Form **990-PF**

Return of Private Foundation

OMB No 1545-0052

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.

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2017 or tax year beginning SEP 1, 2017 , and ending AUG 31, 2018 A Employer identification number Name of foundation 36-2911506 ROBERT E. SHEPHERD FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 630-941-2300 660 N. INDUSTRIAL DRIVE City or town, state or province, country, and ZIP or foreign postal code C if exemption application is pending, check here ELMHURST, IL 60126 G Check all that apply. Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated 0 Section 4947(a)(1) nonexempt charitable trust ____ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Cash _ Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here (Part I, column (d) must be on cash basis.) ▶\$ 881. Part I Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (c) Adjusted net (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income income 49,970 Contributions, gifts, grants, etc., received _____ if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 49,970 Ō. Ō. Total, Add lines 1 through 11 Ο. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees Ō. 2,000 2,000. STMT 1 **b** Accounting fees c Other professional fees 17 Interest OCT **3 0 201**8 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 542 0 542. O. 22 Printing and publications 25,006. 0. 25,006. 0. STMT 2 23 Other expenses 24 Total operating and administrative 27,548 27,548 0. expenses. Add lines 13 through 23 0. 25,000 25,000. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 52,548 0. 27,548 25,000. Add lines 24 and 25 27 Subtract line 26 from line 12: -2,5782 Excess of revenue over expenses and disbursements 0. b Net investment income (if negative, enter -0-)

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

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0.

C Adjusted net income (if negative, enter -0-)

<u></u>	Part 11 Balance Sheets Attached schedules and amounts in the description		Beginning of year	End o	f year
_	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
一	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	3,459.	881.	881.
	3	Accounts receivable >			
		Less; allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less; allowance for doubtful accounts ▶	• -		
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less, allowance for doubtful accounts			
S	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	c	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation	± ± ± ± ± ±		
	12	Investments - mortgage loans	-		
	13	Investments - other			
	14	Land, buildings, and equipment; basis			
		Less accumulated depreciation			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	3,459.	881.	881.
_	17	Accounts payable and accrued expenses			
	18	Grants payable			
S	19	Deferred revenue		•	ī
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iabi	21	Mortgages and other notes payable			ı
_	22	Other liabilities (describe)			
					į
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			1
		and complete lines 24 through 26, and lines 30 and 31.			
alances	24	Unrestricted			
툘	25	Temporarily restricted			
8	26	Permanently restricted			
Net Assets or Fund B		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			F.
ts	27	Capital stock, trust principal, or current funds	0.	0.	,
sse	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ë	29	Retained earnings, accumulated income, endowment, or other funds	3,459.	881.	
Š	30	Total net assets or fund balances	3,459.	881.	
			2 450	001	
_	31	Total liabilities and net assets/fund balances	3,459.	881.	
P	art	III Analysis of Changes in Net Assets or Fund B	alances		
-	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	3.459.
	•	r amount from Part I, line 27a		1 2	3,459. -2,578.
_		r increases not included in line 2 (itemize)		3	2,3,0.
		lines 1, 2, and 3		4	881.
		eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	881.
_			\-\(\triangle\)		Form 990-PF (2017)

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)					low acquir - Purchase - Donation	ed (d	c) Date acquired (mo , day, yr.)	(d) Date sold (mo., day, yr.)
1a								
b NON	E					_		
<u>C</u>				_				
_d				<u> </u>				
<u>e</u>	(A) Donorostono allamad	T (=\)0		Ь.,			(h) Coup or (le	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale			((h) Gain or (k (e) plus (f) min	
a								
b		-		 ∤				
C				-				
d		 		-				
Complete only for assets showing	nain in column (h) and owned by	the foundation	on 12/31/69	-		(I) G	ains (Col. (h) g	an minus
Complete only for assets showing gain in column (h) and owned by the (j) Adjusted basis as of 12/31/69 as of 12/31/69			cess of col. (i) col. (j), if any			còl. (k	(), but not less Losses (from co	than -0-) or
a							·	
b								
C								
d								
е		<u> </u>	-					
2 Capital gain net income or (net capi	tal loss) { If gain, also enter-	er in Part I, line 0- in Part I, line	7 7	}	2			
3 Net short-term capital gain or (loss) If gain, also enter in Part I, line 8, co		nd (6):		}				
If (loss), enter -0- in Part I, line 8 Part V Qualification Un	der Section 4940(e) fo	r Raducad	Tay on Net	Inv	3 estmer	t Inco	me	
If section 4940(d)(2) applies, leave this Was the foundation liable for the sectio If "Yes," the foundation doesn't qualify Tenter the appropriate amount in ea	n 4942 tax on the distributable ai under section 4940(e). Do not co	mplete this part	L.					Yes X No
(a)	(b)	III SU GOUGHS DO		(c)			<u> </u>	(d) stribution ratio
Base periód years Calendar year (or tax year beginning	in) Adjusted qualifying di		Net value of no		ritable-use		Dis (col. (b)	stribution ratio divided by col. (c)) 3 • 9 3 5 7 6 8
2016		25,000. 27,500.				352. 154.		3.372578
2015		22,500.				497.		4.093142
2014		25,000.				468.		3.865182
2013 2012		10,000.				860.		1.296176
2 Total of line 1, column (d)	· · · · · · · · · · · · · · · ·	10,000.			30,	0001	2	16.562846
3 Average distribution ratio for the 5- the foundation has been in existence	•	on line 2 by 5.0	O, or by the numb	er of	years		3	3.312569
4 Enter the net value of noncharitable	-use assets for 2017 from Part X	, line 5					4	7,359.
5 Multiply line 4 by line 3						5	24,377.	
6 Enter 1% of net investment income (1% of Part I, line 27b)				6	0.			
7 Add lines 5 and 6							7	24,377.
8 Enter qualifying distributions from F	Part XII, line 4						8	25,000
If line 8 is equal to or greater than li See the Part VI instructions	ne 7, check the box in Part VI, lin	e 1b, and comp	lete that part usin	ig a 1	% tax rate			
723521 01-03-18								Form 990-PF (2017

Part VII Excise Tax Based on Investment Income (Section 4940(a), 4940(a), or 4948 - see instructions)		1990-PF (2017) ROBERT E. SHEPHERD FOUNDATION 36-2911			Page 4
Dates of villing or determination letter. Call collection of Part I, line 27b Call of the collection of 940(e) requirements in Part V, check here ▶			nstru	CTIO	15)
D Domestic foundations that meet the section 494(a)(e) requirements in Part V, check here	1a				٤
of Part I, line 27b of Note domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b). 1 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 3 Add lines 1 and 2 5 Subtilet A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 6 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 6 Tax based on investment of line 4 to less or line 5 for line 5				_	1
a All Other domestic foundations enter 2% of line 27b, Exempt foreign organizations, enter 4% of Part I, line 12, cot. (b). 2	b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗓 and enter 1%			0.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 3 dod lines 1 and 2 3 dod. 4 Subtitle A (incomp) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Total based on investment income. Subtract line 4 from line 3. It zero or less, enter -0- 5 Total credits on graginations -1 tax withheld at source 6 Total credits and payments. Add lines 86 through 60 6 Except foreign organizations -1 tax withheld at source 6 Total credits and payments. Add lines 86 through 60 6 Except foreign organizations -1 tax withheld at source 7 Total credits and payments. Add lines 86 through 80 6 Except foreign organizations -1 tax withheld at source 7 Total credits and payments. Add lines 86 through 80 7 Total credits and payments. Add lines 86 through 80 7 Total credits and payments. Add lines 86 through 80 8 Enter any penalty for underpayment of estimated tax. Neck here I of Form 2220 is attached 8 Total credits and payments. Add lines 86 through 80 9 Total credits and payments. Add lines 86 through 80 10 veryayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded 11 Part VII-A Statements Regarding Activities 1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campagn? 1 b Did spend more than 5100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition II from 1120 PDL for this year? 1 the assignment of fast) to the credited to 2018 estimated tax. X 1 b X to the foundation fast form 1120 PDL for this year? 1 fives, intach detailed description of the activities. 2 c Enter the remission of fast or political expenditure tax imposed on foundation managers. ▶ \$ 0 . (2) on foundation ma		of Part I, line 27b			
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3		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	~	-	0.
4 Subtlike A (income) bit (domestic section 4947(g)(1) trusts and taxable foundations only, others, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Credits/Payments; 2 0/17 estimated tax payments and 20 16 overpayment credited to 2017 5 Exempt foragin organizations — tax withheld at source 6 16 0 0. 6 Bexing to reproduce the state of the	_				
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Cedest/Payments: 2 2017 estimated tax payments and 2016 overpayment credited to 2017 5 Exempt foreign organizations - tax withheld at source 6 Tax paid with application for seties on of time to file (Form 8868) 6 Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6 si through 80 6 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 0.0. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 11 Enter the amount of line 10 to bit: Credited to 2018 estimated tax ■	4	<u> </u>			
6 Credits/Payments: a 2017 estimated tax payments and 2016 overpayment credited to 2017 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) 6 0 0. 6 8 0 0. 7 Total credits and payments. Add lines 6a through 6d 6 0. 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for undergayment of testinated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owerpaid 11 Enter the amount of line 10 to be. Credited to 2018 estimated tax. 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 intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign. 1a	-				
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c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withholding d Backup withholding erroneously withholding T Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here		· · · · · · · · · · · · · · · · · · ·			ı
d Backup withholding erroneously withhold 7 Total credits and payments. Add lines 6 at through 6d 8 Enter any penalty for underpayment of estimated tax. Check here					
7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 0.0. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed 9 0.0. 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owed 11 Enter the amount of line 10 to be: Credited to 2018 estimated tax	C	tan pane titin approach to the contract of the			
8 Enter any penalty for underpayment of estmated tax. Check here	d	Backup withholding erroneously withheld 6d 0.			* ***
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9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2018 estimated tax	8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 11 Part VIII-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 intervene in any political campaign? 2 Did it spend more than \$100 during the year (either directly) or molirectly) for political purposes? See the instructions for the delimition of distributed by the foundation in connection with the activities and copies of any materials published or distributed by the foundation in Earni 112e-POL for they year? 3 Did it spend in 112e-POL for they year? 4 Did the foundation 5 Did it spend in 112e-POL for they year? 5 Pass the foundation managers. ▶ \$ O. 2 (2) On foundation managers. ▶	9				0.
Enter the amount of line 10 to be: Credited to 2018 estimated tax	10				
Part VII-A Statements Regarding Activities					
1a During the lax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaigin? 1a				-	
any political campaign? b Did it spend more than \$100 during the year (either directly) or political purposes? See the instructions for the definition if the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-PDL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 . e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0 . 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 11 "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 bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? N/A b If "Yes," has it flied a tax return on Form 990-T for this year? N/A 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? N/A To Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 7 Did the foundation claiming status as a pri	_			Yes	Nο
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition if the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-PDL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation. S	10		10		
if the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 . e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0 . 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4 Did the foundation have unrelated business gross income of \$1,000 or more during the year? 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 8 If "Yes," attach the statement required by General Instruction T 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: 8 By language in the governing instrument, or 9 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument, or 1 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 7 X 8a Enter the states to which the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? Se			$\overline{}$		
distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation. \(\backsquare\) \(\barksquare\) \(\backsquare\) \(\backsquare\) \(\barksquare\) \(\barksquare\	0		10		
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Pε	nrt VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	\mathbf{x}^{-}	
	Website address ► N/A			
14	The books are in care of ► MIKE LOWERY . Telephone no. ► 630 - 94		<u> 300</u>	
	Located at ▶ 660 N. INDUSTRIAL DRIVE, ELMHURST, IL ZIP+4 ▶60	126		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		. ►	ш
	and enter the amount of tax-exempt interest received or accrued during the year		/A	
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country >			
Pa	rt VII-B 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.		Yes	No
18	During the year, did the foundation (either directly or indirectly).			'
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	1		
	a disqualified person?			1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(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			
	for the benefit or use of a disqualified person)?		1	1
	(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			ŧ
	termination of government service, if terminating within 90 days.)			
ŧ	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	ا ا		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
•	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	- ; -		\bar{x}
_	before the first day of the tax year beginning in 2017?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
i	a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? Yes X No			į
	MMV NI III	.		1
	If "Yes," list the years			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			: ا
	statement - see instructions.) N/A	2b		
	to the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	<u> </u>		
•	the provisions of section 4342(a)(2) are being applied to any of the years listed in 2a, list the years note.			1
3.	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			į
	during the year? — Yes X No			
,	of "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after			'
١	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			·
	of holdings acquired by gift or bequest or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			'
	Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A	3b		- '
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
•	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b	•	x

			<u> </u>
2	Compensation of five highest-paid employees (other than those inc	cluded on line 1). If none,	enter "NONE."
	/ Mana and address of each ampleuse and more than \$50,000	(b) Title, and average	() Composition

(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE				. ,
	<u> </u>			
	1			
	†			
Total number of other employees paid over \$50,000		-L	<u> </u>	0

Form 990-PF (2017)

(e) Expense

(d) Contributions to

Form 990-PF (2017)

JIM ALLEN

Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	dation Managers, Highly	<u>,</u>
3 Five highest-paid independent contractors for professional services. If none, en	ter "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	L	▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant sta	tistical information such as the	F
number of organizations and other beneficiaries served, conferences convened, research papers p		Expenses
1 N/A		
		_
		0.
2		
		
3		
4		· · · · · · · · · · · · · · · · · · ·
·		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1 N/A		
		0
2		0.
All other program-related investments. See instructions.		*
3		

0 . Form **990-PF** (2017)

Total. Add lines 1 through 3

Part X Minimum Investment Return (All domestic foundations must complete this part Fe	oreign foundations, see	instructions)
1. Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		·
a Average monthly fair market value of securities	1a	0.
b Average of monthly cash balances	1b	7,471.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	7,471.
e Reduction claimed for blockage or other factors reported on lines 1a and		_
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	7,471.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	112.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	7,359.
6 Minimum investment return. Enter 5% of line 5	6	368.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four foreign organizations, check here and do not complete this part.)	undations and certain	
1 Minimum investment return from Part X, line 6	1	368.
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	0.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	368.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	368.
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	368.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
a Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	25,000.
b Program-related investments - total from Part IX-B	15	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:		
a 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	25,000.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	25,000.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	foundation qualifies for the	

Page 9

Undistributed Income (see instructions) Part XIII (a) (b) (d) (c) Corpus Years prior to 2016 2016 2017 1 Distributable amount for 2017 from Part XI, 368. line 7 2 Undistributed income, if any, as of the end of 2017 0. a Enter amount for 2016 only b Total for prior years: 0. 3 Excess distributions carryover, if any, to 2017: 38,457. a From 2012 24,677. **b** From 2013 22,225. c From 2014 27,092. dFrom 2015 24,682. e From 2016 137,133 f Total of lines 3a through e 4 Qualifying distributions for 2017 from 25,000. Part XII, line 4: ►\$ 0 a Applied to 2016, but not more than line 2a b Applied to undistributed income of prior 0 years (Election required - see instructions) c Treated as distributions out of corpus 0 (Election required - see instructions) 368. d Applied to 2017 distributable amount 24,632 e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a)) 0. 0. 6 Enter the net total of each column as indicated below: 161,765 a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract 0 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 0. assessed d Subtract line 6c from line 6b. Taxable 0. amount - see instructions e Undistributed income for 2016. Subtract line 0 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must 0. 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 0. may be required - see instructions) 8 Excess distributions carryover from 2012 38,457. not applied on line 5 or line 7 9 Excess distributions carryover to 2018. 123,308 Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: 24,677 a Excess from 2013 22,225 b Excess from 2014 27,092. c Excess from 2015 d Excess from 2016 24,682. 24,632 e Excess from 2017

723581 01-03-18

ROBERT E. SHEPHERD FOUNDATION 36-2911506 Page 11 Form 990-PF (2017) Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Recipient	If recipient is an individual.	Foundation	Purpose of grant or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year				·
ARIANA DIAZ/ ROOSEVELT UNIVERSITY	N/A	N/A	SCHOLARSHIP	
430 S. MICHIGAN AVE	N/A	,,,,	· ·	
CHICAGO, IL 60605				5,00
ETHAN MILLER SCHMITT/ EMBRY RIDDLE	N/A	N/A	SCHOLARSHIP	
AERONAUTICAL UNIVERSITY				
600 SOUTH CLYDE MORRIS BLVD.				
DAYTONA BEACH, FL 32114				5,000
MAEVE CATHERINE BERNERO/ OAKTON	N/A	N/A	SCHOLARSHIP	
COMMUNITY COLLEGE 1600 E. GOLF ROAD				
DES PLAINES, IL 60016		1		5,000
220 1201100, 11 00010				
TIFFANY LAU/ UNIVERSITY OF ILLINOIS	N/A	N/A	SCHOLARSHIP	
901 W. ILLINOIS ST				
URBANA, IL 61801				5,000
			COUGL ANGUED	
WILLIAM MARCH/ MERRIMACK COLLEGE 315 TURNPIKE STREET	N/A	N/A	SCHOLARSHIP	
NORTH ANDOVER, MA 01845				5,000
Total			▶ 3a	25,000
b Approved for future payment				,
NONE				
			'	
Total		•	▶ 3b	(

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated business income			ded by section 512, 513, or 514	(e)		
Enter gross amounts amount of the mounted.	(a)	(b)	(C) Exclu-	(d)	Related or exempt		
1 Program service revenue:	Business code	Amount	sion	Amount	function income		
•	1		<u> </u>				
a			<u> </u>		-		
c	 		<u> </u>				
d			1				
£			<u> </u>		 		
			<u> </u>		···		
g Fees and contracts from government agencies			1				
2 Membership dues and assessments							
3 Interest on savings and temporary cash investments							
4 Dividends and interest from securities							
5 Net rental income or (loss) from real estate:							
a Debt-financed property							
b Not debt-financed property]		•		
6 Net rental income or (loss) from personal property	-						
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			ŀ				
b							
c							
d							
e							
12 Subtotal. Add columns (b), (d), and (e)).]	0.1	0.		
13 Total. Add line 12, columns (b), (d), and (e)				13	0.		
(See worksheet in line 13 instructions to verify calculations.)							

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

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
	<u> </u>

Forn	1990-PF (2017) ROBERT E. SHEPHERD FOUNDATION	30-2311300	Pa	ige is
Pa	Information Regarding Transfers to and Transactions and Relationships Wit Exempt Organizations	h Noncharitable	;	
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)		Yes	No
	(other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a	Transfers from the reporting foundation to a noncharitable exempt organization of:			İ
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		Х
b	Other transactions:			
		1 41 441		3.5

	Did the organization directly or indirectly engage in any of the following with any other organization described in section 50 I(c)		res	INO
	(other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
ì	Transfers from the reporting foundation to a noncharitable exempt organization of:			
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		X
)	Other transactions:			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
	(3) Rental of facilities, equipment, or other assets	1b(3)		Х
	(4) Reimbursement arrangements	1b(4)		X
	(5) Loans or loan guarantees	1b(5)		Х
	(6) Performance of services or membership or fundraising solicitations	1b(6)		X
;	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X
1	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, of	her ass	ets.	

or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

	Time (a) and value of the goods,							
(a)Line no	(b) Amount involved	(c) Name of no	ncharitable	exempt organization	(d) Description	of transfers, transaction	ons, and sharing arra	angements
N/A		*						
					İ			
	<u> </u>							
		-						
		- "						
	<u> </u>							
ın s	ne foundation directly or indirect ection 501(c) (other than section 'es," complete the following sch	on 501(c)(3)) or in sectionedule.					Yes	X No
	(a) Name of or	ganization		(b) Type of organization	ļ	(c) Description of re	elationship	
	N/A				-			
								
					ļ			
		<u>.</u> .						
	Under penalties of perjury, I declare	that I have examined this re	turn includio	a accompanying schedules an	of statements, and to the	hest of my knowledge		
Sign Here	and belief, it is true, correct, and op	mplete Declaration of prepa		taxpayer) is based on all info	TRUSTE	r has any knowledge	May the IRS dereturn with the shown below? X Yes	preparer
	Signature of officer or truster		1	Date	Title	Chaoli I II	LOTIN	
	Print/Type preparer's n	ame P	reparer's si	gnature	Date	Check if	PTIN	
Paid	DANIELLE M	T. TYLER		110	10/08/18	self- employed	P01433	924
Prepa		ISLEY AND K	IENER	LLP	10,00,10	Firm's EiN ► 3		
Use C			/ -	· \(\nu\)				
	Firm's address ▶ 87	45 W HIGGI	NS RD	STE 200	· · · · · · · · · · · · · · · · · · ·			
	•	HICAGO, IL				Phone no 31	2-263-2	700
					-			

Schedule B (Form 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

Employer identification number

ROBERT E. SHEPHERD FOUNDATION 36-2911506 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributors Special Rules 🔟 For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during 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, or (ii) Form 990-EZ, line 1 Complete Parts I and II 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 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 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)

Name of organization

Employer identification number

ROBERT E. SHEPHERD FOUNDATION

36-2911506

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	l space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BAC ADMINISTRATIVE DISTRICT COUNCIL #1 660 NORTH INDUSTRIAL DRIVE ELMHURST, IL 60126	\$ 12,759.	Person X Payroll Noncash X (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 Oncash (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 Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
723452 11-0		\$Schedule B (Form	Person Payroll Noncash (Complete Part II for noncash contributions) 990, 990-EZ, or 990-PF) (2017)

Employer identification number

ROBERT E. SHEPHERD FOUNDATION

36-2911506

Part II)	Noncash Property (see instructions) Use duplicate copies of Part II if	additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_1	SPORTING GOODS AND OTHER RECREATIONAL ITEMS CONTRIBUTED AS DOOR PRIZES FOR THE ANNUAL GOLF OUTING	\$ 2,759.	05/10/18
(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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
453 11-0		\$Schedule B (Form S	190, <u>990-EZ, or 990-PF) (</u> 2

Name of orga	anization	•	Employer Identification number					
ROBERT	E. SHEPHERD FOUNDATION	ON	36-2911506					
Part III	the year from any one contributor. Complete	columns (a) through (e) and the follo	I in section 501(c)(7), (8), or (10) that total more than \$1,000 for wing line entry. For grounizations					
	completing Part III, enter the total of exclusively religion	us, charitable, etc., contributions of \$1,000 o	r less for the year (Enter this info once)					
(a) No.	Use duplicate copies of Part III if addition	nai space is needed.						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
_								
	(e) Transfer of gift							
	Transferee's name, address, a	and 7ID ± 4	Relationship of transferor to transferee					
-	Transferee s name, address, a	110 ZIF + 4	Relationship of dansieror to dansieree					
(a) No.		1						
from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Part I								
	(e) Transfer of gift							
	Transferee's name, address, a	ING ZIP + 4	Relationship of transferor to transferee					
(a) Na		<u> </u>						
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Part I								
_								
	(e) Transfer of gift							
	Transferee's name, address, a	Relationship of transferor to transferee						
	, and one of the man and the							
(a) No								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Parti								
		-						
		<u> </u>						
	(e) Transfer of gift							
	Transferente name addresse a	and 7ID + 4	Relationship of transferor to transferee					
-	Transferee's name, address, a	IIIU ZIP + 4	neiationship of transferor to transferee					

723454 11-01-17

FORM 990-PF	ACCOUNTI	NG FEES	STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING	2,000.	0.	2,000.	0.	
TO FORM 990-PF, PG 1, LN 16B	2,000.	0.	2,000.	0.	
FORM 990-PF	··OTHER E	XPENSES	Si	PATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
GOLF OUTING EXPENSES ANNUAL REPORT FILING FEE	24,991. 15.	0.	24,991.	0.	
TO FORM 990-PF, PG 1, LN 23	25,006.	0.	25,006.	0.	

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

3

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

BAC ADMINISTRATIVE DISTRICT COUNCIL #1 OF ILLINOIS - ATTN: MIKE LOWERY 660 N. INDUSTRIAL DRIVE ELMHURST, IL 60126

TELEPHONE NUMBER

630-941-2300

FORM AND CONTENT OF APPLICATIONS

1) COMPLETED APPLICATION, INCLUDING ALL REQUIRED ATTACHMENTS (ESSAYS, EXTRA-CURRICULAR ACTIVITIES, ETC.) 2) OFFICIAL TRANSCRIPT OF ALL HIGH SCHOOL RECORDS 3) OFFICIAL ACT AND/OR SAT TEST RESULTS (TEST RESULTS LISTED ON HIGH SCHOOL TRANSCRIPTS WILL BE ACCEPTED)

ANY SUBMISSION DEADLINES

JANUARY 1ST - MARCH 15TH

RESTRICTIONS AND LIMITATIONS ON AWARDS

1) A HIGH SCHOOL SENIOR AT THE TIME OF APPLICATION 2) PROVISIONALLY ACCEPTED AS A FULL-TIME STUDENT INTO AN UNDERGRADUATE DEGREE PROGRAM AT AN ACCREDITED COLLEGE OR UNIVERSITY 3) A DEPEDENDENT CHILD OF A MEMBER IN GOOD STANDING OF THE BAC ADC 1 OF IL.