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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491134024169

OMB No 1545-0052

## **Return of Private Foundation**

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

2018

Open to Public Inspection

For	caler	ndar year 2018, or tax year	beginning 01-01-20	018 , a	nd ending 12-31	-2018			
		indation ID KIRSTEN CUNNINGHAM	A Employer ı	A Employer identification number					
		BLE FOUNDATION	20-0446388	20-0446388					
		l street (or P O box number if mail is n TH GREEN STREET	<b>B</b> Telephone r	B Telephone number (see instructions)					
					(630) 617-910	02			
		i, state or province, country, and ZIP or L 60607	foreign postal code		<b>C</b> If exemption	n application is pendin	g, check here		
G CI	neck al	I that apply	☐ Initial return of a	former public charity	<b>D 1.</b> Foreign o	rganizations, check h	ere 🗆		
		☐ Final return	Amended return			organizations meeting			
		Address chan	ge 🔲 Name change		test, che	ck here and attach co	mputation 🕨 🔲		
H C	neck ty	pe of organization 🗹 Section !	501(c)(3) exempt private	foundation		oundation status was on 507(b)(1)(A), chec			
	Section	1 4947(a)(1) nonexempt charitable	e trust 🔲 Other taxabl	e private foundation					
of	year (f	xet value of all assets at end rom Part II, col (c), ▶\$ 3,748,058	Other (specify)	Cash Accru	F If the found under section	dation is in a 60-mont on 507(b)(1)(B), chec			
			(Part I, column (d) must	Te on cash basis )		1	,		
Pa	rt I	Analysis of Revenue and of amounts in columns (b), (c), and (equal the amounts in column (a) (see	(d) may not necessarily	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc , schedule)	received (attach	0					
	2	Check ► ✓ If the foundation is	not required to attach						
	_								
	3	Interest on savings and tempora Dividends and interest from secu	•	75,644	75,64	1			
	<del>1</del>   5a	Gross rents	inities	73,044	75,04	1			
	b	Net rental income or (loss)							
<u>e</u>	6a	Net gain or (loss) from sale of as	ssets not on line 10						
Revenue	ь	Gross sales price for all assets or							
Şe√	7	Capital gain net income (from Pa				0			
_	8	Net short-term capital gain .							
	9	Income modifications							
	10a	Gross sales less returns and allow	wances						
	b	Less Cost of goods sold							
	С	Gross profit or (loss) (attach sch	edule)						
	11	Other income (attach schedule)							
	12	<b>Total.</b> Add lines 1 through 11		75,644	75,64	4			
	13	Compensation of officers, director	ors, trustees, etc	0		0	0		
	14	Other employee salaries and wag	ges						
ses.	15	Pension plans, employee benefits							
ens	16a	Legal fees (attach schedule) .							
and Administrative Expenses	b	Accounting fees (attach schedule	•				ļ		
/e [	C	Other professional fees (attach s	chedule)						
atı	17	Interest		08-1			_		
ist.	18	Taxes (attach schedule) (see ins	,	1,187		0	0		
Ē	19	Depreciation (attach schedule) a	na aepietion						
Adı	20	Occupancy							
ם י	21	Travel, conferences, and meeting	-				<u> </u>		
g d	22	Printing and publications Other expenses (attach schedule		<b>9</b> 60		0	60		
Operating		Total operating and administr	•	<u>هـُـــا</u>		<u> </u>			
era	24	Add lines 13 through 23		1,247		0	60		
do	25	Contributions, gifts, grants paid		168,216			168,216		
	26	Total expenses and disburser	ments. Add lines 24 and	100,210			100,210		
	27	25 Subtract line 36 from line 13		169,463		0	168,276		
	27	Subtract line 26 from line 12  Excess of revenue over exper	sees and						
	a	disbursements		-93,819					
	Ь	Net investment income (if neg	•		75,64	4			
	С	Adjusted net income (if negati	<u> </u>						
For	Paper	work Reduction Act Notice, se	e instructions.		Cat No 11289	X Foi	m <b>990-PF</b> (2018)		

324

2,092,600

2,046,660

2,046,660 Form **990-PF** (2018)

-93,819

47,879

2

3

4

5

6

disqualified persons (attach schedule) (see instructions) . . . . . Other notes and loans receivable (attach schedule)

Investments—U S and state government obligations (attach schedule) 

Investments—corporate bonds (attach schedule) . . . . . . . .

Investments—land, buildings, and equipment basis ▶ \_\_\_

Less accumulated depreciation (attach schedule) ▶ \_\_\_\_\_\_

Investments—other (attach schedule) . . . . . . .

Less allowance for doubtful accounts ▶

of-year figure reported on prior year's return)

Other increases not included in line 2 (itemize) -

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Enter amount from Part I, line 27a . .

Decreases not included in line 2 (itemize) ▶

S	
Asset	

7

8

9

10a

b

C

11

12

13

2

3

		,	1		
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe >)			
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	2,092,600	2,046,660	3,748,058
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>e</u>	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe >)			
	23	Total liabilities(add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here			
es		and complete lines 24 through 26 and lines 30 and 31.			
anc	24	Unrestricted	2,092,600	2,046,660	
Bal	25	Temporarily restricted			
or Fund Balance	26	Permanently restricted			
Ξ		Foundations that do not follow SFAS 117, check here			
		and complete lines 27 through 31.			
ssets	27	Capital stock, trust principal, or current funds			
SS	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
بخ	29	Retained earnings, accumulated income, endowment, or other funds			
Set	30	Total net assets or fund balances (see instructions)	2,092,600	2,046,660	
	31	Total liabilities and net assets/fund balances (see instructions) .	2,092,600	2,046,660	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
_				. [	

ا م		<b> </b>		
Liabilities	9	Deferred revenue		
불   20	0	Loans from officers, directors, trustees, and other disqualified persons		
를   2:	1	Mortgages and other notes payable (attach schedule)		
ے <sub>  22</sub>	2	Other liabilities (describe )		
23	3	Total liabilities(add lines 17 through 22)	0	0
>		Foundations that follow SFAS 117, check here ▶ ☑		
2		and complete lines 24 through 26 and lines 30 and 31.		
24	4	Unrestricted	2,092,600	2,046,660
24 21 21	5	Temporarily restricted		
20	6	Permanently restricted		
		Foundations that do not follow SFAS 117, check here		
;		and complete lines 27 through 31.		
27	7	Capital stock, trust principal, or current funds		
28	8	Paid-in or capital surplus, or land, bldg , and equipment fund		
29	9	Retained earnings, accumulated income, endowment, or other funds		
Net Assets 25 26 27 28 29 29	0	Total net assets or fund balances (see instructions)	2,092,600	2,046,660
3:	1	Total liabilities and net assets/fund balances (see instructions) .	2,092,600	2,046,660
Part	100	Analysis of Changes in Net Assets or Fund Balances		
1	Total	net assets or fund balances at beginning of year—Part II, column (a), line	30 (must agree with	end-

	Gross sales price	Depreciation allowed (or allowable)	Cost or other basis plus expense of sale			Gain or (loss) (e) plus (f) minus (g)	
а							
b							
С							
d							
е							
	Complete only for assets show	ing gain in column (h) and owned by	y the foundation on 12/31/69			(1)	
	<b>(i)</b> F M V as of 12/31/69	<b>(j)</b> Adjusted basıs as of 12/31/69	(k) Excess of col(ı) over col(յ), ıf any		Gains (Col (h) gain minus col (k), but not less than -0-) Losses (from col (h))		
a							
b							
С							
d							
e							
2	Capital gain net income or (ne		n, also enter in Part I, line 7 ss), enter -0- in Part I, line 7	}	2		
3	• •	(loss) as defined in sections 1222(5 ne 8, column (c) (see instructions)	. , .				

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income ) If section 4940(d)(2) applies, leave this part blank

in Part I, line 8

(a)

Base period years Calendar

year (or tax year beginning in)

2017

2016

2015

2014

2013

2 Total of line 1, column (d)

5 Multiply line 4 by line 3

instructions

Part V

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

number of years the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5

6 Enter 1% of net investment income (1% of Part I, line 27b) .

8 Enter qualifying distributions from Part XII, line 4 , . . . . .

Adjusted qualifying distributions

3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the

. . . . . . . . . . .

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

Enter the appropriate amount in each column for each year, see instructions before making any entries

84,060

55,848

51,337

37,686

30,927

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI

Net value of noncharitable-use assets

3,309,939

1,696,963

1,106,034

1,036,460

799,474

2

3

4

5

6

7

8

Page 3

(d)

Date sold

Yes 🗸 No

0 025396

0 032911

0 046415

0 036360

0 038684

0 179766

0 035953

4,308,878

154,917

155,673

168,276

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756

(d) Distribution ratio

(col (b) divided by col (c))

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Part VIII Information About Officers, Directors, Trustees, F and Contractors (continued)	Foundation Managers, Highly Pa	nid Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		- 0
Part IX-A Summary of Direct Charitable Activities		0
List the foundation's four largest direct charitable activities during the tax year. Include releving anizations and other beneficiaries served, conferences convened, research papers produc		of Expenses
1	,	
2		
3		
4		
		_
Part IX-B Summary of Program-Related Investments (see in	nstructions)	
Describe the two largest program-related investments made by the foundation during the	e tax year on lines 1 and 2	Amount
1		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		•
Iotal. Add lines 1 through 3		Form <b>990-PF</b> (2018)

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

Amounts set aside for specific charitable projects that satisfy the

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

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

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

3

4

5

2

За 3h

4

5

168.276

167.520

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214,688

4,588

210,100

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0

Form	99	0-PF	(20
Pa	rt	XII	1

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XIII	Undistributed Income (	see	instructions)	

1 Distributable amount for 2018 from Part XI, line 7

2 Undistributed income, if any, as of the end of 2018

a Enter amount for 2017 only. . . . . . **b** Total for prior years a From 2013. . . . .

Excess distributions carryover, if any, to 2018 **b** From 2014. . . .

(a)

Corpus

0

0

(b)

Years prior to 2017

(c)

2017

163,688

163,688

c From 2015. . . d From 2016. . . . . . e From 2017. . . . . f Total of lines 3a through e. . . . . . . .

XII, line 4 ▶ \$

4 Qualifying distributions for 2018 from Part a Applied to 2017, but not more than line 2a **b** Applied to undistributed income of prior years

(Election required—see instructions). . . . .

c Treated as distributions out of corpus (Election

5 Excess distributions carryover applied to 2018 (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:

**d** Applied to 2018 distributable amount. . . . . e Remaining amount distributed out of corpus

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 . . . . .

7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . 8 Excess distributions carryover from 2013 not

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . . **b** Excess from 2015. . c Excess from 2016. . . . d Excess from 2017. . . e Excess from 2018. . .

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

Subtract lines 7 and 8 from line 6a . . . . . .



Enter gross amounts unless otherwise indicated		Unrelated b	ısıness ıncome	Excluded by section	512, 513, or 514	(e) Related or exempt
_	service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	function income (See instructions
	and contracts from government agencies					
_	rship dues and assessments					
Interest investm	on savings and temporary cash					
Dividen	ds and interest from securities			14	75,644	
Net ren	tal income or (loss) from real estate					
	financed property					
	ebt-financed property					
	tal income or (loss) from personal property					
	ovestment income (loss) from sales of assets other than					
invento	• /					
	ome or (loss) from special events					
	profit or (loss) from sales of inventory					
Other r	evenue a					
с						
		1				
d						
е						
e Subtota	al Add columns (b), (d), and (e).		0		75,644	
e ! Subtota ! <b>Total.</b> /	Add columns (b), (d), and (e)				75,644 <b>3</b>	75,64
e Subtota Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations )		13		
e Subtota Total. / (See wo art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) orksheet in line 13 instructions to verify calcu	lations )  le Accomplish  income is report	ment of Exempled in column (e) of	pt Purposes Fart XVI-A contribu	3ited importantly to	75,64
eSubtota Total. / (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  brksheet in line 13 instructions to verify calcums.  Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations )  le Accomplish  income is report	ment of Exempled in column (e) of	pt Purposes Fart XVI-A contribu	3ited importantly to	75,64
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eSubtota Total. / (See wo art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  brksheet in line 13 instructions to verify calcums.  Belationship of Activities to the Explain below how each activity for which the accomplishment of the foundation's explain below.	lations )  le Accomplish  income is report	ment of Exempled in column (e) of	pt Purposes Fart XVI-A contribu	3ited importantly to	75,64
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(===	-0/		
VII	Information Regarding Transfers To and Transactions and Relationships With Noncharit Exempt Organizations	able	

Part XV	П	Exempt Organi		ransı	rers 10 a	and Transaction	ons and	Relatio	nsnips with Non	icnaritad	e		
		inization directly or in nan section 501(c)(3)	directly enga							on 501		Yes	No
a Transfe	rs fro	om the reporting foun	dation to a n	oncha	ırıtable exe	empt organization	n of						
<b>(1)</b> Ca										. 1a	(1)		No
(2) Ot	her a	assets								. 1a	(2)		No
<b>b</b> Other tr	ransa	actions											
<b>(1)</b> Sa	ales d	f assets to a nonchari	table exemp	t orga	nization.					.  1ь	(1)		No
(2) Pu	ırcha	ses of assets from a n	Ioncharitable	exem	npt organiz	zation				1b			No
		of facilities, equipmen			-					1b	•		No
( <b>4</b> ) Re	eimbi	ırsement arrangemen	ts							. 1b	•		No
		or loan guarantees.								. 1b	•		No
		ance of services or m								. 1b	(6)		No
c Sharing	of fa	acilities, equipment, n	nailing lists, d	other .	assets, or	paid employees.				. 1	С		No
_		er to any of the above								narket valu			
of the g	goods	s, other assets, or ser	vices given b	y the	reporting	foundation If the	foundatio	n receive	d less than fair mark	ket value			
ın any t	trans	action or sharing arra	ngement, sh	ow in	column (d	<b>i)</b> the value of th	e goods, of	ther asse	ts, or services receiv	ved .			
(a) Line No	1 .	(b) Amount involved	(c) Name of	nonch:	arıtable eve	mpt organization	(d) Des	crintion of	transfers, transactions,	and sharing	arrai	ngemen	ts
(2) 2	1	(2) runoune involved	(c) Hame of		arreasie exe	pe organization	(4) 500	on peron or	cranorers, cranoasciens,	and onamig		-ge-men	
	<u> </u>												
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	-												
	-												
D T 11 C	<del></del>			1 11		1.		1					
		ation directly or indire	•		•					<b>□</b> 1			
		section 501(c) (other		า 501(	(c)(3)) or i	in section 527? .			Ц Ye	es 🗹 N	)		
<b>b</b> If "Yes,	" cor	nplete the following so											
		(a) Name of organization	on		(L	<b>b)</b> Type of organizat	ion		(c) Description	of relationsh	p		
Tu	Inder	penalties of perjury,	I declare tha	t I hav	ve eyamın	ed this return in	cluding acc	romnanvi	ng schedules and st	atements a	nd t	to the	hest
		knowledge and belief											
	hich	preparer has any kno	wledge										
Sign	**	****				2019-05-13	*	****		May the IF	S dı	scuss th	115
Here 👠						2017 03 13	\			return with the p	epar	er show	vn
	S.	gnature of officer or t	rustee			Date	<b>,</b>	ītle		below		_	
	١١	gnature or officer or th	ustee			Date	'	itie		(see ınstr	12	∕ Yes I	□No
		Print/Type preparer's	name	Dron	arer's Sigr	aature				OTINI			
		Time, Type preparers	i ilaille	r ieb	arers Sigi	iatui e	Date		Check if self-	PTIN			
									employed ▶ □	P01	043	075	
Paid		KATHLEEN PUHL					2019-	-05-13					
Prepare	er	F 5 FO:11	V 11.C										
Use On		Firm's name ► FGM	K LLC						F	Firm's EIN	36-	-29296	01
		Fırm's address ▶ 28	01 LAKESIDE	DRI\	VE 3RD F∟	OOR							
										Phone no (	347	374-0	1400
		BA	NNOCKBURN	1, IL (	60015					none no (	J-77.	, 3/4-0	700
	l												

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
AKRON CHILDREN'S HOSPITAL	NONE	OUAL IFIED	UNRESTRICTED FOR GENERAL	1.000

214 W BOWERY ST AKRON, OH 44308	NONE	PUBLIC CHA	USE	1,000
ALZHEIMERS ASSOCIATION 8430 W BRYN MAWR SUITE 800	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE	250

711(1(0)1) 011 11300				
ALZHEIMERS ASSOCIATION 8430 W BRYN MAWR SUITE 800 CHICAGO, IL 60631	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE	250
AMERICAN CANCER SOCIETY	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL	5,100

CHICAGO, IL 60631		oblic city	031	
AMERICAN CANCER SOCIETY 100 TRI STATE INTERNATIONAL LINCOLNSHIRE, IL 60069	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY	5,100

0.110.100/12 00002				
AMERICAN CANCER SOCIETY 100 TRI STATE INTERNATIONAL LINCOLNSHIRE, IL 60069	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY	5,100
Total			▶ 3a	168,216

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

a Paid during the year				
ANDREW WEISHAR FOUNDATION 4948 145TH ST MIDLOTHIAN, IL 60445	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE	2,500
BIG SHOULDERS FUND	NONE	OUALIFIED	UNRESTRICTED FOR GENERAL	19.333

212 W VAN BUREN ST 900 CHICAGO, IL 60607	NONE	PUBLIC CHA	USE
BREAKTHROUGH URBAN MINISTRIES 3330 W CARROLL AVE	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY

Total .

or substantial contributor

CHICAGO, IL 60607		PORLIC CHA	USE	
BREAKTHROUGH URBAN MINISTRIES 3330 W CARROLL AVE CHICAGO IL 60624	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY	4,

CHICAGO, IL 60607		POBLIC CHA	USE	
BREAKTHROUGH URBAN MINISTRIES 3330 W CARROLL AVE CHICAGO, IL 60624	NONE	L	UNRESTRICTED FOR GENERAL USE OF CHARITY	4,833

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CARENET PREGNANCY SERVICES OF NONE QUALIFIED UNRESTRICTED FOR GENERAL 9.061

515 OGDEN AVENUE STE 200 DOWNERS GROVE, IL 60515		PUBLIC CHA	USE OF CHARITY	
CATHOLIC CHARITIES OF THE ARCHDIOCESE OF CHICAGO 721 N LASALLE STREET CHICAGO, IL 60654	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY	9,921

ARCHDIOCESE OF CHICAGO 721 N LASALLE STREET CHICAGO, IL 60654		PUBLIC CHA	USE OF CHARITY	
CATHOLIC RELIEF SERVICES 711 W MONROE ST CHICAGO, IL 60661	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE	9,921

Total			▶ 3a	168,216
CATHOLIC RELIEF SERVICES 711 W MONROE ST CHICAGO, IL 60661	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE	9,921
CHICAGO, IL 60654				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Purpose of grant or Recipient If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CENTER FOR WRONGEUL CONVICTIONS NONE UNRESTRICTED FOR GENERAL 2,500 OUALIFIED 375 EAST CHICAGO AVE PUBLIC CHA USE OF CHARITY

CHICAGO, IL 60611				
CONSERVATION FUND 53 W JACKSON BLVD CHICAGO, IL 60604	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE	4,833
DIOCESE OF JOLIET16555 WEBER RD	NONE	QUALIFIED	UNRESTRICTED FOR GENERAL	2,544

168,216

53 W JACKSON BLVD CHICAGO, IL 60604	NONE	PUBLIC CHA	USE	4,8.
DIOCESE OF JOLIET16555 WEBER RD	NONE	QUALIFIED	UNRESTRICTED FOR GENERAL	2,5

,				
	NONE	~ · · · · · · · · · · · · · · · · · · ·	UNRESTRICTED FOR GENERAL	2,54
CREST HILL, IL 60403		PUBLIC CHA	USE OF CHARITY	

DIOCESE OF JOLIET16555 WEBER RD	NONE	QUALIFIED	UNRESTRICTED FOR GENERAL	2,5
CREST HILL, IL 60403		PUBLIC CHA	USE OF CHARITY	·

Total . .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
DIRECT RELIEF 6100 WALLACE BECKNELL RD SANTA BARBARA, CA 93117	NONE	QUALIFIED PUBLIC CHA	UNRESTICTED FOR GENERAL USE	4,833

SANTA BARBARA, CA 93117				
DOCTORS WITHOUT BOARDERS 333 7TH AVE NEW YORK, NY 10001	NONE	~	UNRESTRICTED FOR GENERAL USE OF CHARITY	4,833
ENTERPRISE COMMUNITY PARTNERS	NONE	QUALIFIED	UNRESTRICTED FOR GENERAL	5.088

333 7TH AVE NEW YORK, NY 10001	inone.	PUBLIC CHA	USE OF CHARITY	1,033
ENTERPRISE COMMUNITY PARTNERS 230 W MONROE ST 1250 CHICAGO, FL 60606	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE	5,088

168,216

NEW YORK, NY 10001		PUBLIC CHA	USE OF CHARITY	
ENTERPRISE COMMUNITY PARTNERS 230 W MONROE ST 1250 CHICAGO, FL 60606	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE	5,0

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
EVANS SCHOLARS FOUNDATION ONE BRIAR ROAD	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE	4,833

ONE BRIAR ROAD GOLF, IL 60029		PUBLIC CHA	USE	
GIVE THE KIDS THE WORLD VILLAGE 110 S BASS RD KISSIMMEE, FL 34736	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE	4,83
·				

210 S BASS RD KISSIMMEE, FL 34736	NONE	PUBLIC CHA	USE	4,833
GREATER CHICAGO FOOD DEPOSITORY 4100 W ANN LURIE PL CHICAGO II 60632	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY	9,920

KISSIMMEE, FL 34736		PUBLIC CHA	035	
GREATER CHICAGO FOOD DEPOSITORY 4100 W ANN LURIE PL CHICAGO, IL 60632	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY	9,920

168,216

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year HINSDALE HUMANE SOCIETY NONE QUALIFIED UNRESTRICTED FOR GENERAL 1.018 22 N ELM ST PUBLIC CHA USE OF CHARITY HINSDALE, IL 60521

INSPIRATION CORPORATION 4554 N BROADWAY STE 207 CHICAGO, IL 60640	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY	4,833
KISHWAUKEE HOSPITAL CANCER CENTER 10 HEALTH SERVICES DRIVE DEKALB, IL 60115	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE	250

Total . .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

any foundation manager

or substantial contributor

Name and address (home or business)

a Paid during the year				
LURIE CHILDREN'S HOSPITAL OF CHICAGO 225 E CHICAGO AVE CHICAGO, IL 60611	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY	250

recipient

CHICAGO 225 E CHICAGO AVE CHICAGO, IL 60611		PUBLIC CHA	USE OF CHARITY	
MARCH OF DIMES 141 W JACKSON BLVD SUITE 1875	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE	1,000

0.110/100/11				
MARCH OF DIMES 141 W JACKSON BLVD SUITE 1875 CHICAGO, IL 60604	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE	1,000
MISERICORDIA6300 N RIDGE AVE CHICAGO, IL 60060	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY	4,833

1	141 W JACKSON BLVD SUITE 1875 CHICAGO, IL 60604		PUBLIC CHA	USE	
ı	MISERICORDIA6300 N RIDGE AVE CHICAGO, IL 60060	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY	4,833

MISERICORDIA6300 N RIDGE AVE CHICAGO, IL 60060	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY	4,83
Total			▶ 3a	168,216

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

a Paid during the year				
NATIONAL PEDIATRIC CANCER FOUNDATION	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE	4,833

55550 EXECUTIVE DR TAMPA, FL 33609				
PAWS CHICAGO1997 N CLYBOURN AVE CHICAGO, IL 60614	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY	2,544

PAWS CHICAGO1997 N CLYBOURN AVE CHICAGO, IL 60614	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY	2,544
RONALD MCDONALD HOUSE 211 E GRAND AVE CHICAGO, IL 60611	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY	4,833

Total			▶ 3a	168,216
RONALD MCDONALD HOUSE 211 E GRAND AVE CHICAGO, IL 60611	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY	4,833
PAWS CHICAGO1997 N CLYBOURN AVE CHICAGO, IL 60614	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY	2,544

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SAINT ANN SCHOOL2211 W 18TH PL NONE OUALIFIED UNRESTRICTED FOR GENERAL 1.000 CHICAGO, IL 60608 PUBLIC CHA USE OF CHARITY

SHARON ROBINSON ONE HUDSON SQUARE 75 VARICK STREET 2ND FLOOR NEW YORK, NY 10013	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE	1,000
SPONSORS FOR EDUCATIONAL OPPORTUNITY 55 EXCHANGE PLACE FLOOR 6 NEW YORK, NY 10005	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE	9,921

Total . .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ST ISAAC IOGUES8149 W GOLF ROAD NONE OUALIFIED 17,699 UNRESTRICTED FOR GENERAL NILES, IL 60714 PUBLIC CHA USE OF CHARITY

THE O'BRIEN SCHOOL FOR THE MASSAI 527 W MAPLE ST HINSDALE, IL 60521	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY	1,000
TRINITY FOUNDATION 100 N GOUGAR ROAD JOLIET, IL 60432	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY	100

Total . .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

a Paid during the year				
UMOJA STUDENT DEVELOPMENT 954 W WASHINGTON BLVD 225 CHICAGO, IL 60607	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY	4,966

ICAGO, IL 60607			
EZ (CHICAGO PUBLIC RADIO) 3 EAST GRAND AVE NAVY PIER 1CAGO, IL 60611	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY

or substantial contributor

WBEZ (CHICAGO PUBLIC RADIO) 848 EAST GRAND AVE NAVY PIER CHICAGO, IL 60611	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY	1,000
WTTW (CHICAGO PUBLIC TELEVISION) 5400 N SAINT LOUIS AVE	NONE	~ · · · · · · · · · · · · · · · · · · ·	UNRESTRICTED FOR GENERAL USE OF CHARITY	1,000

CHICAGO, IL 60611				
WTTW (CHICAGO PUBLIC TELEVISION) 5400 N SAINT LOUIS AVE CHICAGO, IL 60625	NONE	_	UNRESTRICTED FOR GENERAL USE OF CHARITY	1,000

<u>'</u>				
NTTW (CHICAGO PUBLIC TELEVISION) 5400 N SAINT LOUIS AVE CHICAGO, IL 60625	NONE	QUALIFIED PUBLIC CHA	UNRESTRICTED FOR GENERAL USE OF CHARITY	1,00
Total			▶ 3a	168,216

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLI	N: 93491134024169	
TY 2018 Other Expenses Schedule					
•					
Name:	DAVID AND KIR	STEN CUNNING	HAM		
	CHARITABLE FO	OUNDATION			
EIN:	20-0446388				
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
FILING FEES	25	0		25	
BANK FEE	35	0		35	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491134024169		
TY 2018 Other Increases Schedule					
Name:	DAVID AND KI	IRSTEN CUNNINGHAM			
	CHARITABLE F	OUNDATION			
EIN:	20-0446388				
De	escription		Amount		
UNREALIZED GAIN ADJUSTMENT			47,879		

efile GRAPHIC print - DO NOT	PROCESS	As Filed Data	-	DLI	N: 93491134024169	
TY 2018 Taxes Schedule						
	Name:	DAVID AND	KIRSTEN CUNNIN	GHAM		
	CHARITABLE FOUNDATION					
	EIN:	20-0446388				
Category	An	nount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
EXCISE TAX		1,187	0		0	