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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](http://www.irs.gov/form990pf)

For calendar year **2016** or tax year beginning **2016**, and ending **20**

|                                                                                                                                                                                                    |                                                                                                                             |                                                                                                                                                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name of foundation <b>JPMORGAN CHASE FOUNDATION OF NORTHWEST LOUISIANA XXXXX7001</b>                                                                                                               |                                                                                                                             | <b>A</b> Employer identification number<br><b>72-6022876</b>                                                                                          |
| Number and street (or P.O. box number if mail is not delivered to street address)                                                                                                                  | Room/suite                                                                                                                  | <b>B</b> Telephone number (see instructions)<br><b>866-888-5157</b>                                                                                   |
| City or town, state or province, country, and ZIP or foreign postal code<br><b>CHICAGO, IL 60603</b>                                                                                               |                                                                                                                             | <b>C</b> If exemption application is pending, check here. <input type="checkbox"/>                                                                    |
| <b>G</b> Check all that apply:                                                                                                                                                                     | <input type="checkbox"/> Initial return<br><input type="checkbox"/> Final return<br><input type="checkbox"/> Address change | <input type="checkbox"/> Initial return of a former public charity<br><input type="checkbox"/> Amended return<br><input type="checkbox"/> Name change |
| <b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation                                                                               |                                                                                                                             | <b>D</b> 1 Foreign organizations, check here. <input type="checkbox"/>                                                                                |
| <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation                                                                   |                                                                                                                             | 2 Foreign organizations meeting the 85% test, check here and attach computation. <input type="checkbox"/>                                             |
| <b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <b>2,723,236</b>                                                                                    |                                                                                                                             | <b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here. <input type="checkbox"/>                                 |
| <b>J</b> Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____<br>(Part I, column (d) must be on cash basis) |                                                                                                                             | <b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here. <input type="checkbox"/>                              |

| Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).) |                                                                                                 | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|------------------------------------|---------------------------|-------------------------|-------------------------------------------------------------|
| Revenue                                                                                                                                                             | 1 Contributions, gifts, grants, etc., received (attach schedule)                                |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B. |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 3 Interest on savings and temporary cash investments.                                           |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 4 Dividends and interest from securities                                                        | 34,465.                            | 33,927.                   |                         | STMT 1                                                      |
|                                                                                                                                                                     | 5a Gross rents                                                                                  | NONE                               | NONE                      | NONE                    |                                                             |
|                                                                                                                                                                     | b Net rental income or (loss)                                                                   | NONE                               |                           |                         |                                                             |
|                                                                                                                                                                     | 6a Net gain or (loss) from sale of assets not on line 10                                        | 12,828.                            |                           |                         |                                                             |
|                                                                                                                                                                     | b Gross sales price for all assets on line 6a                                                   | 508,651.                           |                           |                         |                                                             |
|                                                                                                                                                                     | 7 Capital gain net income (from Part IV, line 2)                                                |                                    | 12,828.                   |                         |                                                             |
|                                                                                                                                                                     | 8 Net short-term capital gain.                                                                  |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 9 Income modifications                                                                          |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 10a Gross sales less returns and allowances                                                     |                                    |                           |                         |                                                             |
| b Less Cost of goods sold                                                                                                                                           |                                                                                                 |                                    |                           |                         |                                                             |
| c Gross profit or (loss) (attach schedule)                                                                                                                          |                                                                                                 |                                    |                           |                         |                                                             |
| 11 Other income (attach schedule)                                                                                                                                   | 24,963.                                                                                         | 25,782.                            |                           | STMT 2                  |                                                             |
| 12 Total. Add lines 1 through 11                                                                                                                                    | 72,256.                                                                                         | 72,537.                            | NONE                      |                         |                                                             |
| Operating and Administrative Expenses                                                                                                                               | 13 Compensation of officers, directors, trustees, etc.                                          | 30,606.                            | 18,363.                   |                         | 12,242.                                                     |
|                                                                                                                                                                     | 14 Other employee salaries and wages                                                            |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 15 Pension plans, employee benefits                                                             |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 16a Legal fees (attach schedule)                                                                |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | b Accounting fees (attach schedule)                                                             |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | c Other professional fees (attach schedule)                                                     |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 17 Interest                                                                                     |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 18 Taxes (attach schedule) (see instructions)                                                   |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 19 Depreciation (attach schedule) and depletion.                                                |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 20 Occupancy                                                                                    |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 21 Travel, conferences, and meetings                                                            |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 22 Printing and publications                                                                    |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 23 Other expenses (attach schedule)                                                             |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 24 Total operating and administrative expenses. Add lines 13 through 23.                        |                                    |                           |                         |                                                             |
|                                                                                                                                                                     | 25 Contributions, gifts, grants paid                                                            |                                    |                           |                         |                                                             |
| 26 Total expenses and disbursements. Add lines 24 and 25                                                                                                            |                                                                                                 |                                    |                           |                         |                                                             |
| 27 Subtract line 26 from line 12                                                                                                                                    |                                                                                                 |                                    |                           |                         |                                                             |
| a Excess of revenue over expenses and disbursements                                                                                                                 | -107,170.                                                                                       |                                    |                           |                         |                                                             |
| b Net investment income (if negative, enter -0-)                                                                                                                    |                                                                                                 | 24,154.                            |                           |                         |                                                             |
| c Adjusted net income (if negative, enter -0-)                                                                                                                      |                                                                                                 |                                    | NONE                      |                         |                                                             |

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| Part II Balance Sheets      |                                                                                                                               | Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)                |                                                      | Beginning of year     | End of year |         |
|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|-----------------------|-------------|---------|
|                             |                                                                                                                               | (a) Book Value                                                                                                                    | (b) Book Value                                       | (c) Fair Market Value |             |         |
| Assets                      | 1                                                                                                                             | Cash - non-interest-bearing . . . . .                                                                                             |                                                      | 23,679.               | 34,780.     | 34,780. |
|                             | 2                                                                                                                             | Savings and temporary cash investments . . . . .                                                                                  |                                                      | 94,404.               | 75,684.     | 75,684. |
|                             | 3                                                                                                                             | Accounts receivable ▶                                                                                                             |                                                      |                       |             |         |
|                             |                                                                                                                               | Less: allowance for doubtful accounts ▶                                                                                           |                                                      |                       |             |         |
|                             | 4                                                                                                                             | Pledges receivable ▶                                                                                                              |                                                      |                       |             |         |
|                             |                                                                                                                               | Less: allowance for doubtful accounts ▶                                                                                           |                                                      |                       |             |         |
|                             | 5                                                                                                                             | Grants receivable . . . . .                                                                                                       |                                                      |                       |             |         |
|                             | 6                                                                                                                             | Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . . |                                                      |                       |             |         |
|                             | 7                                                                                                                             | Other notes and loans receivable (attach schedule) ▶                                                                              |                                                      |                       |             |         |
|                             |                                                                                                                               | Less: allowance for doubtful accounts ▶                                                                                           | NONE                                                 |                       |             |         |
|                             | 8                                                                                                                             | Inventories for sale or use . . . . .                                                                                             |                                                      |                       |             |         |
|                             | 9                                                                                                                             | Prepaid expenses and deferred charges . . . . .                                                                                   |                                                      |                       |             |         |
|                             | 10a                                                                                                                           | Investments - U.S. and state government obligations (attach schedule) . . . . .                                                   |                                                      |                       |             |         |
|                             | b                                                                                                                             | Investments - corporate stock (attach schedule) . STMT 5 . . . . .                                                                | 1,262,648.                                           | 1,122,265.            | 1,333,568.  |         |
|                             | c                                                                                                                             | Investments - corporate bonds (attach schedule) . STMT 6 . . . . .                                                                | 154,829.                                             | 224,350.              | 225,072.    |         |
|                             | Liabilities                                                                                                                   | 11                                                                                                                                | Investments - land, buildings, and equipment basis ▶ |                       |             |         |
|                             |                                                                                                                               | Less: accumulated depreciation (attach schedule) ▶                                                                                |                                                      |                       |             |         |
| 12                          |                                                                                                                               | Investments - mortgage loans . . . . .                                                                                            |                                                      |                       |             |         |
| 13                          |                                                                                                                               | Investments - other (attach schedule) . . . . . STMT 7 . . . . .                                                                  | 141,271.                                             | 112,568.              | 107,930.    |         |
| 14                          |                                                                                                                               | Land, buildings, and equipment basis ▶                                                                                            |                                                      |                       |             |         |
|                             |                                                                                                                               | Less: accumulated depreciation (attach schedule) ▶                                                                                | 88,587.                                              |                       |             |         |
| 15                          |                                                                                                                               | Other assets (describe ▶ STMT 8 ) . . . . .                                                                                       | 108.                                                 | 88,620.               | 946,202.    |         |
| 16                          |                                                                                                                               | Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I) . . . . .                           | 1,765,526.                                           | 1,658,267.            | 2,723,236.  |         |
| 17                          |                                                                                                                               | Accounts payable and accrued expenses . . . . .                                                                                   |                                                      |                       |             |         |
| 18                          |                                                                                                                               | Grants payable . . . . .                                                                                                          |                                                      |                       |             |         |
| Net Assets or Fund Balances | 19                                                                                                                            | Deferred revenue . . . . .                                                                                                        |                                                      |                       |             |         |
|                             | 20                                                                                                                            | Loans from officers, directors, trustees, and other disqualified persons . . . . .                                                |                                                      |                       |             |         |
|                             | 21                                                                                                                            | Mortgages and other notes payable (attach schedule) . . . . .                                                                     |                                                      |                       |             |         |
| 22                          | Other liabilities (describe ▶) . . . . .                                                                                      |                                                                                                                                   |                                                      |                       |             |         |
| 23                          | Total liabilities (add lines 17 through 22) . . . . .                                                                         |                                                                                                                                   | NONE                                                 |                       |             |         |
| Net Assets or Fund Balances | Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31. |                                                                                                                                   |                                                      |                       |             |         |
|                             | 24                                                                                                                            | Unrestricted . . . . .                                                                                                            |                                                      |                       |             |         |
|                             | 25                                                                                                                            | Temporarily restricted . . . . .                                                                                                  |                                                      |                       |             |         |
|                             | 26                                                                                                                            | Permanently restricted . . . . .                                                                                                  |                                                      |                       |             |         |
|                             | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ <input checked="" type="checkbox"/>   |                                                                                                                                   |                                                      |                       |             |         |
|                             | 27                                                                                                                            | Capital stock, trust principal, or current funds . . . . .                                                                        | 1,765,526.                                           | 1,658,267.            |             |         |
|                             | 28                                                                                                                            | Paid-in or capital surplus, or land, bldg., and equipment fund . . . . .                                                          |                                                      |                       |             |         |
|                             | 29                                                                                                                            | Retained earnings, accumulated income, endowment, or other funds . . . . .                                                        |                                                      |                       |             |         |
|                             | 30                                                                                                                            | Total net assets or fund balances (see instructions) . . . . .                                                                    | 1,765,526.                                           | 1,658,267.            |             |         |
|                             | 31                                                                                                                            | Total liabilities and net assets/fund balances (see instructions) . . . . .                                                       | 1,765,526.                                           | 1,658,267.            |             |         |

## Part III Analysis of Changes in Net Assets or Fund Balances

|   |                                                                                                                                                                      |   |            |
|---|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|------------|
| 1 | Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . . | 1 | 1,765,526. |
| 2 | Enter amount from Part I, line 27a . . . . .                                                                                                                         | 2 | -107,170.  |
| 3 | Other increases not included in line 2 (itemize) ▶                                                                                                                   | 3 |            |
| 4 | Add lines 1, 2, and 3 . . . . .                                                                                                                                      | 4 | 1,658,356. |
| 5 | Decreases not included in line 2 (itemize) ▶ COST BASIS ADJUSTMENT                                                                                                   | 5 | 89.        |
| 6 | Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 . . . . .                                                      | 6 | 1,658,267. |

**Part IV Capital Gains and Losses for Tax on Investment Income**

| (a) List and describe the kind(s) of property sold (e.g., real estate,<br>2-story brick warehouse, or common stock, 200 shs MLC Co.)                                                               |                                            |                                                 | (b) How<br>acquired<br>P - Purchase<br>D - Donation                                            | (c) Date acquired<br>(mo., day, yr.) | (d) Date sold<br>(mo., day, yr.) |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|-------------------------------------------------|------------------------------------------------------------------------------------------------|--------------------------------------|----------------------------------|
| <b>1 a PUBLICLY TRADED SECURITIES</b>                                                                                                                                                              |                                            |                                                 |                                                                                                |                                      |                                  |
| b                                                                                                                                                                                                  |                                            |                                                 |                                                                                                |                                      |                                  |
| c                                                                                                                                                                                                  |                                            |                                                 |                                                                                                |                                      |                                  |
| d                                                                                                                                                                                                  |                                            |                                                 |                                                                                                |                                      |                                  |
| e                                                                                                                                                                                                  |                                            |                                                 |                                                                                                |                                      |                                  |
| (e) Gross sales price                                                                                                                                                                              | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g)                                                   |                                      |                                  |
| a 508,651.                                                                                                                                                                                         |                                            | 495,823.                                        | 12,828.                                                                                        |                                      |                                  |
| b                                                                                                                                                                                                  |                                            |                                                 |                                                                                                |                                      |                                  |
| c                                                                                                                                                                                                  |                                            |                                                 |                                                                                                |                                      |                                  |
| d                                                                                                                                                                                                  |                                            |                                                 |                                                                                                |                                      |                                  |
| e                                                                                                                                                                                                  |                                            |                                                 |                                                                                                |                                      |                                  |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69                                                                                                        |                                            |                                                 | (i) Gains (Col. (h) gain minus<br>col. (k), but not less than -0- or<br>Losses (from col. (h)) |                                      |                                  |
| (i) F.M.V. as of 12/31/69                                                                                                                                                                          | (j) Adjusted basis<br>as of 12/31/69       | (k) Excess of col. (i)<br>over col. (j), if any |                                                                                                |                                      |                                  |
| a                                                                                                                                                                                                  |                                            |                                                 | 12,828.                                                                                        |                                      |                                  |
| b                                                                                                                                                                                                  |                                            |                                                 |                                                                                                |                                      |                                  |
| c                                                                                                                                                                                                  |                                            |                                                 |                                                                                                |                                      |                                  |
| d                                                                                                                                                                                                  |                                            |                                                 |                                                                                                |                                      |                                  |
| e                                                                                                                                                                                                  |                                            |                                                 |                                                                                                |                                      |                                  |
| 2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7<br>If (loss), enter -0- in Part I, line 7 }                                                                |                                            |                                                 | 2                                                                                              | 12,828.                              |                                  |
| 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6).<br>If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in<br>Part I, line 8 |                                            |                                                 | 3                                                                                              |                                      |                                  |

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

| (a)<br>Base period years<br>Calendar year (or tax year beginning in)                                                                                                                                                     | (b)<br>Adjusted qualifying distributions | (c)<br>Net value of noncharitable-use assets | (d)<br>Distribution ratio<br>(col. (b) divided by col. (c)) |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|----------------------------------------------|-------------------------------------------------------------|
| 2015                                                                                                                                                                                                                     | 136,562.                                 | 2,912,080.                                   | 0.046895                                                    |
| 2014                                                                                                                                                                                                                     | 131,754.                                 | 2,792,118.                                   | 0.047188                                                    |
| 2013                                                                                                                                                                                                                     | 126,381.                                 | 2,669,218.                                   | 0.047348                                                    |
| 2012                                                                                                                                                                                                                     | 122,831.                                 | 2,513,376.                                   | 0.048871                                                    |
| 2011                                                                                                                                                                                                                     | 120,511.                                 | 2,702,736.                                   | 0.044589                                                    |
| 2 Total of line 1, column (d)                                                                                                                                                                                            |                                          |                                              | 2 0.234891                                                  |
| 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the<br>number of years the foundation has been in existence if less than 5 years.                                       |                                          |                                              | 3 0.046978                                                  |
| 4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5                                                                                                                                           |                                          |                                              | 4 2,799,123.                                                |
| 5 Multiply line 4 by line 3.                                                                                                                                                                                             |                                          |                                              | 5 131,497.                                                  |
| 6 Enter 1% of net investment income (1% of Part I, line 27b)                                                                                                                                                             |                                          |                                              | 6 242.                                                      |
| 7 Add lines 5 and 6.                                                                                                                                                                                                     |                                          |                                              | 7 131,739.                                                  |
| 8 Enter qualifying distributions from Part XII, line 4.<br>If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the<br>Part VI instructions. |                                          |                                              | 8 129,242.                                                  |

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 see instructions)**

|    |                                                                                                                                                                                                                                               |    |        |
|----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|--------|
| 1a | Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 . . . . .<br>Date of ruling or determination letter _____ (attach copy of letter if necessary - see instructions) | 1  | 483.   |
| b  | Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of 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  |        |
| 3  | Add lines 1 and 2 . . . . .                                                                                                                                                                                                                   | 3  | 483.   |
| 4  | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) . . . . .                                                                                                                         | 4  | NONE   |
| 5  | <b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .                                                                                                                                      | 5  | 483.   |
| 6  | <b>Credits/Payments</b>                                                                                                                                                                                                                       |    |        |
| a  | 2016 estimated tax payments and 2015 overpayment credited to 2016 . . . . .                                                                                                                                                                   | 6a | 1,500. |
| b  | Exempt foreign organizations - tax withheld at source . . . . .                                                                                                                                                                               | 6b | NONE   |
| c  | Tax paid with application for extension of time to file (Form 8868) . . . . .                                                                                                                                                                 | 6c | NONE   |
| d  | Backup withholding erroneously withheld . . . . .                                                                                                                                                                                             | 6d |        |
| 7  | Total credits and payments. Add lines 6a through 6d . . . . .                                                                                                                                                                                 | 7  | 1,500. |
| 8  | Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached . . . . .                                                                                                            | 8  |        |
| 9  | <b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .                                                                                                                                         | 9  |        |
| 10 | <b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .                                                                                                                             | 10 | 1,017. |
| 11 | Enter the amount of line 10 to be <b>Credited to 2017 estimated tax</b> <input type="checkbox"/> <b>1,017.</b> <b>Refunded</b> <input type="checkbox"/> <b>11</b>                                                                             | 11 |        |

**Part VII-A Statements Regarding Activities**

|                                                                                                                                                                                                                                                                                                                                                         | Yes | No |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .                                                                                                                                                                       |     | X  |
| 1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? . . . . .<br>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 |     | X  |
| 1c Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .                                                                                                                                                                                                                                                                                |     | X  |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:<br>(1) On the foundation. <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____                                                                                                                           |     |    |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ _____                                                                                                                                                                               |     |    |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . .<br>If "Yes," attach a detailed description of the activities                                                                                                                                                                                |     | X  |
| 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 . . . . .                                                                                                                  |     | X  |
| 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .                                                                                                                                                                                                                                                |     | X  |
| 4b If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .                                                                                                                                                                                                                                                                    |     |    |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . .<br>If "Yes," attach the statement required by General Instruction T.                                                                                                                                                                         |     | X  |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>• By language in the governing instrument, or<br>• 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                                                                                                                                                                                                                      | X   |    |
| 8a Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> <u>LA</u>                                                                                                                                                                                                                |     |    |
| 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 . . . . .                                                                                                                                 | 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 calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV . . . . .                                                                                        |     | X  |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses . . . . .                                                                                                                                                                                                         |     | X  |

**Part VII-A Statements Regarding Activities (continued)**

|                                                                                                                                                                                                                                                                                                                                              | Yes | No |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) . . . . .                                                                                                                                         | 11  | X  |
| 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) . . . . .                                                                                                                                        | 12  | X  |
| 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ N/A                                                                                                                                                                                                 | 13  | X  |
| 14 The books are in care of ▶ JP MORGAN CHASE BANK, N.A. Telephone no. ▶ (866) 888-5157<br>Located at ▶ 10 S DEARBORN ST; MC; IL 1-0117, CHICAGO, IL ZIP+4 ▶ 60603                                                                                                                                                                           |     |    |
| 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 . . . . . ▶ 15                                                                                                                              |     |    |
| 16 At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? . . . . .<br>See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶ | 16  | X  |

**Part 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.

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 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? . . . . .                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |    |
| (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . .                                                                                                                                                                                                                                                                                                                                                                                   | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |    |
| (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . . . . .                                                                                                                                                                                                                                                                                                                                                                                                       | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |    |
| (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . . . . .                                                                                                                                                                                                                                                                                                                                                                                                             | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |    |
| (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)? . . . . .                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |    |
| (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.) . . . . .                                                                                                                                                                                                                                                  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |    |
| b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? . . . . .                                                                                                                                                                                                                                                                           | 1b                                                                  | X  |
| Organizations relying on a current notice regarding disaster assistance check here . . . . . ▶ <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                    |                                                                     |    |
| 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? . . . . .                                                                                                                                                                                                                                                                                                        | 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)) . . . . .                                                                                                                                                                                                                                                                                                                  |                                                                     |    |
| a 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? . . . . .                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |    |
| If "Yes," list the years ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                     |    |
| b 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 all years listed, answer "No" and attach statement - see instructions.) . . . . .                                                                                                                                                                               | 2b                                                                  | 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 ▶                                                                                                                                                                                                                                                                                                                                                                                        |                                                                     |    |
| 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . .                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |    |
| 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 foundation had excess business holdings in 2016) . . . . . | 3b                                                                  |    |
| 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                                                                  | X  |

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**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

- 5a** During the year did the foundation pay or incur any amount to
- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No
- b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? ☐ **5b**
- Organizations relying on a current notice regarding disaster assistance check here ☐
- c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No
- If "Yes," attach the statement required by Regulations section 53.4945-5(d).
- 6a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ **6b** 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 shelter transaction? ☐ Yes ☒ No
- b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ **7b**

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

| (a) Name and address                                                             | (b) Title, and average hours per week devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|----------------------------------------------------------------------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| JP MORGAN CHASE BANK, N.A.<br>10 S DEARBORN ST; MC; IL 1-0117, CHICAGO, IL 60603 | TRUSTEE<br>2                                              | 30,606.                                   | -0-                                                                   | -0-                                   |
|                                                                                  |                                                           |                                           |                                                                       |                                       |
|                                                                                  |                                                           |                                           |                                                                       |                                       |
|                                                                                  |                                                           |                                           |                                                                       |                                       |
|                                                                                  |                                                           |                                           |                                                                       |                                       |

**2 Compensation of five highest-paid employees (other than those included on line 1 - see instructions). If none, enter "NONE."**

| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---------------------------------------------------------------|-----------------------------------------------------------|------------------|-----------------------------------------------------------------------|---------------------------------------|
| NONE                                                          |                                                           | NONE             | NONE                                                                  | NONE                                  |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |
|                                                               |                                                           |                  |                                                                       |                                       |

Total number of other employees paid over \$50,000 ☐ **NONE**

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**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors** (continued)**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                                                                               |                     | NONE             |
|                                                                                    |                     |                  |
|                                                                                    |                     |                  |
|                                                                                    |                     |                  |
|                                                                                    |                     |                  |
|                                                                                    |                     |                  |
|                                                                                    |                     |                  |
| Total number of others receiving over \$50,000 for professional services . . . . . |                     | NONE             |

**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 number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

Expenses

1 NONE

2

3

4

**Part IX-B Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

Amount

1 NONE

2

All other program-related investments. See instructions.

3 NONE

Total. Add lines 1 through 3 . . . . .

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**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

|          |                                                                                                                     |           |            |
|----------|---------------------------------------------------------------------------------------------------------------------|-----------|------------|
| <b>1</b> | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:         |           |            |
| <b>a</b> | Average monthly fair market value of securities . . . . .                                                           | <b>1a</b> | 2,526,455. |
| <b>b</b> | Average of monthly cash balances . . . . .                                                                          | <b>1b</b> | 86,664.    |
| <b>c</b> | Fair market value of all other assets (see instructions). . . . .                                                   | <b>1c</b> | 228,630.   |
| <b>d</b> | <b>Total</b> (add lines 1a, b, and c) . . . . .                                                                     | <b>1d</b> | 2,841,749. |
| <b>e</b> | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) . . . . . | <b>1e</b> |            |
| <b>2</b> | Acquisition indebtedness applicable to line 1 assets . . . . .                                                      | <b>2</b>  | NONE       |
| <b>3</b> | Subtract line 2 from line 1d . . . . .                                                                              | <b>3</b>  | 2,841,749. |
| <b>4</b> | Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .  | <b>4</b>  | 42,626.    |
| <b>5</b> | <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4         | <b>5</b>  | 2,799,123. |
| <b>6</b> | <b>Minimum investment return.</b> Enter 5% of line 5 . . . . .                                                      | <b>6</b>  | 139,956.   |

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

|           |                                                                                                                    |           |          |
|-----------|--------------------------------------------------------------------------------------------------------------------|-----------|----------|
| <b>1</b>  | Minimum investment return from Part X, line 6 . . . . .                                                            | <b>1</b>  | 139,956. |
| <b>2a</b> | Tax on investment income for 2016 from Part VI, line 5 . . . . .                                                   | <b>2a</b> | 483.     |
| <b>b</b>  | Income tax for 2016. (This does not include the tax from Part VI.) . . . . .                                       | <b>2b</b> |          |
| <b>c</b>  | Add lines 2a and 2b . . . . .                                                                                      | <b>2c</b> | 483.     |
| <b>3</b>  | Distributable amount before adjustments. Subtract line 2c from line 1 . . . . .                                    | <b>3</b>  | 139,473. |
| <b>4</b>  | Recoveries of amounts treated as qualifying distributions . . . . .                                                | <b>4</b>  | NONE     |
| <b>5</b>  | Add lines 3 and 4 . . . . .                                                                                        | <b>5</b>  | 139,473. |
| <b>6</b>  | Deduction from distributable amount (see instructions). . . . .                                                    | <b>6</b>  | NONE     |
| <b>7</b>  | <b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . . | <b>7</b>  | 139,473. |

**Part XII Qualifying Distributions** (see instructions)

|          |                                                                                                                                                                |           |          |
|----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------|
| <b>1</b> | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:                                                                     |           |          |
| <b>a</b> | Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 . . . . .                                                                        | <b>1a</b> | 129,242. |
| <b>b</b> | Program-related investments - total from Part IX-B . . . . .                                                                                                   | <b>1b</b> |          |
| <b>2</b> | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes . . . . .                                            | <b>2</b>  | NONE     |
| <b>3</b> | Amounts set aside for specific charitable projects that satisfy the:                                                                                           |           |          |
| <b>a</b> | Suitability test (prior IRS approval required) . . . . .                                                                                                       | <b>3a</b> | NONE     |
| <b>b</b> | Cash distribution test (attach the required schedule) . . . . .                                                                                                | <b>3b</b> | NONE     |
| <b>4</b> | <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4                                              | <b>4</b>  | 129,242. |
| <b>5</b> | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions) . . . . . | <b>5</b>  | N/A      |
| <b>6</b> | <b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 . . . . .                                                                                | <b>6</b>  | 129,242. |

**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 section 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see instructions)

|                                                                                                                                                                                             | (a)<br>Corpus | (b)<br>Years prior to 2015 | (c)<br>2015 | (d)<br>2016 |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------|-------------|-------------|
| <b>1</b> Distributable amount for 2016 from Part XI, line 7 . . . . .                                                                                                                       |               |                            |             | 139,473.    |
| <b>2</b> Undistributed income, if any, as of the end of 2016                                                                                                                                |               |                            |             |             |
| <b>a</b> Enter amount for 2015 only. . . . .                                                                                                                                                |               |                            | 110,157.    |             |
| <b>b</b> Total for prior years 20 <u>14</u> , 20 <u>  </u> , 20 <u>  </u> . . . . .                                                                                                         |               | NONE                       |             |             |
| <b>3</b> Excess distributions carryover, if any, to 2016                                                                                                                                    |               |                            |             |             |
| <b>a</b> From 2011 . . . . .                                                                                                                                                                | NONE          |                            |             |             |
| <b>b</b> From 2012 . . . . .                                                                                                                                                                | NONE          |                            |             |             |
| <b>c</b> From 2013 . . . . .                                                                                                                                                                | NONE          |                            |             |             |
| <b>d</b> From 2014 . . . . .                                                                                                                                                                | NONE          |                            |             |             |
| <b>e</b> From 2015 . . . . .                                                                                                                                                                | NONE          |                            |             |             |
| <b>f</b> Total of lines 3a through e . . . . .                                                                                                                                              | NONE          |                            |             |             |
| <b>4</b> Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ <u>129,242.</u>                                                                                                       |               |                            |             |             |
| <b>a</b> Applied to 2015, but not more than line 2a . . . . .                                                                                                                               |               |                            | 110,157.    |             |
| <b>b</b> Applied to undistributed income of prior years (Election required - see instructions) . . . . .                                                                                    |               | NONE                       |             |             |
| <b>c</b> Treated as distributions out of corpus (Election required - see instructions) . . . . .                                                                                            | NONE          |                            |             |             |
| <b>d</b> Applied to 2016 distributable amount . . . . .                                                                                                                                     |               |                            |             | 19,085.     |
| <b>e</b> Remaining amount distributed out of corpus. . . . .                                                                                                                                | NONE          |                            |             |             |
| <b>5</b> Excess distributions carryover applied to 2016 . . . . .<br>(If an amount appears in column (d), the same amount must be shown in column (a) )                                     | NONE          |                            |             | NONE        |
| <b>6</b> Enter the net total of each column as indicated below:                                                                                                                             |               |                            |             |             |
| <b>a</b> Corpus Add lines 3f, 4c, and 4e. Subtract line 5 . . . . .                                                                                                                         | NONE          |                            |             |             |
| <b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b. . . . .                                                                                                          |               | NONE                       |             |             |
| <b>c</b> 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 . . . . . |               | NONE                       |             |             |
| <b>d</b> Subtract line 6c from line 6b Taxable amount - see instructions . . . . .                                                                                                          |               | NONE                       |             |             |
| <b>e</b> Undistributed income for 2015. Subtract line 4a from line 2a. Taxable amount - see instructions . . . . .                                                                          |               |                            |             |             |
| <b>f</b> Undistributed income for 2016. Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017. . . . .                                                                |               |                            |             | 120,388.    |
| <b>7</b> 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) . . . . .       | NONE          |                            |             |             |
| <b>8</b> Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . . . .                                                                              | NONE          |                            |             |             |
| <b>9</b> Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a . . . . .                                                                                              | NONE          |                            |             |             |
| <b>10</b> Analysis of line 9                                                                                                                                                                |               |                            |             |             |
| <b>a</b> Excess from 2012 . . . . .                                                                                                                                                         | NONE          |                            |             |             |
| <b>b</b> Excess from 2013 . . . . .                                                                                                                                                         | NONE          |                            |             |             |
| <b>c</b> Excess from 2014 . . . . .                                                                                                                                                         | NONE          |                            |             |             |
| <b>d</b> Excess from 2015 . . . . .                                                                                                                                                         | NONE          |                            |             |             |
| <b>e</b> Excess from 2016 . . . . .                                                                                                                                                         | NONE          |                            |             |             |

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

NOT APPLICABLE

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling . . . . .

**b** Check box to indicate whether the foundation is a private operating foundation described in section

4942(j)(3) or

4942(j)(5)

**2a** Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .

| Tax year                                                                                                                                                           | Prior 3 years |          |          |          | (e) Total |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------|----------|----------|-----------|
|                                                                                                                                                                    | (a) 2016      | (b) 2015 | (c) 2014 | (d) 2013 |           |
| <b>b</b> 85% of line 2a . . . . .                                                                                                                                  |               |          |          |          |           |
| <b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .                                                                             |               |          |          |          |           |
| <b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .                                                           |               |          |          |          |           |
| <b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .                                   |               |          |          |          |           |
| <b>3</b> Complete 3a, b, or c for the alternative test relied upon                                                                                                 |               |          |          |          |           |
| <b>a</b> "Assets" alternative test - enter                                                                                                                         |               |          |          |          |           |
| <b>(1)</b> Value of all assets . . . . .                                                                                                                           |               |          |          |          |           |
| <b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .                                                                                     |               |          |          |          |           |
| <b>b</b> "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . . . .                              |               |          |          |          |           |
| <b>c</b> "Support" alternative test - enter                                                                                                                        |               |          |          |          |           |
| <b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . . |               |          |          |          |           |
| <b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) . . . . .                                      |               |          |          |          |           |
| <b>(3)</b> Largest amount of support from an exempt organization . . . . .                                                                                         |               |          |          |          |           |
| <b>(4)</b> Gross investment income . . . . .                                                                                                                       |               |          |          |          |           |

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year - see instructions.)**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

N/A

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

N/A

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

**a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed.

SEE STATEMENT 10

**b** The form in which applications should be submitted and information and materials they should include:

SEE ATTACHED STATEMENT FOR LINE 2

**c** Any submission deadlines:

SEE ATTACHED STATEMENT FOR LINE 2

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

SEE ATTACHED STATEMENT FOR LINE 2

**Part XV** **Supplementary Information** *(continued)***3 Grants and Contributions Paid During the Year or Approved for Future Payment**

| Recipient<br>Name and address (home or business)      | If recipient is an individual,<br>show any relationship to<br>any foundation manager<br>or substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution | Amount   |
|-------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------|----------|
| <b>a Paid during the year</b><br><br>SEE STATEMENT 16 |                                                                                                                    |                                      |                                     | 117,000. |
| <b>Total</b> . . . . .                                |                                                                                                                    |                                      | ▶ <b>3a</b>                         | 117,000. |
| <b>b Approved for future payment</b>                  |                                                                                                                    |                                      |                                     |          |
| <b>Total</b> . . . . .                                |                                                                                                                    |                                      | ▶ <b>3b</b>                         |          |

### 1 Program service revenue

**g Fees and contracts from government agencies**

2 Membership dues and assessments . . . . .

### 3 Interest on savings and temporary cash investments •

**4 Dividends and interest from securities . . . .**

**5 Net rental income or (loss) from real estate**

a Debt-financed property . . . . .

**b Not debt-financed property . . . . .**

**6 Net rental income or (loss) from personal property.** .

7 Other investment income . . . . .

8 Gain or (loss) from sales of assets other than inventory

9 Net income or (loss) from special events . . .

10 Gross profit or (loss) from sales of inventory . .

11 Other revenue a \_\_\_\_\_

b DEFERRED INCOME

ROYALTY INCOME

d FARM-OTHER INCOME

\_\_\_\_\_

12 Subtotal. Add columns (b), (d), and (e)

**13 Total.** Add line 12, columns (b), (d), and (e) . . .

(See worksheet in line 13 instructions to verify calculations.)

## Part XV-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.

▼

Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See instructions.)

NOT APPLICABLE

## Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- |                                                                                                                                                                                                                                                                                                                                                                                                       |              |    |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|----|
| <b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?                                                                                                                                          | Yes          | No |
| <b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of:                                                                                                                                                                                                                                                                                                           |              |    |
| <b>(1)</b> Cash . . . . .                                                                                                                                                                                                                                                                                                                                                                             | <b>1a(1)</b> | X  |
| <b>(2)</b> Other assets . . . . .                                                                                                                                                                                                                                                                                                                                                                     | <b>1a(2)</b> | X  |
| <b>b</b> Other transactions:                                                                                                                                                                                                                                                                                                                                                                          |              |    |
| <b>(1)</b> Sales of assets to a noncharitable exempt organization . . . . .                                                                                                                                                                                                                                                                                                                           | <b>1b(1)</b> | X  |
| <b>(2)</b> Purchases of assets from a noncharitable exempt organization . . . . .                                                                                                                                                                                                                                                                                                                     | <b>1b(2)</b> | X  |
| <b>(3)</b> Rental of facilities, equipment, or other assets . . . . .                                                                                                                                                                                                                                                                                                                                 | <b>1b(3)</b> | X  |
| <b>(4)</b> Reimbursement arrangements . . . . .                                                                                                                                                                                                                                                                                                                                                       | <b>1b(4)</b> | X  |
| <b>(5)</b> Loans or loan guarantees . . . . .                                                                                                                                                                                                                                                                                                                                                         | <b>1b(5)</b> | X  |
| <b>(6)</b> Performance of services or membership or fundraising solicitations . . . . .                                                                                                                                                                                                                                                                                                               | <b>1b(6)</b> | X  |
| <b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees . . . . .                                                                                                                                                                                                                                                                                                   | <b>1c</b>    | X  |
| <b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. |              |    |

[illegible]

- 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 ☒ No
- b** If "Yes," complete the following schedule.

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |

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, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

**Sign  
Here**

Kristen Baxter  
Signature of officer or trustee

05/02/2017  
Date

▶ Vice President  
Title

May the IRS discuss this return with the preparer shown below (see instructions)? ☒ Yes ☐ No

**Paid  
Preparer  
Use Only**

Print/Type preparer's name

KELLY NEUGEBAUER

Preparer's signature \_\_\_\_\_

Kelji Leung

Date \_\_\_\_\_

|       |  |    |      |
|-------|--|----|------|
| Check |  | if | PTIN |
|-------|--|----|------|

self-employed P01285591

Firm's name ▶ DELOITTE TAX LLP

|            |              |
|------------|--------------|
| Firm's EIN | ▶ 86-1065772 |
|------------|--------------|

Firm's address ► 127 PUBLIC SQUARE  
CLEVELAND, OH

44114

Phone no. 312-486-9652

|                                                                  |                                         |
|------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>JPMORGAN CHASE FOUNDATION OF NORTHWEST | <b>Identifying Number</b><br>72-6022876 |
|------------------------------------------------------------------|-----------------------------------------|

.004065454 RI IN 80 ACS IN THE W/2

|     |    |                                                                                    |
|-----|----|------------------------------------------------------------------------------------|
| Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|-----|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

RENTAL INCOME

3.

**OTHER INCOME:**

**TOTAL GROSS INCOME**

3.

**OTHER EXPENSES:**

DEPRECIATION (SHOWN BELOW)

**LESS: Beneficiary's Portion**

## AMORTIZATION

### LESS. Beneficiary's Portion

## DEPLETION

**LESS: Beneficiary's Portion**

**TOTAL EXPENSES****TOTAL RENT OR ROYALTY INCOME (LOSS)**

3.

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

### Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others****Net Rent or Royalty Income (Loss)**

3.

**Deductible Rental Loss (if Applicable)****SCHEDULE FOR DEPRECIATION CLAIMED**[illegible]

## RENT AND ROYALTY INCOME

|                                                                  |                                         |
|------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>JPMORGAN CHASE FOUNDATION OF NORTHWEST | <b>Identifying Number</b><br>72-6022876 |
|------------------------------------------------------------------|-----------------------------------------|

### DESCRIPTION OF PROPERTY

MI IN 15 ACS BEING THE W 3/4 W/2

|     |    |                                                                                    |
|-----|----|------------------------------------------------------------------------------------|
| Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|-----|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

RENTAL INCOME

3,586.

OTHER INCOME:

TOTAL GROSS INCOME

3,586.

OTHER EXPENSES:

DEPRECIATION (SHOWN BELOW)

**LESS: Beneficiary's Portion**

## AMORTIZATION

**LESS: Beneficiary's Portion**

## DEPLETION

**LESS: Beneficiary's Portion**

**TOTAL EXPENSES****TOTAL RENT OR ROYALTY INCOME (LOSS)**

3,586.

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others****Net Rent or Royalty Income (Loss)**

3,586.

**Deductible Rental Loss (if Applicable)****SCHEDULE FOR DEPRECIATION CLAIMED**[illegible]

## RENT AND ROYALTY INCOME

|                                                                  |                                         |
|------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>JPMORGAN CHASE FOUNDATION OF NORTHWEST | <b>Identifying Number</b><br>72-6022876 |
|------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

1/10 MI IN 752 ACS BEING S/2 S1,

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

RENTAL INCOME

6,094.

OTHER INCOME:

|                              |        |
|------------------------------|--------|
| TOTAL GROSS INCOME . . . . . | 6,094. |
|------------------------------|--------|

**OTHER EXPENSES:**

DEPRECIATION (SHOWN BELOW)

### LESS Beneficiary's Portion

## AMORTIZATION

**LESS: Beneficiary's Portion**

## DEPLETION

### LESS Beneficiary's Portion

**TOTAL EXPENSES**

|                                                      |               |
|------------------------------------------------------|---------------|
| <b>TOTAL RENT OR ROYALTY INCOME (LOSS)</b> . . . . . | <b>6,094.</b> |
|------------------------------------------------------|---------------|

Less Amount to

### Rent or Royalty

## Depreciation

## Depletion

Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others**

|                                          |               |
|------------------------------------------|---------------|
| <b>Net Rent or Royalty Income (Loss)</b> | <b>6,094.</b> |
|------------------------------------------|---------------|

**Deductible Rental Loss (if Applicable)****SCHEDULE FOR DEPRECIATION CLAIMED**[illegible]



## RENT AND ROYALTY INCOME

|                                                                  |                                         |
|------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>JPMORGAN CHASE FOUNDATION OF NORTHWEST | <b>Identifying Number</b><br>72-6022876 |
|------------------------------------------------------------------|-----------------------------------------|

### DESCRIPTION OF PROPERTY

1/2 OF .018934 MI IN 8248 ACS S3.

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

RENTAL INCOME

308.

**OTHER INCOME.**

**TOTAL GROSS INCOME**

308.

**OTHER EXPENSES:**

DEPRECIATION (SHOWN BELOW)

**LESS. Beneficiary's Portion**

## AMORTIZATION

**LESS: Beneficiary's Portion**

## DEPLETION

**LESS: Beneficiary's Portion****TOTAL EXPENSES****TOTAL RENT OR ROYALTY INCOME (LOSS)**

308.

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others****Net Rent or Royalty Income (Loss)**

308.

**Deductible Rental Loss (if Applicable)**

### SCHEDULE FOR DEPRECIATION CLAIMED

[illegible]

## RENT AND ROYALTY INCOME

|                                        |                           |
|----------------------------------------|---------------------------|
| <b>Taxpayer's Name</b>                 | <b>Identifying Number</b> |
| JPMORGAN CHASE FOUNDATION OF NORTHWEST | 72-6022876                |

### DESCRIPTION OF PROPERTY

1/2 OF .018934 MI IN 1160 ACS IN

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

**TYPE OF PROPERTY:** 4 - COMMERCIAL

RENTAL INCOME

10.

**OTHER INCOME:**

**TOTAL GROSS INCOME**

10.

**OTHER EXPENSES:**

DEPRECIATION (SHOWN BELOW)

**LESS: Beneficiary's Portion**

## AMORTIZATION

### LESS Beneficiary's Portion

## DEPLETION

**LESS: Beneficiary's Portion**

**TOTAL EXPENSES**

**TOTAL RENT OR ROYALTY INCOME (LOSS)**

10.

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others****Net Rent or Royalty Income (Loss)**

10.

**Deductible Rental Loss (if Applicable)**

## SCHEDULE FOR DEPRECIATION CLAIMED

[illegible]

## RENT AND ROYALTY INCOME

|                                                                  |                                         |
|------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>JPMORGAN CHASE FOUNDATION OF NORTHWEST | <b>Identifying Number</b><br>72-6022876 |
|------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

1/2 OF .018934 MI IN 280 ACS BEING

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

RENTAL INCOME

100.

OTHER INCOME:

**TOTAL GROSS INCOME**

100.

**OTHER EXPENSES:**

DEPRECIATION (SHOWN BELOW)

### LESS Beneficiary's Portion

## AMORTIZATION

**LESS: Beneficiary's Portion**

## DEPLETION

### LESS. Beneficiary's Portion

**TOTAL EXPENSES****TOTAL RENT OR ROYALTY INCOME (LOSS)**

100.

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others****Net Rent or Royalty Income (Loss)**

100.

**Deductible Rental Loss (if Applicable)****SCHEDULE FOR DEPRECIATION CLAIMED**[illegible]

## RENT AND ROYALTY INCOME

|                                                                  |                                         |
|------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>JPMORGAN CHASE FOUNDATION OF NORTHWEST | <b>Identifying Number</b><br>72-6022876 |
|------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

1/2 OF .018934 MI IN 440 ACS BEING

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

RENTAL INCOME

379.

**OTHER INCOME:****TOTAL GROSS INCOME**

379.

**OTHER EXPENSES:**

DEPRECIATION (SHOWN BELOW)

### LESS. Beneficiary's Portion

## AMORTIZATION

### LESS. Beneficiary's Portion

## DEPLETION

**LESS: Beneficiary's Portion****TOTAL EXPENSES****TOTAL RENT OR ROYALTY INCOME (LOSS)**

379.

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others****Net Rent or Royalty Income (Loss)**

379.

**Deductible Rental Loss (if Applicable)**

## SCHEDULE FOR DEPRECIATION CLAIMED

[illegible]

## RENT AND ROYALTY INCOME

|                                                                  |                                         |
|------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>JPMORGAN CHASE FOUNDATION OF NORTHWEST | <b>Identifying Number</b><br>72-6022876 |
|------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

1/2 OF .018934 MI IN 720 ACS

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

**TYPE OF PROPERTY:** 4 - COMMERCIAL

RENTAL INCOME

1,271.

**OTHER INCOME:**

**TOTAL GROSS INCOME**

1,271.

**OTHER EXPENSES:**

DEPRECIATION (SHOWN BELOW)

**LESS. Beneficiary's Portion**

## AMORTIZATION

**LESS: Beneficiary's Portion**

## DEPLETION

### LESS. Beneficiary's Portion

**TOTAL EXPENSES****TOTAL RENT OR ROYALTY INCOME (LOSS)**

1,271.

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

### Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others****Net Rent or Royalty Income (Loss)**

1,271.

**Deductible Rental Loss (if Applicable)**

### SCHEDULE FOR DEPRECIATION CLAIMED

[illegible]

## RENT AND ROYALTY INCOME

|                                                                  |                                         |
|------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>JPMORGAN CHASE FOUNDATION OF NORTHWEST | <b>Identifying Number</b><br>72-6022876 |
|------------------------------------------------------------------|-----------------------------------------|

### DESCRIPTION OF PROPERTY

1/2 OF .018934 MI IN 285 ACS BEING

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

RENTAL INCOME

372.

OTHER INCOME:

**TOTAL GROSS INCOME**

372.

OTHER EXPENSES:

DEPRECIATION (SHOWN BELOW)

**LESS: Beneficiary's Portion**

## AMORTIZATION

### LESS. Beneficiary's Portion

## DEPLETION

### LESS: Beneficiary's Portion

**TOTAL EXPENSES****TOTAL RENT OR ROYALTY INCOME (LOSS)**

372.

### Less Amount to

### Rent or Royalty

## Depreciation

## Depletion

Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others****Net Rent or Royalty Income (Loss)**

372.

**Deductible Rental Loss (if Applicable)****SCHEDULE FOR DEPRECIATION CLAIMED**[illegible]



## RENT AND ROYALTY INCOME

|                                                                      |     |                                         |                                                                                       |
|----------------------------------------------------------------------|-----|-----------------------------------------|---------------------------------------------------------------------------------------|
| <b>Taxpayer's Name</b><br>JPMORGAN CHASE FOUNDATION OF NORTHWEST     |     | <b>Identifying Number</b><br>72-6022876 |                                                                                       |
| <b>DESCRIPTION OF PROPERTY</b><br>1/2 OF .018934 MI IN 120 ACS BEING |     |                                         |                                                                                       |
| <input type="checkbox"/>                                             | Yes | <input type="checkbox"/>                | No Did you actively participate in the operation of the activity during the tax year? |
| <b>TYPE OF PROPERTY:</b> 4 - COMMERCIAL                              |     |                                         |                                                                                       |
| RENTAL INCOME                                                        |     | 31.                                     |                                                                                       |
| OTHER INCOME:                                                        |     |                                         |                                                                                       |
|                                                                      |     |                                         |                                                                                       |
| TOTAL GROSS INCOME                                                   |     |                                         | 31.                                                                                   |
| OTHER EXPENSES:                                                      |     |                                         |                                                                                       |
|                                                                      |     |                                         |                                                                                       |
|                                                                      |     |                                         |                                                                                       |
|                                                                      |     |                                         |                                                                                       |
|                                                                      |     |                                         |                                                                                       |
|                                                                      |     |                                         |                                                                                       |
|                                                                      |     |                                         |                                                                                       |
|                                                                      |     |                                         |                                                                                       |
|                                                                      |     |                                         |                                                                                       |
|                                                                      |     |                                         |                                                                                       |
| DEPRECIATION (SHOWN BELOW)                                           |     |                                         |                                                                                       |
| LESS: Beneficiary's Portion                                          |     |                                         |                                                                                       |
| AMORTIZATION                                                         |     |                                         |                                                                                       |
| LESS: Beneficiary's Portion                                          |     |                                         |                                                                                       |
| DEPLETION                                                            |     |                                         |                                                                                       |
| LESS: Beneficiary's Portion                                          |     |                                         |                                                                                       |
| TOTAL EXPENSES                                                       |     |                                         | 31.                                                                                   |
| TOTAL RENT OR ROYALTY INCOME (LOSS)                                  |     |                                         |                                                                                       |
| <b>Less Amount to</b>                                                |     |                                         |                                                                                       |
| Rent or Royalty                                                      |     |                                         |                                                                                       |
| Depreciation                                                         |     |                                         |                                                                                       |
| Depletion                                                            |     |                                         |                                                                                       |
| Investment Interest Expense                                          |     |                                         |                                                                                       |
| Other Expenses                                                       |     |                                         |                                                                                       |
| Net Income (Loss) to Others                                          |     |                                         |                                                                                       |
| Net Rent or Royalty Income (Loss)                                    |     |                                         | 31.                                                                                   |
| Deductible Rental Loss (if Applicable)                               |     |                                         |                                                                                       |

### SCHEDULE FOR DEPRECIATION CLAIMED

[illegible]

## RENT AND ROYALTY INCOME

|                                                                  |                                         |
|------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>JPMORGAN CHASE FOUNDATION OF NORTHWEST | <b>Identifying Number</b><br>72-6022876 |
|------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

1/2 OF .018934 MI IN 3000 ACS IN

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

RENTAL INCOME

160.

**OTHER INCOME:**

**TOTAL GROSS INCOME**

160.

**OTHER EXPENSES:**

DEPRECIATION (SHOWN BELOW)

### LESS Beneficiary's Portion

## AMORTIZATION

**LESS: Beneficiary's Portion**

## DEPLETION

**LESS: Beneficiary's Portion**

**TOTAL EXPENSES****TOTAL RENT OR ROYALTY INCOME (LOSS)**

160.

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

### Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others****Net Rent or Royalty Income (Loss)**

160.

**Deductible Rental Loss (if Applicable)****SCHEDULE FOR DEPRECIATION CLAIMED**[illegible]

## RENT AND ROYALTY INCOME

|                                                                  |                                         |
|------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>JPMORGAN CHASE FOUNDATION OF NORTHWEST | <b>Identifying Number</b><br>72-6022876 |
|------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

1/2 OF .018934 MI IN 440 ACS BEING

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

**TYPE OF PROPERTY:** 4 - COMMERCIAL

## RENTAL INCOME

3.

**OTHER INCOME:****TOTAL GROSS INCOME**

3.

**OTHER EXPENSES:**

DEPRECIATION (SHOWN BELOW)

**LESS: Beneficiary's Portion**

## AMORTIZATION

**LESS: Beneficiary's Portion**

## DEPLETION

### LESS: Beneficiary's Portion

**TOTAL EXPENSES****TOTAL RENT OR ROYALTY INCOME (LOSS)**

3.

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others .****Net Rent or Royalty Income (Loss)**

3.

**Deductible Rental Loss (if Applicable)****SCHEDULE FOR DEPRECIATION CLAIMED**[illegible]

## RENT AND ROYALTY INCOME

|                                                                  |                                         |
|------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>JPMORGAN CHASE FOUNDATION OF NORTHWEST | <b>Identifying Number</b><br>72-6022876 |
|------------------------------------------------------------------|-----------------------------------------|

### DESCRIPTION OF PROPERTY

1/2 OF .018934 MI IN 1000 ACS BEING

|  |     |  |    |                                                                                    |
|--|-----|--|----|------------------------------------------------------------------------------------|
|  | Yes |  | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|--|----|------------------------------------------------------------------------------------|

**TYPE OF PROPERTY.** 4 - COMMERCIAL

RENTAL INCOME

179.

**OTHER INCOME:**

**TOTAL GROSS INCOME**

179.

**OTHER EXPENSES:**

DEPRECIATION (SHOWN BELOW)

### LESS. Beneficiary's Portion

## AMORTIZATION

**LESS: Beneficiary's Portion**

## DEPLETION

### LESS Beneficiary's Portion

**TOTAL EXPENSES****TOTAL RENT OR ROYALTY INCOME (LOSS)**

179.

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others****Net Rent or Royalty Income (Loss)**

---

179.

**Deductible Rental Loss (if Applicable)****SCHEDULE FOR DEPRECIATION CLAIMED**[illegible]

## RENT AND ROYALTY INCOME

|                                                                  |                                         |
|------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>JPMORGAN CHASE FOUNDATION OF NORTHWEST | <b>Identifying Number</b><br>72-6022876 |
|------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

1/2 OF .018934 MI IN 40 ACS IN THE

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

RENTAL INCOME

63.

**OTHER INCOME:**

**TOTAL GROSS INCOME**

63.

**OTHER EXPENSES:**

## DEPRECIATION (SHOWN BELOW)

**LESS: Beneficiary's Portion**

## AMORTIZATION

### LESS Beneficiary's Portion

## DEPLETION

**LESS: Beneficiary's Portion****TOTAL EXPENSES****TOTAL RENT OR ROYALTY INCOME (LOSS)**

63.

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

### Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others****Net Rent or Royalty Income (Loss)**

63.

**Deductible Rental Loss (if Applicable)**

### SCHEDULE FOR DEPRECIATION CLAIMED

[illegible]

## RENT AND ROYALTY INCOME

|                                                                  |                                         |
|------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>JPMORGAN CHASE FOUNDATION OF NORTHWEST | <b>Identifying Number</b><br>72-6022876 |
|------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

1/2 OF .018934 MI IN 80 ACS IN THE

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

**TYPE OF PROPERTY:** 4 - COMMERCIAL

## RENTAL INCOME

221.

**OTHER INCOME:**

**TOTAL GROSS INCOME**

221.

**OTHER EXPENSES:**

DEPRECIATION (SHOWN BELOW)

### LESS: Beneficiary's Portion

## AMORTIZATION

### LESS. Beneficiary's Portion

## DEPLETION

### LESS. Beneficiary's Portion

**TOTAL EXPENSES****TOTAL RENT OR ROYALTY INCOME (LOSS)**

221.

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

### Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others****Net Rent or Royalty Income (Loss)**

221.

**Deductible Rental Loss (if Applicable)**

### SCHEDULE FOR DEPRECIATION CLAIMED

[illegible]

## RENT AND ROYALTY INCOME

|                                                                  |                                         |
|------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>JPMORGAN CHASE FOUNDATION OF NORTHWEST | <b>Identifying Number</b><br>72-6022876 |
|------------------------------------------------------------------|-----------------------------------------|

### DESCRIPTION OF PROPERTY

1/2 OF .018934 MI IN 160 ACS BEING

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

RENTAL INCOME

709.

**OTHER INCOME:**

**TOTAL GROSS INCOME**

709.

OTHER EXPENSES:

DEPRECIATION (SHOWN BELOW)

### LESS Beneficiary's Portion

## AMORTIZATION

### LESS. Beneficiary's Portion

## DEPLETION

**LESS: Beneficiary's Portion**

**TOTAL EXPENSES****TOTAL RENT OR ROYALTY INCOME (LOSS)**

709.

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

### Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others****Net Rent or Royalty Income (Loss)**

709.

**Deductible Rental Loss (if Applicable)**

## SCHEDULE FOR DEPRECIATION CLAIMED

[illegible]

## RENT AND ROYALTY INCOME

|                                                                  |                                         |
|------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>JPMORGAN CHASE FOUNDATION OF NORTHWEST | <b>Identifying Number</b><br>72-6022876 |
|------------------------------------------------------------------|-----------------------------------------|

### DESCRIPTION OF PROPERTY

1/2 OF .018934 MI IN 200 ACS BEING

|     |    |                                                                                    |
|-----|----|------------------------------------------------------------------------------------|
| Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|-----|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

RENTAL INCOME

18.

OTHER INCOME:

TOTAL GROSS INCOME

18.

OTHER EXPENSES:

DEPRECIATION (SHOWN BELOW)

**LESS: Beneficiary's Portion**

## AMORTIZATION

### LESS Beneficiary's Portion

## DEPLETION

### LESS: Beneficiary's Portion

**TOTAL EXPENSES****TOTAL RENT OR ROYALTY INCOME (LOSS)**

18.

**Less Amount to**

### Rent or Royalty

## Depreciation

### Depletion

Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others****Net Rent or Royalty Income (Loss)**

---

18.

**Deductible Rental Loss (if Applicable)****SCHEDULE FOR DEPRECIATION CLAIMED**[illegible]

## RENT AND ROYALTY INCOME

|                                                                  |                                         |
|------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>JPMORGAN CHASE FOUNDATION OF NORTHWEST | <b>Identifying Number</b><br>72-6022876 |
|------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

1/2 OF .018934 MI IN 409 ACS BEING

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

RENTAL INCOME

572.

**OTHER INCOME:**

**TOTAL GROSS INCOME**

572.

OTHER EXPENSES:

DEPRECIATION (SHOWN BELOW)

**LESS: Beneficiary's Portion**

## AMORTIZATION

### LESS. Beneficiary's Portion

## DEPLETION

**LESS: Beneficiary's Portion****TOTAL EXPENSES****TOTAL RENT OR ROYALTY INCOME (LOSS)**

572.

### Less Amount to

### Rent or Royalty

## Depreciation

## Depletion

### Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others****Net Rent or Royalty Income (Loss)**

572.

**Deductible Rental Loss (if Applicable)****SCHEDULE FOR DEPRECIATION CLAIMED**[illegible]

## RENT AND ROYALTY INCOME

|                                                                  |                                         |
|------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>JPMORGAN CHASE FOUNDATION OF NORTHWEST | <b>Identifying Number</b><br>72-6022876 |
|------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

1/2 OF .0018934 MI IN 40 ACS BEING

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

RENTAL INCOME

63.

**OTHER INCOME:**

**TOTAL GROSS INCOME**

63.

OTHER EXPENSES:

DEPRECIATION (SHOWN BELOW)

**LESS: Beneficiary's Portion**

## AMORTIZATION

### LESS Beneficiary's Portion

## DEPLETION

### LESS Beneficiary's Portion

**TOTAL EXPENSES****TOTAL RENT OR ROYALTY INCOME (LOSS)**

63.

Less Amount to

### Rent or Royalty

## Depreciation

## Depletion

### Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others** .**Net Rent or Royalty Income (Loss)**

63.

**Deductible Rental Loss (if Applicable)****SCHEDULE FOR DEPRECIATION CLAIMED**[illegible]

## RENT AND ROYALTY INCOME

|                                                                  |                                         |
|------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>JPMORGAN CHASE FOUNDATION OF NORTHWEST | <b>Identifying Number</b><br>72-6022876 |
|------------------------------------------------------------------|-----------------------------------------|

**DESCRIPTION OF PROPERTY**

72/2560 MI IN THE E/2 SW/4 OF S22-

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

RENTAL INCOME

51.

**OTHER INCOME:**

**TOTAL GROSS INCOME**

51.

**OTHER EXPENSES:**

DEPRECIATION (SHOWN BELOW)

**LESS: Beneficiary's Portion**

## AMORTIZATION

**LESS: Beneficiary's Portion**

## DEPLETION

**LESS: Beneficiary's Portion**

**TOTAL EXPENSES****TOTAL RENT OR ROYALTY INCOME (LOSS)**

51.

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others****Net Rent or Royalty Income (Loss)**

51.

**Deductible Rental Loss (if Applicable)****SCHEDULE FOR DEPRECIATION CLAIMED**[illegible]

## RENT AND ROYALTY INCOME

|                                                                  |                                         |
|------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>JPMORGAN CHASE FOUNDATION OF NORTHWEST | <b>Identifying Number</b><br>72-6022876 |
|------------------------------------------------------------------|-----------------------------------------|

### DESCRIPTION OF PROPERTY

MI IN 80 ACS BEING S/2 SE/4 OF

|  |     |  |    |                                                                                    |
|--|-----|--|----|------------------------------------------------------------------------------------|
|  | Yes |  | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|--|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

RENTAL INCOME

8,216.

**OTHER INCOME:**

**TOTAL GROSS INCOME**

8,216.

**OTHER EXPENSES:**

**DEPRECIATION (SHOWN BELOW)****LESS: Beneficiary's Portion**

## AMORTIZATION

**LESS. Beneficiary's Portion**

## DEPLETION

### LESS: Beneficiary's Portion

**TOTAL EXPENSES****TOTAL RENT OR ROYALTY INCOME (LOSS)**

8,216.

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

Investment Interest Expense

### Other Expenses

**Net Income (Loss) to Others****Net Rent or Royalty Income (Loss)**

8,216.

**Deductible Rental Loss (if Applicable)**

### SCHEDULE FOR DEPRECIATION CLAIMED

[illegible]



## RENT AND ROYALTY INCOME

|                                                                  |                                         |
|------------------------------------------------------------------|-----------------------------------------|
| <b>Taxpayer's Name</b><br>JPMORGAN CHASE FOUNDATION OF NORTHWEST | <b>Identifying Number</b><br>72-6022876 |
|------------------------------------------------------------------|-----------------------------------------|

DESCRIPTION OF PROPERTY  
MINERAL ACTIVITY

|  |     |    |                                                                                    |
|--|-----|----|------------------------------------------------------------------------------------|
|  | Yes | No | Did you actively participate in the operation of the activity during the tax year? |
|--|-----|----|------------------------------------------------------------------------------------|

TYPE OF PROPERTY: 4 - COMMERCIAL

RENTAL INCOME

1.

**OTHER INCOME:**

|                                     |           |
|-------------------------------------|-----------|
| <b>TOTAL GROSS INCOME</b> . . . . . | <b>1.</b> |
|-------------------------------------|-----------|

**OTHER EXPENSES:**

DEPRECIATION (SHOWN BELOW)

### LESS: Beneficiary's Portion

## AMORTIZATION

**LESS. Beneficiary's Portion**

## DEPLETION

**LESS: Beneficiary's Portion**

**TOTAL EXPENSES**

|                                                      |           |
|------------------------------------------------------|-----------|
| <b>TOTAL RENT OR ROYALTY INCOME (LOSS)</b> . . . . . | <b>1.</b> |
|------------------------------------------------------|-----------|

**Less Amount to**

### Rent or Royalty

## Depreciation

## Depletion

### Investment Interest Expense

## Other Expenses

**Net Income (Loss) to Others**

|                                          |           |
|------------------------------------------|-----------|
| <b>Net Rent or Royalty Income (Loss)</b> | <b>1.</b> |
|------------------------------------------|-----------|

**Deductible Rental Loss (if Applicable)**

## SCHEDULE FOR DEPRECIATION

### SCHEDULE FOR DEPRECIATION CLAIMED

[illegible]

## FORM 990PF, PART I - DIVIDENDS AND INTEREST FROM SECURITIES

| DESCRIPTION<br>-----                     | REVENUE<br>AND<br>EXPENSES<br>PER BOOKS<br>----- | NET<br>INVESTMENT<br>INCOME<br>----- |
|------------------------------------------|--------------------------------------------------|--------------------------------------|
| AQR LONG-SHORT EQUITY-R6                 | 124.                                             | 124.                                 |
| ARTISAN INTL VALUE FD-ADV                | 439.                                             | 439.                                 |
| BLACKROCK HIGH YIELD PT-BLAC             | 634.                                             | 634.                                 |
| CAPITAL GR NON US EQUITY                 | 1,752.                                           | 1,752.                               |
| DEUTSCHE X-TRACKERS MSCI EAF             | 1,417.                                           | 1,417.                               |
| DODGE & INTERNATIONAL STOCK FUND         | 1,829.                                           | 1,829.                               |
| DOUBLELINE TOTL RET BND-I                | 2,127.                                           | 2,127.                               |
| EATON VANCE MUT FDS TR                   | 1,495.                                           | 1,495.                               |
| GATEWAY TR GATEWAY FD CL Y*              | 801.                                             | 504.                                 |
| HARTFORD CAPITAL APPRECIATION FUND       | 330.                                             | 330.                                 |
| ISHARES MISCI EAFE INDEX FUND            | 704.                                             | 704.                                 |
| ISHARES RUSSELL MIDCAP VALUE INDEX       | 3,427.                                           | 3,427.                               |
| JPM GLBL RES ENH INDEX FD - SEL          | 929.                                             | 929.                                 |
| JPM GLBL BD OPP FD - CL I FUND 3294      | 3,922.                                           | 3,922.                               |
| JPM TR I MLT SC INCOME FD - SEL          | 63.                                              | 63.                                  |
| JPMORGAN US EQUITY FUND                  | 38.                                              | 38.                                  |
| JPMORGAN US LARGE CAP CORE PLUS FUND SEL | 472.                                             | 472.                                 |
| JPMORGAN STRATEGIC INCOME OPPTYS FUND SE | 210.                                             | 210.                                 |
| JPMORGAN SHORT DURATION BOND FUND        | 50.                                              | 50.                                  |
| MFS EMERGING MKTS DEBT FD-I              | 373.                                             | 373.                                 |
| NEUBERGER BERMAN MULTI CAP               | 775.                                             | 775.                                 |
| NEUBERGER BERMAN HI IN B-INS             | 1,169.                                           | 1,169.                               |
| PRUDENTIAL ABS RET BND-Z                 | 1,675.                                           | 1,675.                               |
| SPDR TR UNIT SER 1                       | 889.                                             | 648.                                 |
| VANGUARD TOTAL BOND MARKET INDEX FUND-AD | 7,149.                                           | 7,149.                               |
| VANGUARD FXD INCM INTER-TERM FD ADM*     | 228.                                             | 228.                                 |
| VANGUARD EUROPEAN ETF                    | 986.                                             | 986.                                 |
|                                          | 458.                                             | 458.                                 |
| TOTAL                                    | -----<br>34,465.<br>=====                        | -----<br>33,927.<br>=====            |

JPMORGAN CHASE FOUNDATION OF NORTHWEST

72-6022876

FORM 990PF, PART I - OTHER INCOME  
=====

| DESCRIPTION<br>----- | REVENUE<br>AND<br>EXPENSES<br>PER BOOKS<br>----- | NET<br>INVESTMENT<br>INCOME<br>----- |
|----------------------|--------------------------------------------------|--------------------------------------|
| DEFERRED INCOME      | -819.                                            |                                      |
| RENTAL INCOME        | 2,794.                                           | 2,794.                               |
| MINERAL ROYALTIES    | 22,988.                                          | 22,988.                              |
|                      | -----                                            | -----                                |
| TOTALS               | 24,963.                                          | 25,782.                              |
|                      | =====                                            | =====                                |

JPMORGAN CHASE FOUNDATION OF NORTHWEST

72-6022876

FORM 990PF, PART I - TAXES

=====

| DESCRIPTION<br>-----           | REVENUE<br>AND<br>EXPENSES<br>PER BOOKS<br>----- | NET<br>INVESTMENT<br>INCOME<br>----- |
|--------------------------------|--------------------------------------------------|--------------------------------------|
| FEDERAL TAX PAYMENT - PRIOR YE | 300.                                             |                                      |
| FEDERAL ESTIMATES - INCOME     | 1,500.                                           |                                      |
| FOREIGN TAXES ON QUALIFIED FOR | 631.                                             | 631.                                 |
| FOREIGN TAXES ON NONQUALIFIED  | 29.                                              | 29.                                  |
|                                | -----                                            | -----                                |
| TOTALS                         | 2,460.                                           | 660.                                 |
|                                | =====                                            | =====                                |

JPMORGAN CHASE FOUNDATION OF NORTHWEST

72-6022876

FORM 990PF, PART I - OTHER EXPENSES

=====

| DESCRIPTION<br>-----        | REVENUE<br>AND<br>EXPENSES<br>PER BOOKS<br>----- | NET<br>INVESTMENT<br>INCOME<br>----- |
|-----------------------------|--------------------------------------------------|--------------------------------------|
| FARM - TAXES                | 700.                                             | 700.                                 |
| FARM - INSURANCE            | 896.                                             | 896.                                 |
| FARM - OTHER EXPENSES       | 21,399.                                          | 21,399.                              |
| OTHER EXPENSES              | 10.                                              | 10.                                  |
| MINERAL INT- PRODUCTION TAX | 947.                                             | 947.                                 |
| ROYALTY - OTHER EXPENSES    | 5,408.                                           | 5,408.                               |
| <br>TOTALS                  | <br>-----<br>29,360.<br>=====                    | <br>-----<br>29,360.<br>=====        |

JPMORGAN CHASE FOUNDATION OF NORTHWEST

72-6022876

FORM 990PF, PART II - CORPORATE STOCK

=====

| DESCRIPTION<br>-----           | ENDING<br>BOOK VALUE<br>----- | ENDING<br>FMV<br>--- |
|--------------------------------|-------------------------------|----------------------|
| 115233579 BROWN ADV JAPAN ALPH | 32,000.                       | 29,410.              |
| 256206103 DODGE & COX INTL STO | 88,013.                       | 90,154.              |
| 416649309 HARTFORD CAPITAL APP | 80,030.                       | 97,214.              |
| 464287465 ISHARES MSCI EAFE IN | 145,210.                      | 141,381.             |
| 464287473 ISHARES RUSSELL MID- | 16,586.                       | 44,237.              |
| 00170K745 AMG TIMESSQUARE MID  | 20,988.                       | 38,456.              |
| 04314H667 ARTISAN INTL VALUE F | 43,874.                       | 52,696.              |
| 14042Y601 CAPITAL GR NON US EQ | 79,101.                       | 74,789.              |
| 46637K513 JPM GLBL RES ENH IND | 164,872.                      | 176,481.             |
| 4812A1142 JPM US EQ FD - L FUN | 31,727.                       | 42,712.              |
| 4812A2389 JPM US LARGE CAP COR | 41,253.                       | 62,212.              |
| 64122Q309 NEUBERGER BER MU/C O | 81,785.                       | 131,766.             |
| 78462F103 SPDR S&P 500 ETF TRU | 296,826.                      | 352,060.             |
|                                | -----                         | -----                |
| TOTALS                         | 1,122,265.                    | 1,333,568.           |
|                                | =====                         | =====                |

JPMORGAN CHASE FOUNDATION OF NORTHWEST

72-6022876

FORM 990PF, PART II - CORPORATE BONDS

=====

| DESCRIPTION<br>-----           | ENDING<br>BOOK VALUE<br>----- | ENDING<br>FMV<br>--- |
|--------------------------------|-------------------------------|----------------------|
| 91929687 BLACKROCK HIGH YIELD  | 35,500.                       | 37,880.              |
| 258620103 DOUBLELINE TOTL RET  | 41,813.                       | 40,144.              |
| 921937603 VANGUARD TOTAL BOND  | 46,113.                       | 44,605.              |
| 922031810 VANGUARD INTM TRM IN | 32,500.                       | 32,100.              |
| 55273E640 MFS EMERGING MKTS DE | 35,924.                       | 34,461.              |
| 64128K868 NEUBERGER BERMAN HI  | 32,500.                       | 35,882.              |
|                                | -----                         | -----                |
| TOTALS                         | 224,350.                      | 225,072.             |
|                                | =====                         | =====                |

JPMORGAN CHASE FOUNDATION OF NORTHWEST  
 FORM 990PF, PART II - OTHER INVESTMENTS  
 =====

72-6022876

| DESCRIPTION<br>-----           | COST/<br>FMV<br>C OR F<br>----- | ENDING<br>BOOK VALUE<br>----- | ENDING<br>FMV<br>--- |
|--------------------------------|---------------------------------|-------------------------------|----------------------|
| 277923728 EATON VANCE GLOBAL M | C                               | 17,665.                       | 18,004.              |
| 00191K500 AQR LONG-SHORT EQUIT | C                               | 18,209.                       | 18,549.              |
| 12628J881 CRM LONG/SHORT OPPOR | C                               | 18,209.                       | 17,991.              |
| 29446A819 EQUINOX CAMPBELL STR | C                               | 21,201.                       | 17,190.              |
| 74441J829 PRUDENTIAL ABS RET B | C                               | 37,284.                       | 36,196.              |
|                                |                                 | -----                         | -----                |
| TOTALS                         |                                 | 112,568.                      | 107,930.             |
|                                |                                 | =====                         | =====                |

JPMORGAN CHASE FOUNDATION OF NORTHWEST

72-6022876

FORM 990PF, PART II - OTHER ASSETS

=====

| DESCRIPTION<br>-----            | ENDING<br>BOOK VALUE<br>----- | ENDING<br>FMV<br>--- |
|---------------------------------|-------------------------------|----------------------|
| MINERAL ASSETS                  |                               | 49,901.              |
| 997707798 1/2 MI IN 38.5 ACRES  | 1.                            | 1.                   |
| 997708259 SEC 28 CLAIBORNE PH,  | 1.                            | 1.                   |
| 997708348 SEC 18 BIENVILLE PH,  | 1.                            | 1.                   |
| 997708386 SEC 18 BIENVILLE PH,  | 1.                            | 1.                   |
| 997708387 SEC 8 CADDO PH, LA 60 | 1.                            | 1.                   |
| 997708392 SEC 18 BIENVILLE PH,  | 1.                            | 1.                   |
| 997708406 SECS 1,11&12 DESOTO   | 1.                            | 1.                   |
| 997708417 SEC 4 ETC BIENVILLE   | 1.                            | 1.                   |
| 997708418 SEC 3 ETC BIENVILLE   | 1.                            | 1.                   |
| 997708419 SEC 1 ETC BIENVILLE   | 1.                            | 1.                   |
| 997708420 SEC 9 BIENVILLE LA 2  | 1.                            | 1.                   |
| 997708421 SEC 11 BIENVILLE PH   | 1.                            | 1.                   |
| 997708422 SEC 17 BIENVILLE PH   | 1.                            | 1.                   |
| 997708423 SEC 16&22 BIEVILLE P  | 1.                            | 1.                   |
| 997708424 SEC 5 + BIENVILLE PH  | 1.                            | 1.                   |
| 997708425 SEC 3 BIENVILLE PH L  | 1.                            | 1.                   |
| 997708426 SEC 10 + BIENVILLE P  | 1.                            | 1.                   |
| 997708427 SEC 5,8&9 BIENVILLE   | 1.                            | 1.                   |
| 997708428 SEC 7 ETC BIENVILLE   | 1.                            | 1.                   |
| 997708429 SEC 1 BIENVILLE PH L  | 1.                            | 1.                   |
| 997708430 SEC 1 BIENVILLE PH L  | 1.                            | 1.                   |
| 997708431 SEC 1 BIENVILLE PH L  | 1.                            | 1.                   |
| 997708432 SEC 2 BIENVILLE PH L  | 1.                            | 1.                   |
| 997708433 SEC 33 BIENVILLE PH   | 1.                            | 1.                   |
| 997708434 SEC 25ETC BIENVILLE   | 1.                            | 1.                   |
| 997708435 SEC 35 BIENVILLE PH   | 1.                            | 1.                   |
| 997708456 SEC 22 CLAIBORNE PH   | 1.                            | 1.                   |
| 997708462 SEC 14 SABINE PH LA   | 1.                            | 1.                   |

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STATEMENT 8

JPMORGAN CHASE FOUNDATION OF NORTHWEST

72-6022876

FORM 990PF, PART II - OTHER ASSETS

=====

| DESCRIPTION<br>-----            | ENDING<br>BOOK VALUE<br>----- | ENDING<br>FMV<br>--- |
|---------------------------------|-------------------------------|----------------------|
| 997708465 SEC 8 BIENVILLE PH L  | 1.                            | 1.                   |
| 997708466 SEC 22 CADD O PH LA 3 | 1.                            | 1.                   |
| 997724461 WILLIAMS SVY+ MARION  | 1.                            | 1.                   |
| 997730600 SEC 5 BIENVILLE PH L  | 1.                            | 1.                   |
| 997734085 SEC 6 CADD O PH LA 21 | 1.                            | 1.                   |
| 999999999                       |                               |                      |
| 36R004775 ONE FND/BIENVILLE PA  | 12,354.                       | 217,545.             |
| 36R007422 ONE FND/BIENVILLE PA  | 4,100.                        | 47,111.              |
| 36R007539 ONE FND/BIENVILLE PA  | 4,220.                        | 39,345.              |
| 36R007638 ONE FND/CADD O PARISH | 5,125.                        | 62,674.              |
| 36R007745 ONE FND/CADD O PARISH | 10,785.                       | 52,055.              |
| 36R008222 ONE FND/SABINE PARIS  | 10,504.                       | 104,768.             |
| 36R008545 ONE FND/SABINE PARIS  | 15,900.                       | 168,117.             |
| 36R011341 ONE FND/SABINE PARIS  | 20,964.                       | 160,985.             |
| 36R011457 ONE FND/CADD O PARISH | 4,635.                        | 43,668.              |
|                                 | -----                         | -----                |
| TOTALS                          | 88,620.                       | 946,202.             |
|                                 | =====                         | =====                |

JPMORGAN CHASE FOUNDATION OF NORTHWEST  
FORM 990PF, PART XV - LINES 2a - 2d  
=====

72-6022876

RECIPIENT NAME:

JPMorgan Chase Bank, NA- Timothy D Quinn

ADDRESS:

400 Texas St, fl 12

Shreveport, LA 71101

RECIPIENT'S PHONE NUMBER: 318-226-2382

FORM, INFORMATION AND MATERIALS:

no specific form but include the organizations

IRC Section 501 (c)(3) letter

SUBMISSION DEADLINES:

none

supports organizations in Northwest

RESTRICTIONS OR LIMITATIONS ON AWARDS:

LA and Southern AR

STATEMENT 10

RECIPIENT NAME:  
Career Compass of Louisiana  
ADDRESS:  
17425 JEFFERSON HIGHWAY STE G  
Baton Rouge, LA 70817  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 9,700.

RECIPIENT NAME:  
Shreveport Bossier Business Allianc  
for Higher Education  
ADDRESS:  
1111 HAWN AVE  
Shreveport, LA 71107  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 2,500.

RECIPIENT NAME:  
Centenary College of Louisiana  
ADDRESS:  
2911 CENTENARY BLVD  
Shreveport, LA 71104  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:

Council on Alcoholism and Drug Abus

ADDRESS:

2000 FAIRFIELD AVE  
Shreveport, LA 71104

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 1,200.

RECIPIENT NAME:

Holy Angels Residential Facility

ADDRESS:

10450 ELLERBE ROAD  
Shreveport, LA 71106

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 3,000.

RECIPIENT NAME:

Strand Theatre of Shreveport

ADDRESS:

P.O. BOX 1547  
Shreveport, LA 71165

RELATIONSHIP:

NONE

PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 19,100.

RECIPIENT NAME:  
 Independence Bowl Foundation  
 ADDRESS:  
 P.O. BOX 1723  
 Shreveport, LA 71166  
 RELATIONSHIP:  
 NONE  
 PURPOSE OF GRANT:  
 GENERAL  
 FOUNDATION STATUS OF RECIPIENT:  
 PC  
 AMOUNT OF GRANT PAID ..... 3,000.

RECIPIENT NAME:  
 Betty and Leonard Phillips Deaf  
 Action Center of Northwest Louisian  
 ADDRESS:  
 330 MARSHALL STREET STE 3000  
 Shreveport, LA 71101  
 RELATIONSHIP:  
 NONE  
 PURPOSE OF GRANT:  
 GENERAL  
 FOUNDATION STATUS OF RECIPIENT:  
 PC  
 AMOUNT OF GRANT PAID ..... 2,500.

RECIPIENT NAME:  
 Red River Revel Arts Festival  
 ADDRESS:  
 101 CROCKETT ST  
 Shreveport, LA 71101  
 RELATIONSHIP:  
 NONE  
 PURPOSE OF GRANT:  
 GENERAL  
 FOUNDATION STATUS OF RECIPIENT:  
 PC  
 AMOUNT OF GRANT PAID ..... 5,000.

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## RECIPIENT NAME:

Sci-Port Discovery Center

## ADDRESS:

820 CLYDE FANT PARKWAY

Shreveport, LA 71101

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 20,000.

## RECIPIENT NAME:

ARC of Caddo-Bossier Foundation

## ADDRESS:

351 JORDAN ST.

Shreveport, LA 71101

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 2,500.

## RECIPIENT NAME:

Shreveport Symphony Inc

## ADDRESS:

P.O. BOX 205

Shreveport, LA 71162

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 2,500.

RECIPIENT NAME:  
SHREVEPORT FOUNDATION  
ADDRESS:  
625 TEXAS ST  
SHREVEPORT, LA 71101  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 6,000.

RECIPIENT NAME:  
DRESS FOR SUCCESS  
SHREVEPORT BOSSIER  
ADDRESS:  
520 OLIVE STREET  
SHREVEPORT, LA 71104  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 5,000.

RECIPIENT NAME:  
HOPE CONNECTIONS, INC.  
ADDRESS:  
9650 ROCKVILLE PIKE  
Bethesda, MD 20814  
RELATIONSHIP:  
NONE  
PURPOSE OF GRANT:  
GENERAL  
FOUNDATION STATUS OF RECIPIENT:  
PC  
AMOUNT OF GRANT PAID ..... 5,000.

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## RECIPIENT NAME:

VOLUNTEERS OF AMERICA  
OF NORTH LA.

## ADDRESS:

360 JORDAN ST.  
SHREVEPORT, LA 71101

## RELATIONSHIP:

NONE

## PURPOSE OF GRANT:

GENERAL

## FOUNDATION STATUS OF RECIPIENT:

PC

AMOUNT OF GRANT PAID ..... 25,000.

TOTAL GRANTS PAID:

117,000.

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## RENT AND ROYALTY SUMMARY

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| PROPERTY<br>-----    | TOTAL<br>INCOME<br>----- | DEPLETION/<br>DEPRECIATION<br>----- | OTHER<br>EXPENSES<br>----- | ALLOWABLE<br>NET<br>INCOME<br>----- |
|----------------------|--------------------------|-------------------------------------|----------------------------|-------------------------------------|
| .004065454 RI IN 80  | 3.                       |                                     |                            | 3.                                  |
| MI IN 15 ACS BEING T | 3,586.                   |                                     |                            | 3,586.                              |
| 1/10 MI IN 752 ACS B | 6,094.                   |                                     |                            | 6,094.                              |
| 1/2 OF .018934 MI IN | 18.                      |                                     |                            | 18.                                 |
| 1/2 OF .018934 MI IN | 308.                     |                                     |                            | 308.                                |
| 1/2 OF .018934 MI IN | 10.                      |                                     |                            | 10.                                 |
| 1/2 OF .018934 MI IN | 100.                     |                                     |                            | 100.                                |
| 1/2 OF .018934 MI IN | 379.                     |                                     |                            | 379.                                |
| 1/2 OF .018934 MI IN | 1,271.                   |                                     |                            | 1,271.                              |
| 1/2 OF .018934 MI IN | 372.                     |                                     |                            | 372.                                |
| 1/2 OF .018934 MI IN | 12.                      |                                     |                            | 12.                                 |
| 1/2 OF .018934 MI IN | 31.                      |                                     |                            | 31.                                 |
| 1/2 OF .018934 MI IN | 160.                     |                                     |                            | 160.                                |
| 1/2 OF .018934 MI IN | 3.                       |                                     |                            | 3.                                  |
| 1/2 OF .018934 MI IN | 179.                     |                                     |                            | 179.                                |
| 1/2 OF .018934 MI IN | 63.                      |                                     |                            | 63.                                 |
| 1/2 OF .018934 MI IN | 221.                     |                                     |                            | 221.                                |
| 1/2 OF .018934 MI IN | 709.                     |                                     |                            | 709.                                |
| 1/2 OF .018934 MI IN | 18.                      |                                     |                            | 18.                                 |
| 1/2 OF .018934 MI IN | 572.                     |                                     |                            | 572.                                |
| 1/2 OF .0018934 MI I | 63.                      |                                     |                            | 63.                                 |
| 72/2560 MI IN THE E/ | 51.                      |                                     |                            | 51.                                 |
| MI IN 80 ACS BEING S | 8,216.                   |                                     |                            | 8,216.                              |
| 1/64 X 7/8 ORI IN 3. | 549.                     |                                     |                            | 549.                                |
| MINERAL ACTIVITY     | 1.                       |                                     |                            | 1.                                  |
| TOTALS               | 22,989.                  |                                     |                            | 22,989.                             |
|                      | =====                    | =====                               | =====                      | =====                               |