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Return of Private Foundation

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

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▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

Open to Public Inspection Internal Revenue Service For calendar year 2016 or tax year beginning and ending Name of foundation A Employer identification number & M. Krug Family Foundation 46-3829467 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) (630)257-7120 122 Kraml Drive City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here Burr Ridge, IL 60527 Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here . . . . Amended return Final return 2. Foreign organizations meeting the 85% test, Address change check here and attach computation . . . . Name change Section 501(c)(3) exempt private foundation Check type of organization: E If private foundation status was terminated under Other taxable private foundation Section 4947(a)(1) nonexempt charitable trust section 507(b)(1)(A), check here . . . . . . Fair market value of all assets at | J | Accounting method | X | Cash F If the foundation is in a 60-month termination end of year (from Part II, col. (c). Other (specify) under section 507(b)(1)(B), check here . . . line 16) > \$ 429,276. Part I, column (d) must be on cash basis.) (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (b) Net investment (a) Revenue and (c) Adjusted net for chantable amounts in columns (b), (c), and (d) may not necessarily equal expenses per income income purposes books the amounts in column (a) (see instructions) ) (cash basis only) 132,000 Contributions, gifts, grants, etc., received (attach schedule) Check I if the foundation is not required to attach Sch B Interest on savings and temporary cash investments . . . . . SCANNED SEP 18 b Net rental income or (loss) 6 a Net gain or (loss) from sale of assets not on line 10 . . . . . b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . . . . . . . 10 a Gross sales less returns and allowances **b** Less Cost of goods sold. . . . . . . . . c Gross profit or (loss) (attach schedule) . . . . . . . . . . . . . -1,272. 130,728. 12 Total. Add lines 1 through 11 . . . . . . . . . . . . . . . . Compensation of officers, directors, trustees, etc . . . . . 14 Other employee salaries and wages . . . . . . . . . . . . . . . . . Expenses 15 Pension plans, employee benefits . . . . . . . . . . . . . . . . . . 16 a Legal fees (attach schedule) . . . . . . . . . . . . . . . . . . 1,981 **b** Accounting fees (attach schedule) . . . . . . . . . . . . . . . c Other professional fees (attach schedule)..... Operating and Administrative 18 Taxes (attach schedule) (see instructions) . . . Depreciation (affact schedule) and depletion 8.729 19 Occupancy 20 21 Travel, conferences, and meetings . . ] nd and publications. 6 2017 · · · expenses (attach schedule) · · · 22 Printing 93 23 Other Total operating and administrative expenses.

Add lines 13 through 23. 24 10,803 130,375 25 Contributions, gifts, grants paid . 130,375 Total expenses and disbursements. Add lines 24 and 25. 141,178 26

-10,450

For Paperwork Reduction Act Notice, see instructions.

Subtract line 26 from line 12.

a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) . . . . . . c Adjusted net Income (if negative, enter -0-) . . . . . .

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

5

6

409,276.

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Part	V Capital Gains an	d Losses for Tax on Invest	ment Income			
	' (a) List and describe the	kınd(s) of property sold (e g , real estate, or common stock, 200 shs MLC Co )	***************************************	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo , day, yr )
1a	·	<del></del>		D - Borragon	<del> </del>	<del> </del>
b				<del>                                     </del>		
C				† · · · · · · · · · · · · · · · · · · ·		_
d	<del> </del>			<del> </del>		<del></del>
e	<del></del>		<del></del>	<del></del>		······································
	(e) Gross sales pnce	(f) Deprectation allowed (or allowable)	1	or other basis ense of sale		ain or (loss) (f) minus (g)
a						
<u>b</u>						
c						
d						
e						
Com	plete only for assets showing g	ain in column (h) and owned by the fo	undation on 12/31/6	69	(I) Gains (C	Col (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		sofcol(ı) ol(j),ıfany	col. (k), but	not less than -0-) <b>or</b> s (from col (h))
a						
ь						
С						
d						
е						
2 (	Capital gain net income or (net	p	n, also enter in Par ss), enter -0- in Par		2	- · · ·
3 !	Net short-term capital gain or (li	oss) as defined in sections 1222(5) an	nd (6):			
1	f gain, also enter in Part I, line	8, column (c) (see instructions). If (los	s), enter -0- in	7	]	
F	Part I, line 8	<u> </u>		}	3	
Part	V Qualification Un	der Section 4940(e) for Red	uced Tax on	Net Investmen	t Income	
(For op	tional use by domestic private t	foundations subject to the section 494	0(a) tax on net inve	stment income.)		
		-	• •	•		
ii secu	on 4940(d)(2) applies, leave thi	s part blank				
Was th	e foundation liable for the secti	ion 4942 tax on the distributable amou	nt of any vear in the	e base period?		☐ Yes ☐ No
		fy under section 4940(e) Do not comp	• •			
1		in each column for each year; see the		e making any entries	S.	<del> </del>
	(a)	(b)		(c)		(d)
Cale	Base period years ndar year (or tax year beginning in	Adjusted qualifying distribute )	ons Net value o	f nonchantable-use a		Distribution ratio (b) divided by col (c))
	2015			****	100	107 GIVIGEG BY COI (O//
	2014			· · · · · · · · · · · · · · · · · · ·	<del></del>	<del></del>
	2013		<del></del>	<del></del>		<del></del>
	2012	····				<del> </del>
	2011	<del></del>				
		<del></del>		<del></del>	<del></del>	<del></del>
2	Total of line 1 column (d)				2	
					· · ·   <del>-   -  </del>	
3		the 5-year base period – divide the tota n in existence if less than 5 years			3	
4	Enter the net value of noncha	ritable-use assets for 2016 from Part 2	X, line 5		4	
5	Multinly line 4 by line 3				5	
	• • •					<del></del>
6	Enter 1% of net investment in	come (1% of Part I, line 27b)			6	
7	Add lines 5 and 6				7	
8		from Part XII, line 4				
	If line 8 is equal to or greater See the Part VI instructions.	than line 7, check the box in Part VI, lii	ne 1b, and complet	te that part using a	1% tax rate	<u> </u>
						- 000 DE

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Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instr	uctio	ons)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			
	here and enter 1% of Part I, line 27b			i
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of			i
	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			
3	Add lines 1 and 2			
4	Subtrile A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			<del></del>
6	Credit/Payments:			
a	2016 estimated tax payments and 2015 overpayment credited to 2016 6a			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c			1
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			0.
11	Enter the amount of line 10 to be. Credited to 2017 estimated tax ▶ Refunded ▶ 11			<u>0.</u>
Part	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or		Yes	No
_	intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the			
	definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			
C	Did the foundation file Form 1120-POL for this year?	1c		X
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
_	(1) On the foundation ▶ \$ (2) On foundation managers. ▶ \$			li
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
2	managers \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	_2		X
•	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			
4a	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of changes	3		X
та b	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	4b		X
3	If "Yes," attach the statement required by General Instruction T.	_5_		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			1
•	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict			
	with the state law remain in the governing instrument?			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 XV	6 7	X	
, 8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			1
	IL	- 1		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of			
-	each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for	- 60		
-	calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year?	-		
-	If "Yes," attach a schedule listing their names and addresses	10		X

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	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning		Yes	No
	of section 512(b)(13)? If "Yes," attach schedule (see instructions)	. 11	Ш	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 ▶			
14	The books are in care of ▶Marta Krug Telephone no. ▶ (630)98	<u>86-9</u>	964	
	Located at ▶122 Kraml Burr Ridge, IL 60527 ZIP+4 ▶ 60527			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			▶ 🔲
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	. 16	<u>;                                    </u>	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes."			
	enter the name of the foreign country			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	·		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u> </u>	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?	0		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	ł		
	disqualified person?	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		1	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	0		
	(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?	o		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	ŀ		
	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 )	o	1	
Ь	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			_ 1
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	· 1b	<u> </u> -	- <b> </b> -,
	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 before the first day of the tax year beginning in 2016?	· 10		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)).	ı	ŀ	l i
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and		İ	
	6e, Part XIII) for tax year(s) beginning before 2016?	o		
_	If "yes," list the years		1	
Ь	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		-	- - <del></del>
	all years listed, answer "No" and attach statement - see instructions.)	·   2b	<u> </u>	X
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	- 1	1	1 1
_			-	1 1
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
_	at any time during the year?	o   .	.	
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 of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			- 1
	foundation had excess business holdings in 2016.)			+
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	. 4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			-
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	. 4b		<u> </u>

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Par	VII-B Statements Regarding Activitie	s for Which Forn	1 4720 May Be I	Required (cont	inued)		<del></del>
5a	During the year did the foundation pay or incur any amou			_		1	
	(1) Carry on propaganda, or otherwise attempt to influen	ce legislation (section 4	1945(e))?	🔲 Yes	X No	1 1	
	(2) Influence the outcome of any specific public election	(see section 4955), or	to carry on,				1
	directly or indirectly, any voter registration drive? .			Yes	X No		
	(3) Provide a grant to an individual for travel, study, or of	her similar purposes?		Yes	X No	1 1	
	(4) Provide a grant to an organization other than a charit					1 1	
	section 4945(d)(4)(A)? (see instructions)	_		Tyes	X No		
	(5) Provide for any purpose other than religious, charital			_			i
	purposes, or for the prevention of cruelty to children				X No	1 1	'
b	If any answer is "Yes" to 5a(1)-(5), did any of the transa				[42]	1 1	
•	Regulations section 53 4945 or in a current notice regard					5b	X
	Organizations relying on a current notice regarding disas	•	•			<del>  32  </del>	<del>-   ••</del> -
_							1 1
С	If the answer is "Yes" to question 5a(4), does the foundate because it maintained expenditure responsibility for the g			[7 <sub>V</sub>	₩.	1 1	
				тев	P NO		
_	If "Yes," attach the statement required by Regulations so	• •					
6a	Did the foundation, during the year, receive any funds, di			□	Feet		
	on a personal benefit contract?				X No		
ь	Did the foundation, during the year, pay premiums, direct	tly or indirectly, on a per	sonal benefit contrac	t?		6b	X
	If "Yes" to 6b, file Form 8870.				~		
7a	At any time during the tax year, was the foundation a part	ly to a prohibited tax sho	elter transaction?	∐Yes	X No		
<u>b</u>	If "Yes," did the foundation receive any proceeds or have						X
Pai	rt VIII Information About Officers, Dir	ectors, Trustees,	Foundation Ma	anagers, High	y Paid	<b>Emplo</b>	yees,
	and Contractors						
_1_	List all officers, directors, trustees, foundation man	agers and their comp	ensation (see instru	ctions).			
_	(a) Name and address	(b) Title, and average	(c) Compensation	(d) Contributions			se account,
	<b>(-)</b>	hours per week devoted to position	(If not paid, enter -0-)	employee benefit and deferred compe		other all	lowances
Wil	liam Krug	President					
	Kraml Burr Ridge, IL 60527	01.00					
	<del>,</del>				- 1		
	<del></del>					<del></del>	
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		<del> </del>		<del>                                     </del>	<del></del>	<del></del>	
			}		İ		
		<u> </u>	L	ļ		<u>.</u>	
2	Compensation of five highest-paid employees (other	r than those included	on line 1 - see insti	ructions). If none,	enter		
	"NONE."	T	T	1 (8 2 (1 )	<del></del>		
(a) N	ame and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions employee benefit			se account, lowances
		devoted to position		and deferred compo		Outer an	Owances
		<u> </u>	ļ				
NON	3						
		L		<u> </u>			
NON	2						
NON	₫						
		1			1		
NON	R:	<u> </u>	1	<del>                                     </del>			
641		1		1			
NON		<del>                                     </del>	<del>                                     </del>	<del> </del>			·····
HOM							
Total	number of other employees paid over \$50,000	1	I	<u> </u>			
	idinati of other employees paid over \$50,000	<u> </u>	<del> </del>	<del> </del>		000	DE
UYA					F	-orm <b>990</b>	- <b>PF</b> (2016)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High and Contractors (continued)	y Pai	d Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "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	▶	
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.		Expenses
1 Educational/Health and Welfare		
		120 275
2		130,375.
3		
4		
		<u></u>
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1		
2		
All other program-related investments See instructions	<u></u>	<del> </del>
3		
Total. Add lines 1 through 3	<u></u> ▶	5 000 DE 100 100
UYA		Form 990-PF (2016)

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

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section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions) (d) (a) (b) (c) Corpus Years prior to 2015 2015 2016 1 Distributable amount for 2016 from Part XI, 21,725. 2 Undistributed income, if any, as of the end of 2016. Enter amount for 2015 only . . . . . . . . . . . . . . . . b Total for prior years Excess distributions carryover, if any, to 2016. From 2011 . . . . . . . . . . . . From 2012 . . . . . . . . . . . . 110,328. From 2013 . . . . . . . . . . . . 22,539. From 2014 . . . . . . . . . . . . From 2015 . . . . . . . . . . . . 136,978. 269,845. Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ 130,375. 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 21,725. Applied to 2016 distributable amount . . . . . . . . . 108,650. Remaining amount distributed out of corpus. . . . . . Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a).) Enter the net total of each column as indicated below: 378,495. Corpus Add lines 3f, 4c, and 4e. Subtract line 5. . . . Prior years' undistributed income. Subtract line 4b from line 2b . . . . . . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . . . . . . . d Subtract line 6c from line 6b Taxable amount - see instructions . . . . . . . . . . . . Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount - see instructions . . . . . . . . . . . . Undistributed income for 2016. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2017. . . . . . . . . . . . . . . . Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . . . . . Excess distributions carryover to 2017. 378,495. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 Excess from 2012..... 110,328. Excess from 2013. . . . . . . . Excess from 2014 . . . . . . . . 22,539. 136,978. Excess from 2015. . . . . . . . Excess from 2016. . . . . . . . 108,650

	YV Private Operating Foundati			/II-A question (1)	40-38	2946/ Page 10
	XIV Private Operating Foundati					
1a	If the foundation has received a ruling or dete		•	-		
_	the ruling is effective for 2016, enter the date	•			4042/5/2)	or [] 4042(1)(5) or
b	Check box to indicate whether the foundation		g toundation describe	Prior 3 years	4942(j)(3)	or 4942(j)(5) or
2a	Enter the lesser of the adjusted net income from Part I or the minimum investment	Tax year (a) 2016	<b>(b)</b> 2015	(c) 2014	(d) 2013	(e) Total
		(a) 2010	(0) 2010	(0) 2014	(d) 2010	<del></del>
b	return from Part X for each year listed 85% of line 2a		<u> </u>	<del> </del>		
C	Qualifying distributions from Part XII, line 4			<del> </del>		
·	for each year listed					
d	Amounts included in line 2c not used directly	- <u></u>		<del> </del>		<del></del>
u	for active conduct of exempt activities					
е	Qualifying distributions made directly for	<u> </u>	<del> </del>	<del> </del>		
·	active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative	<del></del>				
,	test relied upon		1			
а	"Assets" alternative test- enter		j			
a	(1) Value of all assets					
	(2) Value of assets qualifying under			† <u>-</u>	· · · · · · · · · · · · · · · · · · ·	
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-enter 2/3 of	····				
	minimum investment return shown in					
c	Part X, line 6 for each year listed "Support" atternative test - enter	·		<u> </u>		
·	(1) Total support other than gross invest-					
	ment income (interest, dividends, rents,					
	payments on securities loans (section		1			
	512(a)(5)), or royalties)		[			ĺ
	(2) Support from general public and 5 or		· · · · · · · · · · · · · · · · · · ·	<del> </del>	<del></del>	
	more exempt organizations as provided					
	in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an				- <u>-</u>	
	exempt organization					
	(4) Gross investment income			†		
Part	XV Supplementary Information	(Complete this	s part only if th	e foundation ha	d \$5.000 or mo	re in assets at
	any time during the year- s					
1 1	nformation Regarding Foundation Manage		<del></del>			
al	List any managers of the foundation who have	contributed more tha	n 2% of the total conf	tributions received by t	he foundation before	the close of any
	ax year (but only if they have contributed more			•		•
		, , ,	. , , , ,			
<u> </u>	ist any managers of the foundation who own	10% or more of the st	tock of a corporation	(or an equally large po	rtion of the ownership	o of a partnership
	or other entity) of which the foundation has a 1			. , , , , , , , , , , , , , , , , , , ,	·	•
	••	•				
2	nformation Regarding Contribution, Grant	, Gift, Loan, Schola	rship, etc., Progran	ns:		
	Check here 🕨 🕱 if the foundation only make				s not accept unsolicit	ed requests for
f	funds If the foundation makes gifts, grants, etc.	c (see instructions) t	o individuals or orgar	nizations under other o	onditions, complete i	tems 2a, b, c, and d
						_
a	The name, address, and telephone number or	e-mail address of the	person to whom app	olications should be ad	dressed.	
Wil:	liam Krug		(630)25	7-7120		
122	Kraml Burr Ridge, IL	60527				
	The form in which applications should be subn		and materials they s	should include:		
			•			
c /	Any submission deadlines					
				· · · · · · · · · · · · · · · · · · ·		
d A	Any restrictions or limitations on awards, such	as by geographical a	reas, charitable fields	s, kinds of institutions,	or other factors	
		············		<del></del>	·	
UYA						Form <b>990-PF</b> (2016)

Recipient	if recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Am
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution	]
Paid during the year		<del> </del>	· · · · · · · · · · · · · · · · · · ·	<del></del>
r and during the year				
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W-A-I	<u>I</u>	<u> </u>		L
Total	<del> </del>	<del> </del>	▶ 3a	
Approved for future payment				
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Ente	r gross	amounts unless otherwise indicated	Unrelated bu	usiness income	Excluded by sect	tion 512, 513, or 514	(e)
1	Progr	am service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
'	a						(
	_		<del></del>			<del>                                     </del>	1
			· · · · · · · · · · · · · · · · · · ·				
			J	1	<u> </u>		<u> </u>
				<del></del>			
	f						
	g F	ees and contracts from government agencies					
2	Memb	pership dues and assessments					
3		est on savings and temporary cash investments					
4		ends and interest from securities					
5	Net re	ental income or (loss) from real estate.					
	a D	Pebt-financed property					
	b N	lot debt-financed property					
6	Net re	ental income or (loss) from personal property					
7	Other	investment income					
8	Gain	or (loss) from sales of assets other than inventory			L		
9	Net in	come or (loss) from special events					
10	Gross	s profit or (loss) from sales of inventory					
11	Other	revenue a					
	c						
		· · · · · · · · · · · · · · · · · · ·			<u> </u>		
	e				<b></b>		
		stal Add columns (b), (d), and (e)		<u> </u>	<u> </u>	<u> </u>	<u></u>
13	Total	. Add line 12, columns (b), (d), and (e)				13	
		sheet in line 13 instructions to verify calculations)		<del></del>			
		Relationship of Activities to the					<del></del>
	e No. ▼	Explain below how each activity for which income in of the foundation's exempt purposes (other than by	•			· ·	omplishment
				<u> </u>	/ \	<u> </u>	
					· · · · · · · · · · · · · · · · · · ·	<del></del>	
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			······	- · · · · · · · · · · · · · · · · · · ·			

	XVII		on Regardin	g Transf	ers To and	Transact	ions and	l Relationship	s With Nonc	harit	able	
	· · · · · · · · · · · · · · · · · · ·		rganizations					La college d'acces	-N 504(-)		Voc	No
1								tion described in sec	tion 501(c)		165	140
	of the Co	ode (other than se	ection 501(c)(3) o	rganizations	s) or in section :	527, relating t	о рошса о	rganizations?				
а	Transfer	s from the reporti	ng foundation to	a noncharita	able exempt org	anızatıon of						
										1a(1)		X
	(2) Othe	erassets				. <b></b>				1a(2)		X
b		insactions.										
										1b(1)		X
										1b(2)		X
												X
												X
												X
												X
C												
đ								l always show the fa				
				=				i iali illarket value ill	any transaction t	y Sildi	iiig	
(a) Lin		nent, show in colu			le exempt organi			ription of transfers, tra	nsactions and sha	nng arr	angem	ents
(a) LIII	e 110 (L)	Allount involved	(c) Name of	Tiononantab	ie exempt organi	Lauon	(4) 5030	ipaon or denoioro, de	risastistis, and sha	g um	ango	
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	+-			*****				<del></del>	<del></del> _			
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<del>4</del>											· .	
			*****									
									······			
2 a								nızations described				
	-			527?					<u>L</u>	_ Yes	Ш	No
<u>b</u>	If "Yes,"	complete the follo					<del></del> 1	(a) D				
		(a) Name of orga	anızation		(b) Type	of organizatio	n	(c) Desc	ription of relations	inip		
						<del></del>	-	<del></del>	<del></del>			
											···	
		· · · ·	<del> </del>		<del></del>			<del></del>				
	Unde	r penalties of penury.	I declare that I have e	xamined this re	etum, including acco	ompanying sched	fules and state	ements, and to the best of	f my knowledge and i	celief, it i	s true,	
C:	corre	ct, and complete Dec	laration of preparer (o	ther than taxpe	yer) is based on all	information of w	hich preparer	has any knowledge	May the IR	S discuss	this re	
Sign		DC: V/I :/\	1h	al	22117	D~	eside.	n+	the prepare		below (	see
Here	Sign	ature of officer or tr	rustee	-010	Dafte	Title	<u>eside</u> :	<u> </u>		″ [∕]v	es l	По
		rint/Type preparer's		Pro	eparer's signatur	)		Date	Check (ZIz	PTIN		
Paid	l'	A // proparor		[""	11.0/			0 30 1	Check Lef			

Preparer Firm's name Use Only Buy Ridy IL 60525 Firm's address 122 Krami Dr.

Check Lif self-employed Firm's EIN

Phone no 130 - 986 - 9964

Form **990-PF**(2016)

### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service Name of the organization

W. & M. Krug Family Foundation

### **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.irs.gov/form990

OMB No 1545-0047

Employer identification number

46-3829467

2016

Organization type (check one).					
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	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
Note: Only a section 50 instructions.	tion is covered by the <b>General Rule</b> or a <b>Special Rule.</b> 101(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See				
General Rule					
or more (in mo	ration filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 coney or property) from any one contributor. Complete Parts I and II See instructions for determining a otal contributions				
Special Rules					
regulations un 13, 16a, or 16	cation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ½ % support test of the der sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line b, and that received from any one contributor, during the year, total contributions of the greater of(1) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II				
contributor, du	ration described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one uring the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, icational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.				
contributor, du contributions t during the yea General Rule	cation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one uring the year, contributions exclusively for religious, charitable, etc., purposes, but no such otaled more than \$1,000. If this box is checked, enter here the total contributions that were received in for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the applies to this organization because it received nonexclusively religious, charitable, etc., contributions or more during the year.				

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZor on Its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

W. & M. Krug Family Foundation

Employer identification number

46-3829467

Part I	Contributors (See instructions). Use duplicate co	ppies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	William & Marta Krug  122 Kraml  Chicago, IL 60527	\$ 132,000.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	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 Occash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Occash Complete Part II for noncash contributions )

Name of organization

Employer identification number

### W. & M. Krug Family Foundation

46-3829467

Noncash Property (See instructions). Use duplicate copie	es of Part II if additional sp	pace is needed.
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	\$	
	Description of noncash property given  (b)  Description of noncash property given  (b)  Description of noncash property given  (b)  Description of noncash property given  (b)  Description of noncash property given	Description of noncash property given  \$  (b)  Description of noncash property given  (c)  FMV (or estimate) (See instructions)  \$  Description of noncash property given  (c)  FMV (or estimate) (See instructions)  \$  Description of noncash property given  (c)  FMV (or estimate) (See instructions)  \$  Description of noncash property given  (c)  FMV (or estimate) (See instructions)  \$  Description of noncash property given  (c)  FMV (or estimate) (See instructions)  \$  Description of noncash property given  (c)  FMV (or estimate) (See instructions)

Name of or	ganization L: Krug Family Foundation			Employer identification number 46–3829467
Part III	Exclusively religious, charitable, etc	c., contributions to on the year from any on one completing Part I be year. (Enter this info	e contributor.	cribed in section 501(c)(7), (8), or Complete columns (a) through (e) and f exclusively religious, charitable, etc.,
(a) No. from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held
	Transferration name address	(e) Transfo	_	
-	Transferee's name, address,	and ZIP + 4	Helatio	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held
_				
}	Transferee's name, address,	(e) Transf	_	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held
		(a) Transf	or of aid	
-	Transferee's name, address,	(e) Transf	_	nship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use o	of gift	(d) Description of how gift is held
-		(e) Transf	er of gift	
-	Transferee's name, address,	and ZIP + 4	Relatio	nship of transferor to transferee
UYA				Schedule B (Form 990, 990-EZ, or 990-PF) (2016
~ (F)				

### Form 990-PF Other Income

Supporting Details for Form 990-PF. Part I, Line 11

(a) Description	(h) Revenue and	(c) Net investment	(d) Adjusted net
(a) Description	expenses per book	income	income
k-1	-1,272.	0.	0.
	0.	0.	0.
	0.	0.	0.
	0.	0.	0.
	0.	0.	0.
	0.	0.	0.
	0.	0.	0.
	0.	0.	0.
	0.	0.	0.
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	0.	0.	0.
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	0.	0.	0.
	0.	0.	0.
	0.	0.	0.
	0.	0.	0.
	0.	0.	0.
	0.	0.	0.
	0.	0.	0.
	0.	0.	0.

## Form 990-PF Professional Fees Expense

Supporting Details for Form 990-PF. Part I, Line 16

(h) Revenue and (c			(a) Dishursemen
expenses per	income	income	for charitable purpose
0.	0.	0.	0.
	<del></del>	<del></del>	0.
<del></del>			<del></del>
			0.
<del></del>	<del></del>	<del></del>	0.
0.	0.	0.	0.
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1,981.	0.	0.	0
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	<del> </del>		0
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0.	0.	0.	0.
0.	0.	0.	0.
0.	0.	0.	0.
	expenses per books  0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 1,981. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	expenses per books  O.	0.         0.         0.           0.         0.         0.

	0.	0.	0.	0.
•	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.

# Form 990-PF Other Expenses Supporting Details for Form 990-PE Port Line 33

Supp	orting Details for Form			
(a) Description	(b) Revenue and expenses per books	(c) Net investmen income	( <b>d)</b> Adjusted net income	(e) Disbursement for charitable purpose
Check Printing	78.	0.	0.	0.
State Filing Fee	15.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
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	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.
	0.	0.	0.	0.

### Form 990-PF Amortization

Supporting Details for Form 990-PF. Part I, Line 23

(a) Description	(b) Date	(c) Amount	(d) Deduction	(e)	(f) Current	(g) Net	(h) Adjusted	(i) Total
	Acquired,	Amortized	for Prior	Amortization	Year	Investment	Net Income	Amount of
	Completed, or		Years	Period	Amortization	Income		Amortization
	Expended							

0.	0.0.00000	0.	0.	0.	0.
 0.	0.0.00000	0.	0.	0.	0.
 0.	0.0.00000	0.	0.	0.	0.
0.	0.0.00000	0.	0.	0.	0.
0.	0.0.00000	0.	0.	0.	0.
0.	0.0.00000	0.	0.	0.	Ο.
0.	0.0.00000	0.	0.	0.	0.
 0.	0.0.00000	0.	0.	0.	0.
0.	0.0.00000	0.	0.	0.	0.
 0.	0.0.00000	0.	0.	0.	0.

### Form 990-PF Other Expenses

Supporting Details for Form 990-PF. Part II, Line 13

**Investments - Other** (b) Listed at Cost (c) Listed at FMV (b) End of Year (c) End of Year **Book Value** Fair Market (a) Description 423,385. 423,385. 0. ٥. ٥. ٥. 0. 0. 0. 0. 0. Ο. 0. 0. 0. Ο. 0. Ο. 0.

### Form 990-PF Substantial Contributors

Supporting Details for Form 990-PF. Part VII-A, Line 10

a) Name (enter either the person's name business's name	e or the	(b) Address	
Person William & Marta Krug	Street address  122 Kraml Drive	<del></del>	Room or suite no.
Business	City, town or post office	State	ZIP Code
	Burr Ridge	IL	60527
	Foreign country	Foreign province/county	
Person	Street address		Room or suite no.
Business	City, town or post office	State	ZIP Code
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Foreign country	Foreign province/county	Foreign postal code
Person	Street address		Room or suite no.
Business	City, town or post office	State	ZIP Code
	Foreign country	Foreign province/county	Foreign postal code
Person	Street address		Room or suite no.
Business	City, town or post office	State	ZIP Code
	Foreign country	Foreign province/county	Foreign postal code
Person	Street address		Room or suite no.
Business	City, town or post office	State	ZIP Code
	Foreign country	Foreign province/county	Foreign postal code

# Federal Statements

W & M Krug Family Foundation

46-3829467

Form 990-PF, Part I, Line 11 Other Income Statement 1

(c)	Adjusted	Net Income
(b) Net	Investment	Income
(a)	Revenue	per Books

	\$0	
	0\$	
(1,272)	(1,272)	
\$	\$	
Pass Through Income.(/አኔኔ.)	Total	

	(a)	(b) Net	(c)	(p)·
	Expenses	Investment	Adjusted	Charitable
	per Books	Income	Net Income	Purposes
Filing Fees	\$ 93			
Total	\$ 93	0\$	0\$	0\$

Statement 3 Form 990-PF, Part III, Line 5 Other Decreases

8,729	8,729
\$	\$
ed losses	Total
Unreal	

### W. & M. Krug Family Foundation Statement 4 Form 990-PF, Part XV, Line 3a Recipient Paid during the Year

	Donee	<b>Foundation</b>	Purpose of	
Name and Address	Relationship	Status	Grant	Amount
Archiocese of Chicago	none	501c3	general fund	1,000.00
835 North Rush Street				
Chicago, IL 60611-2030				
			Housing	
BEDS Plus	none	501c3	Assistance	2,000.00
P. O. Box 2035	none	30103	7.55.5.411.64	2,000.00
La Grange IL 60525				
Pig Prothogo & Pig Sisters of Motropolitan				
Big Brothers & Big Sisters of Metropolitan		504-3		250.00
Chicago	none	501c3	general fund	250.00
560 W. Lake Street 5th Flr.				
Chicago, IL 60661				
				2 222 22
Catholic Extension	none	501c3	general fund	2,000.00
150 South Wacker Drive				
Chicago IL 60606				
_				
Catholic Relief Services	None	501c3	general fund	500.00
228 W. Lexington St.				
Baltimore MD 21201-3443				
Dominican Friars Central Province	none	501c3	general fund	5,000.00
1910 S. Ashland Avenue				
Chicago, IL 60608				
Chicago Jesuit Academy	None	501c3	General Fund	10,000.00
5058 W. Jackson				
Chicago, IL 60644				
<b>3</b> /				
Children's Welfare & Development	none	501c3	general fund	1,150.00
430 Bohland Avenue			J	,
Bellwood, IL 60104				
Denwood, 12 0010-4				
			Building fund &	
			Tuition	
Christ the King Jesuit Preparatory School	none	501c3	assistance	20,000.00
5088 West Jackson Blvd.	Hone	30103	4333441106	20,000.00
Chicago, IL 60644				
Coalition to Salute America's Heroes	none	501c3	general fund	2,000.00
	none	20102	Serieral ruliu	2,000.00
552 Fort Evans Road, Suite 300				
Leesburg, VA 20176				

W. & M. Krug Family Foundation Statement 4 Form 990-PF, Part XV, Line 3a Recipient Paid during the Year

Name and Address Cross Catholic Outreach 2700 N. Military Trail St. 240 Boca Raton, FL 33427	<b>Donee Relationship</b> none	Foundation Status 501c3	Purpose of Grant general fund	<b>Amount</b> 3,000.00
Dominican Friars 1909 South Ashland Avenue Chicago, IL 60608	none	501c3	general fund	15,000.00
Ed Siderwicz Scholarship - St. Mary's University of MN 2500 Park Avenue Minneapolis MN 55404	none	501c3	Scholarship Fund	10,000.00
Fenwick H.S. 505 Washington Oak Park IL 60302	none	501c3	general fund	5,000.00
GIRF - U of C Cancer Research 5841 S. Maryland Avenue Chicago, IL 60637	none	501c3 ′	general fund	250.00
Glen Oaks Hospital Foundation 701 Winthrop Avenue Glendale Heights IL 60139	none	501c3	general fund	200.00
International OCD Foundation Inc. P. O. Box 961029 Boston MA 02196	none	501c3	general fund	250.00
John Buck Co. Foundation 225 West Washington, Suite 2300 Chicago, IL 60606	none	501c3	general fund	2,000.00
Leadership Institute 1101 North Highland Building Arlington VA 22201	none	501c3	general fund	7,000.00
Legal Assistance Foundation 120 South LaSalle Street, Suite 900 Chicago, IL 60603	none	501c3	general fund	300.00
Lurie Children's Foundation 225 E. Chicago Avenue Chicago, IL 60611	none	501c3 Page 2	general fund	1,000.00

### W. & M. Krug Family Foundation Statement 4 Form 990-PF, Part XV, Line 3a Recipient Paid during the Year

	Donee Relationship	Foundation Status	Purpose of Grant	Amount
Misericordia 6300 North Ridge Chicago, IL 60660	none	501c3	general fund	500.00
Morningstar Mission Ministries 350 East Washington Street Joliet IL 60433	none	501c3	General Fund	3,000.00
Lurie Children's Foundation 225 E. Chicago Avenue Chicago, IL 60611	none	501c3	general fund	250.00
Mundelein Seminary 1000 East Maple Avenue Mundelein IL 60060-1174	none	501c3	general fund	500.00
Naperville YMCA 101 W. Van Buren St. Chicago, IL 60607	none	501c3	general fund	100.00
NPH USA 134 N. LaSalle St. Chicago, IL 60602	none	501c3	general fund	2,500.00
Oblates Missions Missionary P. O. Box 695433 San Antonio TX 78265	none	501c3	general fund	2,000.00
San Miguel School Chicago 1954 W 48th St. Chicago, IL 60609	none	501c3	general fund	10,000.00
Sarah's Circle 4838 N. Sheridan Rd. Chicago IL 60640	None	501c3	Hunger & Housing Fund	5,000.00
SOS Children's Villages ILL 216 W. Jackson #925 Chicago, IL 60606	none	501c3	general fund	1,000.00
St. John of the Cross Parish 5005 Wolf Road Western Springs, IL 60558	none	501c3	general fund	2,425.00

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### W. & M. Krug Family Foundation Statement 4 Form 990-PF, Part XV, Line 3a Recipient Paid during the Year

	Donee Relationship	Foundation Status	Purpose of Grant	Amount
St. Terrence Parish 4300 W. 119th Place Alsip IL 60803	none	501c3	general fund	100.00
The H Foundation Goombay 60 S. La Grange Road La Grange IL 60525	none	501c3	general fund	1,200.00
The Society for Propagation of Faith 70 West 36th Street, 8th Floor New York, NY 10018	none	501c3	general fund	1,000.00
U.of Chicago Booth School of Business 1427 East 60th St., Ste 120 Chicago, IL 60637	none	501c3	general fund	250.00
Union League Club Boys & Girls Club 65 West Jackson Blvd. Chicago, IL 60604-3598	None	501c3	general fund	150.00
Univ. of Notre Dame du Lac 400 Main Building Notre Dame IN 46556	none	501c3	scholarship fund	10,000.00
Upendo Village NFP 26W171 Roosevelt Road P.O. Box 667 Wheaton, IL 60187-0667	none	501c3	general fund	2,000.00
Women's Care Center of La Grange 47 South 6th Avenue, Ste 1 La Grange IL 60525	none	501c3	general fund	500.00

130,375.00