



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.

Approach of Section (1997) Approach of Part (1997) Approach of Section (1997) Approach of Secti		C 12, 2017 , and ending	DEC 31, 2017	Open to Public Inspection
Repert Applications Section 497(1) Section 501(1)		C 12, 2011 , and chang	1	Dumher
Section 4947(a) Thompsome and Expenses Transit of the section 597(a) Teach Section		JNDATION	A Employer racitation	numuci
Temporary Temp	**		82-3684391	
4.55 N CITYPRONT PLAZA DRIVE, SUTTE 1500 312-670-7444 City of town, state or province, county, and 2P or fereign postal code CHICAGO, IL 60611 G Check all that apply:		t address) Room/suite		
Colly of town, state or province, country, and 21 Por foreign postal code CHICAGO, IL 60611 G Check all that apply: Final return	455 N CITYFRONT PLAZA DRI	JE, SUITE 1500	1 -	44
Check all that apply:	City or town, state or province, country, and ZIP or foreign	postal code	C If exemption application is pe	nding, check here
Final return Andreas change Hame change Hame change	CHICAGO, IL 60611		_]	·
Check type of organization: Section 501(c)(3) exempt private foundation Section 4947(a)(1) noncempt characteristic trust Other tiseable private foundation Section 4947(a)(1) noncempt characteristic trust Other tiseable private foundation Other (specific) Fart III Analysis of Revenue and Expenses III Contributions, grist, grants, etc., received 1,500,000. III Contributions, grist, grants, etc., received 1,500,000. III Initiation	G Check all that apply: X Initial return	Initial return of a former public charity	D 1. Foreign organizations	, check here
Check bype of organization: Section 901(x)(3) exempt private foundation O Section 4947(x)(1) nonexempt charitable trust Other taxable private foundation O Fair market value of all assets at end of year J Accounting method: Cash Activation O Tair market value of all assets at end of year J Accounting method: Cash Activation O Tair market value of all assets at end of year J Accounting method: Cash O Section O Tair market value of all assets at end of year J Accounting method: O Tair market value of all assets at end of year J Accounting method: O Tair market value of all assets at end of year J Accounting method: O Tair market value of all assets at end of year J Accounting method: O Tair market value of all assets at end of year J Accounting method: O Tair market value of all assets at end of year J Accounting method: O Tair market value of all assets and end of the value of a cash end of the value of		Amended return	2 5	
Section 4947(a)(1) nonexempt charable trust			check here and attach con	nputation
Farr market value of all assets at end of year (from Part II, col. (c), line 16) J. Accounting method.	<u>-</u>		E If private foundation stat	us was terminated
(from Part II, col. (c), line 16)			under section 507(b)(1)(A), check here
Part II Analysis of Revenue and Expenses (the least of sensorate in column (a) and (chinwr not fine to the column (b) (a) Revenue and (b) Net investment (c) Adjusted net income (b) (c) Decarraments or chemically income (c) Analysis of Revenue and Expenses (the least of sensorate in column (a) (c) Analysis of Revenue and Expenses (the least of sensoration in column (a) (c) Analysis of Revenue and Expenses (the least of sensoration in column (a) (c) Analysis of Revenue and Expenses (the least of sensoration in column (a) (c) Analysis of Revenue and Expenses (the least of sensoration in column (a) (c) Analysis of Revenue and Expenses (the least of sensoration in column (a) (c) Analysis of Revenue and Expenses (the least of sensoration in column (a) (c) Analysis of Revenue and Expenses (the least of sensoration in column (a) (c) Analysis of Revenue and Expenses (the least of sensoration in column (a) (c) Analysis of Revenue and Expenses (the least of sensoration in column (a) (c) Analysis of Revenue and Expenses (the least of sensoration in column (a) (c) Analysis of Revenue and Expenses (the least of sensoration (c) Analysis of Revenue and Expenses (the least of sensoration (c) Analysis of Revenue and Expenses (the least of sensoration (c) Analysis of Revenue and Expenses (the least of sensoration (c) Analysis of Revenue and Expenses (the least of sensoration (c) Analysis of Revenue and Expenses (the least of sensoration (c) Analysis of Revenue and Expenses (the least of sensoration (c) Analysis of Revenue and Expenses (the least of sensoration (c) Analysis of Revenue and Expenses (the least of sensoration (c) Analysis of Revenue and Expenses (the least of the least of	· · · · · · · · · · · · · · · · · · ·			
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27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements b Net investment income (if negetive, enter -0-) 519.			1	n
a Excess of revenue over expenses and disbursements b Net investment income (if negetive, enter -0-) 519.			· · · · · · · · · · · · · · · · · · ·	*X************************************
b Net investment income (if negative, enter -0-)]	1,500,519.		不是 多数建筑上
c Adjusted net income (if negative, enter -0-)	· ·	519.	1000	水源深度
				(五代級 蘇陽區)

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

		Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31.				
ès,	24	Unrestricted				
Balances	25	Temporarily restricted				
89	26	Permanently restricted				
Fund		Foundations that do not follow SFAS 117, check here	ightharpoons	ĺ		
Ξ.)	and complete lines 27 through 31.		j		
ŏ	27	Capital stock, trust principal, or current funds			0.	0.
š	28	Paid-in or capital surplus, or land, bldg., and equipment fund			0.	0.
As	27 28 29	Retained earnings, accumulated income, endowment, or othe	r funds		0.	1,500,519.
Net	30	Total net assets or fund balances			0.	1,500,519.
_	21	Total liabilities and not assets/fund halances			0.	1.500.519.

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)		0.
2	Enter amount from Part I, line 27a	2	1,500,519.
3	Other increases not included in line 2 (itemize)	3	0.
	Add lines 1, 2, and 3	4	1,500,519.
5	Decreases not included in line 2 (itemize)	5	0.
	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,500,519.
-	The state of the s		

THE HUMAN FAMILY UNITY FOUNDATION

Form 990-PF (2017) C/C Part IV Capital Gains	ORBA and Losses for T	ay on Investmen	t Income			82	<u>-3684</u>	391	Page 3
(a) List and describ	e the kind(s) of property s varehouse; or common st	sold (for example, real est		(b)	How acquired - Purchase - Donation	(c) Date ac	quired , yr.)	(d) Date (mo , da	
1 <u>a</u>				1 -	- Dollation			<u> </u>	
	ONE	·		\dagger					
C									
d									
e									
(e) Gross sales price	(f) Depreciation a (or allowable	. 10/	ost or other basis expense of sale				n or (loss) f) minus (g))	
_a									
<u>b</u>									
_ <u>c</u>									
_d		}							
Complete only for assets show	ing gain in column (h) an	d owned by the foundation	n on 12/31/60			U Court (Col	/I-X		
Complete only for assets show	7				(co	 Gains (Col. J. (k), but not 	. (N) gain m i less than -	nnus ·O-) or	
(i) FMV as of 12/31/69	(j) Adjusted ba as of 12/31/6		xcess of col. (i) r col. (j), if any				om col. (h)		<u></u>
<u>a</u>	 								
<u>b</u>	 								
<u>d</u>	 					 -			
e	 		· · · · · · · · · · · · · · · · · · ·						,
	C 16	un alan anton un Dant I I		7					
2 Capital gain net income or (net		ın, also enter ın Part I, lını ıss), enter -0- ın Part I, lın		}	2				
3 Net short-term capital gain or (I If gain, also enter in Part I, line i	B, column (c).	s 1222(5) and (6):		}					
If (loss), enter -0- in Part I, line Part V Qualification I	5 Jnder Section 494	40(e) for Reduced	Tax on Net	Inve	stment Inc	ome			
(For optional use by domestic priva								N/A	
(For optional use by domestic priva	te toutidations subject to	ine section 4940(a) tax of	i net mvestment m	icome.	•)			14/12	
If section 4940(d)(2) applies, leave	this part blank.								
Was the foundation liable for the se	ction 4942 tax on the dist	ributable amount of any v	ear in the base per	od?			Γ	Yes	No
If "Yes," the foundation doesn't qual	lify under section 4940(e)	. Do not complete this par	t.				_		
 Enter the appropriate amount in 	each column for each ye	ar; see the instructions be	fore making any ei	ntries.					
(a) Base period years Calendar year (or tax year begins	ning in) Adjusted q	(b) ualifying distributions	Net value of no	(c) onchar	ıtable-use assets	(cc	() Distribut ol. (b) divid		(c))
2016									
2015									
2014									
2013									
2012			l						
2 Total of line 1, column (d)									
3 Average distribution ratio for the	e 5-year base period - divi	de the total on line 2 by 5.	.0, or by the numbe	er of v	ears	2			
the foundation has been in exist			, ,			3			
4 Enter the net value of noncharita	able-use assets for 2017 f	rom Part X, line 5				4	_ _		
5 Multiply line 4 by line 3						5			
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)				6			
7 Add lines 5 and 6						7			
8 Enter qualifying distributions fro	ım Part XII. line 4					8			
If line 8 is equal to or greater the See the Part VI instructions.	•	Part VI, line 1b, and com	plete that part usin	ıg a 1%	6 tax rate.	<u>,-</u>			
723521 01-03-18							For	m 990-F	PF (2017

THE HUMAN FAMILY UNITY FOUNDATION

Form 990-PF (2017) C/O ORBA		3684391		Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 -	see instru	ctions	<u> </u>
1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	,		-{i, }	1.1
Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	<u> </u>		فنستحصف	
b Do mestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1%	1	 	1	10.
of Part I, line 27b	17.		, v ₂ ***	1 -
f c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b). $m J$		ي عسمت السائد الم	ر کا اور محمد المحمد	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2			0.
3 Add lines 1 and 2	3		1	LO.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5_			<u>LO.</u>
6 Credits/Payments:			,	
a 20 17 estimated tax payments and 2016 overpayment credited to 2017 6a 0.	j - 5'			1
b Exempt foreign organizations - tax withheld at source 6b 0.				- 1
c Tax paid with application for extension of time to file (Form 8868) 6c 10.	`	, y , y , y,	-	- ;}
d Backup withholding erroneously withheld 6d 0.	~	-5° - 1'	ـ أ يُد	- 1
7 Total credits and payments. Add lines 6a through 6d	7		1	<u>LO.</u>
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	·		0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax	11			
Part VII-A Statements Regarding Activities				
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervent	ın	<u> </u>	Yes	
any political campaign?		_ <u>1a</u>		<u>X</u> _
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the defin	ition	<u>1b</u>	+	<u>X</u>
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or		1.54	, - ·	7
distributed by the foundation in connection with the activities.		15		د د کت
c Did the foundation file Form 1120-POL for this year?		<u>1c</u>	+	<u> X</u>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.		J	11	, , , , ,
(1) On the foundation. ► \$ 0. (2) On foundation managers ► \$ 0.	-		1	\$ \$\frac{1}{2}\$
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation		. 24		
managers. ► \$0.				<u>`</u>
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		2	+	<u>X</u>
If "Yes," attach a detailed description of the activities.		, ,		. ,
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	r		1-2-	'
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3	+	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	1AT	/A 4b	+-+	
b If "Yes," has it filed a tax return on Form 990-T for this year?	14	/A 4b	+-+	v
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		- - -	, . 	<u> </u>
If "Yes," attach the statement required by <i>General Instruction T</i> 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			1 00 -	, ;
 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or 		,	1-29	
 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state 	law	10 /	급신간	n. 1
remain in the governing instrument?	iaw	6	$ \bar{\mathbf{x}} $	is
· · · · · · · · · · · · · · · · · · ·		0	$\frac{1}{x}$	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, coi. (c), and Part XV			+^+	-31
8a Enter the states to which the foundation reports or with which it is registered. See instructions.		-2	-	* *
· · · · · · · · · · · · · · · · · · ·		1.1	1 - 2'	
DE , WI b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		÷ ,		1
of each state as required by General Instruction G2 If "No," attach explanation SEE STATE	ייינאים <i>ו</i>	3 8b	- -	X
or outside to required by Clerical Mathematical Co. 1887 and 1887		J 60	╁┯╁	<u>^</u>
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV	nuai		-{-4-4-	$\bar{\mathbf{x}}$ \mathcal{V}
10 Did any persons become substantial contributors during the tax year? If Yes, entach a schedule listing their names and addresses		10	+-+	$\frac{X}{X}$
איז מווא אפו פטוון מבנטוווים פוניסינוים איז איז מיוווים מוווין נוויס נמע אבמו י וו אפיל - Blacu a scriedule listing their names and addresses		Form 99	0-PF (

THE HUMAN FAMILY UNITY FOUNDATION 82-3684391 C/O ORBA Page 5 PartiVII:A3 Statements Regarding Activities Yes Νo 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of Х section 512(b)(13)? If Yes, attach schedule See instructions 11 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If Yes," attach statement. See instructions 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A 14 The books are in care of ▶ CHRISTINE WOOD Telephone no > 312 - 670 - 7444Located at ▶ 455 N CITYFRONT PLAZA DRIVE, SUITE 1500 CHICAGO, ZIP+4 ▶60611 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year 16. At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, Yes. securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the Part VII; By Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies 1a During the year, did the foundation (either directly or indirectly) Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available

Yes X No for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception: Check No. if the foundation agreed to make a grant to or to employ the official for a period after Yes X No termination of government service, if terminating within 90 days) billiany answer is 'Yes' to 1a(1) (6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d) 3 or in a current notice regarding disaster assistance? See instructions N/A Organizations relying on a current notice regarding disaster assistance, check here c. Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017? 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(1)(3) or 4942(1)(5)) a. At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning Yes X No before 2017? If "Yes" list the years b. Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach N/A statement - see instructions) c. If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here¹ 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time Yes X No during the year? bilif Yes, did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5 year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10 , 15-, or 20-year first phase holding period? (Use Schedule C N/A Form 4720, to determine if the foundation had excess business holdings in 2017.) 4a. Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

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had not been removed from Jeopardy before the first day of the tax year beginning in 2017?

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THE HUMAN FAMILY UNITY FOUNDATION

Form 99 <u>O-PF (2</u> 017)	82-3	684391 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	-	
	-	
Total number of others receiving over \$50,000 for professional services	<u> </u>	• 0
Part IX-A Summary of Direct Charitable Activities		<u>_</u>
List the foundation's four largest direct charitable activities during the tax year. Include relevant statisti number of organizations and other beneficiaries served, conferences convened, research papers produ	cal information such as the ced, etc.	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on li	ines 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		
		
Total. Add lines 1 through 3	<u> </u>	0 . Form 990-PF (2017)

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P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes	1.72	
a	Aver age monthly fair market value of securities	1a	<u>275,308.</u>
b	Average of monthly cash balances	1b	275,308. 1,224,115.
C	Fair market value of all other assets	1c	
d	Tota I (add lines 1a, b, and c)	1d	1,499,423.
е	Reduction claimed for blockage or other factors reported on lines 1a and	± 2 × 10.	
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Sub tract line 2 from line 1d	3	1,499,423.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	22,491.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,476,932.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	4,047.
P	art XI. Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations ar	nd certain	
	foreign organizations, check here 🕨 🔛 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	4,047.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	10.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4,037.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	4,037.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	4,037.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	منسد	····
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	1	
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for	the section
	4940(e) reduction of tax in those years.		
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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI,				
fine 7			1 x 2 x 1 x 1	4,037.
2 Undistributed income, if any, as of the end of 2017		- ;		
a Enter amount for 2016 only		. (0.	
b Total for prior years:		_		
5		0.		
3 Excess distributions carryover, if any, to 2017.				
a From 2012		, (1 = 5 , , , , , , , , , , , , , , , , , ,		
b From 2013	()		4.0 %	1
d From 2014	· · · · · · · · · · · · · · · · · · ·	, and the second		
e From 2016			<u>.</u>	
f Total of lines 3a through e	0.	i.		
4 Qualifying distributions for 2017 from	, ,	, , ,	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
Part XII, line 4: ► \$ 0.	1	, , , ,		The state of the s
a Applied to 2016, but not more than line 2a			0.	gris rapidati dise
b Applied to undistributed income of prior	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
years (Election required - see instructions)	The second second	0.	133	The state of the state of
c Tre ated as distributions out of corpus				
(Election required - see instructions)	0.	(5, , 4		0
d Applied to 2017 distributable amount		***	48 98	0.
e Rermaining amount distributed out of corpus	0.	2,	13.00	0.
5 Excess distributions carryover applied to 2017 (If am amount appears in column (d), the same amount	<u> </u>			12
must be shown in column (a))	4 7 2			100
6 Enter the net total of each column as indicated below;	, , , , , , , , , , , , , , , , , , ,			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.		, · · · · · · · · · · · · · · · · · · ·	14, 7
b Prior years' undistributed income Subtract		0.	5. S	
line 4b from line 2b c Enter the amount of prior years'	2,44		34	", ",
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				′ ,
amount - see instructions	33.			F 18 18 18 18 18 18 18 18 18 18 18 18 18
e Undistributed income for 2016. Subtract line	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract		, , ,		
lines 4d and 5 from line 1. This amount must	The comment of the			4 027
be distributed in 2018		,		4,037.
7 Amounts treated as distributions out of				, " " , - , - , - , - , -
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election				1
may be required - see instructions)	0.]
8 Excess distributions carryover from 2012		,		
not applied on line 5 or line 7	0.	, ,	1	<u> </u>
9 Excess distributions carryover to 2018		_	1 2 2 2 2 2 2 2	A-1
Subtract lines 7 and 8 from line 6a	0.			, ,
10 Analysis of line 9:	,		, ,	
a Excess from 2013				
b Excess from 2014			7	
c Excess from 2015	\ `		7	1
d Excess from 2016				
e Excess from 2017	<u></u>	<u> </u>		Form 990-PF (2017)

Part XIV.] Private Operating Foundations (see instructions and Part VII-A, question 9) 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, either the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 2 a Finter the lesser of the adjusted net in Zivy part (a) 2016 2 a Finter the lesser of the adjusted net in Zivy part (a) 2016 3 a Finter the lesser of the adjusted net in Zivy part (a) 2017 (b) 2016 (c) 2015 (d) 2014 (e) Total reversity for active conduct of each year listed d Armounts included in line 2c not used directly for active conduct of exempt activities. Subtract line 2d from line 2c 3 Complete 3a, b, or of the atternative test - enter (2) of minimum investment return shown in Part X, line 6 for each year listed c Support alternative test - enter (2) year of all assets (2) Value of assets quantifying under season 4942(0)(3)(B)(b) b Endowment alternative test - enter (1) Value of all assets (2) Value of assets quantifying under season 4942(0)(3)(B)(b) b Endowment alternative test - enter (1) Value of all assets (2) Support alternative test - enter (1) Value of all assets (2) Support alternative test - enter (1) Value of many part X, line 5 for each year listed c Support alternative test - enter (1) Value of many part X, line 5 for each year listed c Support alternative test - enter (1) Value of many part X, line 5 for each year listed c Support alternative test - enter (1) Value of many part X, line 5 for each year listed c Support alternative test - enter (1) Value of many part X, line 5 for each year listed c Support alternative test - enter (1) Value of many part X, line 5 for each year listed c Support alternative test - enter (1) Value of many part X, line 5 for each year listed c Support alternative test - enter (1) Value of the support form part X, line 5 for each year listed c Support alternative test - en	82-3684391 Page 10			orm 990-PF (2017) C/O ORB
to undation, and the ruling is effective for 2017, enter the date of the ruling by Check box to indicate whether the foundation is a private operating foundation described in section 2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed by 85% of line 2 a Cualifying distributions from Part XII, line 4 for each year listed d Amnounts included in line 2c not used directly for active conduct of exempt activities a Cualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2 a Complete 3a, b, or for the alternative test-relied upon: Asserts' affarrative test-	······································			
b) Check hox to indicate whether the foundation is a private operating foundation described in section 2 a Enter the lesser of the adjusted in the adjusted i	aling	ate operating		
2 a Enter the lesser of the adjusted net mcome from Part I or the minimum myestment return from Part X for each year listed b 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Armounts included in line 2c not used directly for active conduct of exempt activities a Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Qualifying under section 4942()(3)(8)(6) b Endowmenff alternative test - enter (1) Value of all assets (2) Value of assets qualifying under section 4942()(3)(8)(6) b Endowmenff alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed or Support fathernative test - enter (1) Total support other than gross investment income (interest, doubtdonds, rents, payments on securities beans (section 512(a)(5)), or royalhes) or securities beans (section 512(a)(5)), or royalhes) or section 4942()(3)(8)(6)(6) in (4) Gross investment income (interest, doubtdonds, rents, payments on securities beans (section 4942()(5)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)(6)	ribad in contion 4040(A/2) or 4040(A/2)	wan decerbed in costion		
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b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or	il contributions received by the foundation before the close of any tax		o have contributed more than 2%	a List any managers of the foundation wh year (but only if they have contributed r
Other entity) of which the foundation has a 10% of greater interest.	ation (or an equally large portion of the ownership of a partnership or	a corporation (or an equally larg		b List any managers of the foundation wh
NONE			o a 1070 of groater interests	• ,
NONE				
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.	ritable organizations and does not accept unsolicited requests for funds. If	cted charitable organizations and	only makes contributions to presel	Check here 🕨 🗓 if the foundation (
a The name, address, and telephone number or email address of the person to whom applications should be addressed	applications should be addressed	o whom applications should be	ber or email address of the person	a The name, address, and telephone num
h. The form in which applications chould be cultimited and information and materials they chould include:	they chould include:	paterials they should include:	on cultimitted and information and	h The form in which anchestions about
b The form in which applications should be submitted and information and materials they should include:	ancy anound michael.	aterials triey should literade:	and the thing that all all all all all all all all all a	
c Any submission deadlines:				c Any submission deadlines:
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:	fields, kinds of institutions, or other factors:	naritable fields, kinds of institution	s, such as by geographical areas,	d Any restrictions or limitations on award

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Total				<u>▶ 3b</u>	0. DE (0047)
				Form 990)-PF (2017)
3611 01-03-18		11			

Form 990-PF (2017) C/O ORBA Part XVI-A Analysis of Income-F	Producing Astivitie	•			3684391 Page 12
Part XVI-A Analysis of Income-F	roducing Activitie	5			
Enter gross amounts unless otherwise indicated.	Unrelated I	ousiness income		d by section 512, 513, or 514	(e)
	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue;	code	Amount	code	Amount	function income
a					
b					
C					
d					
-			1-1		
e					
f g Fees and contracts from government agencies			 		
_	 		╁╌╌┼╴		
2 Membership dues and assessments			┾┷┼		
3 Interest on savings and temporary cash			14	519.	
inve stments			14	319.	
4 Dividends and interest from securities			┼╌┼╴		
5 Net rental income or (loss) from real estate:	1.21		-		
a Debt-financed property	ļ		<u> </u>		
b Not debt-financed property			<u> </u>		
6 Net rental income or (loss) from personal			1 1		
property	<u> </u>		<u> </u>		
7 Other investment income					
8 Gain or (loss) from sales of assets other]]		
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a			1 1		
b			1		
	l I				
	l l		 		
d e			 		
12 Subtotal. Add columns (b), (d), and (e)		0.	 	519.	0.
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>	<u>-</u>	<u> ` </u>	13	
(See worksheet in line 13 instructions to verify calculations	ations \			19	
· · · · · · · · · · · · · · · · · · ·					
Part XVI-B Relationship of Activ	ities to the Accom	plishment of Exe	empt P	urposes	
					
Line No. Explain below how each activity for w			contribut	ed importantly to the accom	plishment of
the foundation's exempt purposes (of	ner man by providing lunus	ior such purposes).			
					
				<u>. </u>	
				···	
	······································				
		······································			
				·····	

Form **990-PF** (2017)

			LY UNI	TY FOUNDATION	N	00 2604	201	٥.	40
Part X	-PF (2017) C/O O		efere to a	nd Transactions an	nd Relationship	82-3684		Pa	ige 13
Tait,	Exempt Organ		SICIS IO di	ila Transactions an	ia riciationsinp	S With Nontellanta	DIE		
1 Did	the organization directly or indi		of the following	on with any other organization	on described in section	501(c)	eur griger	Yes	No
	er than section 501(c)(3) organ	400011204 111 0501101	. 55 1(0)		440.5	Y			
•	nsfers from the reporting found		{		Line Figure	19 mil			
(1) Cash									X
(2) Other assets									Х
` '	er transactions:						1a(2)	¥	2.4
(1)	Sales of assets to a noncharita	able exempt organiza	tion				1b(1)		X
(2)	Purchases of assets from a no	ncharitable exempt c	organization				1b(2)		X
(3)	Rental of facilities, equipment,	or other assets				[1b(3)		X
(4)	Reimbursement arrangements	i					1b(4)		Х
(5)	Loans or loan guarantees						1b(5)		X
(6)	Performance of services or me	embership or fundrai	sing solicitatio	ons		j	1b(6)		X
c Sha	ring of facilities, equipment, ma	ailing lists, other asse	ets, or paid em	ployees		!	1c		X
	ne answer to any of the above is		-	• •	•			ets,	
	ervices given by the reporting f			ed less than fair market value	e in any transaction of	r sharing arrangement, sho	w in		
	ımn (d) the value of the goods,				1 (0-				
(a) Line no	(b) Amount involved	(c) Name o		e exempt organization	(0) Description o	f transfers, transactions, and sha	ring arra	ngemen	ts
		}	N/A_						
	 	 			- 				
	 	 							
	 	 	-	V.,	 				
		 							
		 		· · · · · · · · · · · · · · · · · · ·	 				
		<u> </u>				- -			***
				 					
				·					
					<u> </u>				
					<u> </u>				
	<u></u>	<u> </u>							
	he foundation directly or indirec	•		e or more tax-exempt organiz	zations described		_		_
	ection 501(c) (other than section		ection 527?				_ Yes	X	No
<u>b lf "\</u>	Yes," complete the following sch			(h) Type of organization) Description of relationship			
	(a) Name of or N/A	yamzanon		(b) Type of organization		Description of relationship			
	N/A_								
	······································					· · · · · · · · · · · · · · · · · · ·			
				 				-	
									
	Under penalties of perjury, I declare	that I have examined this	s return, including	accompanying schedules and sta	atements, and to the best	of my knowledge	he IRS di	coves t	
Sign	and belief, it is true, correct, and cor	nplete Declaration of pre	eparer (other than	taxpayer) is based on all informat	tion of which preparer has CHATR/1	TREASURER return	with the n below?	prepare	¥
Here	hristy l	Dood ("he	eus mas	n 16/22/2018	/SECRET		Yes		No
	Signature of officer or trustee	e		Date	Title				
	Print/Type preparer's n	ame	Preparer's s	signature	Date (Check If PTIN			
			Ulos	an werd	1	elf- employed			
Paid	ALAN M. WI		ALAN M		06/11/18	P01:			
Prepa	111111011111111111111111111111111111111	'ROW REISI	N BERK	& ABRAMS, I	LTD.	Firm's EIN ► 36-29	3887	74	
Use (- 							
	Firm's address ► 45	ob N CITYF	KONT P	LAZA DR, SUIT	re 1500				

723622 01-03-18

CHICAGO, IL 60611

Phone no. 312-670-7444

Schedule B

(Fgrm 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Name of the organization
THE HUMAN FAMILY UNITY FOUNDATION
C/O ORBA

Cranization type (check one)

Employer identification number 82-3684391

Filers of:	Sec	ion:	
Form 990 or 99	90-EZ	501(c)() (enter number) organization	
		4947(a)(1) nonexempt charitable trust not treated as a private foundation	
		527 political organization	
Form 990-PF	X	501(c)(3) exempt private foundation	
		4947(a)(1) nonexempt charitable trust treated as a private foundation	
		501(c)(3) taxable private foundation	
General Rule		or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or	
		ontributor Complete Parts I and II See instructions for determining a contributor's total contributions.	
Special Rules			
section any o	ns 509(a)(1) and 1 ne contributor, dur	ribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 'O(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from ng the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, Complete Parts I and II	
year,	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III		
year, is che purpo	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.		
Caution: An o	ganization that isn	t covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF).	

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

THE HUMAN FAMILY UNITY FOUNDATION

Employer identification number

C/O OI	RBA	82	2-3684391
Part 1	Contributors (see instructions) Use duplicate copies of Part I if additional	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CHRISTINE WOOD C/O ORBA 455 N CITYFRONT PLAZA DRIVE, SUITE 1500 CHICAGO, IL 60611	\$1,500,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occupation (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Onncash Complete Part II for noncash contributions)

Name of organization
THE HUMAN FAMILY UNITY FOUNDATION
C/O ORBA

Employer identification number

82-3684391

<u></u>		<u></u>	3001331
Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed	
(a) No. frorm Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No- from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	

	(Form 990, 990-EZ, or 990-PF) (2017)			Page 4			
Name of orga			-	Employer identification number			
	MAN FAMILY UNITY FOUNDA	MOITA					
C/O OR	BA		82-3684391				
Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations						
	completing Part III, enter the total of exclusively religious,	charitable, etc., contributions of \$1,000 c	or less for the year (Enter this info onc	·s ► \$			
	Use duplicate copies of Part III if additiona	I space is needed					
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
PartI	(2,1 a.poo o, g		(4,500)				
							
⊢							
1	(e) Transfer of gift						
	Townstown de many address and TID . A						
-	Transferee's name, address, ar	<u> </u>	Relationship of tra	elationship of transferor to transferee			
1							
ŀ							
(a) N o.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
Fair							
		(e) Transfer of g	ift				
L	Transferee's name, address, an	d ZIP + 4	Relationship of tra	nsferor to transferee			
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(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Desc	ription of how gift is held			
Part I							
}-	(a) Transferred 11/4						
1	(e) Transfer of gift						
	Transferee's name, address, an	d 7IP + 4	Polationship of tra	neforar ta transforaa			
<u> </u>	Transfered a name, address, an		Relationship of transferor to transferee				
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(a) No.							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, an	Relationship of tra	nsferor to transferee				
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FORM 990-PF INTEREST ON SAVING	S AND TEMPORARY	CASH INVESTMENTS	STATEMENT 1
SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
INTEREST INCOME	519.	519.	
TOTAL TO PART I, LINE 3	519.	519.	

FORM 990-PF CORPORATE STOCK		STATEMENT 2
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
ISHARES MSCI KLD 400 SOCIAL INDEX FUND ETF	51,765.	51,576.
ISHARES RUSSELL 2000 ETF	45,308.	44,976.
ISHARES MSCI EAFE ESG OPTIMIZED ETF	122,400.	122,112.
ISHARES MSCI EM ESG OPTIMIZED ETF	23,744.	23,645.
SPDR DJ WILSHIRE INTERNATIONAL REAL ESTATE ETF	33,187.	32,999.
TOTAL TO FORM 990-PF, PART II, LINE 10B	276,404.	275,308.

					
FORM 990-PF	EXPLANATION	CONCERNING	PART VII-A,	LINE 8B	STATEMENT 3

EXPLANATION

THE FOUNDATION IS A DELAWARE CORPORATION AND IS NOT REQUIRED TO SUBMIT A COPY OF FORM 990-PF TO THE ATTORNEY GENERAL SINCE THE FOUNDATION DID NOT CONDUCT ANY ACTIVITIES IN THE STATE DURING THE TAX YEAR. THE FOUNDATION DID FURNISH A COPY TO WISCONSIN.