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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

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2017

OMB No 1545-0052

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 , aı	nd ending 12-31-		
		indation IDATION			entification numbe	er
				36-3488134		
	iber and 0 N LaS	I street (or P O box number if mail is not delivered to street address) alle St	Room/suite	B Telephone nu	ımber (see ınstructio	ons)
C-1		770 - 6	(312) 726-3110)		
		ı, state or province, country, and ZIP or foreign postal code 60602		C If exemption	application is pendir	ng, check here
G Ch	neck al	I that apply Initial return Initial return of a f	ormer public charity	D 1. Foreign or	ganızatıons, check h	ere . \square
		☐ Final return ☐ Amended return			ganizations meeting	
		Address change Name change		,	k here and attach co	· · · —
l Ch	neck ty	pe of organization $lacksquare$ Section 501(c)(3) exempt private f	oundation		undation status was n 507(b)(1)(A), che	
	Section	1 4947(a)(1) nonexempt charitable trust	private foundation			
of '	year <i>(f</i>	xet value of all assets at end from Part II, col (c), \$\ 1,621,454 \] \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	✓ Cash		ation is in a 60-mont n 507(b)(1)(B), che	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and			(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily	expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes
		equal the amounts in column (a) (see instructions))				(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	60,000			
	2	Check ► ☑ If the foundation is not required to attach				
	_	Sch B				
	3	Interest on savings and temporary cash investments	20.067	20.067		
	4 5a	Dividends and interest from securities	30,067	30,067		
<u>e</u>	b	Net rental income or (loss)				
	6a	Net gain or (loss) from sale of assets not on line 10	27,144			
Revenue	ь	Gross sales price for all assets on line 6a 27,319				
Re	7	Capital gain net income (from Part IV, line 2)		27,144		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	11	· · · · · · · · · · · · · · · · · · ·	9 4,756	4,756		
	12	Total. Add lines 1 through 11	121,967	61,967		
	13	Compensation of officers, directors, trustees, etc	121,507	01,507		
	14	Other employee salaries and wages				
Š	15	Pension plans, employee benefits				
nse	16a	Legal fees (attach schedule)				
<u>×</u>	ь	Accounting fees (attach schedule)				
o L	c	Other professional fees (attach schedule)	6,027	3,963		1,583
Operating and Administrative Expenses	17	Interest	1,230	1,230		
S	18	Taxes (attach schedule) (see instructions)	2,285	918		
≣	19	Depreciation (attach schedule) and depletion				
=	20	Occupancy				
† DC	21	Travel, conferences, and meetings				
ਰ ਜ	22	Printing and publications	06-1 2.424	2.121		
Ĕ	23		3,124	3,124		
era	24	Total operating and administrative expenses. Add lines 13 through 23	12,666	9,235		1,583
2	25	Contributions, gifts, grants paid	75,000			75,000
	26	Total expenses and disbursements. Add lines 24 and	. 3,300			7 3,300
		25	87,666	9,235		76,583
	27	Subtract line 26 from line 12				
	a	Excess of revenue over expenses and disbursements	34,301			
	ь	Net investment income (If negative, enter -0-)		52,732		
	С	Adjusted net income(if negative, enter -0-)				
or	Paper	work Reduction Act Notice, see instructions.		Cat No 11289)	ξ Fo	rm 990-PF (2017)

		· · · · · · · · · · · · · · · · · · ·	(a) book value	(B) Dook value	(C) I all I larrect value
	1	Cash—non-interest-bearing	1,722	48,096	48,096
	2	Savings and temporary cash investments	83,685	85,983	85,983
	3	Accounts receivable ►			
		Less allowance for doubtful accounts ▶	3,919	1,281	1,281
	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 ▶			
'n	8	Inventories for sale or use			
יב	9	Prepaid expenses and deferred charges			
î	10a	Investments—U S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)	106,426	106,356	56,152
	С	Investments—corporate bonds (attach schedule)	500,060	550,120	545,056
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	696,874	627,453	884,886
	14	Land, buildings, and equipment basis >			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe >)	ı	1	
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	1,392,686	1,419,290	1,621,454
_	17	Accounts payable and accrued expenses			

Liabilities

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

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

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

30

31 Part III

> 2 3

> 4

5

		,			
		ınstructions Also, see page 1, item I)	1,392,686	1,419,290	1,621,454
	17	Accounts payable and accrued expenses			
	18	Grants payable			
<u>s</u>	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ᆵ	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe)			
	23	Total liabilities(add lines 17 through 22)		0	
		Foundations that follow SFAS 117, check here ▶			
Ses		and complete lines 24 through 26 and lines 30 and 31.			
Balance	24	Unrestricted			
<u> </u>	25	Temporarily restricted			
Fund	26	Permanently restricted			
Ξ		Foundations that do not follow SFAS 117, check here			
ŏ		and complete lines 27 through 31.			
et s	27	Capital stock, trust principal, or current funds	1,392,686	1,419,290	
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
d	29	Retained earnings, accumulated income, endowment, or other funds			

Net Assets or Fund Balances

1,392,686

1,392,686

1,419,290

1,419,290

1,392,686

1,426,987

1,419,290 Form **990-PF** (2017)

34,301

7,697

1

2

3

4

5

Page **3**

1	(a)	How acquired	(c)	(d)	
	the kınd(s) of property sold (e g , re ehouse, or common stock, 200 shs	P—Purchase	Date acquired (mo , day, yr)	Date sold (mo , day, yr)	
<u>, </u>		D—Donation			
1 a 0 265 shares AM CASTLE b FROM PASSTHROUGHS L		P P	2015-08-07 2017-01-01	2017-09-12 2017-12-31	
c FROM PASSTHROUGHS S			P	2017-01-01	2017-12-31
d SEC 1231 & STRADDLES			P	2017-01-01	2017-12-31
e CAPITAL GAIN DISTRIBU			P	2017-01-01	2017-12-51
	(f)		(g)		(h)
(e)	Depreciation allowed	other basis		or (loss)	
Gross sales price	(or allowable)	plus expe	ense of sale	(e) plus (f) minus (g)
a				70	-70
b 3	30,587				30,587
С	3,582			-3,582	
d			1	05	-105
e	314				314
Complete only for assets	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69		(I)
(i)	(j)		(k)		(h) gain minus
F M V as of 12/31/69	Adjusted basis		of col (i)	1 '''	t less than -0-) or rom col (h))
	as of 12/31/69	over coi	(j), if any	Losses (II	
a					-70 30,587
b					
<u>c</u>					-3,582
<u>d</u>					-105 314
e		76 1 1 5		.	314
2 Capital gain net income	e or (net capital loss)	If gain, also enter in P If (loss), enter -0- in F		\	27,144
3 Net short-term capital o	' - - - - - - - - - 	27,144			
·	rt I, line 8, column (c) (see instruct		_	,	
in Part I, line 8				} 3	
Part V Qualification I	Under Section 4940(e) for Re	educed Tax on Net	Investment 1	Income	
For optional use by domestic p	private foundations subject to the se	ction 4940(a) tax on ne	t investment inc	ome)	
f section 4940(d)(2) applies, le	eave this part blank				
Vas the foundation liable for th	ne section 4942 tax on the distributa	ble amount of any year	in the base perio	od?	es 🔽 No
	ot qualify under section 4940(e) Do		in the base perio		
1 Enter the appropriate an	nount in each column for each year,	see instructions before	making any ent	1es	
(a)	(b)	(c)		(d)	
Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitab	le-use assets	Distribution ra (col (b) divided by	
2016	75,110		1,516,357	(00) (0) 0) 1111000 0)	0 04953
2015	84,444		1,597,342		0 05287
2014	81,605		1,657,405		0 04924
2013	74,507		1,638,400		0 04548
2012	66,933		1,521,137		0 04400
2 Total of line 1, column (d)		2	2	0 241112
	o for the 5-year base period—divide		or by the		
	ndation has been in existence if less		🗀		0 048222
	encharitable-use assets for 2017 from	n Part X, line 5	4		1,593,638
5 Multiply line 4 by line 3			5		76,848
	ent income (1% of Part I, line 27b)		<u>-</u> 6	_	527
			7	'	77,375
	ions from Part XII, line 4 ,				76,583
If line 8 is equal to or gre instructions	eater than line 7, check the box in P	art VI, line 1b, and com	plete that part u	sing a 1% tax rate So	ee the Part VI
IIISU UCUOIIS					

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

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Part VIII Information About Cand Contractors	Officers, Directors, Trust	tees, Foundation Ma	nnagers, Highly Paid Ei	
1 List all officers, directors, trustee	es, foundation managers ar	nd their compensation	(see instructions).	
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans and deferred	Expense account, (e) other allowances
See Additional Data Table	(B) devoted to position	-0-7	compensation	
See Additional Data Table				
				\
2 Compensation of five highest-pa	d employees (other than ti	hose included on line 1		ne, enter "NONE."
(a) Name and address of each employee pa more than \$50,000	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				
3 Five highest-paid independent co				
(a) Name and address of each person	n paid more than \$50,000	(b) Typ	e of service	(c) Compensation
NONE		1		
		1		
		-		
		_		
Total number of others receiving over \$50	0.000 for professional services			
Part IX-A Summary of Direct (
List the foundation's four largest direct charitable organizations and other beneficiaries served, con			nation such as the number of	Expenses
1 none				0
2				
3				
4				
	m-Related Investments	· · · · · · · · · · · · · · · · · · ·		
Describe the two largest program-related inve	stments made by the foundation d	uring the tax year on lines 1	and 2	Amount
<u> </u>				
2				
All other program-related investments	Can instrument			

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

3a 3h

4

5

76.583

76.583

Form **990-PF** (2017)

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.

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

Amounts set aside for specific charitable projects that satisfy the

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

3

4

Undistributed income, if any, a Enter amount for 2016 only. **b** Total for prior years

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

e From 2016.

XII, line 4 ▶ \$

indicated below:

d From 2015. . . .

2

Page 9

78,627

76,583

2,044

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Dowl VIII	II adiatuibutad Tagaga (asa yashuyatisas)
Part XIII	Undistributed Income (see instructions)

20_

5 Excess distributions carryover applied to 2017

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

same amount must be shown in column (a))

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

6 Enter the net total of each column as

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) . . .

9 Excess distributions carryover to 2018.

Subtract lines 7 and 8 from line 6a.

c Excess from 2015. . . .

d Excess from 2016. . e Excess from 2017. .

10 Analysis of line 9 a Excess from 2013. . **b** Excess from 2014. .

Distributable amount for 2017 from Part XI, line 7					
Undistributed income, if any, as of the end of 2017					
Enter amount for 2016 only					
Total for prior years 20 20 20	Г				

Excess distributions carryover, if any, to 2017

5 362

5.953 1,638 f Total of lines 3a through e.

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

4 Qualifying distributions for 2017 from Part

required—see instructions). **d** Applied to 2017 distributable amount. . . .

e Remaining amount distributed out of corpus

3,318 5.953

1.638

(a)

Corpus

2.044

10,909

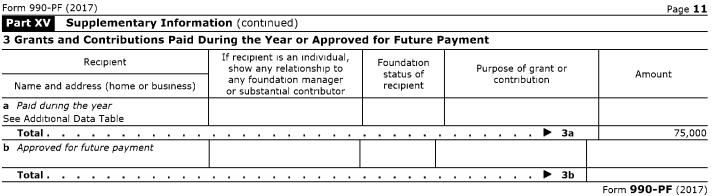
10,909

12.953

(b)

Years prior to 2016

(c)



er gross	amounts unless otherwise indicated	Unrelated bus	iness income	Excluded by section	512, 513, or 514	(e) Related or exemp
	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
d						
	and contracts from government agencies					
	ship dues and assessments					
	st on savings and temporary cash					
	ments			14	30,067	
	tal income or (loss) from real estate				,	
	inanced property					
	ebt-financed property notes or (loss) from personal property					
	evestment income			14	4,756	
Gain o	r (loss) from sales of assets other than					
	ory			18	27,144	
	rofit or (loss) from sales of inventory					
	evenue a					
b						
b c		-				
b c d						
b c d e Subtota Total. /	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculated. Relationship of Activities to th	lations) e Accomplishr	nent of Exem	pt Purposes	61,967	61,9
b c d e Subtota Total. / (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculated in the second columns. The second columns is a columns in the second columns in the second columns in the second columns. The second columns is a columns in the second colum	lations) e Accomplishr income is reported	ment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	61,9
b c d e Subtota Total. / (See wo Int XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculated in the color of activities to the color of activities to the color of activity for which	lations) e Accomplishr income is reported	ment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	61,9
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b c d e Subtota Total. / (See wo	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) rksheet in line 13 instructions to verify calculated in the second columns. The second columns is a columns in the second columns in the second columns in the second columns. The second columns is a columns in the second colum	lations) e Accomplishr income is reported	ment of Exem	pt Purposes If Part XVI-A contribut	ed importantly to	61,9

Forn	1 990-PF (2	2017)			Pa	ge 13
Pā	art XVII	Information Re Exempt Organi	egarding Transfers To and Transactions and Relationships With Noncha zations	ritable		
			directly engage in any of the following with any other organization described in section 50 in 501(c)(3) organizations) or in section 527, relating to political organizations?	1	Yes	No
a ·	Transfers f	rom the reporting foun	dation to a noncharitable exempt organization of			
1	(1) Cash.			1a(1)		No
	(2) Other	assets		1a(2)		No
Ь	Other trans	sactions				
1	(1) Sales	of assets to a nonchar	itable exempt organization	1b(1)		No
			noncharitable exempt organization	1b(2)		No
1	(3) Renta	l of facilities, equipmer	nt, or other assets	1b(3)		No
1	(4) Reimb	oursement arrangemen	ts	1b(4)		No
		_		1b(5)		No
1	(6) Perforr	mance of services or m	embership or fundraising solicitations	1b(6)		No
C S	Sharing of	facılıtıes, equipment, n	nailing lists, other assets, or paid employees	1c		No
I	of the good	ls, other assets, or ser	Is "Yes," complete the following schedule Column (b) should always show the fair market vices given by the reporting foundation. If the foundation received less than fair market vingement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization.	alue	ngemer	nte
(4)	LINE NO	(b) / infounce infooted	(c) Name of noncontraction exempt organization (c) Description of during starting and s	naming arre	ngemer	103

(6) Per	rformance of services or m	embership o	r fundr	aısıng solı	citations					1b(6)	No
c Sharing	g of facilities, equipment, r	nailing lists, o	other a	ssets, or	paid employees.				[1c	No
of the o	answer to any of the above goods, other assets, or ser transaction or sharing arra	vices given b	y the r	eporting f	oundation If th	e foundat	on receiv	ed less than fair ma	arket value		
(a) Line No	(b) Amount involved	(c) Name of	noncha	rıtable exer	npt organization	(d) De	escription o	of transfers, transaction	ns, and shar	ıng arrangen	nents
					-						
						_					
	foundation directly or indire ped in section 501(c) of the	•			*				[]Yes [✓ No
b If "Yes,	," complete the following s	chedule									
	(a) Name of organization	n		(Ь) Type of organiza	tion		(c) Descripti	on of relatio	nship	
							+				
							+				
							+				
0	Under penalties of perjury, of my knowledge and belief which preparer has any kno	, it is true, co							based on a		tion of
Here					2018-05-25	 •			return	e preparer sl	
	Signature of officer or t	rustee			Date		Title			str)? 🗹 Ye	es 🗆 No
	Print/Type preparer's	name	Prepa	ırer's Sıgn	ature	Date		Check if self-	PTIN		
	D 4 . 4							employed ▶ □		P01257947	,

David Lihosit

Firm's name ▶ Simpson Estates Inc

Firm's address ► 30 North Lasalle Ste 1232

Chicago, IL 606023344

Paid **Preparer**

Use Only

Firm's EIN ▶36-2541394

Phone no (312) 726-3110

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account. hours per week not paid, enter Contributions to (e) other allowances -0-) (b) devoted to position employee benefit plans and deferred compensation JONATHAN B MELLIN President ٥ 0 00 30 N LA SALLE ST CHICAGO, IL 60602 DEBRA M COY Secretary 0.00 30 N LA SALLE CHICAGO, IL 60602 TIMOTHY M CRENSHAW Treasurer 0 00 30 N LA SALLE CHICAGO, IL 60602 HOWARD B SIMPSON Director 0 0.00 30 N LA SALLE CHICAGO, IL 60602 JESSIE S JONES Director 0.00 30 N LA SALLE CHICAGO, IL 60602 CHARLES H MORSE IV Director 0.00 30 N LA SALLE CHICAGO, IL 60602 WILLIAM M SIMPSON Director 0 00 30 N LA SALLE CHICAGO, IL 60602 JAMES SIMPSON IV Director 0 00 30 N LA SALLE CHICAGO, IL 60602

•	Form 990PF Part XV Line 1a - 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).
	HOWARD B CIMPSON

th HOMAKO R STAILSON

JESSIE S JONES CHARLES H MORSE IV

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation 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 THE COLONIAL WILLIAMSBURG FNDN NONE UNRESTRICTED 2,500 PO BOX 1776 WILLIAMSBURG, VA 23187 NONE LAKE FOREST OPEN LANDS unrestricted 10.000 000

350 N WAUKEGAN ROAD LAKE FOREST, IL 60045	NONE	uniestricted	10,00
GREAT LAKES DISASTER TRAINING FNDN 271-0 MARKET SOLARE	NONE	unrestricted	10,00

271-0 MARKET SQUARE

LAKE FOREST, IL 60045

75,000

За

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 INTERNATIONAL SNOW LEOPARD NONE unrestricted 1.000 TRUST 4649 SUNNYSIDE AVE N 325 SEATTLE, WA 98103 00

north carolina ZOOLOGICAL SOCIETY 4403 ZOO PARKWAY ASHEBORO, NC 27205	NONE	UNRESTRICTED	1,000
RUSH UNIVERSITY MEDICAL CENTER	NONE	MS CENTER	5,000

ASHEBORO, NC 27205			
RUSH UNIVERSITY MEDICAL CENTER 1700 W VAN BUREN SUITE 250 CHICAGO IL 60612	NONE	MS CENTER	5,00

RUSH UNIVERSITY MEDICAL CENTER 1700 W VAN BUREN SUITE 250 CHICAGO.IL 60612	NONE	MS CENTER	5,0
CHICAGO, IL 60612			

-			75.000
CHICAGO, IL 60612			
1700 II VAII DONEN SOLIE 250			

Total	75,000
3a	

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

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

CHICAGO ZOOLOGICAL SOCIETY 3300 S GOLF ROAD BROOKFIELD, IL 60513	NONE	UNRESTRICTED	7,000
US FRIENDS OF D SHELDRICK WILDLIFE	NONE	UNRESTRICTED	5,000

US FRIENDS OF D SHELDRICK WILDLIFE TR 25283 CABOT ROAD LAGUNA HILLS, CA 92653	NONE	UNRESTRICTED	5,000
WORLD WILDLIFE FUND	NONE	UNRESTRICTED	4.000

LAGUNA HILLS, CA 92653			
WORLD WILDLIFE FUND 1250 24TH ST NW WASHINGTON, DC 20037	NONE	UNRESTRICTED	4,000

,			
WORLD WILDLIFE FUND 1250 24TH ST NW WASHINGTON, DC 20037	NONE	UNRESTRICTED	4,00

VASHINGTON, DC 20037			
250 24TH ST NW			
VORLD WILDLIFE FUND	NONE	UNRESTRICTED	4,00

Total	<u> </u>	•	75.000
WASHINGTON, DC 20037			

3a

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)

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

or substantial contributor

3a

a Paid during the year			
MUSIC IN COMMONPO BOX 1190 SHEFFIELD, MA 01257	NONE	UNRESTRICTED	1,000
ELAWA FARM FOUNDATION	NONE	UNRESTRICTED	3,500

ELAWA FARM FOUNDATION 1401 MIDDLEFORK DRIVE LAKE FOREST, IL 60045	NONE	UNRESTRICTED	

LAKE FOREST, IL 60045			
ALZHEIMER'S ASSOCIATION	NONE	UNRESTRICTED	

ALZHEIMER'S ASSOCIATION 4600 PARK ROAD SUITE 250	NONE	UNRESTRICTED	1,000
CHARLOTTE, NC 28209			

Total				75,000
4600 PARK ROAD SUITE 250 CHARLOTTE, NC 28209				
ALZITETIMEN 3 ASSOCIATION	NONE	1	ONKESTRICIED	i ⊥,

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, 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 WATOTOWORLD73 MILLVALE ROAD NONE UNRESTRICTED 5,000

HAVERHILL, MA 01830			·
KENTUCKY HORSE PARK FOUNDATION 4089 IRON WORKS PARKWAY LEXINGTON, KY 40511	NONE	CAPITAL PROJECTS	2,000
ATLANTA CHARITY CLAYSPO BOX 52686 ATLANTA, GA 30355	NONE	ELIZABETH M SIMPSON PERPETUAL AWARD	5,000

Total . 3a 75,000

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 AFRICAN WILDLIFE FOUNDATION NONE UNRESTRICTED 1.000 1100 NEW JERSEY AVE SE SUITE 900 WASHINGTON, DC 20003 OΩ

WALTHOUR-MOSS FOUNDATION PO BOX 1794 SOUTHERN PINES, NC 28388	NONE	UNRESTRICTED	5,000
THE NATURE CONSERVANCY	NONE	UNRESTRICTED	1,500

<u> </u>			
THE NATURE CONSERVANCY 4245 N FAIRFAX DRIVE SUITE 100 ARLINGTON, VA 22203	NONE	UNRESTRICTED	1,500

75,000

Total .

За

Recipient
Recipi

				2 222
CAROLINA HORSE PARK 2814 MONTROSE ROAD RAEFORD, NC 28394	NONE	PF	UNRESTRICTED	2,500
a Paid during the year				

RAEFORD, NC 28394				
DANNY AND RON'S RESCUEPO BOX 604 CAMDEN, SC 29021	NONE	PF	UNRESTRICTED	2,000
Total				75,000

3a

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491312007228
TY 2017 Other Decreases Scho	edule		
Name:	EBR FOUNDAT	TON	
EIN:	36-3488134		
Software ID:	17005038		
Software Version:	2017v2.2		
De	escription		Amount
Prior Period Valuation Adjustment			7,697

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	Filed Data - DLN: 93491312007228				
TY 2017 Other Expenses Sche	dule					
Name:	EBR FOUNDATION	ON				
EIN:	36-3488134					
Software ID:	17005038					
Software Version:	2017v2.2					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
FILING FEES	25	25				
PORT DEDUCTIONS - CALERA AIV II	2	2				
PORT DEDUCTIONS - SGF	911	911				
PORTFOLIO DEDUCT - AG ENERGY	49	49				
PORTFOLIO DEDUCT - CEW INVEST	6	6				
PORTFOLIO DEDUCT - HAMILTON ROBINSON	126	126				
PORTFOLIO DEDUCT - UNIFILLER	1	1				
PORTFOLIO DEDUCTIONS - ASC INVESTORS	1	1	<u> </u>			

1,014

1,014

PORTFOLIO DEDUCTIONS - CALERA CAP PTRS V

PORTFOLIO DEDUCTIONS - CALERA CAYMAN AIV

Description

Revenue and Expenses per Income Income Charitable Purposes

Disbursements for Charitable Purposes

Other Expenses Schedule

POSTAGE

PORTFOLIO DEDUCTIONS - IRONSIDES CO-INV	652	652	
PORTFOLIO DEDUCTIONS - SIMGLO	305	305	

30

TY 2017 Other Income Schedule						
Name:	EBR FOUNDATION					
EIN:	36-3488134					
Software ID:	17005038					
Software Version:	2017v2.2					
Other Income Schedule						
Description		Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income		

DLN: 93491312007228

4,756

4,756

Other Investment Income

efile GRAPHIC print - DO NOT PROCE	ESS As Filed Data	-	DLN	N: 93491312007228	
TY 2017 Other Professional Fees Schedule					
Na	me: EBR FOUND	ATION			
EIN: 36-3488134					
Software ID: 17005038					
Software Version: 2017v2.2					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
legal fees	481	0	0	0	
management fees	3,166	1,583	0	1,583	
TAX PREP FEES	2,380	2,380	0	0	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -			DLN: 93491312007228	
TY 2017 Taxes Schedule					
Name:	EBR FOUNDATION				
EIN:	36-3488134				
Software ID:	17005038				
Software Version:	sion: 2017v2.2				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
ANGELO GORDON ENERGY PTRS - STATE TAX	6	6			
FEDERAL EXCISE TAX	1,367				
FOREIGN INCOME TAXES	899	899	_		
FRANCHISE TAX	1	1			
IRONSIDES INVEST - STATE TAXES PAID	12	12			