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Extended to November 15, 2018

## Return of Private Foundation

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

OMB No 1545-0052

2017

Open to Public Inspection

Form 990-PF

Department of the Treasury  
Internal Revenue ServiceDo not enter social security numbers on this form as it may be made public.  
Go to www.irs.gov/Form990PF for instructions and the latest information.

For calendar year 2017 or tax year beginning

, and ending

Name of foundation  
**Illinois Children's Healthcare Foundation**

Number and street (or P.O. box number if mail is not delivered to street address) Room/suite  
**1200 Jorie Blvd 301**

City or town, state or province, country, and ZIP or foreign postal code  
**Oak Brook, IL 60523**

G Check all that apply: ☐ Initial return ☐ Initial return of a former public charity  
☐ Final return ☐ Amended return  
☐ Address change ☐ Name change

H Check type of organization: ☒ Section 501(c)(3) exempt private foundation  
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16) **\$ 149,697,411.** (Part I, column (d) must be on cash basis.)

J Accounting method: ☐ Cash ☒ Accrual  
☐ Other (specify)

A Employer identification number  
**03-0503425**

B Telephone number  
**(630) 571-2555**

C If exemption application is pending, check here ☐

D 1. Foreign organizations, check here ☐  
2. Foreign organizations meeting the 85% test, check here and attach computation ☐

E If private foundation status was terminated under section 507(b)(1)(A), check here ☐

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

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))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received				N/A	
2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B					
3 Interest on savings and temporary cash investments		49.	49.		Statement 1
4 Dividends and interest from securities		3,362,944.	3,362,944.		Statement 2
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10		414,741.			
b Gross sales price for all assets on line 6a		3,148,481.			
7 Capital gain net income (from Part IV, line 2)			414,741.		
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)					
11 Other income		106.	106.		Statement 3
12 Total. Add lines 1 through 11		3,777,840.	3,777,840.		
13 Compensation of officers, directors, trustees, etc.		227,000.	6,810.		220,190.
14 Other employee salaries and wages		464,195.	0.		464,195.
15 Pension plans, employee benefits		164,335.	1,134.		163,201.
16a Legal fees Stmt 4		41,003.	0.		44,903.
b Accounting fees Stmt 5		51,495.	39,945.		11,550.
c Other professional fees Stmt 6		359,201.	73,515.		277,714.
17 Interest					
18 Taxes Stmt 7		158,078.	86,581.		0.
19 Depreciation and depletion		5,605.	0.		
20 Occupancy		50,532.	279.		50,253.
21 Travel, conferences, and meetings		72,244.	0.		72,244.
22 Printing and publications		5,418.	0.		5,418.
23 Other expenses Stmt 8		63,819.	413.		63,406.
24 Total operating and administrative expenses. Add lines 13 through 23		1,662,925.	208,677.		1,373,074.
25 Contributions, gifts, grants paid		1,373,081.			4,991,396.
26 Total expenses and disbursements. Add lines 24 and 25		3,036,006.	208,677.		6,364,470.
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements		741,834.			
b Net investment income (if negative, enter -0-)			3,569,163.		
c Adjusted net income (if negative, enter -0-)				N/A	

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

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15320618 805490 ILCHFDN

2017.03020 Illinois Children's Healthcare ILCHFDN2

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<b>Part II Balance Sheets</b> <small>Attached schedules and amounts in the description column should be for end-of-year amounts only</small>		Beginning of year	End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
<b>Assets</b>	1 Cash - non-interest-bearing				
	2 Savings and temporary cash investments	1,550,714.	1,562,725.	1,562,725.	
	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				
	7 Other notes and loans receivable ▶				
	Less: allowance for doubtful accounts ▶				
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges	27,191.	23,409.	23,409.	
	10a Investments - U.S. and state government obligations Stmt 10	8,208,600.	8,285,676.	8,285,676.	
	b Investments - corporate stock Stmt 11	114,919,025.	132,521,445.	132,521,445.	
	c Investments - corporate bonds Stmt 12	7,279,886.	7,288,840.	7,288,840.	
		11 Investments - land, buildings, and equipment: basis ▶			
Less accumulated depreciation ▶					
12 Investments - mortgage loans					
13 Investments - other					
14 Land, buildings, and equipment: basis ▶ 126,874.					
Less accumulated depreciation Stmt 13 ▶ 111,558.		14,693.	15,316.	15,316.	
15 Other assets (describe ▶ )					
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		132,000,109.	149,697,411.	149,697,411.	
<b>Liabilities</b>		17 Accounts payable and accrued expenses	126,158.	139,357.	
		18 Grants payable	6,278,985.	2,660,670.	
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable				
	22 Other liabilities (describe ▶ Statement 14)	70,080.	5,383.		
	23 Total liabilities (add lines 17 through 22)	6,475,223.	2,805,410.		
<b>Net Assets or Fund Balances</b>	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26, and lines 30 and 31.				
	24 Unrestricted	125,524,886.	146,892,001.		
	25 Temporarily restricted				
	26 Permanently restricted				
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.				
	27 Capital stock, trust principal, or current funds				
	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	125,524,886.	146,892,001.		
	31 Total liabilities and net assets/fund balances	132,000,109.	149,697,411.		

**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)	125,524,886.
2 Enter amount from Part I, line 27a	741,834.
3 Other increases not included in line 2 (itemize) ▶ See Statement 9	20,625,281.
4 Add lines 1, 2, and 3	146,892,001.
5 Decreases not included in line 2 (itemize) ▶	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	146,892,001.

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

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<b>1a Publicly Traded Securities</b>			
<b>b Capital Gains Dividends</b>			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a 3,131,119.		2,733,740.	397,379.
b 17,362.			17,362.
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			397,379.
b			17,362.
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	2	414,741.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):	<div> <div>If gain, also enter in Part I, line 8, column (c).</div> <div>If (loss), enter -0- in Part I, line 8</div> </div>	3	N/A

**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 doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2016	6,254,212.	123,286,423.	.050729
2015	6,628,444.	129,525,216.	.051175
2014	6,100,025.	132,754,845.	.045950
2013	5,643,447.	124,422,262.	.045357
2012	5,912,153.	114,803,897.	.051498

2 Total of line 1, column (d)	2	.244709
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	.048942
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	134,359,870.
5 Multiply line 4 by line 3	5	6,575,841.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	35,692.
7 Add lines 5 and 6	7	6,611,533.
8 Enter qualifying distributions from Part XII, line 4	8	6,364,470.

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

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**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. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b		1	71,383.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		2	0.
3 Add lines 1 and 2		3	71,383.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	71,383.
6 Credits/Payments:			
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a	66,000.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	24,383.	
d Backup withholding erroneously withheld	6d	0.	
7 Total credits and payments. Add lines 6a through 6d	7	90,383.	
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	0.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	19,000.	
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax <input type="checkbox"/> 19,000. Refunded <input type="checkbox"/>	11	0.	

**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?		<b>X</b>
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. 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.		<b>X</b>
c Did the foundation file Form 1120-POL for this year?		<b>X</b>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input type="checkbox"/> \$ 0. (2) On foundation managers. <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		<b>X</b>
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		<b>X</b>
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		<b>X</b>
b If "Yes," has it filed a tax return on Form 990-T for this year?	<b>N/A</b>	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		<b>X</b>
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	<b>X</b>	
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	<b>X</b>	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <input type="checkbox"/> <u>IL</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	<b>X</b>	
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 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV		<b>X</b>
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		<b>X</b>

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**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		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		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>www.ilchf.org</b>	X	
14 The books are in care of <b>The Foundation</b> Telephone no. <b>(630) 571-2555</b> Located at <b>1200 Jorie Blvd, No. 301, Oak Brook, IL</b> ZIP+4 <b>60523-2218</b>		
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 <b>15</b>	N/A	
16 At any time during calendar year 2017, 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? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country		X

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

	Yes	No
<b>File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.</b>		
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 checked="" type="checkbox"/> Yes <input 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 Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>	1b	X
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 2017?	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 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? <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 not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.) <b>N/A</b>	2b	
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 2017 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 2017.) <b>N/A</b>	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 2017?	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 ☐ Yes ☒ No **N/A** **5b**

Organizations relying on a current notice regarding disaster assistance, check here ☐ Yes ☒ No

**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 **N/A**

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? ☐ Yes ☒ No **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? ☐ Yes ☒ No **N/A** **7b**

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

**1 List all officers, directors, trustees, and foundation managers and their compensation.**

(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
See Statement 15		227,000.	37,805.	0.

**2 Compensation of five highest-paid employees (other than those included on line 1). 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
Amy Starin, PhD, LCSW - ICHF, 1200 Jorie Blvd, Suite 301, Oak Brook, IL	Senior Program Officer	134,000.	29,852.	0.
Robert J. Egan - ICHF, 1200 Jorie Blvd, Suite 301, Oak Brook, IL 60523	Senior Program Officer	111,198.	26,063.	0.
Matthew J. Thullen - ICHF, 1200 Jorie Blvd, Suite 301, Oak Brook, IL	Program Officer	88,400.	31,643.	0.
Nedranæ Hunt - ICHF, 1200 Jorie Blvd, Suite 301, Oak Brook, IL 60523	Administrative Manager	65,597.	23,699.	0.
Yemisi Odedina - ICHF, 1200 Jorie Blvd, Suite 301, Oak Brook, IL 60523	Program Officer	65,000.	15,273.	0.
<b>Total number of other employees paid over \$50,000</b>				<b>0</b>

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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. If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
UC Regents 405 Hilgard Avenue, Los Angeles, CA 90095	Program Consultation and Evaluation	140,000.
Amdur Spitz & Associates 135 S. LaSalle Street, Chicago, IL 60603	Marketing Communications	80,954.
Vanguard P.O. Box 2600, Valley Forge, PA 19482	Investment Consultant	73,515.

**Total** number of others receiving over \$50,000 for professional services 0

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 See Statement 16	0.
2	
3	
4	

**Part IX-B Summary of Program-Related Investments**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
<b>Total.</b> Add lines 1 through 3 <span style="float:right">0.</span>	

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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>	139,645,087.
<b>b</b>	Average of monthly cash balances	<b>1b</b>	1,079,253.
<b>c</b>	Fair market value of all other assets	<b>1c</b>	
<b>d</b>	Total (add lines 1a, b, and c)	<b>1d</b>	140,724,340.
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	0.
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0.
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	140,724,340.
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) Stmt 17	<b>4</b>	6,364,470.
<b>5</b>	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	134,359,870.
<b>6</b>	Minimum investment return. Enter 5% of line 5	<b>6</b>	6,717,994.

**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>	6,717,994.
<b>2a</b>	Tax on investment income for 2017 from Part VI, line 5	<b>2a</b>	71,383.
<b>b</b>	Income tax for 2017. (This does not include the tax from Part VI.)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	71,383.
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	6,646,611.
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	203,091.
<b>5</b>	Add lines 3 and 4	<b>5</b>	6,849,702.
<b>6</b>	Deduction from distributable amount (see instructions)	<b>6</b>	0.
<b>7</b>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	6,849,702.

**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>	6,364,470.
<b>b</b>	Program-related investments - total from Part IX-B	<b>1b</b>	0.
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<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>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	<b>4</b>	6,364,470.
<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	<b>5</b>	0.
<b>6</b>	Adjusted qualifying distributions. Subtract line 5 from line 4	<b>6</b>	6,364,470.

**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) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
<b>1</b> Distributable amount for 2017 from Part XI, line 7				6,849,702.
<b>2</b> Undistributed income, if any, as of the end of 2017				
<b>a</b> Enter amount for 2016 only			4,906,420.	
<b>b</b> Total for prior years:		0.		
<b>3</b> Excess distributions carryover, if any, to 2017:				
<b>a</b> From 2012				
<b>b</b> From 2013				
<b>c</b> From 2014				
<b>d</b> From 2015				
<b>e</b> From 2016				
<b>f</b> Total of lines 3a through e	0.			
<b>4</b> Qualifying distributions for 2017 from Part XII, line 4: ► \$ 6,364,470.				
<b>a</b> Applied to 2016, but not more than line 2a			4,906,420.	
<b>b</b> Applied to undistributed income of prior years (Election required - see instructions)		0.		
<b>c</b> Treated as distributions out of corpus (Election required - see instructions)	0.			
<b>d</b> Applied to 2017 distributable amount				1,458,050.
<b>e</b> Remaining amount distributed out of corpus	0.			
<b>5</b> Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
<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	0.			
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b		0.		
<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		0.		
<b>d</b> Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
<b>e</b> Undistributed income for 2016. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
<b>f</b> Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018				5,391,652.
<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)	0.			
<b>8</b> Excess distributions carryover from 2012 not applied on line 5 or line 7	0.			
<b>9</b> Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	0.			
<b>10</b> Analysis of line 9:				
<b>a</b> Excess from 2013				
<b>b</b> Excess from 2014				
<b>c</b> Excess from 2015				
<b>d</b> Excess from 2016				
<b>e</b> Excess from 2017				

N/A

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

☐ 4942(j)(3) or ☐ 4942(j)(5)

- b 85% of line 2a**

- d** Amounts included in line 2c not used directly for active conduct of exempt activities

- Subtract line 2d from line 2c**

- a "Assets" alternative test - enter:  
(1) Value of all assets

- (2) Value of assets qualifying under section 4942(j)(3)(B)(i)**

- b "Endowment" alternative test** - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed

- c "Support" alternative test - enter:**

- (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

- (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)**

- (3) Largest amount of support from an exempt organization**

- (4) Gross investment income**

<b>Part XV</b>	<b>Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)</b>
----------------	--

### 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).)

None

- 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.

None

## 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., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

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

See Statement 18

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

- c Any submission deadlines:**

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

**Illinois Children's Healthcare  
Foundation**

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**Part XV** **Supplementary Information** (continued)

<b>3 Grants and Contributions Paid During the Year or Approved for Future Payment</b>				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution * *	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
Adams County Health Department 330 Vermont St Quincy, IL 62301	None	GOV	Expanding Oral Health Home to Rural Residents	100,000.
Ann & Robert H Lurie Childrens Hospital of Chicago 225 E Chicago Ave Pr Dept Box 269 Chicago, IL 60611	None	PC	The Juvenile Justice Collaborative, Convened by Strengthening Chicago's Youth	123,664.
Association House of Chicago 1116 N. Kedzie Ave Chicago, IL 60651	None	PC	Mental Health First Aid (MHFA) / Youth Mental Health First Aid (YMHFA) Project	8,572.
Austin Childcare Providers Network 5701 W Division St Chicago, IL 60651	None	PC	Developmental Screening	50,000.
Board of Trustees of Southern Illinois University Mail Code 6829 Carbondale, IL 62901	None	PC	Adams County Children's Mental Health Partnership	71,275.
<b>Total</b>	<b>See continuation sheet(s)</b>			<b>4,991,396.</b>
<b>b Approved for future payment</b>				
Central Illinois Foodbank 1937 E Cook St Springfield, IL 62791	None	PC	2017 Food Nutrition Program	25,000.
Child's Voice 180 Hansen Court Wood Dale, IL 60191	None	PC	Growing Voices Project	13,535.
Community Health Partnership of Illinois 205 West Randolph, Suite 2222 Chicago, IL 60606	None	PC	15 for 15 Anniversary Grant	15,000.
<b>Total</b>	<b>See continuation sheet(s)</b>			<b>744,535.</b>

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\* \* See Purpose of Grant continuations

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15320618 805490 ILCHFDN

2017.03020 Illinois Children's Healthc ILCHFDN2

**Part XVI-A**      **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e)
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount		Related or exempt function income
<b>1</b> Program service revenue:						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
<b>2</b> Membership dues and assessments						
<b>3</b> Interest on savings and temporary cash investments			14	49.		
<b>4</b> Dividends and interest from securities			14	3,362,944.		
<b>5</b> Net rental income or (loss) from real estate:						
a Debt-financed property						
b Not debt-financed property						
<b>6</b> Net rental income or (loss) from personal property						
<b>7</b> Other investment income			14	106.		
<b>8</b> Gain or (loss) from sales of assets other than inventory			18	414,741.		
<b>9</b> Net income or (loss) from special events						
<b>10</b> Gross profit or (loss) from sales of inventory						
<b>11</b> Other revenue:						
a _____						
b _____						
c _____						
d _____						
e _____						
<b>12</b> Subtotal. Add columns (b), (d), and (e)		0.		3,777,840.		0.
<b>13</b> Total. Add line 12, columns (b), (d), and (e)				3,777,840.		3,777,840.

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

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

[illegible]

## Part XVII


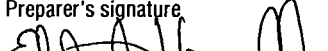
## Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

- |   |       |     |    |
|---|-------|-----|----|
| <p><b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)(3) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?</p> <p><b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of:</p> <p>(1) Cash</p> <p>(2) Other assets</p> <p><b>b</b> Other transactions:</p> <p>(1) Sales of assets to a noncharitable exempt organization</p> <p>(2) Purchases of assets from a noncharitable exempt organization</p> <p>(3) Rental of facilities, equipment, or other assets</p> <p>(4) Reimbursement arrangements</p> <p>(5) Loans or loan guarantees</p> <p>(6) Performance of services or membership or fundraising solicitations</p> <p><b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees</p> <p><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.</p> |       | Yes | No |
|   | 1a(1) |     | X  |
|   | 1a(2) |     | X  |
|   |       |     |    |
|   | 1b(1) |     | X  |
|   | 1b(2) |     | X  |
|   | 1b(3) |     | X  |
|   | 1b(4) |     | X  |
|   | 1b(5) |     | X  |
|   | 1b(6) |     | X  |
|   | 1c    |     | X  |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (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
N/A		

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge				May the IRS discuss this return with the preparer shown below? See instructions <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	 Signature of officer or trustee		Date <b>7/23/18</b>		Title <b>President</b>	
Paid Preparer Use Only	Print/Type preparer's name <b>Elizabeth A. Vaccariello</b>		Preparer's signature 		Date <b>6/18/18</b>	
	Check <input type="checkbox"/> if self-employed		PTIN <b>P00357347</b>			
	Firm's name <b>Varey &amp; Vaccariello CPAs PC</b>				Firm's EIN <b>36-3994838</b>	
Firm's address <b>2205 Point Boulevard, Suite 210 Elgin, IL 60123</b>					Phone no. <b>847-228-6977</b>	

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**Illinois Children's Healthcare  
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**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Casa Kane Co 100 S Third St, Ste 460 Geneva, IL 60134	None	PC	Annual Fall Community Educational Conference	10,000.
Cass County Health Department 331 S Main Virginia, IL 62691	None	GOV	Cass County Mental Health Collaboration	277,002.
Central Illinois Foodbank 1937 E Cook St Springfield, IL 62791	None	PC	Giving Tuesday Matching Grant	16,180.
Child's Voice 180 Hansen Court Wood Dale, IL 60191	None	PC	Growing Voices Project	40,000.
Coles County Mental Health Association Inc 750 Broadway Avenue East Mattoon, IL 61938	None	PC	ICARE (Innovative, Coordinated, Accessible, Research Based, Efficient) Kids	197,425.
Coles County Mental Health Association Inc 750 Broadway Avenue East Mattoon, IL 61938	None	PC	15 for 15 Anniversary Grant	15,000.
Community Health Partnership of Illinois 205 West Randolph, Suite 2222 Chicago, IL 60606	None	PC	Healthy Smiles for All! Sonrisas Sanas para Todos!	50,000.
Community Nurse Health Association 23 Calendar Ave La Grange, IL 60525	None	PC	Community Nurse Mental Health Access for Children and New Mothers	64,000.
Eastern Illinois Foodbank 2405 N Shore Dr Urbana, IL 61802	None	PC	Giving Tuesday Matching Grant	25,000.
Enlace Chicago 2756 S Harding Ave Chicago, IL 60623	None	PC	School Based Mentor (SBM)	60,000.
<b>Total from continuation sheets</b>				<b>4,637,885.</b>

**Illinois Children's Healthcare  
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**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Equine Dreams PO Box 372 Sandwich, IL 60548	None	PC	Program Expansion: Improving Quality of Life & Building Resilience in Children w/Disabilities by	100,000.
Erie Family Health Center Inc 1701 West Superior Street Chicago, IL 60622	None	PC	Westside H3: Developing a Seamless Approach to Behavioral Health Screening and Treatment for Children	363,333.
Erie Family Health Center Inc 1701 West Superior Street Chicago, IL 60622	None	PC	2016 CHMI Advocacy Planning Project - Shriver Center	5,000.
Family Counseling Center Inc 125 N Market St Golconda, IL 62938	None	PC	Southern Illinois Children's Integrated Health Program	50,000.
Family Counseling Center Inc 125 N Market St Golconda, IL 62938	None	PC	15 for 15 Anniversary Grant	15,000.
Family Service Association of Greater Elgin Area 1140 N McLean Blvd, Ste 1 Elgin, IL 60123	None	PC	School-Based Mental Health Project	300,000.
Family Service Association of Greater Elgin Area 1140 N McLean Blvd, Ste 1 Elgin, IL 60123	None	PC	15 for 15 Anniversary Grant	15,000.
Forefront 208 S LaSalle Street, Suite 1540 Chicago, IL 60604	None	PC	General Operating	13,040.
Grantmakers In Health 1100 Connecticut Ave, NW Suite 1200 Washington, DC 20036	None	PC	General Operating	8,050.
Great Lakes Adaptive Sports Association 27864 Irma Lee Circle, Unit 101 Lake Forest, IL 60045	None	PC	Linking Clinical Care Providers & Patients to Health Promotion Initiatives	15,000.
<b>Total from continuation sheets</b>				

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**Illinois Children's Healthcare  
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**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Greater Chicago Food Depository 4100 W Ann Lurie Pl Chicago, IL 60632	None	PC	ILCHF Giving Tuesday Matching Grant	25,000.
Greater Elgin Family Care Center 370 Summit St Elgin, IL 60120	None	PC	Expansion of both School-Based Health Care and a Dental Home	150,000.
Greater Illinois Pediatric Palliative Care Coalition 848 Dodge Ave Evanston, IL 60202	None	PC	15 for 15 Anniversary Grant	15,000.
Health and Medicine Policy Research Group 29 E Madison St Ste 602 Chicago, IL 60602	None	PC	15 for 15 Anniversary Grant	15,000.
Illinois State University Campus Box 4625 Normal, IL 61790	None	GOV	Livingston County Children's Network	73,150.
Inner-City Muslim Action Network 2744 W 63rd St Chicago, IL 60629	None	PC	Pediatric Behavioral Health	180,000.
Lake County Health Department and Community Health Center 3010 Grand Ave Waukegan, IL 60085	None	GOV	Mental Health First Aid Training	82,365.
Lake County Health Department and Community Health Center 3010 Grand Ave Waukegan, IL 60085	None	GOV	New Community Health Center Facility in Zion	200,000.
Lawndale Christian Health Center 3860 West Ogden Avenue Chicago, IL 60623	None	PC	Dental Expansion at Homan Square	300,000.
Loyola University of Chicago 820 North Michigan Ave Chicago, IL 60611	None	PC	Community-Based Dentistry Pipeline Initiative - Evaluation Component	20,000.
<b>Total from continuation sheets</b>				

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**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Memorial Health System 701 N 1st St Springfield, IL 62781	None	PC	CHMI Advocacy Planning Project	5,000.
Memorial Health System 710 North 8th Street Springfield, IL 62702	None	PC	The Children's MOSAIC Project	38,500.
Mental Health Leadership Initiative Inc 14 Central Ave Island Heights, NJ 08732	None	PC	Bending Towards Justice: Youth as Agents of Change	15,500.
Metropolitan Family Services One North Dearborn, 10th Flr Chicago, IL 60602	None	PC	Healthy Minds, Healthy Children, Healthy Chicago (H3)	193,650.
Metropolitan Family Services One North Dearborn, 10th Flr Chicago, IL 60602	None	PC	Early Childhood Mental Health Services	50,000.
Metropolitan Family Services One North Dearborn, 10th Flr Chicago, IL 60602	None	PC	2016 CHMI Advocacy Planning Project - Shriver Center	5,000.
Milestone, Inc. 4060 McFarland Road Loves Park, IL 61111	None	PC	15 for 15 Anniversary Grant	15,000.
NAMI of Greater Chicago 1801 W Warner, Ste 202 Chicago, IL 60618	None	PC	Ending the Silence	31,930.
NAMI of Greater Chicago 1801 W Warner, Ste 202 Chicago, IL 60618	None	PC	15 for 15 Anniversary Grant	15,000.
New Moms, Inc. 5317 W Chicago Ave Chicago, IL 60651	None	PC	Oak Park - Doula Services	41,483.
<b>Total from continuation sheets</b>				

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<b>Part XV Supplementary Information</b>				
<b>3 Grants and Contributions Paid During the Year (Continuation)</b>				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Northern Illinois Food Bank 273 Dearborn Court Geneva, IL 60134	None	PC	ILCHF Giving Tuesday Matching Grant	25,000.
Northwestern University 633 Clark Street Evanston, IL 60208	None	PC	Examining the Impact and Sustainability of the Mother's and Babies Course	145,685.
Oak Park and River Forest Infant Welfare Society 320 Lake Street Oak Park, IL 60302	None	PC	CHMI Advocacy Planning Project - Shriver Center	5,000.
Oak Park and River Forest Infant Welfare Society 320 Lake Street Oak Park, IL 60302	None	PC	Expansion of Oral Health Care for High Need Children	110,798.
Oak Park and River Forest Infant Welfare Society 320 Lake Street Oak Park, IL 60302	None	PC	Integrating Behavioral Health Screening into a Preventive Dental Practice in a Pediatric Medical Home	11,361.
Oak Park and River Forest Infant Welfare Society 320 Lake Street Oak Park, IL 60302	None	PC	15 for 15 Anniversary Grant	15,000.
Peoria Citizens Committee for Economic Opportunity Inc 711 W McBean St Peoria, IL 61605	None	PC	Giving Tuesday Matching Grant	17,550.
Promise Healthcare NFP 819 Bloomington Road Champaign, IL 61820	None	PC	15 for 15 Anniversary Grant	15,000.
Quincy Public Schools, District 172 1416 Maine Street Quincy, IL 62301	None	GOV	15 for 15 Anniversary Grant	15,000.
Quincy Public Schools, District 172 1416 Maine Street Quincy, IL 62301	None	GOV	Adams County Children's Mental Health Partnership-Mentoring Project	75,000.
<b>Total from continuation sheets</b>				

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**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
River Bend Food Reservoir 4040 Kimmel Drive Davenport, IA 52802	None	PC	Giving Tuesday Matching Grant	14,500.
River Bend Food Reservoir 4040 Kimmel Drive Davenport, IA 52802	None	PC	15 for 15 Anniversary Grant	15,000.
Rural Health Inc 513 N Main St Anna, IL 62906	None	PC	Capacity Building - Establishing/Expanding Access to Oral Health	50,000.
Sargent Shriver National Center on Poverty Law 67 E Madison St, Ste 2000 Chicago, IL 60603	None	PC	CHMI Advocacy Planning Project	80,000.
Sargent Shriver National Center on Poverty Law 67 E Madison St, Ste 2000 Chicago, IL 60603	None	PC	Children's Oral Health Advocacy Project	25,000.
Shawnee Health Service and Development Corp 109 California St Carterville, IL 62918	None	PC	Shawnee Oral Health Service Expansion Program	125,672.
Sinai Health System California Ave at 15th Street Chicago, IL 60608	None	PC	Creating a Comprehensive System of Care in Southwest Chicago	251,321.
Sinnissippi Centers Inc 325 Illinois Route 2 Dixon, IL 61021	None	PC	The Community That Cares (CTC)	90,000.
Sinnissippi Centers Inc 325 Illinois Route 2 Dixon, IL 61021	None	PC	15 for 15 Anniversary Grant	15,000.
Sinnissippi Centers Inc 325 Illinois Route 2 Dixon, IL 61021	None	PC	2016 CHMI Advocacy Planning Project	5,000.
<b>Total from continuation sheets</b>				

**Illinois Children's Healthcare  
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**Part XV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Southern Illinois Healthcare Foundation Inc 2041 Goose Lake Road Sauget, IL 62206	None	PC	Collinsville Oral Health Services	150,000.
Southern Illinois Healthcare Foundation Inc 2041 Goose Lake Road Sauget, IL 62206	None	PC	15 for 15 Anniversary Grant	15,000.
St Louis Area Food Bank Inc 70 Corporate Woods Drive St Louis, MO 63044	None	PC	ILCHF Giving Tuesday Matching Grant	10,800.
Tazewell County Health Department 21306 Illinois Route 9 Tremont, IL 61568	None	GOV	The Maywood Initiative	35,962.
Teen Parent Connection Inc 475 Taft Ave Glen Ellyn, IL 60137	None	PC	Adolescent Family Strengthening - Mental Health Expansion Project	25,000.
Transitions of Western Illinois Inc PO Box 3646 Quincy, IL 62305	None	PC	CHMI Advocacy Planning Project - Shriver Center	5,000.
Tri-State Food Bank Inc 801 East Michigan Street Evansville, IN 47711	None	PC	Giving Tuesday Matching Grant	10,200.
Urbana Neighborhood Connections Center 1401 E Main Street Urbana, IL 61802	None	PC	H.O.P.E. (Helping Other People Evolve) Challenge	25,500.
Voices for Illinois Children Inc 125 S Clark Street Chicago, IL 60603	None	PC	Mental Health Consultation (MHC) Initiative	35,000.
Warren County Health Department 240 S Main St Monmouth, IL 61462	None	GOV	Healthy Smiles in Warren County-Warren County Dental Clinic	50,000.
<b>Total from continuation sheets</b>				

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### 3 Grants and Contributions Paid During the Year (Continuation)

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**Part XV Supplementary Information**

**3 Grants and Contributions Approved for Future Payment (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Eastern Illinois Foodbank 2405 N Shore Dr Urbana, IL 61802	None	PC	2017 Food Nutrition Program	25,000.
Great Lakes Adaptive Sports Association 27864 Irma Lee Circle, Unit 101 Lake Forest, IL 60045	None	PC	Linking Clinical Care Providers & Patients to Health Promotion Initiatives	15,000.
Greater Chicago Food Depository 4100 W Ann Lurie Pl Chicago, IL 60632	None	PC	2017 Food Nutrition Program	25,000.
Hancock County Health and Wellness Coalition 671 Wabash Avenue Carthage, IL 62321	None	PC	15 for 15 Anniversary Grant	15,000.
Health and Medicine Policy Research Group 29 E Madison St Ste 602 Chicago, IL 60602	None	PC	Building Trauma-Informed Illinois Health Departments to Improve Child Health	60,000.
Ifloss Coalition 2833 South Grand Ave E Springfield, IL 62703	None	PC	IFLOSS Coalition Planning Grant	10,000.
Lake County Health Department and Community Health Center 3010 Grand Ave Waukegan, IL 60085	None	GOV	New Community Health Center Facility in Zion	71,000.
Livingston County Commission on Children and Youth PO Box 504 Pontiac, IL 61764	None	PC	Mentoring & Systems Integration	75,000.
Memorial Health System 701 N 1st St Springfield, IL 62781	None	PC	The Children's MOSAIC Project-Mentoring Year	75,000.
Metropolitan Family Services One North Dearborn, 10th Flr Chicago, IL 60602	None	PC	Early Childhood Mental Health Services	50,000.
<b>Total from continuation sheets</b>				<b>691,000.</b>

**Illinois Children's Healthcare  
Foundation**

03-0503425

**Part XV Supplementary Information**

**3 Grants and Contributions Approved for Future Payment (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Northern Illinois Food Bank 273 Dearborn Court Geneva, IL 60134	None	PC	2017 Food Nutrition Program	25,000.
Peoria Citizens Committee for Economic Opportunity Inc 711 W McBean St Peoria, IL 61605	None	PC	2017 Food Nutrition Program	25,000.
River Bend Food Reservoir 4040 Kimmel Drive Davenport, IL 52802	None	PC	2017 Food Nutrition Program	25,000.
Sinnissippi Centers Inc 325 Illinois Route 2 Dixon, IL 61021	None	PC	CTC System Engagement and Mentoring	75,000.
St Louis Area Food Bank Inc 70 Corporate Woods Drive St Louis, MO 63044	None	PC	2017 Food Nutrition Program	25,000.
Tazewell County Health Corporation 21306 Illinois Route 9 Tremont, IL 61568	None	PC	The Maywood Initiative	30,000.
Tri-State Food Bank Inc 801 E Michigan St Evansville, IN 47711	None	PC	2017 Food Nutrition Program	25,000.
YWCA of Metropolitan Chicago 1 N LaSalle St., Suite 1150 Chicago, IL 60602	None	PC	YWCA Childhood Trauma & Executive Function Intervention Project	40,000.
<b>Total from continuation sheets</b>				

**Part XV**   **Supplementary Information**

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

Name of Recipient - Equine Dreams

Program Expansion: Improving Quality of Life & Building Resilience in  
Children w/Disabilities by Offering Year-Round Therapeutic  
Equine-Assisted Activities

Name of Recipient - Erie Family Health Center Inc

Westside H3: Developing a Seamless Approach to Behavioral Health  
Screening and Treatment for Children on Chicago's Westside



## Form 990-PF Interest on Savings and Temporary Cash Investments Statement 1

Source	(a) Revenue Per Books	(b) Net Investment Income	(c) Adjusted Net Income
Northern Trust - Checking	49.	49.	
Total to Part I, line 3	49.	49.	

## Form 990-PF Dividends and Interest from Securities Statement 2

Source	Gross Amount	Capital Gains Dividends	(a) Revenue Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income
Vanguard - Capital Gain Dividends	17,362.	17,362.	0.	0.	
Vanguard - Dividends	3,362,944.	0.	3,362,944.	3,362,944.	
To Part I, line 4	3,380,306.	17,362.	3,362,944.	3,362,944.	

## Form 990-PF Other Income Statement 3

Description	(a) Revenue Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income
Class Action Income	106.	106.	
Total to Form 990-PF, Part I, line 11	106.	106.	

Form 990-PF	Legal Fees			Statement 4
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Legal fees - Quarles & Brady LLP	41,003.	0.		44,903.
To Form 990-PF, Pg 1, ln 16a	41,003.	0.		44,903.

Form 990-PF	Accounting Fees			Statement 5
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Accounting fees - Varey & Vaccariello CPAs PC	36,095.	36,095.		0.
Audit fees - Crowe Horwath LLP	15,400.	3,850.		11,550.
To Form 990-PF, Pg 1, ln 16b	51,495.	39,945.		11,550.

Form 990-PF	Other Professional Fees			Statement 6
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Payroll service fees	5,635.	0.		5,635.
I/S Support	7,260.	0.		7,260.
Investment consulting - Vanguard	73,515.	73,515.		0.
Program consultation & evaluation - NTI				
Upstream/Children Research	32,087.	0.		58,115.
Strategic planning - MBMD				
Strategic Consultants LLC	1,750.	0.		1,750.
Program consultation & evaluation - Dr. Bennett Leventhal	18,000.	0.		19,000.
Marketing Communications - Amdur Spitz & Associates	80,954.	0.		80,954.
Program consultation & evaluation - UC Regents	140,000.	0.		105,000.
To Form 990-PF, Pg 1, ln 16c	359,201.	73,515.		277,714.

Form 990-PF	Taxes			Statement	7
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Section 4940 excise tax	71,497.	0.		0.	
Foreign tax withheld on dividends	86,581.	86,581.		0.	
To Form 990-PF, Pg 1, ln 18	158,078.	86,581.		0.	

Form 990-PF	Other Expenses			Statement	8
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Equipment rental and maintenance	5,895.	0.		5,895.	
Supplies	8,073.	0.		8,073.	
Postage, shipping and delivery	12,741.	0.		12,741.	
Insurance	7,721.	77.		7,644.	
Software maintenance	22,840.	0.		22,840.	
Membership dues	3,225.	0.		3,225.	
Miscellaneous	2,677.	0.		2,677.	
Licenses and fees	28.	0.		28.	
Bank charges	336.	336.		0.	
Website	283.	0.		283.	
To Form 990-PF, Pg 1, ln 23	63,819.	413.		63,406.	

Form 990-PF	Other Increases in Net Assets or Fund Balances	Statement	9
Description		Amount	
Unrealized gain on investments carried at market value		20,422,190.	
Income Modification - Grants Returned		203,091.	
Total to Form 990-PF, Part III, line 3		20,625,281.	

Form 990-PF U.S. and State/City Government Obligations Statement 10

Description	U.S. Gov't	Other Gov't	Book Value	Fair Market Value
Vanguard Total Bond Market Index Fd	X		8,285,676.	8,285,676.
Total U.S. Government Obligations			8,285,676.	8,285,676.
Total State and Municipal Government Obligations				
Total to Form 990-PF, Part II, line 10a			8,285,676.	8,285,676.

Form 990-PF Corporate Stock Statement 11

Description	Book Value	Fair Market Value
Vanguard Total Stk Mkt Indx Fd	70,658,311.	70,658,311.
Vanguard Short-Term Investment Grade Fund	7,229,657.	7,229,657.
Vanguard Inter-Term Investment Grade Fund	7,272,418.	7,272,418.
Vanguard Total International Stock Fd	47,361,059.	47,361,059.
Total to Form 990-PF, Part II, line 10b	132,521,445.	132,521,445.

Form 990-PF Corporate Bonds Statement 12

Description	Book Value	Fair Market Value
Vanguard International Bond Index Fd	7,288,840.	7,288,840.
Total to Form 990-PF, Part II, line 10c	7,288,840.	7,288,840.

## Form 990-PF Depreciation of Assets Not Held for Investment Statement 13

Description	Cost or Other Basis	Accumulated Depreciation	Book Value
HP LaserJet 2300N Printer	1,207.	1,207.	0.
Office Furniture	12,226.	12,226.	0.
GIFTS Grants Management Software	17,249.	17,249.	0.
Quickbooks for Nonprofits Software	497.	497.	0.
Dell 2200 MP LCD Projector	1,293.	1,293.	0.
Office Furniture	4,924.	4,924.	0.
GIFTS Grants Application Module Software	6,381.	6,381.	0.
Polycom Soundstation2 Speaker Phone	625.	625.	0.
Gifts Plus Pack Software	945.	945.	0.
Desktop Computer	921.	921.	0.
Office Furniture	1,369.	1,369.	0.
Smart Buy DL 360 - Two	4,524.	4,524.	0.
146GB 10K RPM Hard Drives - Six	1,890.	1,890.	0.
ASA 5505 8Port SSL	384.	384.	0.
400/800GB LT03 960 Tape Drive	2,795.	2,795.	0.
Smart Buy 6730B P8400 - Three	2,700.	2,700.	0.
Smart Buy DC5800 SFF E8400 - Two	1,450.	1,450.	0.
Netshelter SX 24U Deep Enclosure	1,025.	1,025.	0.
APC Smart-UPS 1500VA	635.	635.	0.
Laserjet P4014N MONO LASER	815.	815.	0.
Catalyst 2960 20Port Gigabit Installation New Computer Equip	1,900.	1,900.	0.
EXP Backup Exec SBS Prem Ed 12.5 Win	3,887.	3,887.	0.
OLP Win Small Bus Svr Prem 2008	689.	689.	0.
OLP Win Small Bus Svr Prem Cal Ste 2008	1,579.	1,579.	0.
OLP Win Svr Std 2008 Sngl NL	786.	786.	0.
Ayaya Phone System	690.	690.	0.
Office Furniture - Two Chairs	4,870.	4,870.	0.
Office Furniture - Three Media Towers	1,503.	1,503.	0.
Office Furniture - 4 Cabinets with Custom Top	2,137.	2,137.	0.
Office Furniture	2,002.	2,002.	0.
Office Furniture - Cabinets with Glass Doors	12,385.	12,385.	0.
EX7200 Multimedia Projector	1,674.	1,674.	0.
	757.	757.	0.

HP EliteBook 8570p - Two	2,598.	2,555.	43.
HP Compaq Elite 8300 - Two	1,598.	1,572.	26.
Microsoft Office PRO Plus 2013 - Four	1,956.	1,956.	0.
Microsoft Surface	1,301.	975.	326.
Office Furniture - 3 Chairs	1,200.	571.	629.
Office Furniture - Desk and Credenzia	1,858.	884.	974.
HP EliteBook 840 G2 Windows 7	963.	482.	481.
HP EliteBook 840 G2 Windows 7	962.	465.	497.
HP ProLiant DL360	3,831.	1,213.	2,618.
MS Windows 2012 R22 Software	1,630.	860.	770.
HP EliteBook 840 G3 14" - Two	2,304.	461.	1,843.
Office Furniture	3,463.	495.	2,968.
Office Furniture - Chair	564.	67.	497.
Laptop and Docking Station	1,721.	229.	1,492.
Computer	1,486.	50.	1,436.
Office Furniture - Chair	725.	9.	716.
Total To Fm 990-PF, Part II, ln 14	126,874.	111,558.	15,316.

Form 990-PF	Other Liabilities	Statement 14
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Description	BOY Amount	EOY Amount
Section 4940 Excise Tax Payable	70,080.	5,383.
Total to Form 990-PF, Part II, line 22	70,080.	5,383.

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Form 990-PF      Part VIII - List of Officers, Directors      Statement 15  
Trustees and Foundation Managers

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Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Expense Contrib Account
Michael Parker ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Chair/Director 5.00	0.	0. 0.
Ruth B. Rosenthal, MD ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Vice Chair/Director 2.00	0.	0. 0.
Philip S. Cali ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Treasurer/Director 5.00	0.	0. 0.
Floyd D. Perkins ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Secretary/Director 5.00	0.	0. 0.
Heather Higgins Alderman ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	President 40.00	227,000.	37,805. 0.
Charles E. Box ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0. 0.
Louise Coleman, EdD ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 5.00	0.	0. 0.
J. Kevin Dorsey, MD PhD ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 5.00	0.	0. 0.
Peter Flynn, PhD ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0. 0.
Kathy L. Halloran ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0. 0.
Terry F. Hatch, MD ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0. 0.

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John Jasinski ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
Juan Carlos Avila ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
Kay L. Saving, MD ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
Billie Wright Adams, MD ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
Jennifer Cartland, PhD ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
Nicholas Panomitros, DDS ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
Icy Cade-Bell, MD ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
Angie Cantillon ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
Barbara H. Fiese, PhD ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
J. Kay Giles ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
George O'Neill, Jr. ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
Peter E. Doris, MD ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Board Member Emeritus 2.00	0.	0.	0.
C. William Pollard ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Board Member Emeritus 2.00	0.	0.	0.



James Ryan	Board Member Emeritus			
ICHF, 1200 Jorie Blvd, Suite 301	2.00	0.	0.	0.
Oak Brook, IL 60523				

Totals included on 990-PF, Page 6, Part VIII	227,000.	37,805.	0.
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Form 990-PF	Summary of Direct Charitable Activities	Statement	16
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Activity One

The Illinois Children's Healthcare Foundation works to ensure that every child in Illinois has access to affordable and quality health care by making grants to other not-for-profit organizations that conduct programs designed to address a variety of access issues. Grantmaking is focused in two specific areas: improving the oral health of underserved children and addressing the mental health needs of children. In addition, the Foundation monitors other emerging health issues that the Board of Directors may select as focus areas in the future.

The Foundation has no direct charitable activities.

To Form 990-PF, Part IX-A, line 1

Expenses

0.

Form 990-PF

Cash Deemed Charitable Explanation Statement  
Part X, Line 4

Statement 17

## PART X - LINE 4 - MINIMUM INVESTMENT RETURN

The Illinois Children's Healthcare Foundation chooses to use the amount of administrative expenses and charitable disbursements, as shown in Part I, Line 26D of the return, as the cash deemed held for charitable activities due to the large distributions of the organization.

Form 990-PF

Grant Application Submission Information  
Part XV, Lines 2a through 2d

Statement 18

Name and Address of Person to Whom Applications Should be Submitted

www.ilchf.org - All applicants must submit their proposals electronically.

Telephone NumberName of Grant Program

(630) 571-2555

RFPs - Request for Proposal

Email Address

www.ilchf.org

Form and Content of Applications

Review the open RFP(s) on our website and determine whether your project is a match to the projects being sought for funding. Submit a Letter of Inquiry or Proposal (based on the specific RFP timeline) with the required information by the posting deadline. Be sure to attach all of the requested documentation - incomplete applications will be eliminated from consideration. All applicants must submit their proposals electronically - including all required attachments.

Any Submission Deadlines

Please visit our website for currently open RFPs. Submission deadlines vary from year to year.

Restrictions and Limitations on Awards

You must be either (1) an organization that has been determined by the IRS to be an organization described in Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (the "Code"), that is a public charity described in Section 509(a)(1), (2), or (3) of the Code and that is not a Type III supporting organization within the meaning of Section 4943(f)(5)(A) of the Code; or, (2) a governmental entity described in Section 170(c)(1) or 511(a)(2)(B) of the Code. Your proposed activities must serve Illinois children.

Name and Address of Person to Whom Applications Should be Submitted

Program Officer - Illinois Children's Healthcare Foundation  
1200 Jorie Blvd, Suite 301  
Oak Brook, IL 60523

<u>Telephone Number</u>	<u>Name of Grant Program</u>
(630) 571-2555	Innovation/Emerging Needs Funding

Form and Content of Applications

To propose a project for consideration for Innovation/Emerging Needs Funding, please contact a member of the Foundation's Staff to discuss it. A short project write-up may be submitted to assist during the preliminary conversation.

Any Submission Deadlines

There is no formal deadline to submit an application.

Restrictions and Limitations on Awards

Eligible projects will be able to demonstrate: Innovation, Support of evidence-based research and/or best practices, Potential for statewide system change, and Impact on children's healthcare in Illinois. There is no specific dollar amount assigned to engagement funding projects, although it is anticipated that most grants will be less than \$250,000. You must be either (1) an organization that has been determined by the IRS to be an organization described in Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (the "Code"), that is a public charity described in Section 509(a)(1), (2), or (3) of the Code and that is not a Type III supporting organization within the meaning of Section 4943(f)(5)(A) of the Code; or, (2) a governmental entity described in Section 170(c)(1) or 511(a)(2)(B) of the Code.

# 2017 DEPRECIATION AND AMORTIZATION REPORT

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Asset No	Description	Date Acquired	Method	Life	C o n v	Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
7	HP LaserJet 2300N Printer	03/29/04	SL	5.00		16	1,207.				1,207.	1,207.		0.	1,207.
9	Office Furniture	03/29/04	SL	7.00		16	12,226.				12,226.	12,226.		0.	12,226.
10	Gifts Grants Management Software	04/20/04	SL	3.00		16	17,249.				17,249.	17,249.		0.	17,249.
11	Quickbooks for Nonprofits Software	03/31/04	SL	3.00		16	497.				497.	497.		0.	497.
13	Dell 2200 MP LCD Projector	01/06/05	SL	5.00		16	1,293.				1,293.	1,293.		0.	1,293.
15	Office Furniture	08/31/05	SL	7.00		16	4,924.				4,924.	4,924.		0.	4,924.
17	Gifts Grants Application Module Software	09/15/05	SL	3.00		16	6,381.				6,381.	6,381.		0.	6,381.
19	Polycom Soundstation2 Speaker Phone	01/13/06	SL	5.00		16	625.				625.	625.		0.	625.
20	Gifts Plus Pack Software	12/27/06	SL	3.00		16	945.				945.	945.		0.	945.
21	Desktop Computer	12/03/07	SL	5.00		16	921.				921.	921.		0.	921.
22	Office Furniture	12/21/07	SL	7.00		16	1,369.				1,369.	1,369.		0.	1,369.
23	Smart Buy DL 360 - Two 146GB 10K RPM Hard Drives - Six	04/18/09	SL	5.00		16	4,524.				4,524.	4,524.		0.	4,524.
24		04/18/09	SL	5.00		16	1,890.				1,890.	1,890.		0.	1,890.
25	ASA 5505 8port SSL 400/800GB LT03 960 Tape Drive	04/18/09	SL	5.00		16	384.				384.	384.		0.	384.
26		04/18/09	SL	5.00		16	2,795.				2,795.	2,795.		0.	2,795.
27	Smart Buy 6730B P8400 - Three	04/18/09	SL	5.00		16	2,700.				2,700.	2,700.		0.	2,700.
28	Smart Buy DC5800 SPF E8400 - Two	04/18/09	SL	5.00		16	1,450.				1,450.	1,450.		0.	1,450.
29	Netshelter SX 24U Deep Enclosure	04/18/09	SL	5.00		16	1,025.				1,025.	1,025.		0.	1,025.

728111 04-01-17

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2017 DEPRECIATION AND AMORTIZATION REPORT

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Asset No	Description	Date Acquired	Method	Life	Conv	Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
30	APC Smart-UPS 1500VA	04/18/09	SL	5.00		16	635.				635.	635.		0.	635.
31	Laserjet P4014N MONO LASER	04/18/09	SL	5.00		16	815.				815.	815.		0.	815.
32	Catalyst 2960 20Port Gigabit Installation New Computer	04/18/09	SL	5.00		16	1,900.				1,900.	1,900.		0.	1,900.
33	Equip EXP Backup Exec SBS Prem Ed	04/18/09	SL	5.00		16	3,887.				3,887.	3,887.		0.	3,887.
34	12.5 Win	04/18/09	SL	3.00		16	689.				689.	689.		0.	689.
35	OLP Win Small Bus Svr Prem	04/18/09	SL	3.00		16	1,579.				1,579.	1,579.		0.	1,579.
36	OLP Win Small Bus Svr Prem Cal Ste 2008	04/18/09	SL	3.00		16	786.				786.	786.		0.	786.
37	OLP Win Svr Std 2008 Sngl NL	04/18/09	SL	3.00		16	690.				690.	690.		0.	690.
38	Ayaya Phone System	07/09/09	SL	5.00		16	4,870.				4,870.	4,870.		0.	4,870.
39	Office Furniture - Two Chairs	09/02/09	SL	7.00		16	1,503.				1,503.	1,503.		0.	1,503.
40	Office Furniture - Three Media Towers	09/02/09	SL	7.00		16	2,137.				2,137.	2,137.		0.	2,137.
41	Office Furniture - 4 Cabinets with Custom Top	09/03/09	SL	7.00		16	2,002.				2,002.	2,002.		0.	2,002.
42	Office Furniture	07/19/10	SL	7.00		16	12,385.				12,385.	11,500.		885.	12,385.
43	Office Furniture - Cabinets with Glass Doors	10/01/10	SL	7.00		16	1,674.				1,674.	1,495.		179.	1,674.
44	EX7200 Multimedia Projector	02/23/11	SL	5.00		16	757.				757.	757.		0.	757.
45	HP EliteBook 8570p - Two	02/01/13	SL	5.00		16	2,598.				2,598.	2,035.		520.	2,555.
46	HP Compaq Elite 8300 - Two	02/01/13	SL	5.00		16	1,598.				1,598.	1,252.		320.	1,572.
47	Microsoft Office PRO Plus 2013 - Four	02/01/13	SL	3.00		16	1,956.				1,956.	1,956.		0.	1,956.

728111 04-01-17

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

2017 DEPRECIATION AND AMORTIZATION REPORT

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Asset No	Description	Date Acquired	Method	Life	C o n v	Line No	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
48	Microsoft Surface	04/01/14	SL	5.00		16	1,301.				1,301.	715.		260.	975.
49	Office Furniture - 3 Chairs	09/01/14	SL	7.00		16	1,200.				1,200.	400.		171.	571.
50	Office Furniture - Desk and Credenza	09/01/14	SL	7.00		16	1,858.				1,858.	619.		265.	884.
51	HP EliteBook 840 G2 Windows	07/01/15	SL	5.00		16	963.				963.	289.		193.	482.
52	HP EliteBook 840 G2 Windows	08/01/15	SL	5.00		16	962.				962.	273.		192.	465.
53	HP ProLiant DL360	06/01/16	SL	5.00		16	3,831.				3,831.	447.		766.	1,213.
54	MS Windows 2012 R22 Software	06/01/16	SL	3.00		16	1,630.				1,630.	317.		543.	860.
55	HP EliteBook 840 G3 14" - Two	01/01/17	SL	5.00		16	2,304.				2,304.			461.	461.
56	Office Furniture	01/01/17	SL	7.00		16	3,463.				3,463.			495.	495.
57	Office Furniture - Chair	03/01/17	SL	7.00		16	564.				564.			67.	67.
58	Laptop and Docking Station	05/01/17	SL	5.00		16	1,721.				1,721.			229.	229.
59	Computer	11/01/17	SL	5.00		16	1,486.				1,486.			50.	50.
60	Office Furniture - Chair	12/01/17	SL	7.00		16	725.				725.			9.	9.
	* Total 990-PF Pg 1 Depr						126,874.				126,874.	105,953.		5,605.	111,558.
	Current Year Activity														
	Beginning balance						116,611.			0.	116,611.	105,953.			110,247.
	Acquisitions						10,263.			0.	10,263.	0.			1,311.

728111 04-01-17

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone

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[illegible]

728111 04-01-17

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone