Extended to November 15, 29
Return of Private Foundation 2019

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. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0052

Dena	timer	nt of the Treasury	,				curity numbers or		-	•			JIU
Interr	nal Re	evenue Service			to www.i	rs.gov/Fo	rm990PF for inst			ormation.		Open to Pu	ublic Inspection
For	cale	ndar year 2018	or tax year begir	nning			·	, and e	ending	,			
		f foundation								A Employer identifi	cation	number	
Į	11	<u>i</u> nois C	hildren	's He	alth	care							
र्न	'ou	ndation								03-0503	<u>425</u>		
Nur	nber a	and street (or PO t	oox number if mail is	s not deliver	ed to street	address)			Room/suite	B Telephone numbe	r		
1	20	0 Jorie	${\tt Blvd}$			_			301	(630) 5	71-	2555	
			ovince, country,	and ZIP or	foreign p	ostal cod	e			C If exemption applicati	on is pe	endina, check h	nere
		Brook,		523						,		,	
		k all that apply:		l return			Initial return of a f	ormer public	chardy	D 1. Foreign organiz	rations	check here	
တ	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	K all that apply.		return			Amended return	ormor pasmo	onay	2 o. o.g o. guina		, chicox hore	-
•				ess chang			Name change			Foreign organizati check here and at	ons med	eting the 85% t	test,
	hool	k type of organiz					rate foundation			ĺ		•	
	_		ر مصادر) nonexempt cha			_	able private found	ation	$\mathcal{D}\mathcal{U}$	E If private foundation under section 507			
			assets at end of					X Acc	rual	1			
: E		Part II, col. (c), I		ycai J		ther (spec		LZS ACC	iuai	F If the foundation is			
	:0111 ►\$	ر (د), ا	3 960 3	60 (Pa			ist be on cash bas	ie )		under section 507	עי אָט	(D), CHECK HE	
	art l		evenue and Exp		.,,					fal Advisada di ma		(d) Dieb	oursements
	41 L	The total of am	ounts in columns (b) al the amounts in co	), (c), and (d)	may not		Revenue and Inses per books		nvestment ome	(c) Adjusted ne income	١	for charital	ble purposes pasis only)
چي	Τ.					1,50				N/A		(cash b	aaia Uiliy)
(V)	'		gifts, grants, etc. If the foundation is not i		h Sch D					N/A		•	
	2	Interest on saving	as and temporary	redonen in arigi	ii ocii D	-	53.		53.		-	Staten	ent 1
	3	cash investments					573,183.	2 57	73,183.	-		Staten Staten	
	4		interest from sec	curilles .		_3,	3/3,103.	3,31	3,103.			BLALEI	Henre Z
	1 .	a Gross rents	•	84		٠,						<del></del>	
	_	Net rental income	· · · <del></del>	<del></del>		<u> </u>	163,506.				~		
ē	ba	Net gain or (loss) Gross sales price	from sale of assets				103,300.					-5	
Revenue	_"	assets on line 6a	_10,	384,9	30.	<del></del>		2 16	2 506	H RECE	<u> IV</u>		
è	1		ncome (from Part IV	, line 2)		<u> </u>		2,10	<u> 3,506.</u>			<u> </u>	
_	8	Net short-term				-				S JUL 2	<del>5 21</del>	19 80%	
	9	Income modifi Gross sales less								181			
	102									0005	-		
		Less Cost of goo							<del></del>	OGDE	17,	<u> </u>	· ;
	1	Gross profit or	(IOSS)										
	11						726 742	F 7	26 742				
_	12		es 1 through 11			<del>                                     </del>	736,742.	5,/3	36,742.			2.4	11 520
	13	•	officers, directors,				<u>249,000.</u>		7,470.				<u>11,530.</u> 54,205.
	14		e salaries and wa	-		-	<u>454,205.</u>		0.				
ģ	15		, employee benet				<u>168,189.</u>		1,089.				$\frac{57,100}{600}$
nse	168	a Legal fees		Stmt		-	33,572.		0.				21,663.
ē	.  1	Accounting fee		Stmt			49,035.	<del>1</del>	37,185.				<u>11,850.</u>
ũ	(	Other professi	onal fees .	Stmt	: 5		<u> 262,877.</u>	<u> </u>	<u>75,553.</u>				<u>58,374.</u>
tive	17	Interest		· <u>-</u>	_		150 160		\F_ 0.6E				
tra	18	, Taxes	••	Stmt	: 6		150,462.		<u> 265, 265.</u>				0.
Ë	19	Depreciation a	nd depletion			ļ	4,243.		0.				-0 452
퉏	20	Occupancy			•	ļ	58,772.		319.				8,453.
and Administrative Expenses	21		ences, and meeti	ngs		ļ	61,101.		0.				50,179.
ă	22	• •			_		28,244.		<u> </u>				<u>13,835.</u>
n g	23	•	• •	Stmt	: 7		77,391.	ļ	184.			7	77 <u>,207.</u>
Operating	24		g and administr					_				= =	
ed(		=	d lines 13 throug				<u>597,091.</u>	21	<u> 17,065.</u>				74,396.
0	25	Contributions,	gifts, grants paid	d		5,	<u>251,180.</u>	<u> </u>				5,55	<u>57,937.</u>
	26	Total expense	s and disbursen	nents.									
		Add lines 24 a	nd 25			6,	848,271.	21	L7,065.			6,93	<u>32,333.</u>
	27	Subtract line 2	6 from line 12:										
	8	Excess of revenu	e over expenses an	d disbursem	ents	<1,	111,529.						
	l	b Net investmer	nt income (if negat	tive, enter -0	-)				L9,677.				
	١,	: Adjusted net i	ncome (if penature	onter -O-)				1		N/A			

Illinois Children's Healthcare

For	m 99	0-PF(2018) Foundation		03-	-0503425 Page 2
Б	art	Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only	Beginning of year		of year
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	1,562,725.	2,305,818	2,305,818.
		Accounts receivable			
		Less: allowance for doubtful accounts ▶			
		Pledges receivable			
	7	Less: allowance for doubtful accounts		· · · · · · · · · · · · · · · · · · ·	-
	_ ا	<del></del>			
		Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons			+
	7	Other notes and loans receivable		<del></del>	-
		Less; allowance for doubtful accounts ▶			
Assets	8	Inventories for sale or use		<del></del>	<del> </del>
SS	J	Prepaid expenses and deferred charges	23,409.		
⋖	10a	Investments - U.S. and state government obligations Stmt 10	8,285,676.		
	Ь	Investments - corporate stock Stmt 11	132,521,445.	113,085,568	. 113,085,568.
	C	Investments - corporate bonds Stmt 12	7,288,840.	8,477,251	8,477,251.
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	l	Land, buildings, and equipment basis ► 126,874.			
	' -	Less accumulated depreciation Stmt 13 115,801.	15,316.	11,073	11,073.
	15	Other assets (describe Statement 14)	0.	57,803	
				31,003	37,003.
	10	Total assets (to be completed by all filers - see the	140 607 411	122 969 260	133,869,260.
_	4-	instructions. Also, see page 1, item 1)			
		Accounts payable and accrued expenses	139,357.		
	18	Grants payable	2,660,670.	2,353,913	<u> </u>
ies	19	Deferred revenue			<u> </u>
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons .			<u> </u>
Liabilities	21	Mortgages and other notes payable			
_	22	Other liabilities (describe  Statement 15)	5,383.	0	•
_	23	Total liabilities (add lines 17 through 22)	2,805,410.	2,412,618	, ,
	İ	Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31.			
Çe	24	Unrestricted	146,892,001.	131,456,642	,
a	25	Temporarily restricted			[
Bal	26	Permanently restricted			
Fund Balances		Foundations that do not follow SFAS 117, check here			
교		and complete lines 27 through 31.			1
þ	27	Capital stock, trust principal, or current funds			1
Assets	l	Paid-in or capital surplus, or land, bldg., and equipment fund			
Ass	29	Retained earnings, accumulated income, endowment, or other funds			
Net/	١	Total net assets or fund balances	146,892,001.	131,456,642	1
Z	30	Total net assets of fund parances.	140,002,001.	131,430,042	<del>'</del>
		Tablichillation and and account than the balance	149,697,411.	122 060 260	
	[31	Total liabilities and net assets/fund balances		133,009,200	<u> </u>
P	art	III Analysis of Changes in Net Assets or Fund B	alances		
=				<del></del>	<del></del>
		net assets or fund balances at beginning of year - Part II, column (a), line	30		146 000 001
		agree with end-of-year figure reported on prior year's return)		<u>  1</u>	<del></del>
		amount from Part I, line 27a		2	
3	Othe	r increases not included in line 2 (itemize)	See St	atement 8 3	<del></del>
4	Add	lines 1, 2, and 3		4	<del></del>
5	Decr	eases not included in line 2 (itemize)	See St	atement 9 5	
6	<u>Total</u>	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	131,456,642.
					Form <b>990-PF</b> (2018)

	and Lo	sses for Tax on Inv	estment	Income					<del>5 050</del>	. <u> </u>
		s) of property sold (for exam or common stock, 200 shs.		te,	( <b>b)</b> I	How ac - Purc - Dona	nase i	(c) Date a (mo., da		(d) Date sold (mo., day, yr.)
12 Publicly Trade	d Se	curities			Ť					
b Capital Gains										
C										
d										
е					L.,					
(e) Gross sales price	(f)	Depreciation allowed (or allowable)	plus e	t or other basis xpense of sale					ain or (loss s (f) minus	(g))
a 10,382,569.				8 <u>,221,45</u>	2.					2,161,117
b 2,389.										2,389
<u>C</u>										
<u>d</u>					$\dashv$					
Complete only for assets showin	ים מצוח וח	column (h) and owned by th	ie foundation	on 12/31/69	$\dashv$		/I)	Caine (C	ol. (h) gair	minue
Complete only for assets showin		(i) Adjusted basis		cess of col. (I)			col.	(k), but n	ot less tha	ın -0-) <b>o</b> r
(i) FMV as of 12/31/69		as of 12/31/69		col. (j), if any				Losses	(from col.	(h))
a										2,161,117
b									-	2,389
C										
d										
е										
2 Capital gain net income or (net ca	ortal loss	If gain, also enter i			}	2				2,163,506
3 Net short-term capital gain or (los	•			•	1					
If gain, also enter in Part I, line 8,			i (0 <i>)</i> .		J					
if (loss), enter -0- in Part I, line 8	•	•				3			N/A	1
Part V Qualification U	nder S	Section 4940(e) for l	Reduced	Tax on Net	lnv	estn	nent Inc	ome		
If section 4940(d)(2) applies, leave the Was the foundation liable for the sect if "Yes," the foundation doesn't qualif 1 Enter the appropriate amount in o	tion 4942 y under s	tax on the distributable amo section 4940(e). Do not comp	plete this part	t		- 3.			·	Yes X No
(a) Base period years Calendar year (or tax year beginnii	ng in)	<b>(b)</b> Adjusted qualifying distr	ibutions	Net value of no		rıtable-			Dıstri (col. (b) dı	(d) bution ratio vided by col. (c))
2017			1,470.				9,870			.04736
2016			1,212.				6,423			.05072
2015			3,444.				<u>5,216</u>			.05117
2014			0,025.				4,845			.04595
2013		5,643	3,447.	1	24	<u>,42</u>	<u>2,262</u>	•		.04535
2 Total of line 1, column (d)								2	_	.24058
3 Average distribution ratio for the state the foundation has been in existent	-	·	n line 2 by 5.0	), or by the numb	er of	years		3	. —	.04811
4 Enter the net value of noncharitab	le-use as	sets for 2018 from Part X, III	ne 5					4	14	0,045,547
5 Multiply line 4 by line 3	••••							5		6,738,432
6 Enter 1% of net investment incom		f Part I, line 27b)						6		55,197
7 Add Imag F and C								7		6,793,629
8 Enter qualifying distributions fron				-		٠		8		6,932,333
If line 8 is equal to or greater than See the Part VI instructions.			tb, and comp	lete that part usin	g a 1	% tax	rate.	<u> </u>		
823521 12-11-18								-		Form <b>990-PF</b> (201

	4				
Illinois Children's Healthca:	~ h				
	re /	03-050	2425	Pag	70
orm 990-PF (2018) Foundation Part VI Excise Tax Based on Investment Income (Section 49	940(a), 4940(b), 4940(e), or 4				
	d enter "N/A" on line 1.			<u> </u>	<u>''</u>
• • • •	i		r. tang	<del></del>	<del></del>
Date of ruling or determination letter: (attach copy of letter if the Domestic foundations that meet the section 4940(e) requirements in Part V, check here		1	5	5,19	7
	and enter 176	<b>-</b>		<u>, 13</u>	<u></u>
of Part I, line 27b	r 49/ of Part Llina 12 and (h)				
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter		2		=	0
<ul> <li>Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only</li> <li>Add lines 1 and 2</li> </ul>	, others, enter -o-)	3	51	5,19	<u> </u>
	c others enter -0-1	4			<del>,</del>
, , , ,	y, others, enter -o-)	5	5/	5,19	
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		3		<u>, 1 )</u>	<u> </u>
6 Credits/Payments:	6a   113,000.				
a 2018 estimated tax payments and 2017 overpayment credited to 2018	6b 0.	ł			
b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868)	6c 0.	<b> </b>			
• • • • • • • • • • • • • • • • • • • •	6d 0.				
d Backup withholding erroneously withheld  7. Total credits and payments. Add lines 6a through 6d.	001	7	11	3,000	$\overline{n}$
<ul> <li>7 Total credits and payments. Add lines 6a through 6d</li> <li>8 Enter any penalty for underpayment of estimated tax. Check here  if Form 2220 is a</li> </ul>	hadaette	8			ŏ
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	attached	9			ŭ
O Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	5'	7,80	3
1 Enter the amount of line 10 to be: Credited to 2019 estimated tax	57,803 Refunded	11			0
Part VII-A Statements Regarding Activities	3 / 1 0 0 3 4   Melanded	<u> </u>			Ť
1a During the tax year, did the foundation attempt to influence any national, state, or local le	egislation or did it participate or intervene	in .		Yes N	۷c
any political campaign?			1a		X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political pur	rposes? See the instructions for the defir	irtion	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copie		••			
distributed by the foundation in connection with the activities.				- 1	
c Did the foundation file Form 1120-POL for this year?			1c		X
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 manage				- 1	
e Enter the reimbursement (if any) paid by the foundation during the year for political expe		•			
managers. ▶ \$ 0.			11	_	
2 Has the foundation engaged in any activities that have not previously been reported to the	ne IRS?	_	2		X
If "Yes," attach a detailed description of the activities.					
3 Has the foundation made any changes, not previously reported to the IRS, in its governil	ng instrument, articles of incorporation, o	r	ll		
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?		4a		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the ye	ear?	•	5		X
If "Yes," attach the statement required by General Instruction T.					
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfies	d either:				
By language in the governing instrument, or				-	
By state legislation that effectively amends the governing instrument so that no manda	atory directions that conflict with the state	e law			
remain in the governing instrument?			6	X _	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co	omplete Part II, col. (c), and Part XV		7	X	_

8a Enter the states to which the foundation reports or with which it is registered. See instructions.

of each state as required by General Instruction G? If "No," attach explanation

year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and address

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)

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

Pa	art 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		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ▶ www.ilchf.org			
14	The books are in care of ► The Foundation Telephone no. ► (630)		<u>-25</u>	
	Located at ► 1200 Jorie Blvd, No. 301, Oak Brook, IL ZIP+4 ► 60	523	<u>-22</u>	<u> 18</u>
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	N	/A	
16	At any time during calendar year 2018, 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	<u>.</u>		l
Pa	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required	Τ	1	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	•	Yes	No
1a	a 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?			ayada q
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)  a disqualified person?  Yes X No			
		ľ		` ^ ·]
	(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)?  Yes X No			
	(6) Agree to pay money or property to a government official? (Exception, Check "No"		1	
	if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)  Yes X No			
	termination of government service, if terminating within 90 days.)  L Yes X No b If any answer is "Yes" to 1a(1) (6), did any of the acts fail to qualify under the exceptions described in Regulations		١	
U	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	<del> </del>	<u>x</u>
	Organizations relying on a current notice regarding disaster assistance, check here	<u>                                   </u>		<u> </u>
	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	ļ		
٠	before the first day of the tax year beginning in 2018?	1c	<del></del>	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			4
•	defined in section 4942(j)(3) or 4942(j)(5)):			l
a	a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning		,	
	before 2018? Yes X No			
	If "Yes," list the years  , , , ,			1
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			
	statement - see instructions.) N/A	2b		
c	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	<b>&gt;</b>			
3a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year? Yes X No			
b	b if "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after		1	
	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 2018.)	3b		<u> </u>
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charnable purposes?	4a		X
b	b 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 2018?	4b	<u> </u>	<u> </u>
	Fo	rm <b>99</b>	U-PF	(2018)

0.

24,774

40.00

67,690.

Total number of other employees paid over \$50,000

Blvd, Suite 301, Oak Brook, IL 60523

Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
UC Regents	rogram Consultat	ion
	and Evaluation	122,500.
	Investment	
P.O. Box 2600, Valley Forge, PA 19482	Consultant	75,553.
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities		<b>&gt;</b> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produce		Expenses
1		
See Statement 17		0.
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 line	s 1 and 2.	Amount
1 <u>N/A</u>		
All other program-related investments. See instructions.  3		
Total. Add lines 1 through 3		0.
		Form <b>990-PF</b> (2018)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	145,602,330.
b	Average of monthly cash balances	1b	1,375,550.
С	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	146,977,880.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.	·	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	146,977,880.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) Stmt 18	4	6,932,333.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	140,045,547.
6	Minimum investment return Enter 5% of line 5	6	7,002,277.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here   ☐ and do not complete this part.)	d certair	
1	Minimum investment return from Part X, line 6	1	7,002,277.
2a	Tax on investment income for 2018 from Part VI, line 5 2a 55, 197.		
b	Income tax for 2018. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	55,197.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	6,947,080.
4	Recoveries of amounts treated as qualifying distributions	4	281,268.
5	Add lines 3 and 4	5	7,228,348.
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	7,228,348.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	6,932,333.
b	Program-related investments - total from Part IX-B	1b	<u> </u>
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	6,932,333.
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	<u>55,197.</u>
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	6,877,136.
	Note: The amount on line 6 will be used in Part V. column (h), in subsequent years when calculating whether the foundation of	nualifies	for the section

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part Xi,	· · · · · ·			
line 7				7,228,348.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only			5,391,652.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013				
<b>b</b> From 2014				
c From 2015				
<b>d</b> From 2016				
e From 2017				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2018 from				_
Part XII, line 4: ►\$ 6,932,333.				İ
a Applied to 2017, but not more than line 2a			5,391,652.	Ì
<b>b</b> Applied to undistributed income of prior				1
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus			·	
(Election required - see instructions)	0.			
d Applied to 2018 distributable amount				1,540,681.
e Remaining amount distributed out of corpus	0.			1
5 Excess distributions carryover applied to 2018	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a).)				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b .		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2017. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2019				5,687,667.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2013				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:	<u> </u>	<del></del>		
a Excess from 2014				1
b Excess from 2015				
c Excess from 2016				
d Excess from 2017				
e Excess from 2018				

823581 12-11-18

Foundation

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or show any relationship to Foundation Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year Advocate Charitable Foundation ÞС Advocate IL Masonic None 3075 Highland Parkway, Suite 600 Medical Center Dental Anesthesiology Downers Grove, IL 60515 Capacity Building 66,870, Project PC The Juvenile Justice Ann & Robert H Lurie Childrens None Collaborative, Hospital of Chicago Convened by 225 E Chicago Ave, Box 282 Strengthening Chicago, IL 60611 Chicago's Youth 110,063. Ann & Robert H Lurie Childrens None PC Early Childhood Mental Health Consultation Hospital of Chicago Pilot 225 E Chicago Ave. Box 282 100,000. Chicago, IL 60611 Austin Childcare Providers Network None PC Developmental 5701 W Division St Screening 50,000. Chicago, IL 60651 Board of Trustees of the U of ÞС Construction of UIC None Illinois Pediatric Dentistry 506 S Wright St. 209 Hab Mc 339 Ambulatory Surgery <u>Urbana IL 618</u>01 1,000,000. See continuation sheet(s) ▶ 3a 5.557.937. Total b Approved for future payment Ann & Robert H Lurie Childrens PC Early Childhood Mental None Health Consultation Hospital of Chicago Pilot for Illinois 225 E Chicago Ave, Box 282 Children's Mental Chicago, IL 60611 Health Partnership 200,000. Board of Trustees of the U of PC Construction of UIC None Illinois Pediatric Dentistry 506 S Wright St, 209 Hab Mc 339 Ambulatory Surgery 1,000,000. Urbana IL 61801 Center Cook County Health & Hospital System GOV Cook County MEND None 118 N Clark St Program 156,158, Chicago, IL 60602 See continuation sheet(s) **▶** 3b Total 2,280,117,

Form 990-PF (2018)

	-,	 		
rt XVI-A		 	-Producing	

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
· ·	COUC				
<u>a</u>					
b		<u></u>			
C					· · · · · · · · · · · · · · · · · · ·
d	<u>.</u> .				
e			-	<u> </u>	
			-		· <u> </u>
g Fees and contracts from government agencies					
2 Membership dues and assessments					<del></del>
3 Interest on savings and temporary cash			14	E 2	
investments			14		
4 Dividends and interest from securities			14	3,373,103.	
5 Net rental income or (loss) from real estate:			<del> </del>		
a Debt-financed property			-		
b Not debt-financed property			1		····
6 Net rental income or (loss) from personal property					
7 Other investment income .					
8 Gain or (loss) from sales of assets other					
than inventory			18	2,163,506.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:			Ì		
a			ļ		
b					
C					
d			<u> </u>		
e					-
12 Subtotal. Add columns (b), (d), and (e)		0.		5,736,742.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	5,736,742.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	æmp	t Purposes	
Line No. Explain below how each activity for which incom			contril	outed importantly to the accord	nplishment of
the foundation's exempt purposes (other than b	y providing fu	unds for such purposes).			
N/A					
					· <u></u> -
				<u> </u>	
					·
823621 12-11-18			_		Form <b>990-PF</b> (2018)

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Part XV	Information Regarding Transfers to a Exempt Organizations	nd Transactions a	nd Relationships With Noncha	ritable		
1 Did the	e organization directly or indirectly engage in any of the followin	og with any other organizatio	on described in section 501(c)		Yes	No
	than section 501(c)(3) organizations) or in section 527, relating		m described in socion so i(e)			
•	fers from the reporting foundation to a noncharitable exempt or					
	-	gamzation of.		1a(1)		X
(1) C	·		•			X
	ther assets			1a(2)		
	transactions:			15/1		
V - 7	ales of assets to a noncharitable exempt organization	••		1b(1)		X
• •	urchases of assets from a noncharitable exempt organization	•		1b(2)		X
• •	ental of facilities, equipment, or other assets			1b(3)		X
• •	eimbursement arrangements			1b(4)	-	X
• •	oans or loan guarantees		•	1b(5)		X
, ,	erformance of services or membership or fundraising solicitation			1b(6)		<u>X</u>
	ng of facilities, equipment, mailing lists, other assets, or paid em			1c		<u> </u>
	answer to any of the above is "Yes," complete the following sche vices given by the reporting foundation. If the foundation receiv				ets,	
	in (d) the value of the goods, other assets, or services received.					
(a) Line no	(b) Amount involved (c) Name of noncharitable		(d) Description of transfers, transactions, and	d sharing arr	angeme	nts
	N/A					
				-		
-						
ın sec	foundation directly or indirectly affiliated with, or related to, one tion 501(c) (other than section 501(c)(3)) or in section 527?	or more tax-exempt organiz	zations described	Yes	X	] No
b If Yes	s," complete the following schedule.	T				
	(a) Name of organization	(b) Type of organization	(c) Description of relation	ship		
	N/A			_		
Sign Here	Inder penalties of perjury, I declare that I have examined this return, including the belief, it is true, correct, and complete Declaration of preparer (other that the belief) is true, correct, and complete Declaration of preparer (other that the belief) is true, including the belief of the beli	in taxpayer) is based on all inform $6/28/3619$	President	lay the IRS of turn with the hown below'	prepar See in:	er
	Print/Type preparer's name Preparer's s	Date '	Title Check if PTIN	1		
	1	Λ / / /	self- employed			
Paid	Elizabeth A.	. the accide		0357	217	
Prepare	Vaccariello Vaccariello	- CCC	Firm's EIN ► 36 – 3			
Use On		.U CFAS PC	Firmsein > 30-3	,,,,40	J 0	
	Firm's address ▶ 2205 Point Boulev	rard Suite 2	10			
		aru, surte 2	Phone no. 847 – 2	28-6	977	
	Elgin, IL 60123			<u>3                                    </u>		

Part XV Supplementary Information			-	·
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
Centerstone of Illinois Inc	None	PC	CHMI Planning Grant	
902 W Main Street				
W Frankfort, IL 62896				192,800.
Central Illinois Foodbank	None	PC	2017 Food Nutrition	
1937 E Cook St			Program	
Springfield, IL 62791				25,000,
Central Illinois Foodbank	None	PC	2018 Food Nutrition	
1937 E Cook St			Program	
Springfield IL 62791				25,000,
Chestnut Health Systems Inc	None	PC	Expanding Access to	
1003 Martin Luther King Dr			Integrated Care for At	
Bloomington, IL 61701			Risk Children & Youth	
			in Southwestern	
		<del></del>	Illinois	206,782.
Child's Voice	None	PC	Growing Voices Project	
180 Hansen Court				
Wood Dale, IL 60191	·			13,535,
Coles County Mental Health	None	PC	ICARE (Innovative,	
Association Inc			Coordinated	
750 Broadway Avenue East			Accessible, Research	
Mattoon, IL 61938			Based, Efficient) Kids	223,771.
Community Foundation of Kankakee	None	PC	CHMI 2.0 Planning	
River Valey	None		Grant	
701 S Harrison Ave				
Kankakee, IL 60901				200,000.
Community Health Partnership of	None	PC	15 for 15 Anniversary	
Illinois			Grant	
205 W Randolph St, Suite 2222 Chicago, IL 60606			1	15,000.
chicago, in occor				13,000.
Community Nurse Health Association	None	PC	Community Nurse Mental	
23 Calendar Ave		1	Health Access for	
La Grange, IL 60525			Children and New	
			Mothers	56,500,
Cook County Health & Hospital System	None	GOV	Cook County MEND	
118 N Clark St			Program	
Chicago, IL 60602		1		90,000.
Total from continuation sheets	<u> </u>			4,231,004,

Part XV   Supplementary Informati				
3 Grants and Contributions Paid During the		<del></del> .		
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
Eastern Illinois Foodbank	None	PC	2017 Food Nutrition	
2405 N Shore Dr Urbana IL 61802			Program	25,000
orbana, il diouz				25,000
Eastern Illinois Foodbank	None	PC	2018 Food Nutrition	
2405 N Shore Dr			Program	
Urbana, IL 61802				25,000
Enlace Chicago 2756 S Harding Ave	None	PC	School Based Mentor (SBM)	
Chicago, IL 60623			(SBH)	60,000
Erie Family Health Center Inc	None	PC	Erie Waukegan Health	
1701 W Superior St			Center Oral Health	
Chicago, IL 60622			Initiative	127,871
Esperanza Health Centers	None	PC	Chicago Safety Net Learning Collaborative	
2001 S California Ave, No 100 Chicago IL 60608			Oral Health	20,000
Family Counseling Center Inc	None	PC	Southern Illinois	
125 N Market St			Children's Integrated	
Golconda, IL 62938			Health Program	50,000
Forefront	None	PC	General Operating	
208 S LaSalle Street, Suite 1540	, one		concrat operating	
Chicago, IL 60604				12,194
Grantmakers for Effective	None	PC	General Operating	
Organizations				
1725 Desales Street, Nw, Ste 404 Washington, DC 20036				3,190
washington, DC 20036				3,130
Great Lakes Adaptive Sports	None	PC	Linking Clinical Care	
Association			Providers & Patients	
27864 Irma Lee Circle, Unit 101			to Health Promotion	
Lake Forest, IL 60045			Initiatives	15,000
Outstan Oldson B. 15			2010 7443 Water State	
Greater Chicago Food Depository 4100 W Ann Lurie Pl	None	PC	2018 Food Nutrition	
Chicago IL 60632			Program	25,000
Total from continuation sheets			-	25,000

3 Grants and Contributions Paid During the	fear (Continuation)	· · · · · · · · · · · · · · · · · · ·		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
Greater Chicago Food Depository	None	₽C	2017 Food Nutrition	
4100 W Ann Lurie Pl			Program	25 00/
Chicago, IL 60632				25,000
Greater Elgin Family Care Center	None	PC	Expansion of both	
370 Summit St			School-Based Health	
Elgin, IL 60120			Care and a Dental Home	50,000
Hancock County Health Department	None	GOV	15 for 15 Anniversary	
671 Wabash Avenue			Grant	
Carthage, IL 62321	_	ļ		15,000
Health and Medicine Policy Research	None	PC	Building Trauma Grant	
Group				
29 E Madison St Ste 602				60.000
Chicago, IL 60602				60,000
Heartland Alliance International	None	₽C	Healthy Smiles,	
208 S LaSalle St, Suite 1300			Healthy Growth	
Chicago IL 60604			2018-2019	12,500
Heritage Behavioral Health Center	None	PC	CHMI 2.0 Planning	
151 N Main St	None		Project	
Decatur, IL 62523				200,000
Howard Brown Health Center	None	PC	Integrative Mental	
4025 N Sheridan Rd			Health Care for	
Chicago, IL 60613			Lesbian, Gay,	
			Bisexual, Transgender	264 626
			and Queer youth	264,626
Ifloss Coalition	None	PC	IFLOSS Coalition	
2833 S Grand Ave E			Planning Grant	
Springfield, IL 62703				10,000
Illinois College of Optometry	None	PC	Dr. Robert and Lena	
3241 S Michigan Ave			Lewenson Pediatric and	
Chicago, IL 60616			Binocular Vision	325,000
			Center	
Kane County Health Department	None	GOV	CHMI 2.0 Planning	
719 S Batavia Ave, Bldg A			Project	
Geneva, IL 60134	1	1	l l	200,000

Part XV Supplementary Information 3. Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual,	Farradatas	Durance of areast or	
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Hamo and address (nome or business)	or substantial contributor	recipient		
Take County Health Department and	None	GOV	Mental Health First	
Lake County Health Department and Community Health Center	None	GOV	Aid Training	
3010 Grand Ave				
Waukegan IL 60085				2,135
Lake County Health Department and	None	gov	New Community Health	
Community Health Center			Center Facility in	
3010 Grand Ave			Zion	
Waukegan, IL 60085		<u> </u>		71,000
Lawndale Christian Health Center	None	₽C	West Garfield Park	
3860 W Ogden Ave			Expansion Project	
Chicago IL 60623				100,000
		1		
Legal Council for Health Justice	None	PC	New Approaches to	
17 N State St, Suite 900	None	FC	Childhood Lead	
Chicago IL 60602			Poisoning	100,000
<u> </u>				
Livingston County Commission on	None	PC	2017 CHMI Mentoring	
Children and Youth				
PO Box 504				
Pontiac, IL 61764		+		75,000
Memorial Health System	None	PC	CHMI Mentoring Year	
701 N 1st St				
Springfield IL 62781				75,000
Mahaanalikaa Bamila Gammigaa	None	PC	Healthy Minds, Healthy	
Metropolitan Family Services	None		Children, Healthy	
One North Dearborn, 10th Flr Chicago, IL 60602			Chicago (H3)	263,100
enidago, 11 voor			(113)	
Metropolitan Family Services	None	PC	Early Childhood Mental	
One North Dearborn, 10th Flr			Health Services	EA A44
Chicago, IL 60602		+		50,000
Milestone, Inc.	None	₽C	General Operating	
4060 McFarland Road				
Loves Park, IL 61111		4		1,000
NAMI of DuPage County Illinois	None	PC	Youth Mental Health	
2100 Manchester Road, Bldg B Ste 925			First Aid Project	
Wheaton, IL 60187		<u> </u>		5,000
Total from continuation sheets				

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
man al annual		na	2017 Food Nutrition	
Northern Illinois Food Bank 273 Dearborn Court	None	PC	Program	
Geneva, IL 60134				25,00
Northern Illinois Food Bank	None	PC	2018 Food Nutrition	
273 Dearborn Court			Program	
Geneva, IL 60134				25,000
Ounce of Prevention Fund	None	PC	Community Saturation	
33 W Monroe St, Suite 1200			Project for Enhanced	
Chicago IL 60603	_		Parenting	10,000
Peoria Citizens Committee for	None	PC	2017 Food Nutrition	
Economic Opportunity Inc	[100]		Program	
711 W McBean St				
Peoria, IL 61605			,	25,000
Peoria Citizens Committee for	None	PC	2018 Food Nutrition	
Economic Opportunity Inc		1	Program	
711 W McBean St		İ		
Peoria, IL 61605				25,000
Primo Center for Women and Children 6212 S Sangamon St	None	PC	CHMI 2.0 Planning Grant	
Chicago IL 60621			Grane	200,000
Quincy Public Schools, District 172	None	GOV	Universal Screening in	
1416 Maine Street			Schools Learning	
Quincy, IL 62301			Collaboration	73,00
River Bend Food Reservoir	None	PC	2017 Food Nutrition	
4040 Kimmel Drive Davenport, IA 52802			Program	25,000
PRACTIPOTE, IN 25005				
River Bend Food Reservoir	None	PC	2018 Food Nutrition	
4040 Kimmel Drive		[ ]	Program	
Davenport, IA 52802		1		25,00
Ronald McDonald House Charities Of	None	PC	General Operating	
Chicagoland and Northwest Indiana	House		Denetal Operacting	
1301 W. 22nd St, Suite 905				
Oak Brook, IL 60523				1,00
Total from continuation sheets		<del></del>	<u> </u>	

3, Grants and Contributions Paid During the	Year (Continuation)			
Recipient	show any relationship to   FOURDATION		Purpose of grant or	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
Sargent Shriver National Center on	None	₽C	Children's Oral Health	
Poverty Law			Advocacy Project	
67 E Madison St, Ste 2000 Chicago, IL 60603				25,00
Sargent Shriver National Center on	None	PC	Children's Mental	
Poverty Law	None		Health Access Advocacy	
67 E Madison St, Ste 2000			Project	80.00
Chicago, IL 60603		· · · · · · · · · · · · · · · · · · ·		80,000
Sinnissippi Centers Inc	None	PC	CHMI Mentoring Year	
325 Illinois Route 2			Grant	75.00
Dixon, IL 61021				75,000
Southwest Organizing Project	None	PC	Southwest System of	
2558 W 63rd St			Care Project	
Chicago IL 60629				100,000
St Louis Area Food Bank Inc	None	PC	2017 Food Nutrition	
70 Corporate Woods Drive			Program	
Bridgeton, MO 63044				25,000
St Louis Area Food Bank Inc	None	PC	2018 Food Nutrition	
70 Corporate Woods Drive	None		Program	
Bridgeton, MO 63044				25,000
Tazewell County Health Department	None	GOV	The Maywood Initiative	
21306 Illinois Route 9	None	BOV	The Maywood Initiative	
Tremont, IL 61568				30,00
Teen Parent Connection Inc	None	PC	Adolescent Family	
475 Taft Ave			Strengthening - Mental	
Glen Ellyn, IL 60137			Health Expansion Project	30,00
Tri-State Food Bank Inc	None	PC	2017 Food Nutrition	
801 E Michigan St Evansville, IN 47711			Program	25,00
Tri-State Food Bank Inc	None	PC	2018 Food Nutrition	
801 E Michigan St  Evansville IN 47711			Program	25,00
Total from continuation sheets				

### Illinois Children's Healthcare Foundation

03-0503425

Part XVI Supplementary Information 3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual,	Coundation	Durnana of great as	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome of business)	or substantial contributor	recipient		
Mnited Way of Central Illinois Inc	None	PC	General Operating	
1999 Wabash Ave, Ste 107		1		
Springfiled, IL 62704				1,000
WCA of Metropolitan Chicago	None	₽C	Childhood Trauma &	
N LaSalle St, Suite 1150			Executive Function	
Chicago, IL 60602			Intervention Project	40_000
······································				
Total from continuation sheets	• · · · · · · · · · · · · · ·	·		

3 Grants and Contributions Approved for Fu	ture Payment (Continuation)			
Recipient	If recipient is an individual, show any relationship to		Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
Legal Council for Health Justice	None	PC	New Approaches to	
17 N State St, Suite 900			Childhood Lead	
Chicago, IL 60602			Poisoning	500,000
Loma Linda University	None	₽C	Cook County	
PO Box 2000 Loma Linda, CA 92354			Demonstration of the MEND Program	263,059
HOMA HINGA, CA 72334			Initia I Togram	200,000
Sargent Shriver National Center on	None	PC	Children's Mental	
Poverty Law			Health Access Advocacy	
67 E Madison St, Ste 2000			Project	80,000
Chicago, IL 60603	-			80,000
Southwest Organizing Project	None	PC	Southwest System of	
2558 W 63rd St			Care	80,900
Chicago, IL 60629				80,300
				<u></u>
<u> </u>				
			· I	

Form 990-PF Intere	st on Savin	gs and Tem	porary	Cash In	vestments	Statement 1
Source		(a Reve Per B	nue	Net In	(b) vestment come	(c) Adjusted Net Income
Northern Trust - Ch	ecking		53.		53.	
Total to Part I, li	ne 3		53.		53.	
Form 990-PF	Dividends	and Inter	est fr	om Secur	ities	Statement 2
Source	Gross Amount	Capital Gains Dividend	R	(a) evenue r Books	(b) Net Inves ment Inco	_
Vanguard - Capital Gain Dividends Vanguard - Dividends	2,389. 3,573,183.			0. 573,183.	3,573,18	0. 3.
To Part I, line 4	3,575,572.	2,38	9. 3,	573,183.	3,573,18	3.
Form 990-PF		Legal	Fees			Statement 3
Description		(a) Expenses Per Books	Net I	b) nvest- Income	(c) Adjusted Net Incom	
Legal fees - Quarle Brady LLP	es &	33,572.		0.		21,663.
To Fm 990-PF, Pg 1,	 ln 16a	33,572.		0.		21,663.

Form 990-PF	Accounti	ng Fees	S	tatement 4
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Accounting fees - Varey & Vaccariello CPAs PC Audit fees - Crowe Horwath	33,235.	33,235.		0.
LLP	15,800.	3,950.		11,850.
To Form 990-PF, Pg 1, ln 16b	49,035.	37,185.		11,850.
Form 990-PF C	ther Profes	sional Fees	S	tatement 5
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Payroll service fees I/S Support	9,348. 8,420.	0.		8,598. 8,420.
Investment consulting - Vanguard Program consultation &	75,553.	75,553.	•	0.
evaluation - Dr. Bennett Leventhal	18,000.	0.		16,500.
Marketing Communications -	17,287.	0.		13,087.
Amdur Spitz & Associates				
Program consultation & evaluation - UC Regents Program consultation &	122,500.	0.		210,000.
Program consultation & evaluation - UC Regents	122,500. 11,769.	0.		210,000.

		Taxes			<u> </u>
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitah Purpose	
Section 4940 excise tax	55,197.	0.			0.
Foreign tax withheld on dividends	95,265.	95,265.			0
To Form 990-PF, Pg 1, ln 18 =	150,462.	95,265.			0.
Form 990-PF	Other E	xpenses		:tatement	
	(a)	(b)	(c)	(b)	_
	Expenses	Net Invest-	Adjusted	Charitab	
Description	Per Books	ment Income	Net Income	Purpose	:S
Equipment rental and		,			
maintenance	4,964.	0.		4,96	4
Supplies	7,497.	0.		7,49	7
Postage, shipping and					
delivery	11,240.			11,24	
Insurance	7,915.			7,83	
Software maintenance	21,666.	0.		21,66	6
Staff development and	16 500	•		16 70	
membership dues	16,790.			16,79	
Miscellaneous	4,404.			4,40	
Licenses and fees	91.			9	1
Bank charges	105.			0.71	0
Website	2,719.	0.		2,71 -	. 9
To Form 990-PF, Pg 1, ln 23	77,391.	184.		77,20	17
			langes 9		
Form 990-PF Other Increases	; in Net Agg	ATE OF WILDO HE		TALEMENT	•
Form 990-PF Other Increases	in Net Ass	ets or rund Ba	trances 5	Statement	
Form 990-PF Other Increases  Description	s in Net Ass	ets or rund Ba		Amount	
		ets or rund Ba			8

	<del>-</del>			
Form 990-PF Other Decreases in Net Asse	ets or F	und Balances	Statement	9
Description			Amount	
Unrealized loss on investments carried at	market	value	14,605,0	98.
Total to Form 990-PF, Part III, line 5			14,605,0	98.
Form 990-PF U.S. and State/City Gov	vernment	Obligations	Statement	10
U.S. Description Gov't	Other Gov't	Book Value	Fair Marke Value	t
Vanguard Total Bond Market Index Fd X	<del></del> .	9,906,593.	9,906,5	93.
Total U.S. Government Obligations	•	9,906,593.	9,906,5	93.
Total State and Municipal Government Oblig	gations			
Total to Form 990-PF, Part II, line 10a	:	9,906,593.	9,906,5	93.
Form 990-PF Corporate	Stock		Statement	11
Description		Book Value	Fair Marke Value	t
Vanguard Total Stk Mkt Indx Fd	•	59,358,714.	59,358,7	14.
Vanguard Short-Term Investment Grade Fund		8,449,232.	8,449,2	
Vanguard Inter-Term Investment Grade Fund		8,354,977. 36,922,645.	8,354,9 36,922,6	77.
Vanguard Total International Stock Fd		30,922,045.		45.
Total to Form 990-PF, Part II, line 10b	:	113,085,568.	113,085,5	68.
Form 990-PF Corporate	Bonds		Statement	12
Description		Book Value	Fair Marke Value	t
Vanguard International Bond Index Fd	,	8,477,251.	8,477,2	51.
Total to Form 990-PF, Part II, line 10c		8,477,251.	8,477,2	51.
	:			

Form 990-PF Depreciation of Ass	sets Not Held for	Investment	Statement 13
Description	Cost or Other Basis	Accumulated Depreciation	Book Value
	—————	——————————————————————————————————————	
HP LaserJet 2300N Printer	1,207.	1,207.	0.
Office Furniture	12,226.	12,226.	0.
GIFTS Grants Management			
Software	17,249.	17,249.	0.
Quickbooks for Nonprofits			
Software	497.	497.	0.
Dell 2200 MP LCD Projector	1,293.	1,293.	0.
Office Furniture	4,924.	4,924.	0.
GIFTS Grants Application			
Module Software	6,381.	6,381.	0.
Polycom Soundstation2 Speaker			
Phone	625.	625.	0.
Gifts Plus Pack Software	945.	945.	0.
Desktop Computer	921.	921.	0.
Office Furniture	1,369.	1,369.	0.
Smart Buy DL 360 - Two	4,524.	4,524.	0.
146GB 10K RPM Hard Drives -			
Six	1,890.	1,890.	0.
ASA 5505 8Port SSL	384.	384.	0.
400/800GB LT03 960 Tape Drive	2,795.	2,795.	0.
Smart Buy 6730B P8400 - Three	2,700.	2,700.	0.
Smart Buy DC5800 SFF E8400 -			
Two	1,450.	1,450.	0.
Netshelter SX 24U Deep			
Enclosure	1,025.	1,025.	0.
APC Smart-UPS 1500VA	635.	635.	0.
Laserjet P4014N MONO LASER	815.	815.	0.
Catalyst 2960 20Port Gigabit	1,900.	1,900.	0.
Installation New Computer			
Equip	3,887.	3,887.	0.
EXP Backup Exec SBS Prem Ed			
12.5 Win	689.	689.	0.
OLP Win Small Bus Svr Prem			
2008	1,579.	1,579.	0.
OLP Win Small Bus Svr Prem Cal			
Ste 2008	786.	786.	0.
OLP Win Svr Std 2008 Sngl NL	690.	690.	0.
Ayaya Phone System	4,870.	4,870.	0.
Office Furniture - Two Chairs	1,503.	1,503.	0.
Office Furniture - Three Media			
Towers	2,137.	2,137.	0.
Office Furniture - 4 Cabinets			
with Custom Top	2,002.	2,002.	0.
Office Furniture	12,385.	12,385.	0.
Office Furniture - Cabinets	•	·	
with Glass Doors	1,674.	1,674.	0.
EX7200 Multimedia Projector	757.	757.	0.

Illinois Children's Healthcare	Foundatio		03-0503425
HP EliteBook 8570p - Two	2,598.	2,598.	0.
HP Compag Elite 8300 - Two	1,598.	1,598.	0.
Microsoft Office PRO Plus 2013	1,350.	1,330.	
- Four	1,956.	1,956.	0.
Microsoft Surface	1,301.	1,235.	66.
Office Furniture - 3 Chairs	1,200.	743.	457.
Office Furniture - Desk and	1,200.	743.	±37.
Credenzia	1,858.	1,150.	708.
HP EliteBook 840 G2 Windows 7	963.	675.	288.
HP EliteBook 840 G2 Windows 7	962.	657.	305.
HP ProLiant DL360	3,831.	1,979.	1,852.
MS Windows 2012 R22 Software	1,630.	1,403.	227.
HP EliteBook 840 G3 14" - Two	2,304.	922.	1,382.
Office Furniture	2,304. 3,463.	990.	2,473.
	564.	148.	416.
Office Furniture - Chair	1,721.	573 <b>.</b>	1,148.
Laptop and Docking Station		347.	1,139.
Computer	1,486. 725.	113.	612.
Office Furniture - Chair	725.		012.
Total To Fm 990-PF, Part II, ln 1	126,874.	115,801.	11,073.
Form 990-PF	Other Assets		Statement 14
Description	Beginning of Yr Book Value		Fair Market Value
Section 4940 Excise Tax Deposit	0.	57,803.	57,803.
To Form 990-PF, Part II, line 15	0.	57,803.	57,803.
20 2222 200 22, 2322 22, 2322 23	100		
Form 990-PF Ot	her Liabilities		Statement 15
Description		BOY Amount	EOY Amount
Section 4940 Excise Tax Payable		5,383.	0.
Total to Form 990-PF, Part II, li	ne 22	5,383.	0.

	of Officers, Di Foundation Manag		State	ement 16
Name and Address	Title and Avrg Hrs/Wk			Expense
Ruth B. Rosenthal, MD ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Chair/Director 5.00	0.	0.	0.
Peter Flynn, PhD ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Vice Chair/Dire	ector 0.	0.	0.
Philip S. Cali ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Treasurer/Direction 5.00	ctor 0.	0.	0.
Floyd D. Perkins ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Secretary/Direction 5.00	ctor 0.	0.	0.
Heather Higgins Alderman ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	President 40.00	249,000.	36,317.	0.
Michael Parker ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
Terry F. Hatch, MD ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
John Jasinski ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
Juan Carlos Avila ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
Kay L. Saving, MD ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
Billie Wright Adams, MD ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.

Illinois Children's Healthcare	Foundatio		03	-0503425
Jennifer Cartland, PhD ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
Nicholas Panomitros, DDS ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
Icy Cade-Bell, MD ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
Angie Cantillon ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
Barbara H. Fiese, PhD ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
J. Kay Giles ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
George O'Neill, Jr. ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
Myrtis Sullivan, MD ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
Rudy Valdez, DM ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Director 2.00	0.	0.	0.
Peter E. Doris, MD ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Board Member 2.00	Emeritus 0.	0.	0.
C. William Pollard ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Board Member 2.00	Emeritus 0.	0.	0.
James Ryan ICHF, 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523	Board Member 2.00	Emeritus 0.	0.	0.
Totals included on 990-PF, Page 6	, Part VIII	249,000.	36,317.	0.

Form 990-PF Summary of Direct Charitable Activities Statement 17

### Activity One

The Illinois Children's Healthcare Foundation works to ensure that every child in Illinois has access to affordable and quality health care by making grants to other not-for-profit organizations that conduct programs designed to address a variety of access issues. Grantmaking is focused in two specific areas: improving the oral health of underserved children and addressing the mental health needs of children. In addition, the Foundation monitors other emerging health issues that the Board of Directors may select as focus areas in the future.

The Foundation has no direct charitable activities.

	Expenses	
-	0.	

To Form 990-PF, Part IX-A, line 1

Form 990-PF Cash Deemed Charitable Explanation Statement Statement 18
Part X, Line 4

### PART X - LINE 4 - MINIMUM INVESTMENT RETURN

The Illinois Children's Healthcare Foundation chooses to use the amount of adminstrative expenses and charitable disbursements, as shown in Part I, Line 26D of the return, as the cash deemed held for charitable activities due to the large distributions of the organization.

Form 990-PF Grant Application Submission Information Statement 19
Part XV, Lines 2a through 2d

Name and Address of Person to Whom Applications Should be Submitted

www.ilchf.org - All applicants must submit their proposals electronically.

Telephone Number

(630) 571-2555

RFPs - Request for Proposal

Email Address

Form and Content of Applications

www.ilchf.org

Review the open RFP(s) on our website and determine whether your project is a match to the projects being sought for funding. Submit a Letter of Inquiry or Proposal (based on the specific RFP timeline) with the required information by the posting deadline. Be sure to attach all of the requested documentation - incomplete applications will be eliminated from consideration. All applicants must submit their proposals electronically - including all required attachments.

### Any Submission Deadlines

Please visit our website for currently open RFPs. Submission deadlines vary from year to year.

### Restrictions and Limitations on Awards

You must be either (1) an organization that has been determined by the IRS to be an organization described in Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (the "Code"), that is a public charity described in Section 509(a)(1), (2), or (3) of the Code and that is not a Type III supporting organization within the meaning of Section 4943(f)(5)(A) of the Code; or, (2) a governmental entity described in Section 170(c)(1) or 511(a)(2)(B) of the Code. Your proposed activities must serve Illinois children.

### Name and Address of Person to Whom Applications Should be Submitted

Program Officer - Illinois Children's Healthcare Foundation 1200 Jorie Blvd, Suite 301 Oak Brook, IL 60523

Telephone Number

Name of Grant Program

(630) 571-2555

Innovation/Emerging Needs Funding

### Form and Content of Applications

To propose a project for consideration for Innovation/Emerging Needs Funding, please contact a member of the Foundation's Staff to discuss it. A short project write-up may be submitted to assist during the preliminary conversation.

### Any Submission Deadlines

There is no formal deadline to submit an application.

### Restrictions and Limitations on Awards

Eligible projects will be able to demonstrate: Innovation, Support of evidence-based research and/or best practices, Potential for statewide system change, and Impact on children's healthcare in Illinois. There is no specific dollar amount assigned to engagement funding projects, although it is anticipated that most grants will be less than \$250,000. You must be either (1) an organization that has been determined by the IRS to be an organization described in Section 501(c)(3) of the Internal Revenue Code of 1986, as amended (the "Code"), that is a public charity described in Section 509(a)(1), (2), or (3) of the Code and that is not a Type III supporting organization within the meaning of Section 4943(f)(5)(A) of the Code; or, (2) a governmental entity described in Section 170(c)(1) or 511(a)(2)(B) of the Code.

# 2018 DEPRECIATION AND AMORTIZATION REPORT

Form	Form 990-PF Page 1				ŀ		990-PF	•						
Asset No	Description	Date Acquired	Method	Life	00c>	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	7 HP LaserJet 2300N Printer	03/29/04	SL	5.00	9]	1,207.				1,207.	1,207.		0	1,207.
ĺ	9 Office Furniture	03/29/04	SL	7.00	19	12,226.				12,226.	12,226.		0	12,226.
10	GIFTS Grants Management  O Software	04/20/04	SL	3.00	16	17,249.				17,249.	17,249.		0	17,249.
1	Quickbooks for Nonprofits 11 Software	03/31/04	SL	3.00	<u>일</u>	497.				497.	497.		0	497.
1	13 Dell 2200 MP LCD Projector	01/06/05	SL	5.00	<u>9</u> ]	1,293.				1,293.	1,293.		0.	1,293.
1	15 Office Furniture	08/31/05	SL	7.00	1 <u>1</u> 9	4,924.		1		4,924.	4,924.		0.	4,924.
	GIFTS Grants Application	09/15/05	SL	3.00	16	6,381.				6,381.	6,381.		0.	6,381.
1	Polycom Soundstation2 19 Speaker Phone	01/13/06	SL	5.00	1 9	625.				625.	625.		0	625.
2	20 Gifts Plus Pack Software	12/27/06	SL	3.00	16	945.				945.	945.		0	945.
2	21 Desktop Computer	12/03/07	SL	5.00	16  -	921.	ĺ			921.	921.		0	921.
2	22 Office Furniture	12/21/07	SL	7.00	19 	1,369.				1,369.	1,369.		0	1,369.
2	23 Smart Buy DL 360 - Two	04/18/09	SL	5,00	16	4,524.				4,524.	4,524.		0	4,524.
2	146GB 10K RPM Hard Drives - 24 Six	04/18/09	SL	5.00	16	1,890.				1,890.	1,890.		0	1,890.
7	25 ASA 5505 8Port SSL	04/18/09	SL	5.00	17 P	384.				384.	384.		0	384.
2	400/800GB LT03 960 Tape 26 Drive	04/18/09	SL	5.00	16	2,795.				2,795.	2,795.		0	2,795.
2	Smart Buy 6730B P8400 -	04/18/09	SL	5.00	15	2,700.				2,700.	2,700.		0	2,700.
7	Smart Buy DC5800 SFF E8400 -28 Two	04/18/09	SL	5.00	16	1,450.				1,450.	1,450.	:	0	1,450.
2	Netshelter SX 24U Deep 29 Enclosure	04/18/09 SL	SL	5.00	16	1,025.				1,025.	1,025.		0.	1,025.
828111	828111 04-01-18					(D) - Asset disposed	pesod		•	ITC, Salvage,	Bonus, Comn	nercial Revita	* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone	tion, GO Zone

## 2018 DEPRECIATION AND AMORTIZATION REPORT

orm 95	form 990-PF Page 1				ļ	ŀ	)66	990-PF		•					
Asset	Description	Date Acquired	Method	Lıfe	006>	No.	Unadjusted Bu Cost Or Basis %	Bus Sect % Exp Excl	Section 179 F Expense	Reduction in Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
30	APC Smart-UPS 1500VA	04/18/09	ıs	5,00		9	635.		1		635,	635.		0	635.
31	Laserjet P4014N MONO LASER	04/18/09	SL	5.00	<u></u>	ا او	815.	-			815.	815.		0	815.
32	Catalyst 2960 20Port Glgabit	04/18/09	IS	5.00		v	1,900.				1,900.	1,900.		0	1,900.
33	Installation New Computer Equip	04/18/09	SL	5.00		9	3,887.				3,887.	3,887.		0	3,887.
34		04/18/09	SL	3.00	-1	9	689.	-			689.	689.		0	689.
35		04/18/09	SL	3.00	<u> </u>	9	1,579.		! !		1,579.	1,579.		0	1,579.
36		04/18/09	SL	3.00		9	786.				786.	786.		0	786.
37	OLP Win	04/18/09	SL	3,00	<u>''</u>	ا ا	690.				690.	690.		0	.069
38	Ayaya Phone System	60/60/20	SL	5.00		9	4,870.				4,870.	4,870.		0	4,870.
39		09/02/09	IS	7.00		· او ا	1,503.				1,503.	1,503.		0	1,503.
40		09/02/09	SL	7.00	=	9	2,137.				2,137.	2,137.		0	2,137.
41		60/60/60	SL	7.00		ا ا او ا	2,002.	ļ			2,002.	2,002.		0.	2,002.
42		01/19/10	SL	7.00		9	12,385.				12,385.	12,385.		0	12,385.
43	Office Furniture - Cabinets with Glass Doors	10/01/10	SI	7.00	<u>'                                    </u>	ا ا او ا	1,674.				1,674.	1,674.		0	1,674.
44		02/22/11	SL	5.00	<u></u>	9	757.				757.	757.		0	757.
45	HP EliteBook 8570p - Two	02/01/13	SL	5.00	<del></del>	او	2,598.	<u> </u>			2,598.	2,555.		43.	2,598.
46	HP Compag Elite 8300 - Two	02/01/13	SL	5.00		9	1,598.				1,598.	1,572.		26.	1,598.
47	Microsoft Office PRO Plus 2013 - Four	02/01/13	SL	3,00	<del></del>	9	1,956.				1,956.	1,956.		0.	1,956.
828111 04-01-18						<u>(a)</u>	(D) - Asset disposed	þə		•	ITC, Salvage,	ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone	nercial Revita	ization Deduct	tion, GO Zone

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# 2018 DEPRECIATION AND AMORTIZATION REPORT

Form 9	990-PF Page 1						990-PF							
Asset No	Description	Date Acquired	Method	Lıfe	No c >	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
48	Microsoft Surface	04/01/14	SL	5.00	16	1,301.				1,301.	975.		260.	1,235.
49	Office Furniture - 3 Chairs	09/01/14	SL	7.00	16	1,200.				1,200.	571.		172.	743.
50	Office Furniture - Desk and Credenzia	09/01/14	SL	7.00	16	1,858.				1,858.	884.		266.	1,150.
51		07/01/15		5.00	1 91	963.		,		963.	482.		193.	675.
52		08/01/15	SL	5.00	16	962.	j			962.	465.		192.	657.
53	HP ProLiant DL360	06/01/16	SL	2.00	116	3,831.				3,831.	1,213.		766.	1,979.
54	MS Windows 2012 R22 Software	06/01/16	SL	3.00	19	1,630.				1,630.	860.		543.	1,403.
55	HP EliteBook 840 G3 14" - Two	01/01/17	SL	5.00	16	2,304.				2,304.	461.		461.	922.
56	Office Furniture	01/01/17	SI	7.00	<u>  1</u>	3,463.	Ì			3,463.	495.		495.	990.
57	Office Furniture - Chair	03/01/17	SI	7.00	19	564.				564.	67.		81.	148.
58	Laptop and Docking Station	05/01/17	SI	2.00	<u>일</u> 	1,721.				1,721.	229.		344.	573.
59	Computer	11/01/17	SL	5.00	12 	1,486.				1,486.	50.		297.	347.
9	Office Furniture - Chair	12/01/17	SI	7.00	<u>1</u>	725.				725.	9.		104.	113,
	* Total 990-PF Pg 1 Depr		Ì	Ì	<u> </u>	126,874.				126,874.	111,558.		4,243.	115,801.
					-									
					<u> </u>									
					1									
					1									
828111 04-01-18	04-01-18					(D) - Asset disposed	pesod		*	ITC, Salvage,	Bonus, Comn	nercial Revita	dization Deduc	* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone