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EXTENDED TO NOVEMBER 15, 2017

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 separate instructions is at www.irs.gov/form990pf.

Depa	rtmen			social security numbers on n 990-PF and its separate				Open to Public Inspection
_		idar year 2016 or tax year beginning	30(10/1	ii 550-i i and its separate	, and e		.gov/,ccoop	Open to Papite Inspection
		foundation			<u>·</u>		A Employer identificatio	n number
	•							
	ΗE	VIRGINIA A GROOT FO	DUND	ATION			41-1570533	<u>L</u>
		nd street (or P O box number if mail is not delivered	to street	address)		Room/suite	B Telephone number	
		OVERLOOK DRIVE				L	(847) 615-	-8735
		own, state or province, country, and ZIP or fo E FOREST, IL 60045	oreign p	ostal code			C If exemption application is	pending, check here
		all that apply Initial return		Initial return of a fo	ormer public	charity	D 1 Foreign organization	s, check here
		Final return Address change		Amended return Name change			Foreign organizations m check here and attach or	eeting the 85% test,
Н (	_	type of organization: X Section 501(		empt private foundation			E If private foundation st	
		ction 4947(a)(1) nonexempt charitable trust		Other taxable private found			under section 507(b)(	I)(A), check here
		[ ,		ng method: X Cash	Acc	rual	F If the foundation is in a	
		Part II, col (c), line 16)		ther (specify)	heara l		under section 507(b)(1	1)(B), check here
	s irt l		i, colu	mn (d) must be on cash			( ) ( ) ( ) ( )	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) m necessarily equal the amounts in column (a) )	ay not	(a) Revenue and expenses per books		ome	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received		150,000.			N/A	<del> </del>
	2	Check Interest on savings and temporary	Sch B					G
	3	cash investments		10.	<u></u>	10.		STATEMENT 1
	4	Dividends and interest from securities			<del>\ \ -</del>			<del> </del>
		Gross rents		(3)	1			<del> </del>
	1 _	Net rental income or (loss)  Net gain or (loss) from sale of assets not on line 10		107	100		<u> </u>	
Jue	Ь	Gross sales price for all assets not on line to assets on line 6a		1 1	· \ \	<del>"</del>		<del> </del>
Revenue	7	Capital gain net income (from Part IV, line 2)		10	2	(47)/0.		
æ	8	Net short-term capital gain		100	600	101		
	9	Income modifications		10	1 1/1/2	$\sim$ $\sim$ $\sim$	<u> </u>	
	10a	Gross sales less returns and allowances		"	7/	/-:9/		
		Less Cost of goods sold		 		<u>(57</u>		<del></del>
		Gross profit or (loss)				<u>~</u>		OM A MENTEN O
	11	Other income		80. 150,090.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	$\frac{0}{10}$ .	<del></del>	STATEMENT 2
2017	12 13	Total Add lines 1 through 11  Compensation of officers, directors, trustees, etc		150,090.		0.	<del> </del>	0.
3	14	Other employee salaries and wages		20,311.		0.		20,311.
00	15	Pension plans, employee benefits		20,011				
and Administrative Expense	16a	Legal fees STMT	3	7,883.	<del> </del>	0.		0.
<b>3</b>	b	Accounting fees STMT	4	2,396.		0.		0.
, M	C	Other professional fees						
Ę, j	17	Interest			ļ <u></u>		<u> </u>	<del>                                     </del>
	18	Taxes STMT	5	2,891.	ļ <u></u>	0.		1,785.
<b>Z</b>	19	Depreciation and depletion			<u> </u>			
Ø E	20	Occupancy		16 222	<del> </del>	0.	<del> </del>	16 222
वुर्ज	21	Travel, conferences, and meetings Printing and publications		16,223.			-	16,223.
as	23	Other expenses STMT	6	32,375.		0.		32,075.
atin		Total operating and administrative	•	32,373.			<del>' </del>	
Operating		expenses Add lines 13 through 23		82,079.		0.	,	70,394.
ō	25	Contributions, gifts, grants paid		50,000.				50,000.
	26	Total expenses and disbursements.						
		Add lines 24 and 25		132,079.		0		120,394.
	27	Subtract line 26 from line 12:						
	١	Excess of revenue over expenses and disbursemen	nts	18,011.				
		Net investment income (if negative, enter -0-)			<del> </del>	10	N/A	
	C	Adjusted net income (if negative enter -0-)		İ	1		IN/A	í .

Form **990-PF** (2016)

1

Fo	rm 99	00-PF (2016) THE VIRGINIA A GROOT FO	UNDATION		1570531 Page 2
F	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	71,344.	89,355.	89,355.
	8	Accounts receivable ►	ĺ		
	l	Less, allowance for doubtful accounts			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts	<u>'                                    </u>		
	i	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
	}	Less: allowance for doubtful accounts			
Assets	8	Inventories for sale or use			
SS		Prepaid expenses and deferred charges			
٩	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock			·
	C	Investments - corporate bonds			
	11	Investments - land buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis			
		Less accumulated depreciation			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers - see the	1		
	<u> </u>	instructions. Also, see page 1, item I)	71,344.	89,355.	89,355.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iab	21	Mortgages and other notes payable		<u>-</u> -	
_	22	Other liabilities (describe >)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
	Ì	Foundations that follow SFAS 117, check here			
"		and complete lines 24 through 26 and lines 30 and 31	]		!
ĕ	24	Unrestricted	71,344.	89,355.	
<u>la</u>	25	Temporarily restricted			
Ba	26	Permanently restricted			
Net Assets or Fund Balances	1	Foundations that do not follow SFAS 117, check here	1		
Ē	}	and complete lines 27 through 31	}		
ls o	27	Capital stock, trust principal, or current funds			
se	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
Ä	29	Retained earnings, accumulated income, endowment, or other funds			
Rei	30	Total net assets or fund balances	71,344.	89,355.	
_	(		į į		
	31	Total liabilities and net assets/fund balances	71,344.	<u>89,355.</u>	<u></u>
P	art	III Analysis of Changes in Net Assets or Fund E	Balances		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	: 30		
		st agree with end-of-year figure reported on prior year's return)		1	71,344.
2		r amount from Part I, line 27a		2	18,011.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	89,355.
		eases not included in line 2 (itemize)	-	5	0.
		net assets or fund halances at end of year fline 4 minus line 5) - Part II o	olumn (h) line 30		89.355.

Form **990-PF** (2016)

Form 990-PF (2016) THE V	VIRGINIA A GROO	T FOUNI	DATION			4	11-1570	0531	Page 3
<del></del>	d Losses for Tax on Ir the kind(s) of property sold (e.g	<del></del>	Income	(b) F	low acquired	(a) Date	acquired	(d) Dat	a sold
	ouse; or common stock, 200 sh			D	low acquired - Purchase - Donation	(6) Date (mo.,	acquired day, yr.)	( <b>a</b> ) Dat (mo., da	
1a				ļ					
b · NONE	<u> </u>			ļ					
c d			<del></del>						
e				<del> </del>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				Gain or (loss) us (f) minus (		
a									
b		<del> </del>							
d									
e									
Complete only for assets showing g	jain in column (h) and owned by	the foundation	on 12/31/69	_		(I) Gains (	Col. (h) gain	minus	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any		CC	ol. (k), but	not less than s (from col. (I	1-0-) <b>or</b>	
a		ļ							
<u>b</u>		<del> </del>		-					
C d									
e		<del> </del>					<u>.</u> -		<del></del>
	∫ If gain, also ente	r in Part Lline		7					
2 Capital gain net income or (net capital	al loss) { If (loss), enter -0	)- ın Part I, line	, 7	}	2				
3 Net short-term capital gain or (loss) of figure, also enter in Part I, line 8, col	as defined in sections 1222(5) a			)					
If (loss), enter -0- in Part I, line 8  Part V   Qualification Und	ler Section 4940(e) for	r Reduced	Tax on Net	Inv	3   estment In	come		<del></del> -	
(For optional use by domestic private for									
		10 10(0) 101 011	not invocation in	.000	···/				
If section 4940(d)(2) applies, leave this [	part blank.								
Was the foundation liable for the section			•	rıod?				Yes	X No
If "Yes," the foundation does not qualify the state of the appropriate amount in each								<del></del>	
(a)		instructions bei	iore making any e					(d)	
Base periód years Calendar year (or tax year beginning i	(b) Adjusted qualifying dis	stributions	Net value of no	(c) onchar	rıtable-use asset	s	Distrib (col. (b) div	ution ratio	. (c))
2015		4,105.			110,70	5.			30712
2014		55,932.			143,74				58680
2013		35,282.			156,87				43637
2012		70,207.	·		216,02				24998
2011		57,355			273,36	0.		4	<u>46397</u>
<ul><li>2 Total of line 1, column (d)</li><li>3 Average distribution ratio for the 5-ye</li></ul>	ear hace period - divide the total	on line 2 by 5	or by the number	r of vo	arg	2		2.6	04424
the foundation has been in existence		on mie z by 5,	or by the number	i ui ye	di 2	3	-	5	20885
4 Enter the net value of noncharitable-	use assets for 2016 from Part X,	, line 5				4		104	,560.
5 Multiply line 4 by line 3						5		54	,464.
6 Enter 1% of net investment income (	1% of Part I, line 27b)					6	<del> </del>	<del></del>	0.
7 Add lines 5 and 6						7	-	54	,464.
8 Enter qualifying distributions from Pa					-	8		120	,394.
If line 8 is equal to or greater than lin	e 7, check the box in Part VI, lin	e 1b, and comp	lete that part usi	ng a 1	% tax rate.				

	m 990-PF (2016) THE VIRGINIA A GROOT FOUNDATION		<u> 15705</u>			age 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948 -	see in	stru	ction	ıs)
18	a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.	1				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
ŧ	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🗓 and enter 1%	1_1_				_0.
	ef Part I, line 27b					
(	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5				0.
6	Credits/Payments:					
ä	a 2016 estimated tax payments and 2015 overpayment credited to 2016 6a 720					
ŀ	Exempt foreign organizations - tax withheld at source 6b					
(	c Tax paid with application for extension of time to file (Form 8868)					
(	d Backup withholding erroneously withheld 6d 6	]				
7	Total credits and payments. Add lines 6a through 6d	7			7	20.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			7	20.
11	Enter the amount of line 10 to be: Credited to 2017 estimated tax	11				0.
	art VII-A Statements Regarding Activities					
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interve	ne in			Yes	No
	any political campaign?		Γ	1a		X
ŧ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	on)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publi	shed or	. [	,		
	distributed by the foundation in connection with the activities					
(	Did the foundation file Form 1120-POL for this year?			1c		Х
	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0					
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ► \$ O •					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		Х
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	. or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	•		3		х
48	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		Х
	o If "Yes," has it filed a tax return on Form 990-T for this year?	N	I/A [	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		·	5		Х
	If "Yes," attach the statement required by General Instruction T		Ī			
6			Ì			
	By language in the governing instrument, or		İ			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the st	ate law	1		]	
	remain in the governing instrument?			6	x	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part	ΧV		7	X	
•	bio and realisation have account quote at any time daring the year in 165, complete rate in, cor (o), and rate in		t		<u> </u>	t
8:	a Enter the states to which the foundation reports or with which it is registered (see instructions)		l			
56	MN				[	
ŀ	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)					
٠	of each state as required by General Instruction G? If "No," attach explanation			8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for c	alendar	<u> </u>	OD	<del></del>	<del> </del>
J	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	aiviiuai	-	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		 	10	<del>                                     </del>	X
<u>.                                    </u>	The state of the s				٠	

Pa	art VII-A   Statements Regarding Activities (continued)			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11_		_X_
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement (see instructions)	12		_X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► <u>WWW.VIRGINIAAGROOTFOUNDATION.ORG</u>	-		
14	The books are in care of ► PATRICE OLANDER-QUAMME  Telephone no. ► 763-55			
	Located at ► 10750 55TH PLACE NORTH, PLYMOUTH, MN ZIP+4 ►55	442		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	3.7	· / 3 ►	
40	and enter the amount of tax-exempt interest received or accrued during the year	<u>IN</u>	/A Yes	No
16	, , , , , , , , , , , , , , , , , , , ,		res	
	securities, or other financial account in a foreign country?	16	L	_X_
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	}		
Pa	foreign country ►  art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	L	اـــــــــــا	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	τ	Yes	No
1a	During the year did the foundation (either directly or indirectly):	-		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		į	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(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)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)		,	
b	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	,		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	<u>1b</u>		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		<u>'</u>	
	before the first day of the tax year beginning in 2016?	1c		_X_
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation		 	
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning  before 2016?  Yes X No		ļ	
h	If "Yes," list the years \( \sum_{\text{in}} \), If "Yes," list the years \( \sum_{\text{in}} \), If the provisions of section 4942(a)(2) (relating to incorrect).		l	
U	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	1	]	
	statement - see instructions.)  N/A	2b	1	}
c	of the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
·	•			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?	1		
b	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		1	Ì
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	1		{
	Form 4720, to determine if the foundation had excess business holdings in 2016) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	1		
	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b	<u></u>	X
	Fo	rm <b>99</b> 9	0-PF	(2016)

orm 990-PF (2016) THE VIRGINIA A GROOT FOU			<u>41-15705:</u>	31 Page <b>6</b>
Part VII-B   Statements Regarding Activities for Which	Form 4720 May Be F	Required (continu	ued)	
5a During the year did the foundation pay or incur any amount to:			Ì	1 1
(1) Carry on propaganda, or otherwise attempt to influence legislation (sectio	n 4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire	ectly,	i	1 1
any voter registration drive?		Ye	s X No	1
(3) Provide a grant to an individual for travel, study, or other similar purposes	5?	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization				1 1
4945(d)(4)(A)? (see instructions)		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	or educational nurposes, or f			
the prevention of cruelty to children or animals?	, or oddodnoral parposoc; or r		s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	ider the exceptions described i		.3 (22) 100	
section 53.4945 or in a current notice regarding disaster assistance (see instri	•	iii ricgulations	N/A 5	ь
· · · · · · · · · · · · · · · · · · ·	·			
Organizations relying on a current notice regarding disaster assistance check				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption		. —		- } -
expenditure responsibility for the grant?		I/A Ye	es L No	
If "Yes," attach the statement required by Regulations section 53 494	- •			1 1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on	<u></u>	T	
a personal benefit contract?		Ye	es X No	.
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		6	b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax		Ye	es 🗶 No	
b If "Yes," did the foundation receive any proceeds or have any net income attrib				'b
Part VIII Information About Officers, Directors, Trust	tees, Foundation Ma	ınagers, Highly	/	
Paid Employees, and Contractors	·····			
1 List all officers, directors, trustees, foundation managers and their		(-) Companyation	(d) Contributions to	( ) [
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
<del></del>	to position	enter -0-)	compensation	allowances
PENELOPE G WEST	PRESIDENT & T	REASURER		
255 OVERLOOK DRIVE				
LAKE FOREST, IL 60045	10.00	0.	0.	0.
NINA W LATUSEK	SECRETARY			
15 W LOUIS STREET				
LAKE FOREST, IL 60045	1.00	0.	0.	0.
ERIC WEST	NONE			
551 KNOB VIEW DR	7			
WINSTON-SALEM, NC 27104	1.00	0.	0.	0.
STANLEY SHETKA	V-PRESIDENT/	CO TREASU		<del></del>
10247 40TH STREET WEST	1 1 1 1 2 2 2 2 1 1 7		[	
WEBSTER, MN 55088	1.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those in				
	(b) Title, and average hours per week		(d) Contributions to employee benefit plans and deferred	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	(e) Expense account, other allowances
NONE	devoted to position		Compensation	unowanioo
HOHE	-		]	
	<del> </del>	<del>                                     </del>		
	†			
	<del> </del>		<del> </del>	
	1			
	<del> </del>	<del> </del>	<del> </del>	
	-			
	<del> </del>		<del> </del>	
T-L-L number of other employees and out #50,000		<u> </u>	<u> </u>	
Total number of other employees paid over \$50,000	<del></del>			000 BE (0040)
			Form	990-PF (2016)

	<u>41-1570!</u>	531 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."		
(a) Name and address of each person paid more than \$50,000 (b) Type of service	ce	(c) Compensation
· NONE		
		····
Total number of others receiving over \$50,000 for professional services	<b>&gt;</b>	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the		Expenses
number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.		
1 NONE		
		0.
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	<del></del>	Amount
1 NONE		
, <del></del>		0.
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<b>&gt;</b>	0.
	For	m <b>990-PF</b> (2016)

P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign fou	ndations, se	e instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	l 1a	0.
	Average of monthly cash balances	1b	106,152.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	106,152.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	106,152.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,592.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	104,560.
6	Minimum investment return. Enter 5% of line 5	6	5,228.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here \(\bigsim\) and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	5,228.
		\	5,440.
2 a b	lax on investment income for 2016 from Part VI, line 5 Income tax for 2016. (This does not include the tax from Part VI.)	1	
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	5,228.
4		4	0.
5	Recoveries of amounts treated as qualifying distributions Add lines 3 and 4		5,228.
6		6	0.
7	Deduction from distributable amount (see instructions)	7	5,228.
_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<del></del>	3,440.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	120,394.
b	Program-related investments - total from Part IX-B	1b	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:	-  -	-
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	120,394.
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	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	120,394.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation 4940(e) reduction of tax in those years.	qualifies for t	

Form **990-PF** (2016)

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2015	(c) 2015	( <b>d</b> ) 2016
1 Distributable amount for 2016 from Part XI, line 7				5,228.
2 Undistributed income, if any, as of the end of 2016	<del> </del>			3,220.
a Enter amount for 2015 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2016.				
a From 2011 54, 475.				
b From 2012 59,558. c From 2013 78.136.				
c From 2013 78,136. d From 2014 59,403.				
e From 2015	İ			
f Total of lines 3a through e	361,514.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: \$\simes \sum_{120,394}.				
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				5,228.
e Remaining amount distributed out of corpus	115,166.			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:		:		
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	476,680.			
b Prior years' undistributed income. Subtract		<del></del>		
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously		•		
assessed		0.		
d Subtract line 6c from line 6b. Taxable		0		
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line			0.	
4a from line 2a. Taxable amount - see instr. f Undistributed income for 2016 Subtract			<u> </u>	
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	54,475.			
9 Excess distributions carryover to 2017				
Subtract lines 7 and 8 from line 6a	422,205.		_	
O Analysis of line 9:				
a Excess from 2012 59,558.				
b Excess from 2013 78,136.				
c Excess from 2014 59,403.				
d Excess from 2015 109,942.				
e Excess from 2016 115, 166.		<del></del>	L	5 000 DE (0040)

		OOT FOUNDAT			570531 Page 10
Part XIV Private Operating For	<del></del>		II-A, question 9)	N/A	
1 a If the foundation has received a ruling or d	etermination letter tha	at it is a private operating			
foundation, and the ruling is effective for 2	016, enter the date of	the ruling	<b>&gt;</b>		
b Check box to indicate whether the foundat	ion is a private operat	ing foundation described		4942(j)(3) or4	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2016	<b>(b)</b> 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,				<u> </u>	
line 4 for each year listed					
d Amounts included in line 2c not			<del> </del>	+	-
Į.					
used directly for active conduct of					
exempt activities		<del> </del>	<del> </del>	<del> </del>	<del> </del>
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c				<u> </u>	<del></del>
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)					
b "Endowment" alternative test - enter				<del> </del>	
2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed		<del> </del>	<del></del>	<del></del>	<del> </del>
c "Support" alternative test - enter:					1
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income		<del>                                     </del>	<del> </del>	<del> </del>	
Part XV Supplementary Inform	nation (Compl	ete this part only	if the foundation	n had \$5.000 or n	nore in assets
at any time during the			ii dio iodiidado		
1 Information Regarding Foundation				<del> </del>	
a List any managers of the foundation who i	•	a than 20/ of the total cor	stributions recoved by th	a faundation hafara tha a	loca of any tay
year (but only if they have contributed mo			itributions received by th	e roundation before the c	iose of any lax
NONE	σ ιπαπ φο,σσογ. (σσο	00011011 007 (0)(2).)			
	400/	<u> </u>			
b List any managers of the foundation who other entity) of which the foundation has a			(or an equally large port	ion of the ownership of a	partnership or
• •	1 10 % of greater inter	631.			
NONE					
2 Information Regarding Contribution					
Check here 🕨 💹 if the foundation only					
the foundation makes gifts, grants, etc. (se	ee instructions) to inc	lividuals or organizations	under other conditions, o	complete items 2a, b, c, a	nd d.
a The name, address, and telephone numbe	r or e-mail address o	f the person to whom app	lications should be addr	essed:	
THE VIRGINIA A GROOT	FOUNDATIO:	N, 847-615-	8735		
255 OVERLOOK DRIVE, L	AKE FORES	T, IL 60045			
b The form in which applications should be			should include:		
SEE ATTACHED INSTRUCT		-		EE STATEMEN	т #1.
c Any submission deadlines:					<del></del>
MARCH 1 OF EACH YEAR.					
d Any restrictions or limitations on awards,	such as by geographi	cal areas, charitable fields	s, kinds of institutions for	other factors	=
SEE ELIGIBILITY REQUI					E STATEMENT
#1					

Total

ter gross amounts unless otherwise indicated.	Unrelated b	usiness income		ed by section 512, 513, or 514	(e)
Program service revenue:	(a) Business code	<b>(b)</b> Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a					
b					
С	1				
d		<del></del>			
e		<del></del>			
f					
g Fees and contracts from government agencies					
Membership dues and assessments			T 1		
nterest on savings and temporary cash					
nvestments			14	10.	
Dividends and interest from securities					
Net rental income or (loss) from real estate:					
a Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal					
property			ìì		
Other investment income					
Gain or (loss) from sales of assets other					
than inventory			} }		
Net income or (loss) from special events		·			
Gross profit or (loss) from sales of inventory					
Other revenue:					
CATALOG SALES			01	80.	
b					
C					
d					
e					
Subtotal. Add columns (b), (d), and (e)		0	•	90.	
Total Add line 12, columns (b), (d), and (e)				13	9
e worksheet in line 13 instructions to verify calculations	5.)				
art XVI-B Relationship of Activitie	s to the Accon	nnlishment of F	xempl	Purposes	
Tielddonomp o'r Aodd do					
	income is reported in o	column (e) of Part XVI-	-A contrib	uted importantly to the accom	plishment of
	han by providing fund:	s for such purposes).			<del></del>
Explain below how each activity for which is the foundation's exempt purposes (other to					
Explain below how each activity for which the foundation's exempt purposes (other t				<del></del>	
Explain below how each activity for which the foundation's exempt purposes (other to					
e No Explain below how each activity for which the foundation's exempt purposes (other t					
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Explain below how each activity for which the foundation's exempt purposes (other t					
Explain below how each activity for which the foundation's exempt purposes (other t					
Explain below how each activity for which is the foundation's exempt purposes (other to					

Debt the organization directly or inderestly engage in any of the following with any other organization described in section 501(c)) or the Code (other than section 501(c)) organizations) or in section 527, relating to political organizations?   Transfers from the reporting foundation to a nonchardable exempt organization of:   13(1)	1 Ond the organization directly or indexectly angle in any of the following with any other organization described in section 501(c) or in account 527, relating to political organizations?  1 Trainisters from the reporting foundation to a noncharitable exempt organization of:  (1) Cash (2) Other assets 1a(2) X (3) Sites of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Renal of facilities, equipment or other assets (4) Rembursement arrangements (5) Loss or in ona guarantees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) Renal of well-ties, equipment, making less, other assets, or paid employees (8) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (9) Performance of services or membership or fundrasing solicitations (10) Loss or large of the above is completed in following schedule. Column (6) should always show the fair market value of the goods, other assets, or services received. (9) Amount myorked (9) Amount myorked (9) Name of organization (1) Coexingtion of electricists, because from a received service in service organization (1) Coexingtion of electricists, and straining arrangements.  10) In the properties of the color (other than sections 501(c)(3)) or in section 527?  11 Performance of services or contract and services received.  12 In the contraction of the contraction of the services organization of the contraction of the services organization of the contraction of the services organization.  12 In the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contraction of the contracti	Part XVII	, <b></b>	o and Transactions ar	nd Relationships With Nonch	aritable	
Transfers from the reporting foundation to a noncharitable exempt organization of:  (1) Cash  (2) Other assets  (3) Seles of assets from a noncharitable exempt organization  (1) Sales of assets from a noncharitable exempt organization  (2) Purchases of assets from a noncharitable exempt organization  (3) Remail of facilities, equipment, or other assets  (3) Remail of facilities, equipment, or other assets  (4) Sales of assets from a noncharitable exempt organization  (3) Remail of facilities, equipment, or other assets  (4) Remailmance of services or membership or fundrasing solicitations  (5) Leass or fear quarantees  (6) Performance of services or membership or fundrasing solicitations  (6) Performance of services or membership or fundrasing solicitations  (7) Alto all the allows in Sales of assets from a noncharitable exempt organization  (8) Performance of services or membership or fundrasing solicitations  (8) Performance of services or membership or fundrasing solicitations  (9) Performance of services or membership or fundrasing solicitations  (9) Performance of services or membership or fundrasing solicitations  (9) Amount monked  (9) Remo of monkaritable exempt organization  (1) Sesseption of transfers, transactions, and sharing arrangements. Show in socions 501(e) of the Code (other from sections 501(e)) of the Code (other from sections 501(e)) of the Code (other from sections 501(e)) of the Code (other from sections 501(e)) of the Code (other from sections 501(e)) of the Code (other from sections 501(e)) of the Code (other from sections 501(e)) of the Code (other from sections 501(e)) of the Code (other from sections 501(e)) of the Code (other from sections 501(e)) of the Code (other from sections 501(e)) of the Code (other from sections 501(e)) of the Code (other from sections 501(e)) of the Code (other from sections 501(e)) of the Code (other from sections 501(e)) of the Code (other from sections 501(e)) of the Code (other from sections 501(e)) of the Code (other from sections 501(e)) of the Code (	the Code (other than section 50 (c)(3) organizations) or in section 527, relating to political organizations?    Transfers from the reporting foundation to a noncharidable exempt organization of:   15 (2) Other reases   16 (2) Other reases   16 (2) Other reases   17 (2) Other reases   18 (2) Other reases	4 Dubb.	Exempt Organizations				You No
1 Is the foundation directly or indirectly affidiated with, or related to, one or more tax-exempt organization or sharing arrangements.  1 Is the foundation directly or indirectly affidiated with, or related to, one or more tax-exempt organization or sharing arrangements.  2 Is the foundation directly or indirectly affidiated with, or related to, one or more tax-exempt organization or sharing arrangements.  2 Is the foundation directly or indirectly affidiated with, or related to the property organization or sharing arrangement. Sharing organization or sharing arrangement of sharing arrangements.  3 Is the foundation directly or indirectly affidiated with, or related to the property organization or sharing arrangement. Show in Sharing arrangement is sharing arrangement organization.  3 Is the foundation directly or indirectly affidiated with, or related to, one or more tax-exempt organization or sharing arrangement. Show in section 501(c) of the Code (other than section 501(c) (3) or in section 501(c) of the Code (other than section 501(c) (3)) or in section 527?  3 If Yes, complete the following schedule.  (a) Name of organization (b) Type of organization (c) Description of relationship.  N/A  1 If Yes, complete the following organization (b) Type of organization (c) Description of relationship.  N/A  1 If Yes, complete the following organization (c) Description of relationship.  N/A  1 If Yes, complete the following organization (b) Type of organization (c) Description of relationship.  1 If Yes, complete the following organization (b) Type of organization (c) Description of relationship.  1 If Yes, complete the following organization (b) Type of organization (c) Description of relationship.  2 In Yes, complete the following organization (c) Description of relationship.  3 In Yes, complete the following organization (c) Description of relationship.  1 If Yes, complete the following organization (c) Description of relationship.  2 In Yes, complete the following organization (c) Description of relationship.  3	a Transfer from the reporting foundation to a noncharitable exempt organization of:  (1) Cash (2) Other assets  0 Other transactions:  (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Retails of includes, equipment or other assets (4) Rombursement arrangements (5) Lones or long quarattees (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (6) Performance of services or membership or fundrasing solicitations (7) Fundrasing or services growth by the reporting foundation referred less than fair market value in any transaction or sharing arrangement, show in column (4) the value of the goods, other assets, or services received.  2a Is the foundation directly or indirectly affiliated wink, or related to, one or more tax-exempt organization or sharing arrangement, show in column (4) the value of the goods, other assets, or services received.  2a Is the foundation directly or indirectly affiliated wink, or related to, one or more tax-exempt organization or sharing arrangement, show in section 501(c) of the Code (other than section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  2a Is the foundation directly or indirectly affiliated wink, or related to, one or more tax-exempt organization or sharing arrangement, show in section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  3 In a section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  3 In a section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  4 In the answer to a section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  5 In this period section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  5 In this period section 501(c) of the Code (other than section 501(c)(3)) or in section 52??  5 In this period section 501(c) of the Code (other than section 501(c)(3)) or in secti			, ,	, ,	-	es No
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(a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  b if "Yes," complete the following schedule.  (a) Name of organization (b) Type of organization (c) Description of relationship  N/A  Sign I Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and behind, but for the following schedules and sharing arrangements  N/A  Sign I Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and behind, but for the following schedules and statements, and to the best of my knowledge and behind, but for the following schedules and statements, and to the best of my knowledge and behind, but for the following schedules and statements, and to the best of my knowledge and behind, but for the following schedules and statements, and to the best of my knowledge and behind, but for the following schedules and statements, and to the best of my knowledge and the following schedules and statements, and to the best of my knowledge and the following schedules and statements, and to the best of my knowledge and the following schedules and statements, and to the best of my knowledge and the following schedules and statements, and to the best of my knowledge and the following schedules and statements, and to the best of my knowledge and the following schedules and statements, and to the best of my knowledge and the following schedules and statements, and to the best of my knowledge and the following schedules and statements, and to the best of my knowledge and the following schedules and statements are schedules and statements.  Sign at the followi	(a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?  3 If Yes, "complete the following schedule.  (a) Name of organization (b) Type of organization (c) Description of relationship  N/A  Sign  Onder penaltieg of perjury, 1 declare that I have examined this return, including accompanying schedules and statements, and to the best of my showledge and the first of the code of				e in any transaction or sharing arrangement	, show in	
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2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 52??    b   If Yes, complete the following schedule.   (a) Name of organization   (b) Type of organization   (c) Description of relationship	2a is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes	(a) Line no	· ·		(0) Description of transfers, transactions, an	d sharing arrar	igements
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Jesu	In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X   No		N/£	<u> </u>	ļ		
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Jesu	In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X   No						
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Jesu	In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X   No				<u> </u>		
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Jesu	In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X   No				<del> </del>		
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Jesu	In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X   No						
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Jesu	In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X   No		<del></del>		<del> </del>		
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Jesu	In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?						
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Jesu	In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?						
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Jesu	In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?				<u> </u>		
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Jesu	In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?						
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Jesu	In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?						
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Jesu	In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?						
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Jesu	In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?						
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Jesu	In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?						
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Jesu	In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?						
In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Jesu	In section 501(c) of the Code (other than section 501(c)(3)) or in section 527?    Yes   X   No				<u> </u>		
Sign Here    Value of organization   (b) Type of organization   (c) Description of relationship	b If "Yes," complete the following schedule.  (a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Sign  Under penalties at perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, this trip, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge  Figure 1	2a Is the four	ndation directly or indirectly affiliated with, or related to, o	one or more tax-exempt organiza	ations described		
(a) Name of organization  N/A  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, this true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, this true. Correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge shown below (see instr.)?  Signature of officer of trustee  Print/Type preparer's name  Preparer's signature  Preparer's signature  Date  Check X if PTIN  PATRICE	(a) Name of organization  (b) Type of organization  (c) Description of relationship  N/A  Sign Under penalties of perjury. I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, this true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, this true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, this true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, this true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, this true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, this true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, this true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, this true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge and belief, this true, correct, and complete Declaration of the best of my knowledge and belief, the line in the lest of my knowledge and belief, the line in the lest of my knowledge and belief, the line in the lest of my knowledge and belief, the line in the lest of my knowledge and belief, the line in	ın section	501(c) of the Code (other than section 501(c)(3)) or in s	section 527?		Yes	X No
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Sign Here  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, this true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge    May the IRS discuss this return with the preparer shown below (see instr.)?	Sign Here    Vinder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is trul, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below (see instr.)?    Yes		(a) Name of organization	(b) Type of organization	(c) Description of relation	1ship	
Sign Here    and belief, this true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge   May the HS discousaries return with the preparer shown below (see instr.)?   Yes No	Sign Here Signature of officer of trustee Date Title  Print/Type preparer's name PATRICE OLANDER-QUAMME  Preparer Use Only  Firm's address ▶ PO BOX 41638  Population of preparer (other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below (see instr.)?    Vest   No		N/A				
Sign Here    and belief, this true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge   May the HS discousaries return with the preparer shown below (see instr.)?   Yes No	Sign Here Signature of officer of trustee Date Title  Print/Type preparer's name PATRICE OLANDER-QUAMME  Preparer Use Only  Firm's address ▶ PO BOX 41638  Population of preparer (other than taxpayer) is based on all information of which preparer has any knowledge return with the preparer shown below (see instr.)?    Vest   No						
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Sign Here    and belief, this true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has any knowledge   May the HS discoust instruction of which preparer has an	Sign Here    Signature of officer of trustee   Date   Check   If   Primt's personal properties   Primt's address ▶ PO BOX 41638   Policy   Policy   Primt's address ▶ PO BOX 41638   Primt's based on all information of which preparer has any knowledge with the preparer shown below (see instr.)?   Way the It S discuss in the preparer shown below (see instr.)?   Way the It S discuss in the preparer shown below (see instr.)?   Way the It S discuss in the preparer shown below (see instr.)?   Way the It S discuss in the preparer shown below (see instr.)?   Way the It S discuss in the preparer shown below (see instr.)?   Way the It S discuss in the preparer shown below (see instr.)?   Way the It S discuss in the preparer shown below (see instr.)?   Way the It S discuss in the preparer shown below (see instr.)?   Way the It S discuss in the preparer shown below (see instr.)?   Way the It S discuss in the preparer shown below (see instr.)?   Way the It S discuss in the preparer shown below (see instr.)?   Way the It S discuss in the preparer shown below (see instr.)?   Way the It S discuss in the preparer shown below (see instr.)?   Way the It S discuss in the preparer shown below (see instr.)?   Way the It S discuss in the preparer shown below (see instr.)?   Way the It S discuss in the preparer shown below (see instr.)?   Way the It S discuss in the preparer shown below (see instr.)?   Way the It S discuss in the preparer shown below (see instr.)?   Way the It S discuss in the preparer shown below (see instr.)?   Way the It S discuss in the It S d						
Sign Here    Signature of officer of trustee   Date   Check   If   PTIN	Sign Here    Signature of officer of trustee					May the IRS di:	scuss this
Signature of officer of trustee  Print/Type preparer's name  PATRICE  Print/Type preparer's name  Preparer's signature  Date  Check X if PTIN  self- employed	Here Signature of officer of trustee Date Title  Print/Type preparer's name Preparer's signature Date Check X if PTIN Self- employed Self- employed Preparer Use Only  Firm's name ▶ PATRICE OLANDER-QUAMME  Firm's address ▶ PO BOX 41638	Sign	elief, it's true, correct, and complete Declaration of preparer (other	than taxpayer) is based on all informa	ation of which preparer has any knowledge	eturn with the	preparer
Signature of officer of trustee   Date   Title	Signature of officer of trustee    Print/Type preparer's name	Here	melory (+ West	6/21/17	Tresident		
PATRICE self-employed	Paid Preparer Use Only  PATRICE OLANDER-QUAMME Firm's name ▶ PATRICE OLANDER-QUAMME Firm's address ▶ PO BOX 41638  PATRICE OLANDER-QUAMME Firm's address ▶ PO BOX 41638	Sign	nature of officer of trustee	Date			
PATRICE self-employed	Paid Preparer Use Only  PATRICE OLANDER-QUAMME  PATRICE OLANDER-QUAMME  Firm's name ▶ PATRICE OLANDER-QUAMME  Firm's address ▶ PO BOX 41638		Print/Type preparer's name Preparer	's signature	Date Check X If PTI	٧	
	Paid Preparer Use Only  OLANDER-QUAMME  Firm's name ▶ PATRICE OLANDER-QUAMME  Firm's address ▶ PO BOX 41638  P01425275  Firm's elin ▶ 41-1733715		PATRICE		self- employed		
	Preparer Use Only  Firm's name ▶ PATRICE OLANDER-QUAMME  Firm's address ▶ PO BOX 41638	Paid		Range Ldo.	6/19/17 P	014252	<u>2</u> 75
	Use Only Firm's address ▶ PO BOX 41638	Preparer		DUAMME			
		Use Only		<del>~</del> <b></b>			
Firm's address ► PO BOX 41638		_	Firm's address ▶ PO BOX 41638				
			1	441-0638	Phone no 763-	550-90	03
	Form <b>990-PF</b> (2016)			<del></del>			

# Schedule B

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

OMB No 1545-0047

Name of the organization

Employer identification number

· TH	E VIRGINIA A GROOT FOUNDATION	41-1570531				
Organization type(check o	·					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	s covered by the <b>General Rule</b> or a <b>Special Rule.</b> (7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ile. See instructions				
	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor.					
Special Rules						
sections 509(a)(1) any one contributo	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount in a complete Parts I and II	or 16b, and that received from				
year, total contribu	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III					
year, contributions is checked, enter h purpose Don't cor	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.					
but it must answer "No" on	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fig. 1) Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Filling requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	•				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

### THE VIRGINIA A GROOT FOUNDATION

41-1570531

Part I	Contributors (See instructions) Use duplicate copies of Part I if additional space is needed					
(a) <b>N</b> o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	ESTATE OF CANDICE B GROOT  255 OVERLOOK DRIVE  LAKE FOREST, IL 60045	\$ <u>150,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions)			
(a) <b>N</b> o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions)			

Employer identification number

### THE VIRGINIA A GROOT FOUNDATION

41-1570531

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Page 4 Name of organization Employer identification number THE VIRGINIA A GROOT FOUNDATION 41-1570531 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF INTEREST ON SAV	INGS AND T	EMPORARY	CASH	INVESTMENTS	STATEMENT	1
SOURCE	RE	(A) VENUE BOOKS	NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOM	
MORGAN STANLEY BANK		10.		10.		
TOTAL TO PART I, LINE 3		10.		10.		
FORM 990-PF	OTHER	INCOME			STATEMENT	2
DESCRIPTION		(A) REVEN PER BO		(B) NET INVEST- MENT INCOME		
CATALOG SALES	-		80.	0	•	-
TOTAL TO FORM 990-PF, PART I	, LINE 11		80.	0	•	
FORM 990-PF	LEG	AL FEES			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOK	NET I				
HOLMSTROM & KENNEDY PC	7,88	3.	(	).	<del></del>	0.
TO FM 990-PF, PG 1, LN 16A	7,88	3.	(	).		0.
FORM 990-PF	ACCOUN	ring fee	S		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOK	NET I				
PATRICE OLANDER-QUAMME	2,39	6.	(	).		0.

18

FORM 990-PF	TAX	ES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
STATE REGISTRATION & FEE FEDERAL TAXES PAYROLL TAXES	60. 1,046. 1,785.	0.		0. 0. 1,785.	
TO FORM 990-PF, PG 1, LN 18 =	2,891.	0.		1,785.	
FORM 990-PF	OTHER EXPENSES		STATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ADVERTISING SERVICE FEES SUBSCRIPTIONS & SUBSCRIPTION	10,278.	0.		10,278.	
SERVICES CONSULTANT - PROGRAM	1,059.	0.		1,059.	
DIRECTION OFFICE SUPPLIES & EXPENSE	15,000. 321.	0.		15,000. 321.	
PAYROLL PROCESSING	1,872.	0.		1,872.	
SOFTWARE AND SCANNER MEMBERSHIPS & ASSOCIATIONS	2,630. 915.	0. 0.		2,630. 915.	
TO FORM 990-PF, PG 1, LN 23	32,375.	0.		32,075.	