contributions to employee	Evno	200	ount	
	(a) Name and address	hours per week	not paid, enter	benefit plans and deferred		nse acc r allowa		
		(b) devoted to position	-0-)	compensation	(-,			
WILL	IAM H MCESSY	DIRECTOR	0	(0		0	
	W EVERETT ROAD	0 20						
	FOREST, IL 60045 J MCESSY	DIRECTOR	0	,				
	W EVERETT ROAD	0 20	٥		7		·	
	FOREST, IL 60045							
DAVI	D A LULLO	DIRECTOR	0	(0		C	
	MAN AND CUTLER LLP 111 W MONROE	0 20						
ST CHIC	AGO, IL 60603							
2	Compensation of five highest-pa	id employees (other than th	nose included on line 1	l—see instructions). If no	ne, enter "	NONE	."	
	(2)	Title, and average		Contributions to				
N	(a) ame and address of each employee pa		(c) Compensation	employee benefit		se acco		
	more than \$50,000	(b) devoted to position		plans and deferred (d) compensation	(e) other	allowal	nces	
NON	E			(11)				
Tota	I number of other employees paid ov	er \$50,000.						
		+20/0001 1 1 1 1			Form 99	0-PF	(2016)	
					10111199	~	(2010	

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly	Paid Employees,
3 Five highest-paid independent contractors for professional service	ces (see instructions). If none, ente	er "NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		• 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rel	evant statistical information such as the number	per of Expenses
organizations and other beneficiaries served, conferences convened, research papers produced 1 NONE	uced, etc	0
2		
3		
4		
-		
Part IX-B Summary of Program-Related Investments (see	instructions)	
Describe the two largest program-related investments made by the foundation during t	the tax year on lines 1 and 2	Amount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		. • 0
		Form 990-PF (2016)

3a 3h

4

5

279.750

279.750

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Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

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

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

3

4

5

125,490

125,490

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0

(d)

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Part XIII	Un

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Part XIII	Undistributed Income (see instructions)

b Total for prior years

d From 2014. . . .

From 2011.

b From 2012. . . . c From 2013. . .

e From 2015.

1 Distributable amount for 2016 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2016 a Enter amount for 2015 only.

Excess distributions carryover, if any, to 2016

f Total of lines 3a through e.

d Applied to 2016 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2016

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2017.

10 Analysis of line 9

a Excess from 2012. . .

d Excess from 2015. . .

e Excess from 2016. . .

c Excess from 2014. . . .

b Excess from 2013. .

(If an amount appears in column (d), the

6 Enter the net total of each column as

b 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. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2015 Subtract line 4a from line 2a Taxable 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

indicated below:

4 Qualifying distributions for 2016 from Part XII, line 4 🕨 \$ a Applied to 2015, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election

125.989 113,377

164 541

113.377 164,541

1.236.837

119,524

154.260

1.236.837 119,524 (a)

Corpus

1.760.268

154.260

1,914,528

125.989

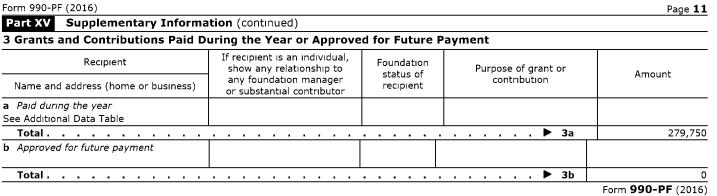
1,788,539

(b)

Years prior to 2015

(c)

2015



r gross	amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	512, 513, or 514	(e) Related or exem
	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function incom (See instruction
	and contracts from government agencies					
	ship dues and assessments					
	st on savings and temporary cash					
	ments			1.4	20.165	
	ds and interest from securities tal income or (loss) from real estate			14	39,165	
	inanced property					
	ebt-financed property					
	ntal income or (loss) from personal property					
Other in	nvestment income.					
	r (loss) from sales of assets other than					
	ory			18	99,615	
	ome or (loss) from special events					
	rofit or (loss) from sales of inventory					
	evenue a					
:						
: d						
Subtota Fotal. A	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)	ns)			138,780	
Subtota Total. A	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exem	pt Purposes f Part XVI-A contribut	Bted importantly to	138,
Subtota Fotal. A worksh t XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio Belationship of Activities to the Explain below how each activity for which	ns) e Accomplish income is reporte	ment of Exem	pt Purposes f Part XVI-A contribut	Bted importantly to	
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oubtota otal. A worksh t XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplish income is reporte	ment of Exem	pt Purposes f Part XVI-A contribut	ted importantly to	
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. (==	
Ш	Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Par	t XVII	Exempt Organi		alisi	icis io	and mansact		s allu i	Relatio	nsinps with Noi	iciiaiita	ыс		
1 Di	d the or) of the	rganization directly or in Code (other than section	directly enga- n 501(c)(3) o	ge in organi	any of the izations) o	e following with a or in section 527,	any , rel	other or ating to	ganızatıo political	n described in sections?	on 501		Yes	No
a Tr	ansfers	from the reporting foun	dation to a ne	oncha	ırıtable ex	empt organizatio	on o	f						
(1	L) Cash	1									. 1	.a(1)		No
(2	2) Othe	er assets									. 1	.a(2)		No
b 0	ther trar	nsactions												
(1	L) Sales	s of assets to a nonchar	ıtable exempt	t orga	nızatıon.						. 1	.b(1)		No
(2	2) Purcl	hases of assets from a r	noncharitable	exem	pt organiz	zation					1	.b(2)		No
(3	3) Rent	al of facilities, equipmen	nt, or other as	ssets.							1	.b(3)		No
(4	l) Reim	bursement arrangemer	its								. 1	b(4)		No
(5) Loan	s or loan guarantees.									. 1	.b(5)		No
(6) Perfo	rmance of services or m	embership or	fund	raising so	licitations					. 1	.b(6)		No
c Sh	naring o	f facılıtıes, equipment, r	nailing lists, c	ther .	assets, or	paid employees	i				. L	1 c		No
		wer to any of the above										lue		
		ods, other assets, or ser nsaction or sharing arra												
	any tra	nsaction of sharing area	ingement, site	J V V III	column (c	a) the value of the	iic g	,00as, 0t	4330	is, or services recer	veu			
(a) Lii	ne No	(b) Amount involved	(c) Name of	noncha	arıtable exe	mpt organization		(d) Desc	cription of	transfers, transactions,	, and sharır	ng arra	ngemen	its
2a Is	the fou	ndation directly or indire	ectly affiliated	with	, or relate	d to, one or mor	re ta	ax-exem	pt organi	zations				
de	scribed	in section 501(c) of the	Code (other	than	section 50	01(c)(3)) or in se	ectic	on 527?.			\square	Yes	✓ N	lo
b If	"Yes," c	complete the following s	chedule											
		(a) Name of organization	on		(1	b) Type of organiza	ation	ı		(c) Description	of relation	ship		
	1	1 1 6	* 1 1 ··			1.11								
		ler penalties of perjury, ny knowledge and belief												
Sigi		ch preparer has any kno		ni ecc,	, and com	piece Deciaracio) ii Oi	prepare	er (other	chan caxpayer, is be	asea on a	1111101	mation	1 01
Her		****	_			2017-05-03		\ **	****	1	May the IRS	discus	s this r	eturn
ı i e i								-)-			vith the pre	·		
	'	Signature of officer or t	rustee			Date		▼ Tit	tle	(see instr)?	<u> </u>	es 🗆 N	ło
	•	Print/Type preparer's	name	Dran	arer's Sigi	nature	T	Date			DTIN			
		Print/Type preparer's	, name	riep	arers Sigi	iature		Date		Check if self-	PTIN			
										employed ▶ □	Р	00050	386	
Paid	i t	DAVID A LULLO												
_	- parer	Firm's name & CUA	DMAN AND C) I D		1							
	Only	Thin S hanner City	PMAN AND C	UILER	LLP						Fırm's EIN	I ► 36	-21537	731
	~····y		.1 W MONROE	E FL 1	.8									
											Phone no	(312) 845-	3000
		CH	HICAGO, IL 6	0603	4099							\	,	
		i								1				

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (c) (d) (b) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 6188 NORTHERN TR CORP Р 2016-01-07 2016-04-22 28812 NORTHERN TR CORP Ρ 2016-01-07 2016-04-22 15000 JPMORGAN CHASE Р 2016-04-22 2016-05-24 15000 JPMORGAN CHASE Р 2016-04-22 2016-08-10 35514 02 MFB NORTHERN FDS ACTIVE Р 2016-08-09 2016-11-08 Ρ 7415 25 MFB NTHRN MULTI MGR GLB 2016-05-24 2016-11-08 Р 31041 07 MFB NTHRN INTL EQTY 2016-05-24 2016-11-08 Р 6646 83 MFB NTHRN FDS EMERGING 2016-08-09 2016-11-08 Ρ 8426 97 MFO DFA INVT DIMENSIONS 2016-05-24 2016-11-08 Р 2016-05-23 13698 63 MFO BLCKRCK FDS HGH YLD 2016-11-08 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) 440.390 433,187 7,203 2,041,225 2,016,964 24,261 950,529 950,325 204 987,428 950,325 37,103 363,308 380,000 -16,692 87,722 87,500 222 333,381 325,000 8,381 67,465 67,000 465 154,045 135,000 19,045 103,425 100,000 3,425 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (i) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 7,203 24,261 204 37,103 -16,692 222 8,381 465 19,045 3,425

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e.g., real estate, (b) (c) (d) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) Date acquired Date sold How acquired P-Purchase (mo, day, yr) (mo, day, yr) D-Donation 17123 29 BLCKRCK FDS HGH YLD Р 2016-05-24 2016-11-08 8838 38 MFB NTHRN FDS GLOBAL Ρ 2016-05-24 2016-11-08 5950 MFC FLEXSHARES TR MORINGSTAR Р 2016-05-24 2016-11-08 Р 2016-05-26 2016-11-10 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (q) 129,281 125,000 4.281 86,439 87,500 -1,061163.194 150,416 12,778 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (1) **(I)** Losses (from col (h)) (i) as of 12/31/69 (k) over col (1), if any 4,281 -1,061 12,778

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

Name and address (home or business)	any foundation manager or substantial contributor	recipient	
a Paid during the year			

a raid darning the year				
ANNUAL CATHOLIC APPEAL PO BOX 109098 CHICAGO, IL 60610	NONE	501(C)(3)	GENERAL USE OF CHARITY	6,000

<u>'</u>				
CARDINAL STRITCH RETREAT HOUSE 1300 STRITCH DR MUNDELEIN, IL 60060	NONE	501(C)(3)	GENERAL USE OF CHARITY	50,000
CATHOLIC EXTENSION	NONE	501(C)(3)	GENERAL USE OF CHARITY	5,000

MUNDELEIN, IL 60060				
CATHOLIC EXTENSION 150 S WACKER DRIVE 20TH FL CHICAGO, IL 60606	NONE	501(C)(3)	GENERAL USE OF CHARITY	5,000
FOCUS 603 PARK POINT DRIVE	NONE	501(C)(3)	GENERAL USE OF CHARITY	1.500

CATHOLIC EXTENSION 150 S WACKER DRIVE 20TH FL CHICAGO, IL 60606	NONE	501(C)(3)	GENERAL USE OF CHARITY	5,000
FOCUS 603 PARK POINT DRIVE GENESEE, CO 80401	NONE	501(C)(3)	GENERAL USE OF CHARITY	1,500
EDIENDS OF CARNELLY HOUSE	NONE	504(6)(3)	CENEDAL LICE OF CHARTE	F 900

CHICAGO, IL 60000				
FOCUS 603 PARK POINT DRIVE GENESEE, CO 80401	NONE	501(C)(3)	GENERAL USE OF CHARITY	1,500
FRIENDS OF SARNELLI HOUSE PO BOX 88234 MILWALIKEE WI 53288	NONE	501(C)(3)	GENERAL USE OF CHARITY	5,000

Total				279,750
FRIENDS OF SARNELLI HOUSE PO BOX 88234 MILWAUKEE, WI 53288	NONE	501(C)(3)	GENERAL USE OF CHARITY	5,000
GENESEE, CO 80401	NONE	501(C)(3)	GENERAL USE OF CHARITY	1,500

За

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

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

a Paid during the year				
JOHN PAUL II NEWMAN CENTER 700 S MORGAN STREET CHICAGO, IL 60607	NONE	501(C)(3)	GENERAL USE OF CHARITY	2,000
MARQUETTE UNIVERSITY OF LAW SCHOOL PO BOX 1881	NONE	501(C)(3)	GENERAL USE OF CHARITY	10,000

SCHOOL PO BOX 1881 MILWAUKEE, IL 53201				
MARYTOWN 1600 W PARK AVENUE LIBERTYVILLE, IL 60048	NONE	501(C)(3)	GENERAL USE OF CHARITY	2,500
MUNDELEIN SEMINARY	NONE	501(C)(3)	GENERAL USE OF CHARITY	40,000

MARYTOWN 1600 W PARK AVENUE LIBERTYVILLE, IL 60048	NONE	501(C)(3)	GENERAL USE OF CHARITY	2,500
MUNDELEIN SEMINARY 1000 EAST MAPLE AVENUE MUNDELEIN, IL 60060	NONE	501(C)(3)	GENERAL USE OF CHARITY	40,000
RELEVANT RADIO PO BOX 10707 GREEN BAY, WI 54307	NONE	501(C)(3)	GENERAL USE OF CHARITY	100,000

,				
MUNDELEIN SEMINARY 1000 EAST MAPLE AVENUE MUNDELEIN, IL 60060	NONE	501(C)(3)	GENERAL USE OF CHARITY	40,00
RELEVANT RADIO PO BOX 10707 GREEN BAY, WI 54307	NONE	501(C)(3)	GENERAL USE OF CHARITY	100,00
Total				279,750

3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

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

a Paid during the year				
ST FRANCIS DE SALES 148 MAIN STREET LAKE GENEVA, WI 53147	NONE	501(C)(3)	GENERAL USE OF CHARITY	17,250

NONE GENERAL USE OF CHARITY 5,000 ST MARTIN DE PORRES HIGH SCHOOL 501(C)(3) 515 S MARTIN LUTHER KING JR AVE WAUKEGAN, IL 60085 NONE 501(C)(3) GENERAL USE OF CHARITY

ST NORBERT COLLEGE 100 GRANT ST 2,500 DE PERE, WI 54115 NONE DATRICKS SHILDSHI 30.500

ST PATRICKS CHURCH 991 S WAUKEGAN LAKE FOREST, IL 60045	NONE	501(C)(3)	GENERAL USE OF CHARITY	30,500
WOODLAWN FOUNDATION 524 NORTH AVENUE 203	NONE	501(C)(3)	GENERAL USE OF CHARITY	2,500

WOODLAWN FOUNDATION NONE 501(C)(3) GENERAL USE OF CHARITY	RE FOREST, IL 60045				
524 NORTH AVENUE 203 NEW ROCHELLE, NY 10801	24 NORTH AVENUE 203	NONE	501(C)(3)	GENERAL USE OF CHARITY	2

DLN: 93491123007317

TY 2016 Investments Corporate Stock Schedule

Name: WILLIAM H & LOIS J MCESSY FOUNDATION

EIN: 36-4074862

Name of Stock	End of Year Book Value	End of Year Fair Market Value
2395 ALTRIA GRP INC	151,756	161,950
377 BERKSHIRE HATHAWAY	57,016	61,443
264 BLACKROCK INC COM	96,037	100,463
2208 CARNIVAL CORP	109,573	114,948
636 CHEVRON	68,604	74,857
2718 CISCO SYSTEMS INC.	85,215	82,138
2210 COCA COLA	92,578	91,627
528 DOMINION RES INC	38,574	40,440
645 DUKE ENERGY CORP	49,769	50,065
1173 ELI LILLY & CO	92,410	86,274
776 GENERAL DYNAMICS	126,771	133,984
4071 GENERAL ELECTRIC	121,642	128,644
1625 GENERAL MILLS	101,064	100,376
2566 INTEL CORP	89,068	93,069
3200 KINDER MORGAN	67,917	66,272
759 LOWES COS INC	51,358	53,980
1566 MERCK & CO INC	101,190	92,190
1291 MICROSOFT CORP	77,294	80,223
1119 NORFOLK SOUTHERN	111,972	120,930
1255 PAYCHECK INC.	69,078	76,404
2827 PFIZER INC.	91,802	91,821
1044 REYNOLDS AMERICAN	56,785	58,506
1593 VERIZON COMMUNICATIONS	75,642	85,034
2567 WELLS FARGO	125,718	141,467
2015 BLOCK, H&R INC	43,328	46,325
2674 CA INC COM	84,982	84,953
1283 CINCINNATI FINANCAL	90,463	97,187
670 HASBRO INC	56,105	52,119
1718 MOSAIC CO	46,482	50,389
159 NEW MARKET CORP	64,427	67,391

Name of Stock	End of Year Book Value	End of Year Fair Market Value
736 DIAGEO PLC SPON	76,387	76,500

efile GRAPHIC print - DO NOT PROCESS	S As Filed Data	-	DLI	N: 93491123007317	
TY 2016 Legal Fees Schedule					
<u>-</u>					
Nam	e: WILLIAM H 8	& LOIS J MCESSY	FOUNDATION		
EI	N: 36-4074862				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
CHAPMAN AND CUTLER LLP	2,336	0		0	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491123007317		
TY 2016 Other Expenses Schedule						
Name:	WILLIAM H & L	OIS J MCESSY FO	UNDATION			
EIN:	EIN: 36-4074862					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FILING FEE	15	0		0		

efile GRAPHIC print - DO NOT PROCES TY 2016 Other Professiona			DLN	N: 93491123007317
Name: WILLIAM H & LOIS J MCESSY FOUNDATION EIN: 36-4074862				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes

9,868

9,868

NORTHERN TRUST

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491123007317			
TY 2016 Substantial Contributors						
Schedule	Schedule					
			· ·			
Name:	WILLIAM H &	LOIS J MC	ESSY FOUNDATION			
EIN:	36-4074862					
Name			Address			
WILLIAM H MCESSY		1.3	1025 W EVERETT ROAD LAKE FOREST, IL 60045			

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491123007317					
Schedule B (Form 990, 990-EZ,	Schedu	ule of Contributors		OMB No 1545-0047	
or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www irs gov/form990				
Name of the organizat WILLIAM H & LOIS J MC			Employer id	lentification number	
			36-4074862		
Organization type (ch	eck one)				
Filers of:	Section:				
Form 990 or 990-EZ	rm 990 or 990-EZ				
	4947(a)(1) nonexempt char	ritable trust not treated as a priva	ate foundation		
	☐ 527 political organization				
Form 990-PF	✓ 501(c)(3) exempt private fo	undation			
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
	ation filing Form 990, 990-EZ, or 990-F r property) from any one contributor C				
Special Rules					
under sections received from a	tion described in section 501(c)(3) filing 509(a)(1) and 170(b)(1)(A)(vi), that che by one contributor, during the year, totaine 1h, or (ii) Form 990-EZ, line 1 Com	cked Schedule A (Form 990 or 9 al contributions of the greater of	990-EZ), Part II, line 13,	16a, or 16b, and that	
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 lf this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year					
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not 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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)					
For Paperwork Reduction for Form 990, 990-EZ, or 9	Act Notice, see the Instructions 0-PF	Cat No 30613X	Schedule B (Form 990	, 990-EZ, or 990-PF) (2016)	

Name of organization Employer identification number WILLIAM H & LOIS J MCESSY FOUNDATION 36-4074862 Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed (d) (a) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 WILLIAM H MCESSY Person **Payroll** 1025 W EVERETT ROAD \$500,000 Noncash LAKE FOREST, IL60045 (Complete Part II for noncash contributions) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (b) (c) (d) (a) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions) (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (c) (a) (b) (d) **Total contributions** Name, address, and ZIP + 4 No. Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (a) (c) (d) (b) No. **Total contributions** Type of contribution Name, address, and ZIP + 4 Person **Payroll** Noncash (Complete Part II for noncash contributions)

Schedule B (Form 99	90, 990-EZ, or 990-PF) (2016)		Page 3	
Name of organization WILLIAM H & LOIS J MCESSY FOUNDATION		Employer identification number		
		36-40	74862	
Part II	Noncash Property			
(a) No.from Part I	(see instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
=				
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
=		\$		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
=		\$		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		\$		
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received	
		s		
<u></u>		Schedule B (Form 9	990, 990-EZ, or 990-PF) (2016)	

Schedule B (Form	990, 990-EZ, or 990-PF) (2016)		Page 4
Name of organizat WILLIAM H & LOIS J	ion MCESSY FOUNDATION		Employer identification number 36-4074862
than \$1, organiza the year	000 for the year from any one contributo	r. Complete columns (a) thro of exclusively religious, chari actions.) ► \$	d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less for
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	t Relationship of transferor to transferee
(a)	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
No.from Part I	(b) Fullpose of glit	(c) ose of gift	(d) Description of now gift is field
	Transferee's name, address, and	(e) Transfer of gift	t Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 F	t Relationship of transferor to transferee
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift ZIP 4	t Relationship of transferor to transferee
			Schedule B (Form 990, 990-EZ, or 990-PF) (2016)