DLN: 93491319058518 OMB No 1545-0052

2017

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

Department of the Treasury Internal Revenue Service

Form 990-PF

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

or	caler	ndar year 2017, or tax year beginning 01-01-20	017 , aı	nd en	ding 12-31-	2017	
		indation DUCATIONAL AND CHARITABLE FUND			A Employer ide	entification numbe	r
KE	MPEK E	DUCATIONAL AND CHARITABLE FUND			36-6054499		
		street (or P O box number if mail is not delivered to street address)) Room/suite		B Telephone nu	mher (see instruction	15)
Pľ	MB 186	1001 GREEN BAY ROAD	B Telephone number (see instructions) (847) 441-2043				
		, state or province, country, and ZIP or foreign postal code IL 60093			<u> </u>	application is pending	g, check here
- CH	neck al	I that apply Initial return Initial return of a	former public charity		D 1. Foreign ord	ganizations, check he	re \Box
3 Ci	ieck ai	☐ Final return ☐ Amended return				ganizations, theck he	▶ ⊔
		☐ Address change ☐ Name change				k here and attach cor	
ı Ch	neck tv	pe of organization Section 501(c)(3) exempt private	foundation			undation status was t n 507(b)(1)(A), chec	
_			e private foundation		under section	11 507(D)(T)(A), Cliec	k nere - —
		et value of all assets at end J Accounting method	☑ Cash ☐ Accru	ıal	F If the founda	ition is in a 60-month	termination
		rom Part II, col (c), \$ 11,732,742			under sectioi	n 507(b)(1)(B), checl	k here
11116	e 10/	(Part I, column (d) must	be on cash basis)				
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	(p) V	Net investment income	(c) Adjusted net income	for charitable purposes
		equal the amounts in column (a) (see instructions))	books				(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)					
	2	Check ► ✓ if the foundation is not required to attach		1			
	*	Sch B					
	3	Interest on savings and temporary cash investments	16,308	3	16,308	16,308	
	4	Dividends and interest from securities	215,442	2	215,442	215,442	
	5a	Gross rents					
	b	Net rental income or (loss)					
ΚE	6a	Net gain or (loss) from sale of assets not on line 10	464,179	7			
Revenue	b	Gross sales price for all assets on line 6a 4,322,174					
Re	7	Capital gain net income (from Part IV, line 2)	-		464,179		
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	ь	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	398	3			
	12	Total. Add lines 1 through 11	696,327	7	695,929	231,750	
	13	Compensation of officers, directors, trustees, etc	64,992	2	19,498	19,497	45,495
	14	Other employee salaries and wages					
es	15	Pension plans, employee benefits					
ens	16a	Legal fees (attach schedule)					
ă ×	b	Accounting fees (attach schedule)					
Operating and Administrative Expenses	C	Other professional fees (attach schedule)	69,474	1	69,474	69,474	
a E	17	Interest					
<u>.</u>	18	Taxes (attach schedule) (see instructions)	9,876	5	9,876	9,876	
Ē	19	Depreciation (attach schedule) and depletion		1			
5	20	Occupancy					
ב ב	21	Travel, conferences, and meetings	1,971	1	1,971	1,971	
<u> </u>	22	Printing and publications	20.1 5.005	-	5.005	5.005	
Ē	23	Other expenses (attach schedule)	6,996	P	6,996	6,996	
eral	24	Total operating and administrative expenses.	452.000		107.01	407.014	45 405
<u>ā</u>	25	Add lines 13 through 23	153,309 529,230		107,815	107,814	45,495 529,230
-	25		529,230	1			329,230
	26	Total expenses and disbursements. Add lines 24 and 25	682,539	9	107,815	107,814	574,725
	27	Subtract line 26 from line 12			,	,	
	a	Excess of revenue over expenses and	13,788	3			
	Ь	disbursements Net investment income (if negative, enter -0-)		+	588,114		
	c	Adjusted net income(if negative, enter -0-)		1	- 30,111	123,936	
or		work Reduction Act Notice, see instructions.	1		at No 11289X		<u> </u> m 990-PF (2017)

		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 ▶			
2	8	Inventories for sale or use			
sel	8 9 10a	Prepaid expenses and deferred charges	7,309	3,997	3,997
ŝ	102	Investments—U.S. and state government obligations (attach schedule)	529.831	715.864	577.365

6,235,456

3,647,255

10,783,462

10.783.462

10,783,462 10,783,462

9,700,344

9,700,344

9,700,344

9,700,344

7,339,405

3,631,085

11,732,742

Prepaid expenses and deferred charges	7,309	
Investments—U S and state government obligations (attach schedule)	529,831	% J
Investments—corporate stock (attach schedule)	5,360,624	% J
Investments—corporate bonds (attach schedule)		
Investments—land, buildings, and equipment basis ▶		
Less accumulated depreciation (attach schedule) ▶		
Investments—mortgage loans		
Investments—other (attach schedule)	3,578,193	% J

C 11

12

13

14

15

16

17

18

19

20

21 22

23

24

25

26

28 29

31

Liabilities

or Fund Balances

Assets 27

Net 30 Investments—other (attach schedule) Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -

Unrestricted . . .

Permanently restricted .

and complete lines 27 through 31.

Temporarily restricted

Less accumulated depreciation (attach schedule) ▶

Total assets (to be completed by all filers—see the

Accounts payable and accrued expenses

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 ▶

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

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

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

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Part III **Analysis of Changes in Net Assets or Fund Balances** Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with endof-year figure reported on prior year's return) 9,700,344 2 Enter amount from Part I, line 27a 2 13,788 3 1,069,330 3 Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 4 10,783,462 5 Decreases not included in line 2 (itemize) ▶ 6 10,783,462 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 Form 990-PF (2017)

Page **3**

List and describe	(a) the kind(s) of property sold (e g , reehouse, or common stock, 200 shs	eal estate,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1aSee Additional Data Tab	le				
b					
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain	(h) or (loss) f) minus (g)
a See Additional Data Tab	le				
b					
c					
d					
e					
Complete only for asset	s showing gain in column (h) and ow	ned by the foundation	on 12/31/69		(I)
(i) F M V as of 12/31/69	as 01 12/31/09	Excess	(k) s of col (ı) l (j), ıf any	Gains (Col col (k), but not	(h) gain minus t less than -0-) or rom col (h))
a See Additional Data Tab	le				
b					
С					
d					
e					
If gain, also enter in Pa	e or (net capital loss) gain or (loss) as defined in sections : art I, line 8, column (c) (see instructi		Part I, line 7	2	464,179
ın Part I, line 8			<u>(</u>	3	-21,332
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net	Investment In	come	
(For optional use by domestic	orivate foundations subject to the sec	ction 4940(a) tax on ne	et investment incom	ie)	
	eave this part blank ne section 4942 tax on the distributa ot qualify under section 4940(e) Do			,	∕es ☑ No
•	nount in each column for each year,			ς	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitat		(d) Distribution ra (col (b) divided by	
2016	594,808		10,487,573		0 05672
2015	659,224		11,240,279		0 05865
2014	538,745		11,286,882		0 04773
2013	535,208		10,736,089		0 04985
2012	526,817		10,154,939	ı	0 05188
2 Total of line 1, column (•		2		0 264825
number of years the fou	o for the 5-year base period—divide in Indation has been in existence if less Incharitable-use assets for 2017 fron	than 5 years	, or by the		0 052965 11,160,821
5 Multiply line 4 by line 3		·	5		591,133
· ·	ent income (1% of Part I, line 27b)		6		5,881
	ent income (170 of Part 1, line 275)				597,014
	ions from Part XII, line 4 ,		8		574,725
	eater than line 7, check the box in Pa			g a 1% tax rate Se	

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

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

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 -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table			compensation	
See Additional Sata Table				
2 Compensation of five highest-pai	d employees (other than t	hose included on line 1	—see instructions). If nor	ne, enter "NONE."
(a)	Title, and average		Contributions to	
Name and address of each employee pa	ıd hours per week	(c) Compensation	employee benefit plans and deferred	Expense account, (e) other allowances
more than \$50,000	(b) devoted to position		(d) compensation	(c) other unonunces
NONE				
	±50.000			
Total number of other employees paid over				-u
3 Five highest-paid independent co (a) Name and address of each persor			e of service	(c) Compensation
NONE	paid more than \$50,000	(6) 199	e or service	(c) compensation
NONE		1		
		1		
		1		
Total number of others receiving over \$50				
Part IX-A Summary of Direct C				
List the foundation's four largest direct charitable organizations and other beneficiaries served, cont	activities during the tax year Incl erences convened, research paper	ude relevant statistical inforn s produced, etc	nation such as the number of	Expenses
1	erenees conveneu, recearen paper	o producedy etc		
2				
3				
4				
	n-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
1				
2				
All other program-related investments	See instructions			
3	JUST HIST GOLD IS			
Total. Add lines 1 through 3 .				

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

574,725

574.725

574,725

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

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

2

3

4

5

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

b Total for prior years

a From 2012.

e From 2016.

b From 2013. . . . c From 2014. . . d From 2015.

2

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

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

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2018.

10 Analysis of line 9

a Excess from 2013. . .

c Excess from 2015. . . .

d Excess from 2016. . .

e Excess from 2017. . .

b Excess from 2014. .

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

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 required—see instructions). Page 9

546,279

546,279

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Part XIII Undistributed Income (see instructions)

Distributable amount for 2017 from Part XI, line 7	
Undistributed income, if any, as of the end of 2017	

49.451 19,365

112.152 77,053

19.365

112.152

77,053

28.446

(a)

Corpus

258.021

28.446

286,467

49.451

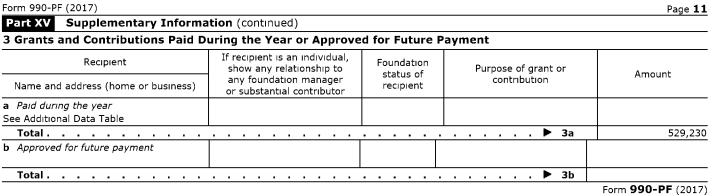
237,016

(b)

Years prior to 2016

(c)

2016



Form 990-PF (2017)	. aima Aativitiaa				Page 12
Part XVI-A Analysis of Income-Prod	ucing Activities		<u> </u>		(-)
Enter gross amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	(e) Related or exempt	
1 Draguam conuce volvenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
1 Program service revenue	Business code	Amount	Exclusion code	Amount	(CCC motractions)
b					
c					
d					
e					
g Fees and contracts from government agenci					+
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
Investments					16,303 215,443
5 Net rental income or (loss) from real estate	•				213,44.
a Debt-financed property					
f b Not debt-financed property					
6 Net rental income or (loss) from personal pro	pperty				
7 Other investment income					+
8 Gain or (loss) from sales of assets other than inventory					464,17
9 Net income or (loss) from special events					,
O Gross profit or (loss) from sales of inventory					
1 Other revenue					200
a SETTLEMENT INCOME b					398
c					
d					
e					
L2 Subtotal Add columns (b), (d), and (e).					696,32
L3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify			1	3	696,327
Part XVI-B Relationship of Activities		nment of Exem	pt Purposes		
Line No. Explain below how each activity for the accomplishment of the foundation	which income is report	ed in column (e) o	of Part XVI-A contribu	ited importantly to	0
instructions)	on's exempt purposes (other than by pro	viding runds for sucr	(See	
EARNED INCOME FROM INTEREST, DI	VIDENDS, CAPITAL GA	INS ARE THE DOL	LARS USED		
TO MAKE CHARITABLE GRANTS AVAIL	ABLE TO OTHER ORGA	NIZATIONS			
					orm 990-PF (2017

Form 99	0-PF (2	2017)								Pa	ge 13
Part	XVII	Information Re Exempt Organi		ransfers To a	and Transacti	ons and R	Relatio	nships With Noncl	naritable		
		anization directly or in Code (other than sectio						on described in section organizations?	501	Yes	No
a Trar	nsfers f	rom the reporting foun	idation to a r	oncharitable ex	empt organizatio	n of					
(1)	Cash.								1a(1)		No
		assets							1a(2)		No
		sactions									
		of assets to a nonchar	•	-					1b(1)		No
		ases of assets from a r							. 1b(2)		No
		l of facilities, equipmer oursement arrangemen	•				• •		1b(3)	-	No No
` '		or loan guarantees.					· · ·		1b(5)		No
		nance of services or m							1b(6)		No
		facilities, equipment, n	•	-					1c		No
of th in a	ne good ny tran	ls, other assets, or ser	vices given b	y the reporting	foundation If the	e foundation	receive	ways show the fair mai id less than fair market its, or services received	value		
(a) Line	No	(b) Amount involved	(c) Name of	noncharitable exe	mpt organization	(d) Descr	ription of	transfers, transactions, an	d sharing arra	ingemen	ts
-											
desc	cribed ii	dation directly or indire in section 501(c) of the mplete the following si (a) Name of organizatio	Code (other chedule	than section 50	•	ction 527? .	_		. Yes	V	No
				·							
-											
	of my		f, it is true, c					ng schedules and state than taxpayer) is base			
Sign Here		****			2018-11-15	**			May the IRS d return		
nere	• •	Signature of officer or trustee			Date		tle		with the prepa pelow (see instr)?	_	
		Print/Type preparer's	s name	Preparer's Sigi	nature	Date		Check if self-		21//1	
Paid		Judith Archambaul	lt					employed ▶ □	P01469	7141	
Preparent of the Prepar		Firm's name ► Arch	ambault & A	ssociates LTD		<u> </u>		Firm	n's EIN ▶20	-04098	32

Firm's address ▶ 851 Spruce St Suite 100

Winnetka, IL 60093

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d List and describe the kind(s) of property sold (e g , real estate, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P-Purchase (mo, day, yr) (mo, day, yr) D-Donation ACCT 505 Р 2017-01-01 2017-01-01 ACCT 505 Ρ 2000-01-01 2017-01-01 ACCT 522 Ρ 2017-01-01 2017-01-01 ACCT 522 Р 2000-01-01 2017-01-01 Ρ ACCT 524 2017-01-01 2017-01-01 Ρ ACCT 524 2000-01-01 2017-01-01 Capital Gain Dividends Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h Depreciation allowed Gain or (loss) (e) Gross sales price Cost or other basis (g) plus expense of sale (f) (or allowable) (h) (e) plus (f) minus (g) 142,820 137,808 5,012 660,126 510,160 149,966 1,218,354 1,244,496 -26,1422,152,748 1,821,559 331,189 30.389 30.591 -202 115,286 113,381 1,905 2,451 Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Gains (Col (h) gain minus col (k), but not less than -0-) or (i) F M V as of 12/31/69 Adjusted basis Excess of col (i) **(I)** Losses (from col (h)) (j) as of 12/31/69 (k) over col (j), if any 5,012 149,966 -26.142331,189 -202 1,905

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 (b) devoted to position -0-) employee benefit plans and deferred compensation JOHN VAN CLEAVE Chairman 0.00 TWO ARBOR LANE 307 EVANSTON, IL 60201 DALE PARK 1R Secretary 0.00 1000 SKOKIE BLVD WILMETTE, IL 60091 LYNN VAN CLEAVE Trustee O 0 00 1919 MILTON NORTHBROOK, IL 60062 BRIAN VAN CLEAVE Trustee ٥ 0.00 1047 ELM ST WINNETKA, IL 60093 PATRICIA VAN CLEAVE Trustee 64,992 0 00 1047 ELM ST WINNETKA, IL 60093 KATHERINE SHOOK Trustee 0 00 **5232 MADISON AVENUE** SKOKIE, IL 60076

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				
AMERICAN CANCER SOCIETY 225 N MICHIGAN AVE 1200 CHICAGO, IL 60601	NONE	501(C)(3)	PROGRAM SUPPORT	500

CHICAGO, IL 60601				
CHICAGO BOTANICAL GARDEN 1000 LAKE COOK RD GLENCOE, IL 60022	NONE	501(C)(3)	PROGRAM SUPPORT	30,500

CHICAGO BOTANICAL GARDEN 1000 LAKE COOK RD GLENCOE, IL 60022	NONE	501(C)(3)	PROGRAM SUPPORT	30,500
NATIONAL MS SOCIETY 525 W MONROE 900	NONE	501(C)(3)	PROGRAM SUPPORT	500

GLENCOE, IL 60022				
NATIONAL MS SOCIETY 525 W MONROE 900 CHICAGO, IL 60661	NONE	501(C)(3)	PROGRAM SUPPORT	500

Total		•	<u> </u>	529 230
NATIONAL MS SOCIETY 525 W MONROE 900 CHICAGO, IL 60661	NONE	501(C)(3)	PROGRAM SUPPORT	50
NIATIONAL MC COCIETY	LNONE	L EO4/C\/3\		

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

HOLY FAMILY MINISTRIES ONE NORTHFIELD PLAZA 300 NORTHFIELD, IL 60093	NONE	501(C)(3)	PROGRAM SUPPORT	56,000
NUFEINBERG SCHOOL OF MEDICINE 303 E CHICAGO AVE MORTON BLDG 4-656 CHICAGO II. 60611	NONE	501(C)(3)	PROGRAM SUPPORT	50,000

NUFEINBERG SCHOOL OF MEDICINE 303 E CHICAGO AVE MORTON BLDG 4-656 CHICAGO, IL 60611	NONE	501(C)(3)	PROGRAM SUPPORT	50,000
WINNETKA CONGREGATIONAL CHURCH 725 PINE ST WINNETKA IL 60093	NONE	501(C)(3)	PROGRAM SUPPORT	6,800

CHICAGO, IL 60611				
WINNETKA CONGREGATIONAL CHURCH 725 PINE ST WINNETKA, IL 60093	NONE	501(C)(3)	PROGRAM SUPPORT	6,800
			· · · · · · · · · · · · · · · · · · ·	

WINNETKA CONGREGATIONAL CHURCH 725 PINE ST WINNETKA, IL 60093	NONE	501(C)(3)	PROGRAM SUPPORT	6,80
Total				529,230

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 WINNETKA HISTORICAL SOCIETY NONE 501(C)(3) PROGRAM SUPPORT 3.550

PO BOX 365 WINNETKA, IL 60093	None	301(0)(3)	THOSIN WISSITSKY	3,330
WINNETKA COMMUNITY HOUSE 620 LINCOLN AVE WINNETKA, IL 60093	NONE	501(C)(3)	PROGRAM SUPPORT	65,500
WINNETKA PUBLIC SCHOOL	NONE	501(C)(3)	PROGRAM SUPPORT	300

WINNETKA COMMUNITY HOUSE 620 LINCOLN AVE WINNETKA, IL 60093	NONE	501(C)(3)	PROGRAM SUPPORT	65,500
WINNETKA PUBLIC SCHOOL FOUNDATION PO BOX 97 WINNETKA, IL 60093	NONE	501(C)(3)	PROGRAM SUPPORT	300

PO BOX 97 WINNETKA, IL 60093				
WINNETKA PUBLIC SCHOOL FOUNDATION	NONE	501(C)(3)	PROGRAM SUPPORT	300
WINNEIRA, IL 60093				

529,230

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 NAPSLO EDUCATION FOUNDATION NONE 501(C)(3) PROGRAM SUPPORT 15,000 201 NE 54TH ST 200

KANSAS CITY, MO 64118				
JUNIOR LEAGUE OF EVANSTON-NORTH SHO 620 LINCOLN 209 WINNETKA, IL 60093	NONE	501(C)(3)	PROGRAM SUPPORT	150
NEW TRIER EDUCATION FOUNDATION	NONE	501(C)(3)	PROGRAM SUPPORT	930

Total				529,230
NEW TRIER EDUCATION FOUNDATION 7 HAPP ROAD NORTHFIELD, IL 60093	NONE	501(C)(3)	PROGRAM SUPPORT	930
620 LINCOLN 209 WINNETKA, IL 60093				

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				
ROTARY CLUB OF WINNETKA- NORTHFIELD	NONE	501(C)(3)	PROGRAM SUPPORT	5,850
620 LINCOLN AVE				

NORTHFIELD 620 LINCOLN AVE WINNETKA, IL 60093				
EVANS SCHOLARS FOUNDATION 1 BRIAR ROAD	NONE	501(C)(3)	PROGRAM SUPPORT	25,000

WINNETKA, IL 60093				
EVANS SCHOLARS FOUNDATION 1 BRIAR ROAD GOLF, IL 60029	NONE	501(C)(3)	PROGRAM SUPPORT	25,000
IOTA COURT PRESERVATION	NONE	501(C)(3)	PROGRAM SUPPORT	25,000

GOLF, IL 60029				
IOTA COURT PRESERVATION ASSOCIATION PO BOX 1582 MADISON, WI 53701	NONE	501(C)(3)	PROGRAM SUPPORT	25,000

IOTA COURT PRESERVATION ASSOCIATION PO BOX 1582 MADISON, WI 53701	NONE	501(C)(3)	PROGRAM SUPPORT	25,000
Total				529,230

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				
COUNSELING CENTER OF THE NORTH SHOR 992 1/2 GREEN BAY RD WINNETKA II 60093	NONE	501(C)(3)	PROGRAM SUPPORT	100

WINNETKA, IL 60093				
VOLUNTEER CENTER 520 GLENDALE AVE STE 13 WINNETKA, IL 60093	NONE	501(C)(3)	PROGRAM SUPPORT	100
NOBLE NETWORK OF CHARTER	NONE	501(C)(3)	PROGRAM SUPPORT	31,500

T-4-1				520.220
NOBLE NETWORK OF CHARTER SCHOOLS 1 N STATE ST CHICAGO, IL 60602	NONE	501(C)(3)	PROGRAM SUPPORT	31,500
520 GLENDALE AVE STE 13 WINNETKA, IL 60093	NONE	301(C)(3)	PROGRAM SUPPORT	100

Total				529,230
NOBLE NETWORK OF CHARTER SCHOOLS 1 N STATE ST CHICAGO, IL 60602	NONE	501(C)(3)	PROGRAM SUPPORT	31,50
WINNETKA, IL 60093				

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				
GENEVA FOUNDATION3200 GRANT ST EVANSTON, IL 60201	NONE	501(C)(3)	PROGRAM SUPPORT	1,000
CHICAGO YOUTH CENTERS	NONE	501(C)(3)	PROGRAM SUPPORT	30.000

NEW HARPTON COURSE TO MAIN OF	NONE	E04 (C) (D)	DD C CD AM CUIDDODT	1 500
CHICAGO YOUTH CENTERS 218 SOUTH WABASH AVE STE 600 CHICAGO, IL 60604	NONE	501(C)(3)	PROGRAM SUPPORT	30,000
EVANSTON, IL 60201				

218 SOUTH WABASH AVE STE 600 CHICAGO, IL 60604				
NEW HAMPTON SCHOOL70 MAIN ST NEW HAMPTON, NH 03256	NONE	501(C)(3)	PROGRAM SUPPORT	1,500

NEW HAMPTON SCHOOL70 MAIN ST NEW HAMPTON, NH 03256	NONE	501(C)(3)	PROGRAM SUPPORT	1,500
Total				529,230

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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

MOTHERS TRUST FOUNDATION 400 E ILLINOIS RD LAKE FOREST, IL 60045	NONE	501(C)(3)	PROGRAM SUPPORT	2,000
a raid during the year				

1400 W AUGUSTA BLVD CHICAGO, IL 60642				
WINNETKA BD NORTHWESTERN SETTLEMENT	NONE	501(C)(3)	PROGRAM SUPPORT	25,000
E/11/2 O(15				

1400 W AUGUSTA BLVD CHICAGO, IL 60642				
WINNETKA YOUTH ORGANIZATION 620 LINCOLN AVE WINNETKA, IL 60093	NONE	501(C)(3)	PROGRAM SUPPORT	200

WINNETKA YOUTH ORGANIZATION 620 LINCOLN AVE WINNETKA, IL 60093	NONE	501(C)(3)	PROGRAM SUPPORT	200
Total				529,230

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				
COMMUNITIES IN SCHOOLS CHICAGO 815 W VAN BUREN STE 300 CHICAGO, IL 60607	NONE	501(c)(3)	PROGRAM SUPPORT	75,000
CAMMA IOTA SIGMADO BOY 456	NONE	501(c)(3)	DROCRAM SLIDDORT	10,000

CHICAGO, IL 60607				
GAMMA IOTA SIGMAPO BOX 456 YARDLEY, PA 19067	NONE	501(c)(3)	PROGRAM SUPPORT	10,000
INDIAN HILL CLUB SCHOLARSHIP FOUNDA ONE INDIAN HILL ROAD	NONE	501(c)(3)	PROGRAM SUPPORT	5,000

YARDLEY, PA 19067	NONE	301(0)(3)	THOSINAT SOTT SIXT	10,000
INDIAN HILL CLUB SCHOLARSHIP FOUNDA ONE INDIAN HILL ROAD WINNETKA, IL 60093	NONE	501(c)(3)	PROGRAM SUPPORT	5,000
Total				529,230

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				
OPERATION WARMPO BOX 822431 PHILADELPHIA, PA 19182	NONE	501(c)(3)	PROGRAM SUPPORT	250

100

				1
SAMARITAN COUNSELING CENTER 690 OAK ST WINNETKA, IL 60093	NONE	501(c)(3)	PROGRAM SUPPORT	
				<u> </u>

WINNETKA, IL 60093				
SALVATION ARMY1515 W MONROE ST CHICAGO, IL 60607	NONE	501(c)(3)	PROGRAM SUPPORT	1,500

SALVATION ARMY1515 W MONROE ST CHICAGO, IL 60607	NONE	501(c)(3)	PROGRAM SUPPORT	1,500
Total				529,230

Recipient
Recipient
Recipient
If recipient is an individual, show any relationship to any foundation manager or substantial contributor

A Paid during the year

Recipient

If recipient is an individual, show any relationship to any foundation manager or substantial contributor

A Paid during the year

AVON WALK FOR BREAST CANCER 4929 WILSHIRE BLVD 255 LOS ANGELES, CA 90010	NONE	501(C)(3)	PROGRAM SUPPORT	2,500
UOAAPO BOX 525 KENNEBUNK, ME 04043	NONE	501(C)(3)	PROGRAM SUPPORT	500

KENNEBUNK, ME 04043				
YOUTH GUIDANCE1 N LASALLE 900 CHICAGO, IL 60602	NONE	501(C)(3)	PROGRAM SUPPORT	10,000
Total				529,230

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

a raid daring the year				
GREATER ITASCA FOOD PANTRY PO BOX 202 ITASCA, IL 60143	NONE	501(C)(3)	PROGRAM SUPPORT	500
YOUNG LIFE CHICAGO NORTHSIDE	NONE	501(c)(3)	PROGRAM SUPPORT	1,000

11A3CA,1L 60143				
YOUNG LIFE CHICAGO NORTHSIDE 2958 N DAMEN AVE CHICAGO, IL 60618	NONE	501(c)(3)	PROGRAM SUPPORT	1,000
LAKE FOREST PRESERVATION FOUNDATION 400 E ILLINOIS LAKE FOREST. IL 60045	NONE	501(C)(3)	PROGRAM SUPPORT	1,000

2958 N DAMEN AVE CHICAGO, IL 60618				
LAKE FOREST PRESERVATION FOUNDATION 400 E ILLINOIS LAKE FOREST, IL 60045	NONE	501(C)(3)	PROGRAM SUPPORT	1,0

Total				529,230
LAKE FOREST PRESERVATION FOUNDATION 400 E ILLINOIS LAKE FOREST, IL 60045	NONE	501(C)(3)	PROGRAM SUPPORT	1,000
CHICAGO, IL 00018				

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 WOMEN'S EXCHANGE630 LINCOLN AVE NONE 501(C)(3) 100 PROGRAM SUPPORT WINNETKA, IL 60093

GIO'S GARDEN2028 PARMENTER ST MIDDLETON, WI 53562		501(C)(3)		1,000
CRISTO REY ST MARTIN COLLEGE PREP 501 S MARTIN LUTHER KING JR AVE WAUKEGAN, IL 60085	NONE	501(C)(3)	PROGRAM SUPPORT	25,000

529,230

MIDDLETON, WI 53562				
CRISTO REY ST MARTIN COLLEGE PREP 501 S MARTIN LUTHER KING JR AVE WAUKEGAN, IL 60085	NONE	501(C)(3)	PROGRAM SUPPORT	25,00

Total . . 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 THE WETLANDS INITIATIVE NONE 501(C)(3) PROGRAM SUPPORT 1.000

53 W JACKSON BLVD 1015 CHICAGO, IL 60604		, ,,,,		·
BRUSHWOOD CENTER AT RYERSON WOODS 21850 N RIVERWOODS RD RIVERWOODS IL 60015	NONE	501(C)(3)	PROGRAM SUPPORT	200

WOODS 21850 N RIVERWOODS RD RIVERWOODS, IL 60015				
CAMP LEELANAU KOHAHNA FDN 1653 PORT ONEIDA RD MAPLE CITY, MI 49664	NONE	501(C)(3)	PROGRAM SUPPORT	1,000

KIVEKWOODS, IE 00015				
CAMP LEELANAU KOHAHNA FDN 1653 PORT ONEIDA RD MAPLE CITY, MI 49664	NONE	501(C)(3)	PROGRAM SUPPORT	1,000
Total				529,230

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				
FAMILY SERVICE CENTER3545 LAKE 200 WILMETTE, IL 60091	NONE	501(C)(3)	PROGRAM SUPPORT	

FRIENDS OF YOUTH SERVICES 3080 WEST LAKE AVE GLENVIEW, IL 60026	NONE	501(C)(3)	PROGRAM SUPPORT	1,000
DEFLICEFONE 4753 N. BBOADWAY 404	NONE	E01/C)/2)	DD GCD AM GUDDODT	F00

1,000

GLENVIEW, IL 60026				
REFUGEEONE4753 N BROADWAY 401 CHICAGO, IL 60640	NONE	501(C)(3)	PROGRAM SUPPORT	500
·				

REFUGEEONE4753 N BROADWAY 401 CHICAGO, IL 60640	NONE	501(C)(3)	PROGRAM SUPPORT	500
Total				529 230

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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				
REVOLUTION WORKSHOP 3410 W LAKE ST CHICAGO, IL 60624	NONE	501(C)(3)	PROGRAM SUPPORT	5,000

ACLU FOUNDATION 125 BROAD ST 18TH FL NEW YORK, NY 10004	NONE	501(C)(3)	PROGRAM SUPPORT	1,000
CHICAGO, IL 60624				

ACLU FOUNDATION 125 BROAD ST 18TH FL NEW YORK, NY 10004	NONE	501(C)(3)	PROGRAM SUPPORT	1,000
WIKIMEDIA FOUNDATION INC 1 MONTGOMERY ST 1600 SAN FRANCISCO CA 94104	NONE	501(C)(3)	PROGRAM SUPPORT	500

Tatal	E20 220			
WIKIMEDIA FOUNDATION INC 1 MONTGOMERY ST 1600 SAN FRANCISCO, CA 94104	NONE	501(C)(3)	PROGRAM SUPPORT	500
125 BROAD ST 18TH FL NEW YORK, NY 10004				

WIKIMEDIA FOUNDATION INC 1 MONTGOMERY ST 1600 SAN FRANCISCO, CA 94104	NONE	501(C)(3)	PROGRAM SUPPORT	500
Total				529,230

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				
NAMI CHICAGO 1801 W WARNER AVE 202 CHICAGO, IL 60613	NONE	501(C)(3)	PROGRAM SUPPORT	1,000

CHICAGO, IL 60613				
WRIGHT-WAY RESCUE 5915 LINCOLN AVE MORTON GROVE, IL 60053	NONE	501(C)(3)	PROGRAM SUPPORT	1,000
MT AUBURN HOSPITAL	NONE	501(C)(3)	PROGRAM SUPPORT	100

5915 LINCOLN AVE MORTON GROVE, IL 60053	NONE	301(0)(3)	PROGRAM SUFFORT	1,000
MT AUBURN HOSPITAL 330 MT AUBURN ST CAMBRIDGE, MA 02138	NONE	501(C)(3)	PROGRAM SUPPORT	100

Tabal				
MT AUBURN HOSPITAL 330 MT AUBURN ST CAMBRIDGE, MA 02138	NONE	501(C)(3)	PROGRAM SUPPORT	10
MORTON GROVE, IL 60053				

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Total				529.230
330 MT AUBURN ST CAMBRIDGE, MA 02138				
MT AUBURN HOSPITAL	NONE	501(C)(3)	PROGRAM SUPPORT	100

Recipient If recipient is an individual, Purpose of grant or 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

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HABITAT FOR HUMANITY INTL 322 WEST LAMAR ST AMERICUS, GA 31709	NONE	501(C)(3)	PROGRAM SUPPORT	100
PLANNED PARENTHOOD FEDERATION OF AM 123 WILLIAM ST 10TH FL NEW YORK, NY 10038	NONE	501(C)(3)	PROGRAM SUPPORT	1,000
MARCH OF DIMES	NONE	E01/C)/3)	DROCRAM CURRORT	1 000

E04/C\/3\

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OF AM 123 WILLIAM ST 10TH FL NEW YORK, NY 10038	NONE	501(C)(3)	PROGRAM SUPPORT	1,000
MARCH OF DIMES 1550 CRYSTAL DR 1500 ARLINGTON, VA 22202	NONE	501(C)(3)	PROGRAM SUPPORT	1,000
· · · · · · · · · · · · · · · · · · ·				1

NEW TORK, NT 10038				
MARCH OF DIMES 1550 CRYSTAL DR 1500 ARLINGTON, VA 22202	NONE	501(C)(3)	PROGRAM SUPPORT	1,000
Total				529,230

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of

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

Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
AMERICAN RED CROSSPO BOX 37839	NONE	501(C)(3)	PROGRAM SUPPORT	1.000

1				
AMERICAN RED CROSSPO BOX 37839 BOONE, IA 50037	NONE	501(C)(3)	PROGRAM SUPPORT	1,000
CHILDREN'S NEUROBLASTOMA CANCER FDN	NONE	501(C)(3)	PROGRAM SUPPORT	500

BOONE, IA 30037				
CHILDREN'S NEUROBLASTOMA CANCER FDN 360 W SCHICK RD 23-211 BLOOMINGDALE, IL 60108	NONE	501(C)(3)	PROGRAM SUPPORT	500

CHILDREN'S NEUROBLASTOMA CANCER FDN 360 W SCHICK RD 23-211 BLOOMINGDALE, IL 60108	NONE	501(C)(3)	PROGRAM SUPPORT	500
YWCA EVANSTONNORTHSHORE 1215 CHURCH ST	NONE	501(C)(3)	PROGRAM SUPPORT	400

BLOOMINGDALE, IL 60108				
YWCA EVANSTONNORTHSHORE 1215 CHURCH ST EVANSTON, IL 60201	NONE	501(C)(3)	PROGRAM SUPPORT	400

Г	Tatal				F20 220
	215 CHURCH ST VANSTON, IL 60201				
۲	WCA EVANSTUNNORTHSHURE	NONE	[501(C)(3)	PROGRAM SUPPORT	4

1215 CHURCH ST EVANSTON, IL 60201		
Total	 	 529,230

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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

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a Paid during the year				
CHICAGO PUBLIC MEDIA 848 E GRAND AVE	NONE	501(C)(3)	PROGRAM SUPPORT	1,000

CHICAGO, IL 60611				
INTEGRATED LIVING OPPORTUNITIES 5603 POTOMAC AVE NW - NORTH	NONE	501(C)(3)	PROGRAM SUPPORT	

INTEGRATED LIVING OPPORTUNITIES	NONE	501(C)(3)	PROGRAM SUPPORT	
5603 POTOMAC AVE NW - NORTH				
ENTRY				
WASHINGTON, DC 20016				

5603 POTOMAC AVE NW - NORTH ENTRY MASURINGTON DG 20016			
	5603 POTOMAC AVE NW - NORTH	, , , ,	
WACHINGTON DC 20016	ENTRY		
WASHINGTON, DC 20016	WASHINGTON, DC 20016		
			

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efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319058518					
TY 2017 Investments Corporate Stock Schedule							
11 2017 Investments corpore	ite Stock Sche						
Name:	KEMPER EDUCATI	ONAL AND CHARITABLE FUND					
EIN:	36-6054499						
Software ID:	17005038						

Software Version: 2017v2.2		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
CORPORATE STOCK	6,235,456	7,339,405

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319058518
TY 2017 Investments Governr	nent Obligat	ions Schedule
Name:	KEMPER EDUC	ATIONAL AND CHARITABLE FUND
EIN:	36-6054499	
Software ID:	17005038	
Software Version:	2017v2.2	
US Government Securities - End of Year Book Value:		715,864
US Government Securities - End of Year Fair Market Value:		577,365
State & Local Government Securities - End of Year Book Value:		
State & Local Government Securities - End of Year Fair Market Value:		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319058518
TY 2017 Investments - Other	Schedule	
Name:	KEMPER EDUCATIONAL AND C	HARITABLE FUND
EIN:	36-6054499	
Software ID:	17005038	
Software Version:	2017v2.2	
Investments Other Schedule 2		

Investments Other Schedule 2			
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
ALTERNATIVES	AT COST	1,028,758	1,071,221
MUTUAL FUNDS	AT COST	2,618,497	2,559,864

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491319058518						
TY 2017 Other Expenses Sche	dule					
Name: KEMPER EDUCATIONAL AND CHARITABLE FUND						
EIN:	36-6054499					
Software ID:	: 17005038					
Software Version:	Software Version: 2017v2.2					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
BANK SERVICE CHARGE	6,295	6,295	6,295			
DUES & SUBSCRIPTIONS	215	215	215			
LICENSES & FEES	10	10	10			
MEETING EXPENSE	339	339	339			
POSTAGE	49	49	49			

SUPPLIES

TY 2017 Other Income Schedule								
Name:	KEMPER EDU	JCATIONAL AND CH	HARITABLE FUND					
EIN:	36-6054499)						
Software ID:	17005038							
Software Version:	2017v2.2							
Other Income Schedule								
Description		Revenue And	Net Investment	Adjusted Net Income				

Expenses Per Books

398

Income

DLN: 93491319058518

SETTLEMENT INCOME

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491319058518						
TY 2017 Other Professional Fees Schedule						
Name: KEMPER EDUCATIONAL AND CHARITABLE FUND						
EIN: 36-6054499						
Software ID: 17005038						
Software Versio	Software Version: 2017v2.2					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
INVESTMENT CONSULTING FEES	69,474	69,474	69,474	0		

efile GRAPHIC print - DO NOT F	PROCESS	As Filed Data	-	DLN	N: 93491319058518
TY 2017 Taxes Schedu	ıle				
	Name:	KEMPER EDI	JCATIONAL AND C	HARITABLE FUND	
	EIN: 36-6054499				
Software ID: 17005038					
Software '	Version:	2017v2.2			
Category	Ar	mount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL TAX		3,312	3,312	3,312	
FOREIGN TAX		6,564	6,564	6,564	