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2017

OMB No 1545-0052

Form 990-PF Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

Open to Public Inspection

| | | ndar year 2017, or tax year beginning 01-01-20 |)17 , a | nd er | nding 12-31- | | |
|---------------------------------------|----------------|--|------------------------------------|----------|---|--|--|
| TH | E GALO | ındatıon NEY-STRUBBE CHARITABLE ION 19-RP683 | | | 26-3293200 | entification numbe | r |
| | | street (or P O box number if mail is not delivered to street address) | Room/suite | | | ımber (see ınstructio | ne) |
| 14 | 435 WE: | ST GLENLAKE AVE | | | (773) 743-4838 | , | 113) |
| | | , state or province, country, and ZIP or foreign postal code L 60660 | | | ` | application is pendin | g, check here |
| G Ch | neck al | I that apply | former public charity | | 2 Foreign or | ganizations, check he rganizations meeting sk here and attach co | the 85% |
| H Ch | neck ty | pe of organization Section 501(c)(3) exempt private | foundation | | | undation status was f on 507(b)(1)(A), chec | |
| | , | | e private foundation | | under section | 11 307 (b)(1)(A), clied | Kilele - — |
| of ' | year <i>(f</i> | tet value of all assets at end irom Part II, col (c), \$ 301,679 J Accounting method Other (specify) (Part I, column (d) must | Cash Accru | ıal | | ation is in a 60-mont in 507(b)(1)(B), chec | |
| Pa | rt 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) |
| | 1 | Contributions, gifts, grants, etc , received (attach | | | | | ,,, |
| | 2 | schedule) Check If the foundation is not required to attach | | | | | |
| | 3 | Sch B Interest on savings and temporary cash investments | | | | | |
| | 4 | Dividends and interest from securities | 12,860 | | 12,860 | | |
| | 5a | Gross rents | | | | | |
| • | ь | Net rental income or (loss) | | | | | |
| RE | 6a | Net gain or (loss) from sale of assets not on line 10 | 35 | | | | |
| Revenue | ь 7 | Gross sales price for all assets on line 6a 15,000 Capital gain net income (from Part IV, line 2) | | | 35 | | |
| | 8 | Net short-term capital gain | | | | | |
| | 9 | Income modifications | | | | | |
| | 10a b | Gross sales less returns and allowances Less Cost of goods sold | | | | | |
| | c | Gross profit or (loss) (attach schedule) | | | | | |
| | 11 | Other income (attach schedule) | | | | | |
| | 12 | Total. Add lines 1 through 11 | 12,895 | | 12,895 | | |
| | 13 | Compensation of officers, directors, trustees, etc | C | | 0 | | (|
| | 14 | Other employee salaries and wages | | | | | |
| es | 15 | Pension plans, employee benefits | | | | | |
| en S | 16a | Legal fees (attach schedule) | | | | | |
| ă | ь | Accounting fees (attach schedule) | 2,000 | | 2,000 | | (|
| ē. | С | Other professional fees (attach schedule) | 2,970 | | 2,970 | | (|
| a E | 17 | Interest | | | | | |
| <u> </u> | 18 | Taxes (attach schedule) (see instructions) | 20 | | 20 | | (|
| <u>=</u> | 19 | Depreciation (attach schedule) and depletion | | | | | |
| Ę. | 20 | Occupancy | | | | | |
| פַ | 21 | Travel, conferences, and meetings | | | | | |
| Operating and Administrative Expenses | 22 | Printing and publications | | | | | |
| Ĭ. | | | | | | | |
| era | 24 | Total operating and administrative expenses. Add lines 13 through 23 | 4,990 | | 4,990 | | , |
| o | 25 | Contributions, gifts, grants paid | 19,425 | <u> </u> | 7,550 | | 19,425 |
| | 26 | Total expenses and disbursements. Add lines 24 and 25 | 24,415 | | 4,990 | | 19,425 |
| | 27 | Subtract line 26 from line 12 | 27,410 | | 7,550 | | 15,42. |
| | а | Excess of revenue over expenses and disbursements | -11,520 | | | | |
| | ь | Net investment income (if negative, enter -0-) | | | 7,905 | | |
| | С | Adjusted net income(if negative, enter -0-) | | | | | |
| or | Paner | work Reduction Act Notice, see instructions. | | | Cat No. 11289) | - Fo | m QQN_DF (2017 |

| | - | | 1 ' ! | | ' I ' |
|---------|-----|--|---------|-------------|---------------|
| | 2 | Savings and temporary cash investments | | | |
| | 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 ▶ | | | |
| y. | 8 | Inventories for sale or use | | | |
| sets | 9 | Prepaid expenses and deferred charges | | | |
| As | 10a | Investments—U S and state government obligations (attach schedule) | | | |
| | ь | Investments—corporate stock (attach schedule) | 46,003 | 9 45 | 5,953 77,557 |
| | c | Investments—corporate bonds (attach schedule) | 14,965 | | 0 0 |
| | 11 | Investments—land, buildings, and equipment basis ▶ | | | |
| | | Less accumulated depreciation (attach schedule) ▶ | | | |
| | 12 | Investments—mortgage loans | | | |
| | 13 | Investments—other (attach schedule) | 133,951 | 133 | 3,951 176,617 |
| | 14 | Land, buildings, and equipment basis > | | | |
| | | Less accumulated depreciation (attach schedule) ▶ | | | |
| | 15 | Other assets (describe >) | | | |
| | 16 | Total assets (to be completed by all filers—see the | | | |
| | | instructions Also, see page 1, item I) | 238,945 | 227 | 7,409 301,679 |
| | 17 | Accounts payable and accrued expenses | | | |
| | 18 | Grants payable | | | |
| es | 19 | Deferred revenue | | | |
| alities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| \circ | ı | | | | |

268.255

-29,310

238,945

238,945

268.225

-40,816

227,409

227,409

1

2

3

4

5

6

238,945

-11,520

227,425

227,409 Form **990-PF** (2017)

16

Liat 21

22

23

24

25

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28

29

30

31 Part III

2

3

4

Net Assets or Fund Balances

Mortgages and other notes payable (attach schedule). .

Foundations that follow SFAS 117, check here ▶

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

Foundations that do not follow SFAS 117, check here ▶

Capital stock, trust principal, or current funds

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total liabilities and net assets/fund balances (see instructions) .

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

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

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances (see instructions) . . .

Total liabilities(add lines 17 through 22)

Other liabilities (describe >_

Unrestricted

Temporarily restricted

Permanently restricted

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3

| | (a) the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs | | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
|--|--|---------------------------------|--|--|--|
| 1 a ZOETIS INC | | | | 2015-01-01 | 2017-10-12 |
| ь | | | | | |
| С | | | | | |
| d | | | | | |
| e | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | Cost or | (g) other basis ense of sale | Gain o | h) r (loss)) minus (g) |
| a 1 | 5,000 | | 14,965 | , , , , | 35 |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| Complete only for assets | s showing gain in column (h) and ow | ned by the foundation (| on 12/31/69 | | 1) |
| (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | Excess | (k) of col(ı) (յ), ıf any | col (k), but not | h) gain minus less than -0-) or om col (h)) |
| a | , , | | 377 | | 35 |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| • | gain or (loss) as defined in sections 1 rt I, line 8, column (c) (see instructions 1 | | · | 3 | 35 |
| Part V Qualification I | Jnder Section 4940(e) for Re | duced Tax on Net | Investment In | come | |
| (For optional use by domestic p | private foundations subject to the sec | tion 4940(a) tax on ne | t investment incom | e) | |
| If section 4940(d)(2) applies, le | eave this part blank | | | | |
| If "Yes," the foundation does no | te section 4942 tax on the distributal of qualify under section 4940(e) Do | not complete this part | | | es 🗹 No |
| ** * | nount in each column for each year, T | see instructions before | making any entries | | |
| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitab | le-use assets | (d) Distribution rati (col (b) divided by c | |
| 2016 | 23,462 | | 291,474 | | 0 080494 |
| 2015 | 12,037 | | 299,937 | | 0 040132 |
| 2014 | 20,108 | | 315,840 | | 0 063665 |
| 2013 | 23,246 | | 328,582 | | 0 070746 |
| 2012 | 11,213 | | 318,801 | I | 0 035172 |
| 2 Total of line 1, column (| d) | | 2 | | 0 290209 |
| number of years the four | o for the 5-year base period—divide t ndation has been in existence if less t ncharitable-use assets for 2017 from | than 5 years 🔒 🐍 🧍 | 3 4 | | 0 058042 296,899 |
| 5 Multiply line 4 by line 3 | | • | 5 | | 17,233 |
| | ent income (1% of Part I, line 27b) | | 6 | | 79 |
| | | | 7 | | 17,312 |
| | ions from Part XII, line 4 , | | 8 | g a 1% tax rate Se | 19,425 |
| instructions | , | | | | |

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?.

7b

| and contractors | | | | | |
|---|----------|---|---|---|---------------------------------------|
| 1 List all officers, directors, trustee | es, fo | undation managers ar | nd their compensation | | |
| (a) Name and address | | Title, and average hours per week a) devoted to position | (c) Compensation (If not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | Expense account, (e) other allowances |
| MARIE J GALONEY SOLI | | TRUSTEE | 0 | 0 | 0 |
| 1435 WEST GLENLAKE AVENUE | 0 00 | | | | |
| CHICAGO, IL 60660 | <u> </u> | | | | |
| 2 Compensation of five highest-pa | id em | ployees (other than th | hose included on line 1 | 1 | ne, enter "NONE." |
| (a) Name and address of each employee pa more than \$50,000 | aıd | Title, and average hours per week (b) devoted to position | (c) Compensation | Contributions to employee benefit plans and deferred (d) compensation | Expense account, (e) other allowances |
| NONE | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Total number of other employees paid over | er \$50 | 0,000 | <u> </u> | | 0 |
| 3 Five highest-paid independent co | ontra | ctors for professional | services (see instructi | ons). If none, enter "NON | E". |
| (a) Name and address of each persor | n paid | l more than \$50,000 | (b) Typ | e of service | (c) Compensation |
| NONE | | | | | |
| | | | | | |
| | | | | | |
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| | | | - | | |
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| | | | - | | |
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| | | | _ | | |
| | | | | | |
| Fotal number of others receiving over \$50 | 0,000 | for professional services | | | 0 |
| Part IX-A Summary of Direct (| Chari | itable Activities | | | |
| List the foundation's four largest direct charitable | | | | nation such as the number of | Expenses |
| organizations and other beneficiaries served, con | ferenc | es convened, research paper | s produced, etc | | |
| 1 | | | | | |
| | | | | | |
| | | | | | |
| 2 | | | | | |
| | | | | | |
| · | | | | | |
| 3 | | | | | |
| | | | | | |
| | | | | | |
| 4 | | | | | |
| | | | | | |
| | | | | | |
| Part IX-B Summary of Program | m-Pa | alated Investments | (coo instructions) | | |
| Describe the two largest program-related inve | | | | and 2 | Amount |
| | esunei | its made by the foundation d | uring the tax year on lines I | and 2 | Amount |
| 1 | | | | | |
| | | | | | |
| | | | | | |
| 2 | | | | | |
| | | | | | |
| AH - 11 | | | | | |
| All other program-related investments | See i | instructions | | | |
| 3 | | | | | |
| | | | | | |
| | | | | | |
| Fotal. Add lines 1 through 3 | | | | | 0 |

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

1a

1b

2

3a 3h

4

5

19,425

19.425

19.346

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79

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

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

Adjusted qualifying distributions. Subtract line 5 from line 4.

Amounts set aside for specific charitable projects that satisfy the

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

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

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

income Enter 1% of Part I. line 27b (see instructions).

1

2

3

4

5

14,766

14,766

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0

Page 9

| orm 990-PF (20 | 017) | |
|----------------|-----------------------------------|---------------|
| Part XIII | Undistributed Income (see instruc | tions) |
| | | (a) Corpus |

2.259

9,034

2,259

9.034

4.659

| 011 | 1 330 11 (2 | 31/) | |
|-----|-------------|--|-------|
| P | art XIII | Undistributed Income (see instru | ction |
| | | | |
| | | | |
| 1 | Distributab | le amount for 2017 from Part XI, line 7 | |
| 2 | Undistribut | ed income, if any, as of the end of 2017 | |

a Enter amount for 2016 only.

Excess distributions carryover, if any, to 2017

f Total of lines 3a through e.

d Applied to 2017 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2017

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2017 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions) . . .

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

6 Enter the net total of each column as

9 Excess distributions carryover to 2018.

Subtract lines 7 and 8 from line 6a . .

10 Analysis of line 9 a Excess from 2013. .

b Excess from 2014. . c Excess from 2015. . .

d Excess from 2016. .

e Excess from 2017. . .

indicated below:

4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ a Applied to 2016, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election

b Total for prior years

d From 2015. . . .

a From 2012. **b** From 2013. . . . c From 2014. .

e From 2016.

(d)

(b)

Years prior to 2016

11.293

4.659

15,952

15,952

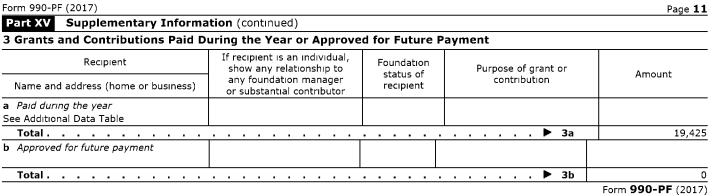
(c)

2016

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

c Any submission deadlines

factors NONE



| nter gross | s amounts unless otherwise indicated | | usiness income | Excluded by section | | (e) Related or exempt function income |
|--|---|--|------------------------------------|----------------------------------|---------------------------------------|---------------------------------------|
| Progran | n service revenue | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | (See instructions) |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| _ | and contracts from government agencies | | | | | |
| Intere | est on savings and temporary cash | | | | | |
| | ments | | | 14 | 12,860 | |
| | ntal income or (loss) from real estate | | | 14 | 12,860 | |
| a Debt | -financed property | | | | | |
| | lebt-financed property | | | | | |
| | ental income or (loss) from personal property | | | | | |
| | nvestment income | | | | | |
| ınven | tory | | | 18 | 35 | |
| | come or (loss) from special events | | | | | |
| | profit or (loss) from sales of inventory revenue a | | | | | |
| | | | | | | |
| c | | | | | | |
| | | | | | | |
| d | _ | | | | | |
| d e | | | 0 | | 12 895 | (|
| d e Subtot | al Add columns (b), (d), and (e). | | 0 | | 12,895 | |
| d e Subtot Total. (See w | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) | | 13 | · · · · · · · · · · · · · · · · · · · | |
| d e Subtot Total. (See w art XV | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) le Accomplish income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ted importantly to | 12,895 |
| d e Subtot Total. (See w | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu B Relationship of Activities to the Explain below how each activity for which | lations) le Accomplish income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ted importantly to | |
| d e Subtot Total. (See w art XV | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) le Accomplish income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ted importantly to | |
| d e Subtot Total. (See w art XV | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) le Accomplish income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ted importantly to | |
| d e Subtot Total. (See w Irt XV | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) le Accomplish income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ted importantly to | |
| d e Subtot Total. (See w Irt XV | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) le Accomplish income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | ted importantly to | |
| d e Subtot Total. (See w art XV | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) le Accomplish income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to | |
| d e Subtot Total. (See w Irt XV | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) le Accomplish income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to | |
| d e Subtot Total. (See w Irt XV | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) le Accomplish income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to | |
| d e Subtot Total. (See w Irt XV | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) le Accomplish income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to | |
| d e Subtot Total. (See w Irt XV | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) le Accomplish income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to | |
| d e Subtot Total. (See w art XV | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) le Accomplish income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to | |
| d e Subtot Total. (See w art XV | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) le Accomplish income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to | |
| d e Subtot Total. (See w art XV | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) le Accomplish income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to | |
| d e Subtot Total. (See w Irt XV | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) le Accomplish income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to | |
| d e Subtot Total. (See w art XV | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) le Accomplish income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to | |
| d e Subtot Total. (See w art XV | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) le Accomplish income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to | |
| d e Subtot Total. (See w art XV | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) le Accomplish income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to | |
| d e Subtot Total. (See w art XV | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) le Accomplish income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to | |
| d e Subtot Total. (See w Irt XV | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) le Accomplish income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to | |
| d Subtot Total. (See w | al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu | lations) le Accomplish income is report | nment of Exempled in column (e) of | pt Purposes Part XVI-A contribut | Bted importantly to | |

| orm 990-P | F (2017) | | | | | | Pa | ge 13 |
|-------------------|--|----------------------|---|------------|--|------------|----------|--------------|
| Part XV | Information Re Exempt Organi | | fers To and Transact | ions and I | Relationships With Nonchari | table | | |
| | | | any of the following with a zations) or in section 527 | | ganization described in section 501 political organizations? | | Yes | No |
| a Transfer | rs from the reporting foun | dation to a noncha | ırıtable exempt organizatio | on of | | | | |
| (1) Ca | sh | | | | | 1a(1) | | No |
| (2) Oth | her assets | | | | | 1a(2) | | No |
| b Other tr | ransactions | | | | | | | |
| (1) Sa | les of assets to a nonchar | ıtable exempt orga | nization | | | 1b(1) | | No |
| (2) Pui | rchases of assets from a r | oncharitable exem | ipt organization | | | 1b(2) | | No |
| (3) Re | ntal of facilities, equipmer | nt, or other assets. | | | | 1b(3) | | No |
| (4) Re | ımbursement arrangemen | ts | | | | 1b(4) | | No |
| ` ' | - | | | | | 1b(5) | | No |
| (6) Peri | formance of services or m | embership or fund | raising solicitations | | | 1b(6) | | No |
| c Sharing | of facilities, equipment, r | nailing lists, other | assets, or paid employees | | | 1c | | No |
| (a) Line No | (b) Amount involved | | aritable exempt organization | | ther assets, or services received cription of transfers, transactions, and sha | arıng arra | ngemer | ıts |
| | | | | | | | | |
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| | | | | | | | | |
| | | | | | | | | |
| describe | ed in section 501(c) of the | Code (other than | , or related to, one or more section 501(c)(3)) or in se | | , , | ☐ Yes | ✓ | No |
| D If "Yes," | complete the following some 'can be completed the complete the following some complete the compl | | (b) Type of organiza | ation | (c) Description of relati | onship | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

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 May the IRS discuss this return 2018-04-02 Here with the preparer shown

Signature of officer or trustee Date Title (see instr)? 🗹 Yes 🗆 No PTIN Print/Type preparer's name Preparer's Signature Date Check if self-P00024055 employed ▶ 🔲 REBECCA L PHILLIPS CPA Paid **Preparer** Firm's name ▶ MCM CPAS & ADVISORS LLP Fırm's EIN ▶27-1235638 **Use Only** Firm's address ▶ 462 S FOURTH ST SUITE 2600

Phone no (502) 749-1900 LOUISVILLE, KY 402023445

Form **990-PF** (2017)

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AARP FOUNDATION222 N LA SALLE ST NONE PUBLIC EXEMPT PURPOSE 25 CHICAGO, IL 60601 CHARITY ALLEY CAT ALLIES 7920 NORFOLK AVE NONE EXEMPT PURPOSE 400 PUBLIC BETHESDA, MD 20814 CHARITY

| , | | | | |
|--|------|-------------------|----------------|----|
| AMERICAN HEART ASSOCIATION 7272 GREENVILLE AVENUE DALLAS, TX 75231 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 50 |
| AMERICAN RED CROSS 431 18TH STREET NW WASHINGTON, DC 20006 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 50 |

| DALLAS, 1X 75231 | | | | |
|--|------|-------------------|----------------|--|
| AMERICAN RED CROSS 431 18TH STREET NW WASHINGTON, DC 20006 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | |
| ANIMAL LEGAL DEFENSE FUND | NONE | PLIBLIC | EXEMPT PURPOSE | |

| 431 18TH STREET NW WASHINGTON, DC 20006 | | CHARITY | | |
|---|------|-------------------|----------------|--|
| ANIMAL LEGAL DEFENSE FUND 525 E COTATI AVE | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | |

| 431 18TH STREET NW WASHINGTON, DC 20006 | | CHARITY | | |
|---|------|-------------------|----------------|--|
| ANIMAL LEGAL DEFENSE FUND 525 E COTATI AVE | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | |

| /ASHINGTON, DC 20006 | | CINICIT | | |
|---|------|-------------------|----------------|-----|
| NIMAL LEGAL DEFENSE FUND 25 E COTATI AVE OTATI CA 94931 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |

| <u>'</u> | | | | 1 |
|--|------|-------------------|----------------|----|
| NIMAL LEGAL DEFENSE FUND 25 E COTATI AVE OTATI, CA 94931 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 20 |
| | | | | |

| Total | | | | 19,425 |
|--------------------------------------|------|---------|----------------|--------|
| 525 E COTATI AVE COTATI, CA 94931 | | CHARITY | | |
| ANTHAL LEGAL DEI LINGE I OND | NONE | 1 ODLIC | LYCHILL OKLOSE | 2, |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| ANTI CRUELTY SOCIETY 157 W GRAND AVE CHICAGO, IL 606547174 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |
|--|------|-------------------|----------------|-----|
| ASPCA424 E 92ND ST NEW YORK NY 10128 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |

| ASPCA424 E 92ND ST NEW YORK, NY 10128 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |
|---|------|-------------------|----------------|-----|
| BEST FRIENDS ANIMAL SOCIETY 15321 S BRAND BLVD | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 450 |

| | | C | | |
|--|------|-------------------|----------------|-----|
| BEST FRIENDS ANIMAL SOCIETY 15321 S BRAND BLVD MISSION HILLS, CA 91345 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 450 |
| BOYS TOWN14100 CRAWFORD ST | NONE | PUBLIC | EXEMPT PURPOSE | 100 |

| MISSION HILLS, CA 91345 | | | | |
|---|------|-------------------|----------------|-----|
| BOYS TOWN14100 CRAWFORD ST BOYS TOWN, NE 68010 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |
| CAL FARLEY'SPO BOX 1890 | NONE | PUBLIC | EXEMPT PURPOSE | 100 |

| BOYS TOWN14100 CRAWFORD ST BOYS TOWN, NE 68010 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |
|---|------|-------------------|----------------|-----|
| CAL FARLEY'SPO BOX 1890 AMARILLO, TX 79174 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |

| BOYS TOWN, NE 68010 | | CHARITY | | |
|--|------|-------------------|----------------|---|
| CAL FARLEY'SPO BOX 1890 AMARILLO,TX 79174 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | |
| | | | | i |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| CARE FOR REAL5339 N SHERIDAN RD CHICAGO, IL 60640 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |
|--|------|-------------------|----------------|-----|
| CASTLETON RANCH HOUSE RESCUE 12103 EAST AVENUE H LANCASTER, CA 93535 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |

| ANCASTER, CA 93535 | | CHARTT | | |
|--|------|-------------------|----------------|-----|
| CATHOLIC EXTENSION 50 S WACKER DR 2000 CHICAGO, IL 60606 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |
| | | | | |

| CATHOLIC EXTENSION 150 S WACKER DR 2000 CHICAGO, IL 60606 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 20 |
|---|------|-------------------|----------------|----|
| CATHOLIC RELIEF SERVICES 228 W LEXINGTON ST | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 10 |

| CHICAGO, IL 00000 | | | | |
|---|------|-------------------|----------------|-----|
| CATHOLIC RELIEF SERVICES 228 W LEXINGTON ST BALTIMORE, MD 212013443 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |
| CHICAGO AUDUBON SOCIETY | NONE | PUBLIC | EXEMPT PURPOSE | 50 |

| 228 W LEXINGTON ST BALTIMORE, MD 212013443 | | CHARITY | | |
|---|------|-------------------|----------------|----|
| CHICAGO AUDUBON SOCIETY 5801 N PULASKI RD C | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 50 |

| 228 W LEXINGTON ST BALTIMORE, MD 212013443 | | CHARITY | | |
|--|------|-------------------|----------------|---|
| CHICAGO AUDUBON SOCIETY 5801 N PULASKI RD C CHICAGO II 60646 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | ! |

| <u>'</u> | | | | |
|---|------|-------------------|----------------|--------|
| CHICAGO AUDUBON SOCIETY 5801 N PULASKI RD C CHICAGO, IL 60646 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 50 |
| Total | | | | 19 425 |

| CHICAGO, IL 60646 | CHARTT | |
|-------------------|--------|------------|
| Total | | 19,425 |

| Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment | | | | |
|--|---|-------------------------|----------------------------------|--------|
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| CHICAGO COALITION FOR THE HOMELESS 1325 S WABASH AVE 205 CHICAGO, IL 606052507 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |
| CHICAGO TRIBUNE CHARITIES 205 NORTH MICHIGAN AVENUE SUITE 4300 CHICAGO, IL 60601 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |
| CHRISITIAN APPALACHIAN PROJECT PO BOX 55911 LEXINGTON, KY 405555911 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 400 |
| CONSUMER REPORTSPO BOX 96552 WSHINGTON, DC 200906552 | NONE | PUBLIC CHARITY | EXEMPT OURPOSE | 10 |
| CORAZON A CORAZON 8235 S SOUTH SHORE DR CHICATO, IL 60617 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |

19,425

Total . .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| DEFENDERS OF WILDLIFE 1130 17TH ST NW WASHINGTON, DC 20036 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |
|--|------|-------------------|----------------|-----|
| DELTA RESCUEPO BOX 9 GLENDALE, CA 91209 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 300 |
| | | | | 1 |

| DEFENDERS OF WILDLIFE 1130 17TH ST NW WASHINGTON, DC 20036 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |
|---|------|-------------------|----------------|-----|
| DREAMCHASER HORSE RESCUE 6340 KINCHELOE DR FALCON, MO 65470 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |
| EARTH JUSTICE 50 CALIFORNIA ST STE 500 SAN FRANCISCO CA 94111 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |

| DREAMCHASER HORSE RESCUE 6340 KINCHELOE DR FALCON, MO 65470 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |
|--|------|-------------------|----------------|-----|
| EARTH JUSTICE 50 CALIFORNIA ST STE 500 SAN FRANCISCO, CA 94111 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |
| EASTER SEALS2230 FEDERAL STREET | NONE | PUBLIC | EXEMPT PURPOSE | 50 |

| FALCON, MO 65470 | | | | |
|--|------|-------------------|----------------|-----|
| EARTH JUSTICE 50 CALIFORNIA ST STE 500 SAN FRANCISCO, CA 94111 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |
| EASTER SEALS2230 FEDERAL STREET CHICAGO, IL 60616 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 50 |
| · | | | | |

| SAN FRANCISCO, CA 94111 | | GI S II (211 | | |
|--|------|-------------------|----------------|--------|
| EASTER SEALS2230 FEDERAL STREET CHICAGO, IL 60616 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 50 |
| Total | | | | 19,425 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | | |
|---|------|-------------------|----------------|-----|
| ENVIRONMENTAL DEFENSE FUND 257 PARK AVENUE SOUTH NEW YORK, NY 10010 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |
| | | | | |

| FOOD FOR THE ROOP (404 LYON) CROAD | NONE | DUDI IC | EVENDT BURDOCE | , - |
|---|------|-------------------|----------------|-----|
| FELINES AND CANINES 6379 N PAULINA ST CHICAGO, IL 60660 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 150 |
| NEW YORK, NY 10010 | | | | |

| 6379 N PAULINA ST CHICAGO, IL 60660 | | CHARITY | | |
|--|------|-------------------|----------------|-----|
| FOOD FOR THE POOR6401 LYONS ROAD COCONUT CREEK, FL 33073 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 15 |
| FRATERNITE NOTRE DAME | NONE | PUBLIC | EXEMPT PURPOSE | 100 |

| FOOD FOR THE POOR6401 LYONS ROAD COCONUT CREEK, FL 33073 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 15 |
|---|------|-------------------|----------------|-----|
| FRATERNITE NOTRE DAME 502 N CENTRAL AVE CHICAGO, IL 60644 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |
| EDIENDS OF THE EARTH | NONE | DUBLIC | EVENDT BURDOCE | 200 |

| FRATERNITE NOTRE DAME 502 N CENTRAL AVE CHICAGO, IL 60644 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |
|---|------|-------------------|----------------|-----|
| FRIENDS OF THE EARTH 1100 15TH STREET NW 11TH FLOOR | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |

| 502 N CENTRAL AVE CHICAGO, IL 60644 | NONE | CHARITY | EXEMPT PURPOSE | 100 |
|--|------|-------------------|----------------|-----|
| FRIENDS OF THE EARTH 1100 15TH STREET NW 11TH FLOOR WASHINGTON, DC 20005 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |

| FRIENDS OF THE EARTH 1100 15TH STREET NW 11TH FLOOR WASHINGTON, DC 20005 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |
|--|------|-------------------|----------------|--------|
| Total | | | | 19,425 |

| Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment | | | | |
|--|---|-------------------------|----------------------------------|--------|
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| GREATER CHICAGO FOOD DEPOSITORY 4100 W ANN LURIE PL CHICAGO, IL 60632 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 300 |
| HARMONY HOUSE106 MUSGROVE ST CLINTON, SC 293252350 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |
| HOOVED ANIMAL HUMANE SOCIETY 10714 MCCONNELL RD WOODSTOCK, IL 60098 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |
| HOUSING OPPORTUNITIES & MAINTENANCE FOR THE ELDERLY 1419 W CARROLL AVE FLOOR 2 CHICAGO, IL 606071149 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 400 |
| HUMANE FARMING ASSOCIATION | NONE | PUBLIC | EXEMPT PURPOSE | 200 |

CHARITY

19,425

36 WOODLAND AVE

Total . . 3a

SAN RAFAEL, CA 94901

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year HUMANE SOCIETY OF THE US NONE PUBLIC EXEMPT PURPOSE 100 2100 L ST NW CHARITY WASHINGTON, DC 20037 NONE EXEMPT PURPOSE 50 INTERNATIONAL ANIMAL RESCUE PUBLIC 1595 SPRING HILL RD 550 CHARITY

| VIENNA, VA 22182 | | | | |
|--|------|-------------------|----------------|-----|
| IZZY'S LOVE EQUINE RESCUE 9739 DRY BRIDGE RD EMMITSBURG, MD 21727 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |
| JANE GOODHALL INSTITUTION 1606 COOLERS DAIRY RD WALTERBORO, SC 29488 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |

PUBLIC

CHARITY

EXEMPT PURPOSE

200

19,425

NONE

KINDNESS RANCH

Total .

3a

355 NORTH ASHLAND AVENUE

CHICAGO, IL 606071019

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year 100

| LEADER DOGS FOR THE BLIND 1039 SOUTH ROCHESTER ROAD ROCHESTER HILLS, MI 48307 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | |
|---|------|-------------------|----------------|--|
| LITTLE BROTHERS1558 BOLLINGER RD WESTMINSTER, MD 21157 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | |
| | | | | |

| WESTMINSTER, MD 21157 | THO THE | CHARITY | EXEMPTON ODE | |
|--|---------|-------------------|----------------|-----|
| LITTLE LONGEAR MINIATURE DONKEY RESCUE 1275 MAMARONECK AVE WHITE PLAINS, NY 10605 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |
| MARCH OF DIMESSOON CROVE AVE | NONE | DUBLIC | EVEMBT DUDDOSE | 50 |

500

| RESCUE 1275 MAMARONECK AVE WHITE PLAINS, NY 10605 | | CHARITY | | |
|---|------|-------------------|----------------|-----|
| MARCH OF DIMES3239 GROVE AVE BERWYN, IL 60643 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 50 |
| MEALS ON WHEELS OF NO ILLINOIS | NONE | PUBLIC | EXEMPT PURPOSE | 200 |

| MARCH OF DIMES3239 GROVE AVE BERWYN, IL 60643 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 50 |
|--|------|-------------------|----------------|-----|
| MEALS ON WHEELS OF NO ILLINOIS 1140 WEST JACKSON BLVD | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |

| MARCH OF DIMES3239 GROVE AVE BERWYN, IL 60643 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 50 |
|---|------|-------------------|----------------|-----|
| MEALS ON WHEELS OF NO ILLINOIS 1140 WEST JACKSON BLVD CHICAGO, IL 60607 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |

| BERWIN, IL 60643 | | CHARITT | | |
|---|------|-------------------|----------------|--------|
| MEALS ON WHEELS OF NO ILLINOIS 1140 WEST JACKSON BLVD CHICAGO, IL 60607 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |
| Total | | | | 19,425 |

3a

| Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment | | | | |
|--|---|-------------------------|----------------------------------|--------|
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| MERCY HOME FOR BOYS AND GIRLS PO BOX 4147 SUFFOLK, VA 23439 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 300 |
| NATIONAL RESOURCES DEFENSE COUNCIL 3200 E 91ST ST CHICAGO, IL 60617 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 400 |
| NATIONAL SHRINE OF ST JUDE 4711 NORTH RAVENSWOOD AVE CHICAGO, IL 606404407 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 50 |
| NIGHT MINISTRIES8424 BEDELL RD BERLIN CENTER, OH 44401 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |
| NOAH'S LOST ARK ANIMAL PARK | NONE | PUBLIC | EXEMPT PURPOSE | 100 |

CHARITY

6310 S CLAREMONT AVE

CHICAGO, IL 60636

Total . За

19,425

| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
|--|---|-------------------------|----------------------------------|--------|
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| OLIVE BRANCH MISSION 1458 S CANAL ST CHICAGO, IL 60607 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |
| PACIFIC GARDEN MISSION 801 EIGHTEENTH STREET NW WASHINGTON, DC 200063517 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |
| PARALYZED VETS OF AMERICA 1997 N CLYBOURN AVE CHICAGO, IL 60614 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |
| PAWS CHICAGO 5100 WISCONSIN AVE NW 4 WASHINGTON, DC 20016 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 2,000 |
| PCRM PHYSICIANS COMMITTEE FOR RESPONSIBLE MEDICINE 8317 DUCKWORTH RD SAN ANGELO, TX 76905 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 600 |
| Total | | | . | 19,425 |

| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
|---|---|----------------------|----------------------------------|--------|
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | Contribution | |
| a Paid during the year | | | | |
| PEACEFUL VALLEY DONKEY RESCUE 501 FRONT ST NORFOLK, VA 23510 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 450 |
| PEOPLE FOR THE ETHICAL TREATMENT OF ANIMALS (PETA) 2410 W LUNT AVE CHICAGO, IL 60645 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 250 |
| RED CLOUD INDIAN SCHOOL 100 MISSION DRIVE PINE RIDGE, SD 57770 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |
| RED DOOR ANIMAL SHELTER 16415 ADDISON RD SUITE 200 ADDISON, TX 75001 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |
| RESERVATION ANIMAL RESCUE 5040 N PULASKI ROAD CHICAGO, IL 60660 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |
| Total | | | | 19,425 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SALVATION ARMY5500 GAINES STREET NONE PUBLIC **EXEMPT PURPOSE** 1,200 SAN DIEGO, CA 92110 CHARITY

| SAN DIEGO HUMANE SOCIETY 16891 CAROLE NOON LN FORT PIERCE, FL 34945 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 250 |
|---|------|-------------------|----------------|-----|
| SAVE-A-PET 13105 WATERTOWN PLANK ROAD ELM GROVE, WI 53122 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |

| SAVE-A-PET 13105 WATERTOWN PLANK ROAD ELM GROVE, WI 53122 | NONE | CHARITY | EXEMPT PURPOSE | 200 |
|---|------|-------------------|----------------|-----|
| SCHOOL SISTERS OF NOTRE DAME 4447 2ND RD UDALL, KS 67146 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |
| COUTHERN WINDS FOURNE RESCUE | NONE | DUDUTC | EVEMBT BURBOCE | 100 |

| | ELM GROVE, WI 53122 | | | | |
|---|--|------|-------------------|----------------|--|
| ı | SCHOOL SISTERS OF NOTRE DAME 4447 2ND RD UDALL, KS 67146 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | |
| | SOUTHERN WINDS EQUINE RESCUE | NONE | PUBLIC | EXEMPT PURPOSE | |

| 4447 2ND RD UDALL, KS 67146 | | CHARITY | | |
|---|------|-------------------|----------------|----|
| SOUTHERN WINDS EQUINE RESCUE 262 DANNY THOMAS PL | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 10 |

| 4447 2ND RD UDALL, KS 67146 | | CHARITY | | |
|---|------|-------------------|----------------|---|
| SOUTHERN WINDS EQUINE RESCUE 262 DANNY THOMAS PL | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 1 |

100

MEMPHIS, TN 38105 19,425 Total .

| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
|--|---|-------------------------|----------------------------------|--------|
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| ST JUDE CHILDREN'S RESEARCH HOSPITAL 1420 W GRANDVILLE AVENUE CHICAGO, IL 60660 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 50 |
| ST GERTRUDE PARISH 2511 WEST LOGAN BOULEVARD CHICAGO, IL 60647 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 1,300 |
| ST JOHN BERCHMAN PARISH 1000 TONGUE RIVER ROAD ASHLAND, MT 59003 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 2,400 |
| ST LABRE INDIAN SCHOOL 301 CHURCH STREET MT CALVARY, WI 53057 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |
| ST LAWRENCE SEMINARY 1140 W JACKSON BLVD CHICAGO, IL 60607 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 25 |

| Recipient | If recipient is an individual, | Foundation | Purpose of grant or | Amount |
|--|--|------------------------|---------------------|--------|
| Name and address (home or business) | show any relationship to any foundation manager or substantial contributor | status of recipient | contribution | |
| a Paid during the year | | | | |
| SUNDAY MASS AT MERCY HOME 237 CEMETERY HILL RD KINGSTON, TN 37763 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |
| TREE HOUSE HUMANE SOCIETY 216 NORTH MEECH ROAD DANSVILLE, MI 48819 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |
| TURNING POINT DONKEY RESCUE 220 W LOCUST ST2 BELVIDERE, IL 61008 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 300 |
| VETERANS OF FOREIGN WARS 450 7TH AVE NEW YORK, NY 10123 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |
| WILD BURROW RESCUE AND PRESERVATION PROJECT PO BOX 10 OLANCHA, CA 935490010 | NONE | PUBLIC CHARITY | EXEMPT PURPPOSE | 100 |

Recipient
Recipi

| a Paid during the year | | | | |
|--|------|-------------------|----------------|-----|
| WILDERNESS SOCIETY 1615 M STREET NW WASHINGTON, DC 20036 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 100 |
| | | | | |

| 1615 M STREET NW WASHINGTON, DC 20036 | | CHARITY | | |
|---|------|-------------------|----------------|--------|
| YOUNG AT HEARTPO BOX 1293 PALATINE, IL 60078 | NONE | PUBLIC CHARITY | EXEMPT PURPOSE | 200 |
| Total | | | | 19,425 |

| efile GRAPHIC print - DO NOT PROCES | SS As Filed D | ata - | Γ | DLN: 93491110001138 | | |
|-------------------------------------|---------------|--------------------------|------------------------|---|--|--|
| TY 2017 Accounting Fees Schedule | | | | | | |
| | | | | | | |
| Nan | ne: THE GAL | ONEY-STRUBBE CH | ARITABLE | | | |
| FOUNDATION 19-RP683 | | | | | | |
| EI | IN: 26-3293 | 200 | | | | |
| Accounting Fees Schedule | | | | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | |
| ACCOUNTING FEES | 2,000 | 2,000 | | 0 | | |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93491110001138 |
|--------------------------------------|--------------------------|---------------------|
| TY 2017 Investments Corpor | ate Stock Schedule | |
| Name: | THE GALONEY-STRUBBE CHAR | RITABLE |
| | FOUNDATION 19-RP683 | |

| EIN: 26-3293200 | | | |
|------------------------|--|---------------------------|----------------------------------|
| Name of Stock | | End of Year Book Value | End of Year Fair Market Value |
| COMMON STOCKS | | 20,427 | 50,717 |
| FOREIGN STOCKS | | 25,526 | 26,840 |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | | DLN: 93491110001138 |
|--------------------------------------|-----------------|------------|--------|---------------------|
| TY 2017 Investments - Other S | Schedule | | | |
| Name: | THE GALONEY-ST | RUBBE CHAR | ITABLE | |
| | FOUNDATION 19- | RP683 | | |
| EIN: | 26-3293200 | | | |
| investments Other Schedule 2 | | | | |
| | | | | |

| Investments Other Schedule 2 | | | | | | |
|------------------------------|-----------------------|------------|----------------------------------|--|--|--|
| Category/ Item | Listed at Cost or FMV | Book Value | End of Year Fair Market Value | | | |
| EQUITY FUNDS | AT COST | 53,058 | 69,906 | | | |
| BALANCED FUNDS | AT COST | 80,893 | 106,711 | | | |

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN: 9349111000 | 1138 | | | | |
|--------------------------------------|-----------------|---------------------|-----------------|------|--|--|--|--|
| TY 2017 Other Decreases Schedule | | | | | | | | |
| | | | | | | | | |
| Name: | THE GALONEY | -STRUBBE CHARITABLE | | | | | | |
| | FOUNDATION | 19-RP683 | | | | | | |
| EIN: | 26-3293200 | | | | | | | |
| De | escription | | Amount | | | | | |
| COST BASIS ADJUSTMENT | | | | 16 | | | | |

| efile GRAPHIC print - DO NOT PROCES | SS As Filed Data | - | DLI | N: 93491110001138 | | |
|--|--------------------------------------|----------------|--------------|-------------------------|--|--|
| TY 2017 Other Professional Fees Schedule | | | | | | |
| | | | | 1 | | |
| Nar | Name: THE GALONEY-STRUBBE CHARITABLE | | | | | |
| | FOUNDATIO | N 19-RP683 | | | | |
| E | IN: 26-3293200 | | | | | |
| Category | Amount | Net Investment | Adjusted Net | Disbursements | | |
| dategory | Amount | Income | Income | for Charitable Purposes | | |

2,970

2,970

ADVISORY FEES

| efile GRAPHIC print - DO NOT F | PROCESS | As Filed Data | - | DLI | N: 93491110001138 |
|--------------------------------|---------|---------------|--------------------------|------------------------|---|
| TY 2017 Taxes Schedu | ıle | _ | _ | _ | |
| | | | | | |
| | | FOUNDATIO | | RITABLE | |
| | EIN: | 26-3293200 | | | |
| Category | An | nount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
| BANK FEES | | 20 | 20 | | 0 |