## **Return of Private Foundation**

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

Department of the Treasury Internal Revenue Service

▶ 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. Open to Public Inspection

Fo	<u>r çalen</u>	ndar year 2018 or tax year beginning	, 20 <sup>-</sup>	18, and	ending		, 20	
Nar	ne of fou	indation .			A Employe	er Identification numb	er	
NE	EW_VI	SIONS FOUNDATION			36-4	291720		
Ñur	nber and	street (or P O box number if mail is not delivered to street address)	Roo	m/suite	B Telephor	ne number (see instruct	ions)	
4 8	485 HALF DAY ROAD V 200V				(847)883-9700			
		, state or province, country, and ZIP or foreign postal code				tion application is pend	ling check here ▶ □	6
Вί	JFFAL	O GROVE IL 60089 '				application to police	9, 000 ,10.07	v
			n of a former publi	c charity	D 1. Foreig	n organizations, check	here ▶□	
			•	··,	ľ		_	
		☐ Address change ☐ Name cha	nge			n organizations meeting here and attach compi		•
Н	Check	type of organization: Section 501(c)(3) exempt p	<u>.                                </u>	nl.	E If private	foundation status was	terminated under	
		on 4947(a)(1) nonexempt charitable trust   Other tax			section 5	07(b)(1)(A), check here	▶□	
ī		narket value of all assets at   J Accounting method				data		
		f year (from Part II, col. (c), Other (specify)				ndation is in a 60-mont ction 507(b)(1)(B), chec		
	line 16) ▶ \$ 4,068,063. (Part I, column (d) must be on cash basis)				. –			
P	art I			[	L		(d) Disbursements	
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment	(c) Adjusted net	for charitable	•
		the amounts in column (a) (see instructions))	books	"	ncome	ıncome	purposes (cash basis only)	
	1	Contributions, gifts, grants, etc., received (attach schedule)	1,055,798:	WHITE ON THE				
	2	Check ► ☐ if the foundation is not required to attach Sch. B		**************************************				•
	3	Interest on savings and temporary cash investments	y contrary (project the contrary (1) (1) (1) (1) (1)		- THE CONTRACTOR AND THE	LIC COSTAL CODAL ALECCASINE CONTRACTOR CONTR		
	4	Dividends and interest from securities	57,277.	-	59,567:	,	A CONTRACTOR OF THE SECOND	
?	5a	Gross rents	3172111		37,307 F			
Í	b	Net rental income or (loss)						
4 60	6a	Net gain or (loss) from sale of assets not on line 10	95,160.			шининаданданнадандарындарымадынды		
Ę	Ь	Gross sales price for all assets on line 6a 1, 781, 513.	33/100.	T AKE	Skinsk			
Revenue	7	Capital gain net income (from Part IV, line 2)	mallinish United admirt oil its 111	A.	88,198.	7 (0.00)	The state of the s	
2 æ	8	Net short-term capital gain	25.25			SULTANT AND SULTANT SU		
ב	9	Income modifications	f.	10000				
<u> </u>	10a	Gross sales less returns and allowances	To the Control of the	- Transport	3.24			
	ь	Less: Cost of goods sold		i idio				
ζ	c	Gross profit or (loss) (attach schedule)	L. L. J. J. G. S. L. L. L. C.	3.20		<u>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</u>		
א א	11	Other income (attach schedule) See Stmt		000000000000000000000000000000000000000	1,061		100 SERVER OF SERVER	
	12	Total. Add lines 1 through 11 ·	1,208,235.	3	48,826.	RECEIVE	in well and	
	13	Compensation of officers, directors, trustees, etc.	1,200,233.	<u> </u>	10,020.			
benses	14	Other employee salaries and wages			46	J 13.0	<u>                                      </u>	
Ë	15	Pension plans, employee benefits			18	NOV <b>2</b> -5>20	19 0	
	16a	Legal fees (attach schedule) L-16a Stmt	3,920.				<b>920</b> .,	_
ũ	b	Accounting fees (attach schedule)	3,520.			OGDEN.	UY I	
ξ	С	Other professional fees (attach schedule) L-16c Stmt.	99,126.		28 <b>,</b> 797.		70,329.	
rat	17	Interest						
ist	18	Taxes (attach schedule) (see instruction See. Stmt.	2,000.		3,077.	<u>-</u>	0.	
Operating and Administrative	19	Depreciation (attach schedule) and depletion .					100	
P	20	Occupancy					Section Sectio	
Ą	21	Travel, conferences, and meetings	7,339				7,339.	
ĭ	22	Printing and publications					, , , , , , , , , , , , , , , , , , , ,	
9	23	Other expenses (attach schedule) See .Stmt.	9,888.		11,322.		9,503.	
ţ	24	Total operating and administrative expenses.	- ,	1	,			
ža		Add lines 13 through 23	122,273.		43,196.		91,091.	
ğ	25	Contributions, gifts, grants paid	1,289,000.	3200			1,289,000.	
U	26	Total expenses and disbursements. Add lines 24 and 25	1,411,273.	2 30000 1120 00000	43,196.		1,380,091.	
	27	Subtract line 26 from line 12.		2312				
	а	Excess of revenue over expenses and disbursements	-203,038					
	b	Net investment income (if negative, enter -0-)		3	05,630:			
_	С	Adjusted net income (if negative, enter -0-)			P 2	A STATE OF THE PROPERTY OF THE PARTY OF THE		

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form **990-PF** (2018)

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year
	4,	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	1,173,743.	757,375.	757,375.
	3	Accounts receivable ►		niilimidaamiddanii(MAniimi)(** E \$	appropriate community
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable -	ohibitii.14.231.37.3 diddoinid daest 37.57.6.250	and the second s	100 A 100
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶	4 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1		***************************************
		Less: allowance for doubtful accounts ▶			
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments – U.S. and state government obligations (attach schedule)			
	b	Investments - corporate stock (attach schedule) L-10b Stmt	2,084,486.	1,997,816.	2,169,293.
	С	Investments—corporate bonds (attach schedule) L-10c Stmt	851,730.	1,151,730.	1,141,395.
	11	Investments – land, buildings, and equipment basis ▶			
		Less. accumulated depreciation (attach schedule) ▶			
	12	Investments – mortgage loans			
	13	Investments - other (attach schedule)			
	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			
		instructions. Also, see page 1, item l)	4,109,959.	3,906,921.	4,068,063.
	17	Accounts payable and accrued expenses			
S	18	Grants payable			
Liabilities	19	Deferred revenue			
oili	20	Loans from officers, directors, trustees, and other disqualified persons			
ia	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe	0.	0.	
	23	Total liabilities (add lines 17 through 22)	0.	0.	
r)		Foundations that follow SFAS 117, check here ▶ □			
lances		and complete lines 24 through 26, and lines 30 and 31.			
an	24	Unrestricted			
3al	25	Temporarily restricted			10:03/4000/5/20
d E	26	Permanently restricted			**************************************
Net Assets or Fund Ba		Foundations that do not follow SFAS 117, check here ▶ ⊠ and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds	4,109,959.	3,906,921.	STEP IN THE STANS
t A	30	Total net assets or fund balances (see instructions)	4,109,959.	3,906,921.	
Ne	31	Total liabilities and net assets/fund balances (see instructions)	4,109,959.	3,906,921.	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			100 agricus of our manufactures and and analysis bridge
	Tota	I net assets or fund balances at beginning of year-Part II, colu	mn (a), line 30 (mus	-	4,109,959.
2		er amount from Part I, line 27a			-203,038.
3		an increase and included in the O (Access).			203,030.
4		lines 1, 2, and 3		4	3,906,921.
5	_			<u> </u>	3,300,321.
6	Tota	reases not included in line 2 (itemize) ► I net assets or fund balances at end of year (line 4 minus line 5)—	Part II. column (b) lii	ne 30 <b>6</b>	3,906,921.
					Form <b>990-PF</b> (2018)

Pärt	V Capital Gains and	d Losses for Tax on Investm	ent Income		<del></del>	<u></u>
		ind(s) of property sold (for example, real es use, or common stock, 200 shs MLC Co)	tate,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr )
1a	SEE NT2-122768 STM	T		P	Various_	Various
b	SEE NT2-122768 STM	T		P	Various	Various
c	NORTHERN TRUST ACC	T #4616 - SEE ATTACHED	STATEMENT	P	Various	Various
d	NORTHERN TRUST ACC	T #4616 - SEE ATTACHED	STATEMENT	P	Various	Various
е	See Statement	,				
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		ın or (loss) (f) mınus (g))
a	1,395,097.			1,395,737.		-640.
b	154,040.			5,521.		148,519.
С	8,492.			11,898.	······································	-3,406.
<u>d</u>	115,483.			75,256.		40,227.
<u>        e                            </u>	110,203.			6,705.		103,498.
	(i) FMV as of 12/31/69	owing gain in column (h) and owned b (j) Adjusted basis as of 12/31/69	(k) Exces	on 12/31/69 s of col (i) (j), if any	col (k), but no	ol (h) gain minus ot less than -0-) <b>or</b> from col (h))
а	" '- '					-640.
b	0.	0.		0.		148,519.
c						-3,406.
d	0.	0.	····	0.		40,227.
е	0.	0.		0.		103,498.
2	Capital gain net income of	ormercaonariossi / °	also enter in Pa enter -0- in Pai		2	288,198.
3		in or (loss) as defined in sections it, line 8, column (c). See instruc			3	200 100
Part		der Section 4940(e) for Redu	ced Tay on N	et Investment	•	288,198.
Was t	s," the foundation doesn't	section 4942 tax on the distribut qualify under section 4940(e). Do	not complete t	his part.	•	☐ Yes ⊠ No
1	<del></del>	ount in each column for each yea	ir; see the instru	ictions before m	aking any entries.	
Cale	(a) Base period years endar year (or tax year beginning in	(b) Adjusted qualifying distributions	Net value of	(c) f noncharitable-use a		(d) stribution ratio divided by col (c))
	2017	1,171,35		3,971,1		0.294970
	2016	881,16	59.	3,553,3		0.247985
	2015	822,05		3,429,8	65.	0.239675
	2014	718,15		3,193,6		0.224872
	2013	480,81	13.	2,555,9	20.	0.188117
2	Total of line 1, column (d				. 2	1.195619
3		ofor the 5-year base period—divioundation has been in existence			. <b>3</b>	0.239124
4	Enter the net value of nor	ncharitable-use assets for 2018 fr	om Part X, line	5	. 4	4,047,339.
5	Multiply line 4 by line 3				5	967,816.
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)			. 6	3,056.
7	Add lines 5 and 6 .				7	970,872.
8	Enter qualifying distribution				8	1,380,091.
	If line 8 is equal to or gre	ater than line 7, check the box in	raπ vi, line 1b	, and complete t	mat part using a	1% tax rate See the

Part		Instruction	ons)		
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1. )				
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	3,056	a : 2 8950000		
	here > X and enter 1% of Part I, line 27b				
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of part I, line 12, col (b).	\$\$\C\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	0 .	<del></del>		
3	Add lines 1 and 2	3,056	<u>.  </u>		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	0.			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	3,056	91 (%191/4/4/3		
6	Credits/Payments:				
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 5,710.				
, p	Exempt foreign organizations—tax withheld at source . 6b 66 6000				
C	Tax paid with application for extension of time to file (Form 8868)  6c 6,000.				
d .	Backup withholding erroneously withheld	11,710	88   38-32-8		
7 8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  from 2220 is attached 8	11,710	<del>'                                     </del>		
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		+-		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10	8,654	+-		
11	Enter the amount of line 10 to be: Credited to 2019 estimated tax ▶ 8,654. Refunded ▶ 11	0,001	+		
	VII-A Statements Regarding Activities		·····		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	Ye:	s No		
	participate or intervene in any political campaign?	1a	×		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b	×		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	2 XX 3	\$ E. G		
	published or distributed by the foundation in connection with the activities				
С	Did the foundation file Form 1120-POL for this year?	1c	×		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation. ▶ \$ (2) On foundation managers ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers. ► \$	<u> </u>			
2	'Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2	×		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	2 ×		
4a	(44,000				
b					
5					
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.				
	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?				
7					
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶	7 ×	\$ 72 M		
	IL	<b>探交援</b>			
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) of each state as required by <i>General Instruction G?</i> If "No," attach explanation	8b ×			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	725 B	\$ 55 TM		
J	4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV	9	× 2		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10 ×			
		orm 990-P			

Pari	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		×
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		×
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address ► N/A	13	X	
14	The books are in care of ► ERIC F.ACHEPOHL  Located at ► 485 HALF DAY ROAD BUFFALO GROVE IL  ZIP+4 ► 60089			)
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —check here and enter the amount of tax-exempt interest received or accrued during the year <b>\Delta</b> 15		•	▶ □
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			
Parl	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	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?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		×
	Organizations relying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?	1c		×
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	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?	*		
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement—see instructions.)	<b>2</b> b	and a	×
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  ▶ 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
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 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		
4a b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?  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?	4a	79. ja	×

	Statements Regarding Activities				,						
5a	During the year, did the foundation pay or incur	-							266	Yes	No
	(1) Carry on propaganda, or otherwise attempt t		•	•		•	☐ Yes	⊠ No			
	(2) Influence the outcome of any specific public directly or indirectly, any voter registration dr		,		•	-		1521			
	(3) Provide a grant to an individual for travel, stu						☐ Yes ☐ Yes	⊠ No ⊠ No	1,200,000		
	(4) Provide a grant to an individual for travel, stu							△ NO			
	section 4945(d)(4)(A)? See instructions						☐ Yes	<b>⊠</b> No			
	(5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to	children	or animals?				□Yes	⊠ No	1.5572		
b	If any answer is "Yes" to 5a(1)–(5), did any of the in Regulations section 53.4945 or in a current no			•	•			cribed	5b		
	Organizations relying on a current notice regardi	_						▶ □		*	
С	If the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility			•	otion from		Yes				
	If "Yes," attach the statement required by Regula		-			• •	res	∐ No			
6a	Did the foundation, during the year, receive any					emiums	i				
	on a personal benefit contract?		•				☐ Yes	⊠ No			
b	Did the foundation, during the year, pay premium	ns, dire	ctly or indired	ctly, on	a personal	benefi	t contract	? .	6b	S1.6782+0545*/	X
7.	If "Yes" to 6b, file Form 8870.			l <b>4</b> l		o		<b>☑</b>			
7a b	At any time during the tax year, was the foundation If "Yes," did the foundation receive any proceed		•				∐ Yes	∑ No	7b		25,230
8	Is the foundation subject to the section 4960 ta							ır.	05.5	2045¢	33363
Ū	remuneration or excess parachute payment(s) de	uring th	e year?				☐Yes	X No			
Par	VIII Information About Officers, Direct									ees,	
	and Contractors		·								
1	List all officers, directors, trustees, and found	lation r	nanagers an	d their	compens	ation. S	See instru	ictions	<b>3.</b>		
	(a) Name and address	hou	e, and average rs per week ed to position	(If n	mpensation ot paid, ter -0-)	emplo	Contribution: byee benefit erred compe	plans	(e) Expe	nse acc allowan	
R.	MILLER	DIRECT	OR-PRESIDENT								
	HALF DAY ROAD BUFFALO GROVE IL 60089		1.00		0.			0.			0.
	ACHEPOHL	DIRECTO	OR-TREASURER								
	HALF DAY ROAD BUFFALO GROVE IL 60089		1.00		0.			0.			0.
	VERSTEN COORD	SECRI	ETARY		0			^			^
	HALF DAY ROAD BUFFALO GROVE IL 60089	DIREC	1.00		0.			0.			0.
	FISCHER HALF DAY ROAD BUFFALO GROVE IL 60089	DIKE	1.00		0.			0.			0.
2	Compensation of five highest-paid employed	es (oth		se inclu		ne 1—	see instr		s). If no	one. e	
	"NONE."	•							•	•	
			l				(d) Contribu	itions to	(e) Expe		
	(a) Name and address of each employee paid more than \$50,00	00	(b) Title, and a hours per w devoted to po	/eek	(c) Comper	nsation	employee plans and c compens	benefit deferred	other a	allowan	
			hours per w	/eek	(c) Comper	nsation	employee plans and o	benefit deferred		allowan	-
NONE			hours per w	/eek	(c) Comper	nsation	employee plans and o	benefit deferred		allowan	
			hours per w	/eek	(c) Comper	nsation	employee plans and o	benefit deferred		allowan	
			hours per w	/eek	(c) Comper	nsation	employee plans and o	benefit deferred		allowan	
			hours per w	/eek	(c) Comper	nsation	employee plans and o	benefit deferred		allowan	
			hours per w	/eek	(c) Comper	nsation	employee plans and o	benefit deferred		allowan	
			hours per w	/eek	(c) Comper	nsation	employee plans and o	benefit deferred		allowan	
			hours per w	/eek	(c) Comper	nsation	employee plans and o	benefit deferred		allowan	

Part	and Contractors (continued)	tion Managers, Highly Paid Em	nployees,
3	Five highest-paid independent contractors for professional services. See	e instructions. If none, enter "NONI	E."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
THE	BENIDA GROUP	MANAGEMENT AND FINANCIAL SERVICES	
485	HALF DAY ROAD BUFFALO GROVE IL 60089		80,239
	number of others receiving over \$50,000 for professional services	<u> </u>	80,239
Part	IX-A Summary of Direct Charitable Activities		
	the foundation's four largest direct charitable activities during the tax year. Include relevant st		Expenses
	anizations and other beneficiaries served, conferences convened, research papers produced, etc		
1 .			
_			
-		w	
2 .			
_			
3			
-			
_			
4 .			
-			
	W 52 0		
	IX-B Summary of Program-Related Investments (see instruct		
	cribe the two largest program-related investments made by the foundation during the tax year or	ines 1 and 2	Amount
1.	•		
-			
٠.			
2			
	other program-related investments. See instructions		
3			
-			
<del></del>	Add All add		
ı otal.	Add lines 1 through 3	<u></u>	

Part	see instructions.)	ign ioc	indations,
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	3,989,529.
b	Average of monthly cash balances	1b	119,445.
C	Fair market value of all other assets (see instructions)	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	4,108,974.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	4,108,974.
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	1	
	instructions)	4	61,635.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,047,339.
6	Minimum investment return. Enter 5% of line 5	6	202,367.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► and do not complete this part.)	ounda	itions
1	Minimum investment return from Part X, line 6	1	202,367.
2a	Tax on investment income for 2018 from Part VI, line 5		20273071
b	Income tax for 2018. (This does not include the tax from Part VI.) 2b		
C	Add lines 2a and 2b	2c	3,056.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	199,311.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	199,311.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	199,311.
Part	XII Qualifying Distributions (see instructions)	<u> </u>	<del></del>
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	1,380,091.
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	1,380,091.
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. See instructions	5	3,056.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,377,035.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whet	ther the foundation

Part	XIII Undistributed Income (see instruction	ons)			
•		(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1	Distributable amount for 2018 from Part XI, line 7	14.		218-7	199,311.
2	Undistributed income, if any, as of the end of 2018:		4.5		
а	Enter amount for 2017 only			0.	
b	Total for prior years: 20, 20, 20				767.5
3	Excess distributions carryover, if any, to 2018:			ON CONTRACTOR CONTRACT	
а	From 2013 . 355, 564.	Committee Complete		1824 THE TOTAL PROPERTY.	
b	From 2014				
C	From 2015		100000		
d	From 2016 708, 197. From 2017 977.080	40.00		400	
f	From 2017	3,258,796	o Marin yang mengang selam	mmoonboondoonleenings	
4	Qualifying distributions for 2018 from Part XII,	1,7,3,0,1,1,1,1		initialitation of the second section of the second	
•	line 4: ▶ \$ 1,380,091.				
а	Applied to 2017, but not more than line 2a .				
b	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)	The state of the s			(A)
d	Applied to 2018 distributable amount		2.33		199,311.
e	Remaining amount distributed out of corpus	1,180,780.		annangangang (1. 17. pangangangang	
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:				maangggdoteess s. Trophylphyrnolu
а	Corpus Add lines 3f, 4c, and 4e. Subtract line 5	4,439,576	perpendia kata tanan ama ta sasa kata kata k		and the state of t
Ь	Prior years' undistributed income. Subtract line 4b from line 2b		0.		
С	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—see instructions		0.		
е	Undistributed income for 2017. Subtract line 4a from line 2a. Taxable amount—see instructions	d.		0.	
f	Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019				0.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(q)(3) (Election may be required—sec instructions)		10.4	The second secon	See and Community and Communit
8	Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions).	355,564.			a gaga ya anaranta ana ana ana ana ana ana ana ana ana
9	Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	4 004 012			
10	Analysis of line 9:	4,084,012.	Total Commission Commi		
a	Excess from 2014				
b	Excess from 2015 655, 452.				e Maria di Pari di Pari di Mandalahan
С	Excess from 2016	Page 1 Appropriate process of the page 1 1 2 2 1	TATE OF THE PROPERTY OF THE PR		
đ	Excess from 2017 977, 080.	8 Samujuju			
0	Excess from 2018				

•						//
	90-PF (2018)	<b>A</b> : /	vations and Daw	LVIII A superhas O		Page 10
Part 1a`	XIV Private Operating Founda  If the foundation has received a ruling foundation, and the ruling is effective for	g or determination	letter that it is a	private operating	)	N/A
b	Check box to indicate whether the four	ndation is a private	e operating founda	ation described in se	ction 🗌 4942(j)(3	3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2018	<b>(b)</b> 2017	(c) 2016	(d) 2015	(0) 10101
b c	85% of line 2a					<u> </u>
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon.					
а	"Assets" alternative test enter:					
	<ul><li>(1) Value of all assets .</li><li>(2) Value of assets qualifying under section 4942(j)(3)(B)(i)</li></ul>					
b	"Endowment" alternative test—enter <sup>2</sup> / <sub>3</sub> of minimum investment return shown in Part X, line 6 for each year listed					
С	"Support" alternative test-enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) .					
	(3) Largest amount of support from an exempt organization .					
	(4) Gross investment income .	/				
Part	XV Supplementary Information			the foundation h	ad \$5,000 or mo	re in assets at
	any time during the year-		ns.)			
	Information Regarding Foundation List any managers of the foundation of before the close of any tax year (but of R. MILLER	who have contribi				by the foundation
	List any managers of the foundation	who own 10% o	r more of the ste	ack of a corneration	(or an equally lar	ac portion of the
	ownership of a partnership or other er					ge portion of the
2	Information Regarding Contribution	Grant Gift Lo	an Scholarshin	etc Programs:		
-	Check here ► 🗵 if the foundation unsolicited requests for funds. If the ficomplete items 2a, b, c, and d. See in	only makes cont oundation makes	ributions to pres	elected charitable o		
а	The name, address, and telephone nu		dress of the perso	on to whom applicat	tions should be ad	dressed:
b	The form in which applications should	l be submitted and	d information and	materials they shou	uld include:	

c Any submission deadlines:

factors:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

	t XV Supplementary Information (conti	nued)			
3.	<b>Grants and Contributions Paid During t</b>	he Year or Approve	ed for Fut	ture Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or	Amount
	Name and address (home or business)	or substantial contributor	recipient	contribution	
а	_				
SEE	ATTACHED				
					1,289,000.
					1
		1			
					İ
		-			
	Total			<b>▶</b> 3a	1,289,000.
b	Approved for future payment				
	-				
					]
	Total	<u> </u>			

Рa	rt XVI	<ul> <li>Analysis of Income-Producing Ac</li> </ul>	ctivities				
		s amounts unless otherwise indicated.		Isiness income	Excluded by sect	ion 512, 513, or 514	(e) Related or exempt
1	Progr	ram service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
	а						
	b _						
	c _						
	d						
	e _						
	f				ļ		
_	-	ees and contracts from government agencies	-		<del> </del>	<del></del>	
_		bership dues and assessments	ļ				
3 4		est on savings and temporary cash investments ends and interest from securities			14	57,277.	
-		ental income or (loss) from real estate:	Name of the second	in the second second		57,277.	Salar Galaire State
Ü		ebt-financed property	Character to a second financia contract of the				
		ot debt-financed property					
6		ental income or (loss) from personal property					
7		investment income					
8		or (loss) from sales of assets other than inventory			18	95,160.	
9	Net ır	ncome or (loss) from special events					
10		s profit or (loss) from sales of inventory					
11	Othe	revenue. a					
	b _						
	°. –						
	d _						
10	e Subt	otal. Add columns (b), (d), and (e)				152 427	
		Add line 12, columns (b), (d), and (e)	Salar Sa		1 12 14 15 15 15 15 15 15 15 15 15 15 15 15 15	152,437. <b>13</b>	152,437.
		sheet in line 13 instructions to verify calculation	ns.)	•			132,437.
_	rt XVI	-	•	ent of Exemp	t Purposes		<del> </del>
Lin	e No.	Explain below how each activity for which accomplishment of the foundation's exempt put	<del> </del>	<del> </del>	<del></del>	-A contributed is	nportantly to the
	▼	accomplishment of the foundation's exempt pur	rposes (other tha	n by providing fur	nds for such purp	oses) (See instruc	ctions)
						<u> </u>	
			<u>.</u>				
				<u> </u>			-
						<del>.</del>	

Form **990-PF** (2018)

BAA

Part	XVI	Informatio Organizati	n Regarding Tra	insfers to and	Transactio	ns and F	Relationshi	ps Wit	h Noncl	naritabl	е Ехе	mpt
1 a	in s orga Tran	section 501(c) (o anizations? nsfers from the rep	directly or indirectly other than section porting foundation	to a noncharitable	nizations) o	r in secti	on 527, re			ai	Yes	
(2) Other assets								1a(1) 1a(2) 1b(1)		×		
	(2) Purchases of assets from a noncharitable exempt organization							1b(2) 1b(3) 1b(4)		× ×		
c d	(6) Sha	iring of facilities, e	arantees . ervices or members equipment, mailing of the above is "Y	lists, other assets	g solicitation , or paid em	ns nployees				1b(5) 1b(6) 1c how the		X X arket
		ie in any transaction	ther assets, or ser on or sharing arran	gement, show in	column (d) 1	the value o	f the goods	, other a	assets, or	services	recei	ved.
(a) Line	e no	(b) Amount involved	(c) Name of nor	icharitable exempt org	anization	(d) Desc	iption of transf	ers, transa	actions, and	sharing arr	angeme	ents
									· -			
								* -				
						<del> </del>		<del>.</del>			<u>.</u>	
										<del></del>		
2a b	des	cribed in section 5	ectly or indirectly 501(c) (other than set following schedule	section 501(c)(3)) o			ore tax-exe	mpt or	ganızatior · ·		es 🗵	No
		(a) Name of organ	nization	<b>(b)</b> Type	of organization	1		(c) Desc	ription of rela	ationship		
					<del></del>							
Sign Iere	cor		declare that I have exami aration of preparer (other		on all information	of which prep REASURE	arer has any kno		May the	wledge and ne IRS discu ne preparer s structions	iss this shown b	return elow?
Paid Prep Use			HERXIT	Prepare Co signatu			)Date	19 5	Check ☐ nelf-employe	d F	2157	
		Firm's address ▶	485 HALF DA	Y ROAD SUITE	#200			Phone r		883-9		

BUFFALO GROVE

IL 60089

# Form 990-PF: Return of Private Foundation

# Part IV: Capital Gains and Losses for Tax on Investment Income

## **Continuation Statement**

(a) List and describe (e.g., real estate, common stoc	(b) How acquired P-Purchase D-Donation	(c) Date acquired	(d) Date sold		
NORTHERN TRUST ACCT #4	616 - SEE ATTACHED STA	TEMENT	P	Various	Various
NORTHERN TRUST ACCT #4	616 - CAPITAL GAIN DIS	TRIBUTION	P	Various	Various
FROM K-1 MFC INTERNATI	ONAL FUND LLC		P	Various	Various
MFO ARIEL-CAPITAL GAIN	DISTRIBUTION #4612		P	Various	Various
MFO PAX WORLD FDS SER #4612	TR I-CAPITAL GAIN DIST	RIBUTION	Р	Various	Various
(e) Gross sales price	<pre>(f) Depreciation   allowed (or   allowable)</pre>		st or other us expense of sale	(h) Gain ( (e) plus (g	(f) minus
30,809.			6,705.		24,104.
980.			0.		980.
1,191.			0.		1,191.
31,044.			0.		31,044.
46,179.			0.	•	46,179.
110,203.	0.		6,705.		103,498.
	ets showing gain in co e foundation on 12/31/		_	(l) Gains gain minus	col. (k),
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col. col. j), if any	but not less or Losses ( (h)	(from col.
0.	0.		0.		24,104.
0.	0.		0.		980.
0.	0.		0.		1,191.
0.	0.		0.		31,044.
0.	0.		0.		46,179.
0.	0.				
0.	0.				
0.	0.				
0.	0.		0.		103,498.

# Additional information from your Form 990-PF: Return of Private Foundation

## Form 990-PF: Return of Private Foundation

## Other Income

## **Continuation Statement**

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income
FROM K-1 - MFC INTERNATIONAL FUND		31.	
MFO ARIEL INVT TR ARIEL FD INV CL FUND		438.	
MFO DOMINI SOCIAL INVESTMENT TRUST IMPACT BD FD INV SHS		446.	
MFO PAX WORLD FDS SER TR I SMALL CAP FD INSTL CL		146.	
Total		1,061.	

#### Form 990-PF: Return of Private Foundation

## **Taxes**

## **Continuation Statement**

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
FROM K-1 - MFC INTERNATIONAL FUND LLC		3,077.		0.
EXTENSION AND ESTIMATED TAX	2,000.			0.
Total	2,000.	3,077.		0.

#### Form 990-PF: Return of Private Foundation

## **Other Expenses**

## **Continuation Statement**

Description	Revenue and Expense per Book	Net Investment Income	Adjusted Net Income	Disbursement for charitable purpose
POSTAGE, MAILING SERV	583,			5831-
DUES & MEMBERSHIPS	2,940;,			2,940
PROFESSIONAL DEVELOPMENT	2,308:	•		2,308:
MOBILE & CONFERENCE CALLS	286:	~		286.
MISCELLANEOUS	1,136.	/		1,136:
INSURANCE EXPENSES	2,250:	,		2,250
FROM K-1 - MFC INTERNATIONAL FUND LLC		10,937.		0.
CT CORPORATION SYSTEM	85.	85.		0.
DELAWARE SECRETARY OF STATE	300.	300.		· . 0.
Total	9,888.	11,322.		9,503.

Name	Employer Identification No				
NEW VISIONS FOUNDATION	36-4291720				
Asset Information:					
Description of Property SEE ATTACHED - NT ACCT# 4612					
Business Code Exclusion Code 18					
Date Acquired Various How Acquired . Purchased					
Date Sold Various Name of Buyer					
Check Box, if Buyer is a Business					
Sales Price 77, 593. Cost or other basis (do not reduce by depreciati	ion) 0 .				
Sales Expense Valuation Method Fair Market Val					
Total Gain (Loss)	<del>-</del>				
Description of Property SEE ATTACHED - NT ACCT# 4616					
Business Code Exclusion Code . 18					
Date AcquiredVarious How Acquired . Purchased					
Date Sold Various Name of Buyer					
Check Box, if Buyer is a Business					
Sales Price154, 783. Cost or other basis (do not reduce by depreciati	ion). 93,960.				
Sales Expense Valuation Method Fair Market Val					
Total Gain (Loss) 60 , 823 . Accumulated Depreciation					
Description of Property SEE NT2-122768					
Business Code Exclusion Code <u>18</u>	<del>-</del>				
Date AcquiredVarious How Acquired . Purchased					
Date SoldVarious Name of Buyer					
Check Box, if Buyer is a Business					
Sales Price1,549,136. Cost or other basis (do not reduce by depreciate	ion) 1.592.392.				
Sales Expense Valuation Method					
Total Gain (Loss)43, 256. Accumulated Depreciation					
Description of Property					
Date Acquired How Acquired					
Date Sold Name of Buyer .					
Check Box, if Buyer is a Business					
Sales Price Cost or other basis (do not reduce by depreciati	ion).				
Sales Expense Valuation Method					
Total Gain (Loss) Accumulated Depreciation					
Description of Property					
Date Acquired How Acquired					
Date Sold Name of Buyer	<del>-</del>				
Check Box, if Buyer is a Business					
Sales Price Cost or other basis (do not reduce by depreciati	ion).				
Sales Expense Valuation Method Total Gain (Loss) Accumulated Depreciation					
Total Call (E033)	• • • •				
Totals:					
Total Gain (Loss) of all assets					
Gross Sales Price of all assets					
Unrelated Business IncomeBusiness Code					
Excluded by section 512, 513, 514 95, 160. Exclusion Code · 18					
Related/Exempt Function Income					
Total of English Control in Contr					
QuickZoom here to Form 990-PF, Page 1					
QuickZoom here to Form 990-PF, Page 12					

Name	Employer Identification No
NEW VISIONS FOUNDATION	36-4291720

## Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
QUARLES & BRADY, LLP	LEGAL FEES	3,920.	•		3,920.
Total to Form 990-	PF, Part I, Line 16a	3,920.			3,920.

## Line 16b - Accounting Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
otal to Form 990-P	PF, Part I, Line 16b				

## Line 16c - Other Professional Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
THE BENIDA GROUP LLC REV. JOHN VAUGHN THE BENIDA GROUP LLC NEUBERGER BERMAN NORTHERN TRUST	MANAGEMENT SERVICES CONSULTING INVESTMENT SERVICES MANAGEMENT FEES SERVICE FEES	68,626: 1,703: 11,613. 10,409. 6,775.	11,613. 10,409. 6,775.		68,626
Total to Form 990-	PF, Part I, Line 16c	99,126.	28,797.	•	70,329.

## **Investments**

Name NEW VISIONS FOUNDATION					yer Identification No 291720
Line 10a - Investments - US and State Government Obligations:	JS and State Government Obligations Obligations			End on the same of	f Year US Government Obligations FMV
Tot to Fm 990-PF, Pt II, Ln 10a					
Line 10b - Investme	ents - Corporate	Stock:	Book Value	•	f Year Fair Market Value
NEUBERGER BERMAN  MFO PAX WORLD FDS SER I  MFO ARIEL INVT TR ARIEL  See L-10b Stmt  Totals to Form 990-PF, Part II, L	416, 348,	337. 569. 000. 910. 816.	913,905. 359,733. 338,334. 557,321. 2,169,293.		
Line 10c - Investments - Corporate Bonds:				End o	f Year Fair Market Value
CALVERT SOCIAL  DOMINI SOCIAL  COOPERATIVE FUND OF NEW ENGLAND  See L- 10c Stmt  Totals to Form 990-PF, Part II, Line 10c				000. 730. 000. 000. 730.	243,162. 444,233. 50,000. 404,000. 1,141,395.
Line 12 - Investme	ents - Mortgage I	oans:	Book Value		f Year Fair Market Value
Totals to Form 990-PF, Part II, L	ine 12				
Line 13 - Inve	estments - Other:		Book Value		f Year Fair Market Value
Totals to Form 990-PF, Part II, L	ine 13				

## Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2018

**Employer identification number** 

NEW VISIONS FOUNDATION 36-4291720 Organization type (check one): Filers of: Section: Form 990 or 990-EZ ☐ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF ≤ 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions 

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

NEW VISIONS FOUNDATION

Employer identification number

36-4291720

Part I	Contributors (see instructions). Use duplicate of	opies of Part I if additional space is	needed.
(a)	(b)	(c)	(d)

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	H. MILLER  485 HALF DAY ROAD, SUITE 200  BUFFALO GROVE IL 60089	\$ <u>339,472.</u>	Person X Payroll  Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	HLM & JM 2006 CHARITABLE LEAD TRUST  485 HALF DAY ROAD, SUITE 200  BUFFALO GROVE IL 60089	* 365,322.	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	HLM CHARITABLE LEAD TRUST III  485 HALF DAY ROAD, SUITE 200  BUFFALO GROVE IL 60089	<b>\$</b> 151,003.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		(c) Total contributions \$ 200,000.	(d) Type of contribution  Person Payroll Noncash  (Complete Part II for noncash contributions.)
No.	Name, address, and ZIP + 4  HLM CHARITABLE LEAD TRUST I  485 HALF DAY ROAD, SUITE 200	Total contributions	Person X Payroll  Noncash (Complete Part II for
No. 4	Name, address, and ZIP + 4  HLM CHARITABLE LEAD TRUST I  485 HALF DAY ROAD, SUITE 200  BUFFALO GROVE IL 60089  (b)	### Total contributions  ### 200,000.  ### (c)	Type of contribution  Person Payroll Noncash (Complete Part II for noncash contributions.)
No. 4	Name, address, and ZIP + 4  HLM CHARITABLE LEAD TRUST I  485 HALF DAY ROAD, SUITE 200  BUFFALO GROVE IL 60089  (b)	\$ 200,000.  (c) Total contributions	Type of contribution  Person

Name of organization

NEW VISIONS FOUNDATION

Employer identification number

36-4291720

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	145 SHARES OF EDITAS MEDICINE INC (EDIT)		
		\$ 4,142.	10/05/2018
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	1,870 SHARES OF MYOKARDIA INC (MYOK)		
		\$ 103,205.	10/05/2018
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	2,180 SHARES OF OKTA INC (OKTA)		
		\$ 141,940.	10/05/2018
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	1,001 SHARES OF PPDAI GROUP INC (PPDF)		
		\$5,986.	10/05/2018
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	146 SHARES OF SAGE THERAPEUTICS INC (SAGE)		
		\$ 19,598.	10/05/2018
		(c)	(d)
(a) No. from Part I	(b)  Description of noncash property given	FMV (or estimate) (See instructions.)	(d) Date received
from	(b) Description of noncash property given  3,664 SHARES OF SNAP INC (SNAP)		Date received
from Part I	Description of noncash property given		Date received

Name of organization
NEW VISIONS FOUNDATION

Employer identification number 36-4291720

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	157 SHARES OF SPOTIFY TECHNOLOGY (SPOT)		
		\$ 25,808.	10/05/2018
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	262 SHARES OF VOYAGER THERAPEUTICS (VYGR)		
		\$4,367.	10/05/2018
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	165 SHARES OF ZSCALER INC (ZS)		
		\$6,112.	10/05/2018
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Name of org	ganization	<del></del>	Employer identification number	
	IONS FOUNDATION		36-4291720	
Part III	(10) that total more than \$1,000 for	the year from any one contri ions completing Part III, enter e year. (Enter this information of	tions described in section 501(c)(7), (8), or butor. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc., once. See instructions.)	
(a) No.			(d) Description of how gift is held	
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
-				
		(e) Transfer of gift		
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee	
(a) No.	· · · · · · · · · · · · · · · · · · ·			
from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
Part I				
L				
	(e) Transfer of gift			
	T		Salational Confidence and Administration	
F	Transferee's name, address, an	a ZIP + 4	Relationship of transferor to transferee	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
		••••		
1		(e) Transfer of gift		
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee	
1				

NEW VISIONS FOUNDATION 36-4291720

# Additional information from your 2018 Federal Exempt Tax Return

## Form 990-PF Part II Line 10, 12 and 13 Investments

# L-10b Stmt

## **Continuation Statement**

Line 10b Description	Line 10b Book	Line 10b FMV
NT ACCOUNT #2674612 - DIVERSIFIED ASSET PORTFOLIO	103,101.	103,220.
NT ACCOUNT #2674616 - DIVERSIFIED ASSET PORTFOLIO (NB)	36,153.	36,222.
MFC INTERNATIONAL FUND	380,656.	417,879.
Total	519,910.	·557 <b>,</b> 321.

## Form 990-PF Part II Line 10, 12 and 13 Investments

#### L- 10c Stmt

## **Continuation Statement**

Ln 10c Description	Line 10c Book	Line 10c FMV
LOCAL ENTERPRISE ASSISTANCE FUND	50,000.	50,000.
COOP FUND OF NEW ENGLAND	29,000.	29,000.
VERMONT COMMUNITY LOAN FUND	50,000.	50,000.
CHICAGO COMMUNITY LOAN FUND	50,000.	50,000.
NATURAL CAPITAL INVESTMENT FUND	75,000.	75,000.
CAPITAL FOR CHANGE NOTE	75,000.	75,000.
SHARED CAPITAL	75,000.	75,000.
Total	404,000.	404,000.

#### **List of Substantial Contributors**

New Visions Foundation FEIN: 36-4291720 Tax Year: 2018

## Form 990-PF, Part VII-A, Line 10

The following persons became substantial contributors to the foundation during the year (i.e., they have contributed at least \$5,000 in money or other property during the current and prior tax years combined, and those contributions are more than 2% of the total contributions received by the foundation from its creation through the close of the current tax year.)

Name	Address
H. MILLER	485 Half Day Road, Suite 200 Buffalo Grove, IL 60089
HLM Charitable Lead Trust I	485 Half Day Road, Suite 200 Buffalo Grove, IL 60089