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.

Department of the Treasury ► Go to www.irs.gov/Form990PF for instructions and the latest information. Internal Revenue Service For calendar year 2018 or tax year beginning and ending Name of foundation A Employer identification number IGLEWSKI FAMILY FOUNDATION C/O JANICE MADER 36-6109490 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 19260 WINDING WAY 239-466-1871 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here FORT MYERS, FL 33908 Check all that apply: Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation X Address change Name change X Section 501(c)(3) exempt private foundation Check type of organization: If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here X Cash I Fair market value of all assets at end of year J Accounting method. Accrual If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here (Part I, column (d) must be on cash basis.) 987,596. ▶\$ Part Manalysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes expenses per books income income 7. N/A. Contributions, gifts, grants, etc., received Check X if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 34,985. 34,985 STATEMENT 1 Dividends and interest from securities **机型**(2) 1972年 1973 5a Gross rents b Net rental income or (loss) -4,545. SCANNED MAY 1 6 2019 Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 9,338. Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income Total Add lines 1 through 11 30,440. 34,985. 2,000 2,000 Compensation of officers, directors trustees etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees Expenses RECEIVED 00. STMT 2 3 3,000. b Accounting fees c Other professional fees 17 Interest Administrative STMT 3 2, 0. 18 Taxes 19 Depreciation and depletion OGDEN UT 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 120. STMT 4 145. 25. 23 Other expenses 24 Total operating and administrative 1,106 7,243. 5,025. expenses Add lines 13 through 23 47,000. 47,000. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements 54,243. Add lines 24 and 25 27 Subtract line 26 from line 12 ludomia). Posta before -23,803. 2 Excess of revenue over expenses and disbursements 33.879. b Net investment income (if negative enter -0-)

Patria de la composición dela composición de la composición de la composición dela c

c Adjusted net income (if negative, enter -0-) 823501 12-11-18 LHA For Paperwork Reduction Act Notice, see instructions

Form 990-PF (2018)

N/A

For	m 99		ION		6109490 Page 2
		Balance Sheets Allached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	
P.	art	Balance Sneets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	-	Cash - non-interest-bearing	155,254.	143,345.	
		-	133,234.	143,343.	143,343.
	ľ	Savings and temporary cash investments		FIRM STATE OF THE	**************************************
	3	Accounts receivable -			
		Less: allowance for doubtful accounts	COMPANY - THE OR WANTED THROUGH STORY THE TAKEN STORY	[20 pg - 1, pg 1 2 pg 1 pg 1 pg 1 pg 1 pg 1 pg 1 pg	S. P. STONE C. WAR. OF THE REPORT OF THE PROPERTY OF THE PROPE
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	5	Grants receivable			<u> </u>
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	_			
		Less: allowance for doubtful accounts	AND SECTION AND ASSESSMENT OF THE PARTY OF T	Bases Transis at NARSO 1872 To 1972 Section 2.7.	ALCOHOLOGICAL ACTION OF A STATE ACCESS
	8	Inventories for sale or use			
ssets	_				
Ass	9	Prepaid expenses and deferred charges			
. `		Investments - U.S. and state government obligations	260 525	246,419.	712 076
		Investments - corporate stock STMT 5	260,525.	240,419.	712,876.
	C	Investments - corporate bonds	C. CORP. C. Springer Co. C. Sp	Transportations and the American American	and his to the present and an array of the
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 6	138,811.	140,932.	131,375.
	14	Land, buildings, and equipment; basis			* 1
		Less accumulated depreciation			
	15	Other assets (describe ►			
		Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	554,590.	530,696.	987,596.
_	17	Accounts payable and accrued expenses	332,330.	330,030.	
	18	Grants payable			
es	19	Deferred revenue			
Liabılitı	20	Loans from officers, directors, trustees, and other disqualified persons			
iab	21	Mortgages and other notes payable			
_	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	是一种的一种。 第二章
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31			
es	24	Unrestricted			
anc	25	Temporarily restricted			
3al	26	Permanently restricted			
Þ		Foundations that do not follow SFAS 117, check here			
Fund Balances		and complete lines 27 through 31			
5	27	Capital stock, trust principal, or current funds	554,590.	530,696.	
	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Assets			0.	0.	
Ϋ́	29	Retained earnings, accumulated income, endowment, or other funds	554,590.	530,696.	TITE IN THE TRANSPORT
Net	30	Total net assets or fund balances	334,390.	330,030.	STATES THE STATE OF STATES
			FF4 F00	[[[]	至何思想到1949年
_	31	Total liabilities and net assets/fund balances	554,590.	530,696.	The Part of the Asia
P	art.	Analysis of Changes in Net Assets or Fund Ba	alances		
_	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		t agree with end-of-year figure reported on prior year's return)	00		554,590.
				1	-23,803.
		amount from Part I, line 27a		2	
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	530,787.
		eases not included in line 2 (itemize) PENALTIES		5	91.
<u>6_</u>	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	530,696.
					Form 990-PF (2018)

Form 990-PF (2018) . C/O JANICE MADER

F	Part IV Capital Gains a	ind Losses for Tax on In	vestment	Income				-		
		he kınd(s) of property sold (for examelends, or common stock, 200 shs		te,	(b) F	low acquir Purchase Donation	ed	(c) Date a		(d) Date sold (mo , day, yr.)
<u>1a</u>	QUALITY CARE PR	PTS					7	JARIC	US	07/27/18
_ <u>b</u>										
_ <u>c</u>										
<u>d</u>				<u> </u>	 					
<u>e</u>		(f) Depreciation allowed	(a) Cos	st or other basis	' 			(b) Gar	ın or (loss	<u> </u>
	(e) Gross sales price	(or allowable)		expense of sale					(f) minus	
a	9,338.			13,88	3.					-4,545.
b										
_ <u>c</u>										
d			-		-	<u></u>				
<u>e</u>		a source column (h) and surred but	the foundation	on 10/21/60	-					<u> </u>
_	Complete only for assets snowing	g gain in column (h) and owned by					(I) col. (Gains (Co (k), but no	ol. (h) gain ot less tha	minus n -0-) or
_	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col (j), if any				Losses (1	from col ((h))
_ <u>a</u>	·									-4,545.
<u>b</u>										
_ <u>c</u>										
e										
_	· · · · · · · · · · · · · · · · · · ·	∫ If gain, also enter	r in Part I line	7	7					
2	Capital gain net income or (net cap	oital loss) { If (loss), enter -0	- ın Part I, lıne	7	<i>}</i>	2				-4,545.
3		s) as defined in sections 1222(5) an	nd (6):		٦١					
	If gain, also enter in Part I, line 8, 6	column (c).			-	ا ا			N/A	
ΓP	If (loss), enter -0- in Part I, line 8 Part V Qualification Ur	nder Section 4940(e) for	Reduced	Tax on Net	Inve	stment	Incor	ne	14/12	•
		foundations subject to the section 4	1940(a) tax on	net investment in	come.)				
•		ŕ	, ,							
II S	section 4940(d)(2) applies, leave the	is part diank.								
		on 4942 tax on the distributable am		,	iod?					Yes X No
_		under section 4940(e) Do not com			ntring					
1	(a)	ach column for each year; see the ir	ISTRUCTIONS DEL	ore making any er				1		(d)
	Base period years Calendar year (or tax year beginnin	(b) Adjusted qualifying dis	tributions	Net value of no	(c) Inchari	table-use	assets	1	Distrit	(d) oution ratio vided by col (c))
_	2017		4,825.		1.	098,	485.		30. (B) G.V	.049910
_	2016		8,990.			018,				.057902
	2015	5	1,687.			009,				.051220
_	2014		1,264.		1,	030,		+		.049756
_	2013	4	4,933.			981,	912.	ļ	-	.045761
_										254540
	Total of line 1, column (d)	was been seved doude the total	an luna O bu E () or butbo much				2		.254549
3	the foundation has been in existen-	-year base period - divide the total of	on line 2 by 5 t	o, or by the numb	er or y	ears		3		.050910
	the roundation has been in existen	ce ii less iilali 5 years								.030310
4	Enter the net value of noncharitable	e-use assets for 2018 from Part X, I	line 5					4		1,008,991.
		,								
5	Multiply line 4 by line 3							5		51,368.
6	Enter 1% of net investment income	e (1% of Part I, line 27b)						6		339.
_										E1 707
7	Add lines 5 and 6							7	_	51,707.
8	Enter qualifying distributions from	Part XII, line 4						8		52,025.
	. , ,	line 7, check the box in Part VI, line	1b, and comp	lete that part usin	g a 1%	tax rate.				

	" "IGLEWSKI- FAMILY FOUNDATION					
	990-PF (2018) C/O JANICE MADER			36-610		Page 4
27-200	Excise Tax Based on Investment Income (Section 4940		40(e), or 49	18 - see	instructions	6)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔛 and e	enter "N/A" on line 1) [
	Date of ruling or determination letter: (attach copy of letter if nee		ns) 📗		CARCARIA (C.	
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	➤ X and enter 1%	P	1 Programme values of the	3.5	39.
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4%		(b). J			2
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; of	hers, enter -0-)	Ļ	2		0.
	Add lines 1 and 2		-	3	33	39.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, o	thers, enter -U-)	-	4		0.
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		Ē	5	3.3	39.
	Credits/Payments	ا ما	740.			
	2018 estimated tax payments and 2017 overpayment credited to 2018	_6a	0.			
	Exempt foreign organizations - tax withheld at source	6b	0.			
	Tax paid with application for extension of time to file (Form 8868)	6c	0.			
	Backup withholding erroneously withheld	6d	<u> </u>	ARCH CEESE.	7/	10.
	Total credits and payments. Add lines 6a through 6d		-	7		0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	acnea	_ }	8		<u> </u>
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		?	9	4.0	01.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	401 İ	Refunded >	10	40	0.
	Enter the amount of line 10 to be: Credited to 2019 estimated tax **Extended Type	401.	Retunded 🗲	11		<u> </u>
	During the tax year, did the foundation attempt to influence any national, state, or local legis	lation or did it particin	ate or intervene ii		Yes	No
	any political campaign?	siation of the it particips	ate of litter verie in	1	1a	X
	only pointical campaight? Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	eac2 Saa tha instructio	one for the definit	on	1b	X
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies (UII	10	
	distributed by the foundation in connection with the activities.	or any materials poons	ried of			
	Did the foundation file Form 1120-POL for this year?				16	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	voar*				
	(1) On the foundation. ► \$ O . (2) On foundation managers		0.			
	Enter the reimbursement (if any) paid by the foundation during the year for political expendi					
	managers > \$ 0.	iture tax imposed on ic	Junuation			
	Has the foundation engaged in any activities that have not previously been reported to the IF	RS?			2	X
	If "Yes," attach a detailed description of the activities.	10.				7.00
	Has the foundation made any changes, not previously reported to the IRS, in its governing i	nstrument articles of i	ncorporation or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	non amorn, ar noice or r	moor por attort, or		3	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year	r?			4a	X
	If "Yes," has it filed a tax return on Form 990-T for this year?	•		N/A	4b	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?)		·	5	X
	If "Yes," attach the statement required by General Instruction T					
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied ei	ther.				
	By language in the governing instrument, or	•				
	 By state legislation that effectively amends the governing instrument so that no mandator 	y directions that confli	ct with the state l	aw		
	remain in the governing instrument?	•			6 X	
	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comp	olete Part II, col. (c), an	d Part XV		7 X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructio	ons 🕨				
	IL					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttorney General (or des	signate)			
	of each state as required by General Instruction G? If "No," attach explanation				8b X	
9	is the foundation claiming status as a private operating foundation within the meaning of se	ction 4942(j)(3) or 494	42(j)(5) for calend	far	Fig Arg	
	year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," com	plete Part XIV			9	<u> </u>
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedu	ile listing their names and a	ddresses		10	<u>X</u>
				F	orm 990-PF (2018)

	IGLEWSKI FAMILY FOUNDATION 36-610	9490	_	Page 5
P.	art VII A Statements Regarding Activities (continued)	L váleda v. I.		
			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		<u> X</u>
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	,		Х
10	If "Yes," attach statement. See instructions.	12	Х	
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	[13]		
14	The books are in care of ► JANICE MADER Telephone no ►			
	Located at ▶ 19260 WINDING WAY, FORT MYERS, FL ZIP+4 ▶3	3908		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			$\overline{\cdot}$
	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		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
_	foreign country			
*Pa	Statements Regarding Activities for Which Form 4720 May Be Required	[and to Hotelana]		
	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):		TOP	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			15
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		17.10	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No			
	(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"	X		
	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			
h	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	NEG. COLORY	X
	Organizations relying on a current notice regarding disaster assistance, check here		7.4	574F
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
•	before the first day of the tax year beginning in 2018?	1c	Via allum	Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	CET !		9.8.2
	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? Yes X No			
	If "Yes," list the years \blacktriangleright			
b	If "Yes," list the years \(\bigsim_ \),			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	273		
	statement - see instructions) N/A	2b	N= (-	4.5
	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		* (
2.	. Did the foundation held more than a ON/ direct or indirect interest in any hyperson enteresing at any time.	200 E 200 E 20	ees. 1-12.2	TOTAL STATE OF

Yes X No

N/A

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2018.)

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?

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,

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3Ь

4a

during the year?

· IGLEWSKI FAMILY FOUNDATI	ON			
Form 990-PF (2018) C/O JANICE MADER			36-610949	0 Page 6
Part VIIEB Statements Regarding Activities for Which F	orm 4720 May Be Re	equired _{(contin}	ued)	
5a During the year, did the foundation pay or incur any amount to:				Yes No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	es 🗶 No 🧣	
(2) Influence the outcome of any specific public election (see section 4955), o	r to carry on, directly or indire	ctly,		
any voter registration drive?		Y6	es 🗓 No 📳	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	es 🗶 No 🕌	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section			
4945(d)(4)(A)? See instructions		Ye	es 🗶 No 🎏	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo			
the prevention of cruelty to children or animals?		Ye	es 🗶 No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance? See instru	uctions		N/A 5	b
Organizations relying on a current notice regarding disaster assistance, check l	nere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for				
expenditure responsibility for the grant?	N	[/A Ye	es 📖 No 🎏	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Ye	es 🗶 No 🕍	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		6	b X
If "Yes" to 6b, file Form 8870.		_		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No	14 Z (L)
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A 7	b na pozst retsou
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	51,000,000 in remuneration or		(V).	
excess parachute payment(s) during the year? Paint/III Information About Officers, Directors, Truste	es Foundation Man		es X No	
Paid Employees, and Contractors	ses, i oundation ivial	lagers, riigiliy		
1 List all officers, directors, trustees, and foundation managers and ti	neir compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
JANICE MADER	MANAGING TRUS			
799 BIRDIE VIEW PT.	1			
SANIBEL, FL 33957	5.00	0.	0.	0.
JERRY MADER	TRUSTEE			
799 BIRDIE VIEW PT.				
SANIBEL, FL 33957	5.00	0.	0.	0.
	PAST MANAGING	TRUSTEE		
1024 CELLANA COURT				
FORT MYERS, FL 33908	5.00	2,000.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1) If none is	ntor "NONE "		
2 Compensation of tive highest-paid employees (other than those inc	(b) Title, and average	inter NONE.	(d) Contributions to	(e) Eynense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other allowances
NONE	devoted to position		compensation	allowalices
1101111		ı		
	1	!		

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

IGLEWSKI FAMILY FOUNDATION

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Part VIII Information About Officers, Directors, Trustees, Founda Paid Employees, and Contractors (continued)		0100400 18	ige 7
3 Five highest-paid independent contractors for professional services. If none, enter	r "NONE."	-	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compens	ation
NONE	_		
Total number of others receiving over \$50,000 for professional services		>	0
Rant IX-A Summary of Direct Charitable Activities	····		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers produced in N/A	stical information such as the duced, etc.	Expenses	
2		-	
3			
4			
Part IX-B Summary of Program-Related Investments	· · · · · · · · · · · · · · · · · · ·		
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2.	Amount	
1 N/A		1	
2		-	_
All other program-related investments. See instructions 3			
		7	

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 \blacktriangleright

0.

Total. Add lines 1 through 3

36-6109490 Form 990-PF (2018) C/O JANICE MADER Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes. 872,703. a Average monthly fair market value of securities 1a 151,653. Average of monthly cash balances 1b b C Fair market value of all other assets 10 1,024,356. Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1e 1c (attach detailed explanation) Acquisition indebtedness applicable to line 1 assets 2 2 3 Subtract line 2 from line 1d 3 15,365 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 008,991 5 Minimum investment return Enter 5% of line 5 50,450 PartXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here
and do not complete this part.) 50,450. Minimum investment return from Part X, line 6 1 Tax on investment income for 2018 from Part VI, line 5 339. 2a Income tax for 2018. (This does not include the tax from Part VI.) b 339 2c Add lines 2a and 2b 50. 3 3 Distributable amount before adjustments. Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 4 50. 111 5 Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 50 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. 7 Part XIII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 52,025. a Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a 0. Program-related investments - total from Part IX-B 1b b 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 Cash distribution test (attach the required schedule) b 3b

Adjusted qualifying distributions Subtract line 5 from line 4

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

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

income Enter 1% of Part I, line 27b

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Form 990-PF (2018)

52,025.

51,686.

339

4

6

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C/O JANICE MADER

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
Distributable amount for 2018 from Part XI, line 7		1		50,111.
2 Undistributed income, if any, as of the end of 2018			· · · · · · · · · ·	
a Enter amount for 2017 only			0.	
b Total for prior years:				
g rotal for prior yours		0.		
3 Excess distributions carryover, if any, to 2018				
a From 2013				
b From 2014 571.				
c From 2015 2,088.				
d From 2016 8,927.				
e From 2017 625.				
f Total of lines 3a through e	12,211.			
Qualifying distributions for 2018 from				
Part XII, line 4 [.] ► \$ 52,025.				
a Applied to 2017, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		monet adulatio not continue	contain constain digitor	Light computer conce
(Election required - see instructions)	0.			
d Applied to 2018 distributable amount				50,111.
e Remaining amount distributed out of corpus	1,914.			30,111.
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	14,125.			
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				0.
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	14,125.			
10 Analysis of line 9				
a Excess from 2014 571.				
b Excess from 2015 2,088.		6		
c Excess from 2016 8,927.	^	(<u>,</u>	' .i , , ,	$\sim h$
d Excess from 2017 625.				
e Excess from 2018 1,914.				

IGLEWSKI FAMILY FOUNDATION

	NICE MADER				L09490 Page 10
Part:XIV Private Operating F	oundations (see in	structions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo			▶		
b Check box to indicate whether the foun		ng foundation described i		4942(j)(3) or4	1942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year	(1) 0017	Prior 3 years	1 (1) 0045	- / / / / / / / / / / / / / / / / / / /
income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
investment return from Part X for					
each year listed					<u> </u>
b 85% of line 2a					ļ
c Qualifying distributions from Part XII,	ļ	1			
line 4 for each year listed			 	 	
d Amounts included in line 2c not					
used directly for active conduct of exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "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					<u> </u>
ParttXV■ Supplementary Info			f the foundation	had \$5,000 or mo	re in assets
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh year (but only if they have contributed r			ributions received by the	foundation before the clos	se of any tax
NONE					
b List any managers of the foundation who other entity) of which the foundation ha			or an equally large portio	n of the ownership of a pa	artnership or
NONE	o a vovo o groutor interco	•			
2 Information Regarding Contribute	on Grant Gift Loan	Scholarchin etc. Dr.	ograma:		
<u> </u>	only makes contributions t	o preselected charitable	organizations and does n		ests for funds If
a The name, address, and telephone num					
JANICE MADER, IGLEWS		•	ations should be address	cu	
19260 WINDING WAY, F					
b The form in which applications should t WRITTEN STATEMENT OF	oe submitted and informat	ion and materials they st	onlq include.		
c Any submission deadlines: NONE			· ·		· -
d Any restrictions or limitations on award	s such as by apparachies	l areas charitable fields	kinds of institutions or o	other factors:	
NONE	o, outer as by govyrapilled	. a. 003, OHAHADIC HEIDS,	Kingo of illotticitotio, UF C	and lacturs.	

	(CORRINGEO)		···	· -
3 Grants and Contributions Paid During the Y		Payment	<u> </u>	
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year				
		1		
AGRACE FD	N/A	CHARITABLE	SUPPORT	
MADISON, WI 53711		-		1,000.
		İ		
ALZHEIMER'S ASSOCIATION	N/A	CHARITABLE	SUPPORT	
225 N MICHIGAN AVE, FL 17 CHICAGO, IL 60601		+		1 000
CHICAGO, ID 60601	-	 		1,000.
CARINGBRIDGE 1715 YANKEE DOODLE RD, STE 301	N/A	CHARITABLE	SUPPORT	
EAGEN MN 55121				1,000.
,				
CHILDREN'S HEALTHCARE OF ATLANTA FD	N/A	CHARITABLE	SUPPORT	
3395 NE EXPRESSWAY, STE 100	N/A	CHARTTABLE	BOFFORT	i
ATLANTA, GA 30341				2,000.
CHRISTMAS COMMANDOS	N/A	CHARITABLE	SUPPORT	
1528 N LAKE GEORGE			1	
MISHAWAKA, IN 46545	<u></u>		<u> </u>	1,000.
	NTINUATION SHEE	ST(S)	<u>▶</u> 3a	47,000.
Approved for future payment				
NONE				
		1		
		:		
Total		<u> </u>	<u> </u>	0.
10101			י עט י	

Part XV Supplementary Informati 3 Grants and Contributions Paid During th				
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	Continuation	741104111
CSUN MUSIC THERAPY	N/A	CHARITABLE	SUPPORT	
18111 NORDHOFF ST				
NORTHRIDGE, CA 91330				2,000.
DANNY DID FOUNDATION	N/A	CHARITABLE	SUPPORT	
PO BOX 46576				
CHICAGO, IL 60646				2,000.
DAVE THOMAS FD FOR ADOPTION	N/A	CHARITABLE	SUPPORT	
716 MT. AIRYSHIRE BLVD, STE 100				
COLUMBUS, OH 43235				1,000.
ESSENTIAL TREMOR FOUNDATION	N/A	CHARITABLE	SUPPPORT	
PO BOX 14005				
LENEXA, KS 66285				1,000.
F.I.S.H. OF SANIBEL	N/A	CHARITABLE	SUPPORT	
1630 PERIWINKLE WAY, UNIT B				
SANIBEL, FL 33957				1,000.
FIRST LOVE INTERNATIONAL	N/A	CHARITABLE	SUPPORT	
P.O. BOX 15836				
LOVES PARK, IL 61132				2,000.
GLADIOLUS LEARNING & DEVELOPMENT	N/A	CHARITABLE	SUPPORT	
CENTER	N/ A		DOLLOKI	
10320 GLADIOLUS DR			:	
FORT MEYERS, FL 33908				1,000.
HADLEY SCHOOL FOR THE BLIND	N/A	CHARITABLE	SUPPPORT	
700 ELM STREET				
WINNETKA, IL 60093		ļ		2,000.
HARRY CHAPIN FOOD BANK	N/A	CHARITABLE	SUPPORT	
3760 FOWLER STREET				
FORT MYERS, FL 33901				1,000.
HISTIOCYTOSIS ASSOC OF AMERICA	N/A	CHARITABLE	SUPPORT	
332 NORTH BROADWAY				
PITMAN, NJ 08071		1		2,000.
Total from continuation sheets				41,000.

Part XV Supplementary Information				·
3 Grants and Contributions Paid During the \	fear (Continuation)			
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		
HOLLAND FREE HEALTH CLINIC	N/A	CHARITABLE	SUPPORT	
99 W 26TH ST	,,,			
HOLLAND, MI 49423				1,000.
LED COLOR CULDADA MOLL DO	NT / N	CUADIMADI E	CIIDDODM	
LEE COAST CHAPTER MDAA FD PO BOX 682	N/A	CHARITABLE	SUPPORT	
SANIBEL, FL 33957				1,000.
LIGHTHOUSE SCHOOL FOR THE BLIND	N/A	CHARITABLE	SUPPORT	
1155 MARKET ST, 10TH FLOOR SAN FRANCISCO, CA 94103				2,000.
SAN FRANCISCO, CA 34103				2,000.
LURIE CHILDREN'S HOSPITAL OF CHICAGO	N/A	CHARITABLE	SUPPORT	
225 E CHICAGO		1		
CHICAGO, IL 6011		 		2,000.
MICIANA PARTNERS FOR PARKINSONS	N/A	CHARITABLE	SUPPORT	
50698 STATE RD 933				
SOUTH BEND, IN 46637				2,000.
·			,	
MUNDELEINE HIGH SCHOOL FD	N/A	CHARITABLE	SUPPORT	
1350 W HAWLET ST			DOTT ON T	
MUNDELEIN , IL 60060				3,000.
		L		
PAN-FLORIDA 2097 TRADE CENTER WAY, STE D	N/A	CHARITABLE	SUPPORT	
NAPLES , FL 34109				1,000.
PIZZA 4 PATRIOTS	N/A	CHARITABLE	SUPPORT	
P.O. BOX 542 ELK GROVE VILLAGE, IL 60009				1,000.
EDR GROVE VILLEAGE, IL 00005				1,000.
PLAY FOR JAKE FOUNDATION	N/A	CHARITABLE	SUPPORT	
612 MONROE ST				
LAPORTE, IN 46350		 		2,000.
PLAY FOR P.I.N.K.	N/A	CHARITABLE	SUPPORT	
60 E 56TH ST, 8TH FLOOR				
NEW YORK, NY 10022				1,000.
Total from continuation sheets				<u> </u>

Part XV Supplementary Information	า			
3 Grants and Contributions Paid During the	ear (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	, and
POWALD MODOWALD HOUSE OF MIGHTANA	.,,	OUADIMADI D	CHD DOD#	
RONALD MCDONALD HOUSE OF MICHIANA 610 N MICHIGAN ST, STE 310	N/A	CHARITABLE	SUPPORT	
SOUTH BEND, IN 46601				5,000.
ST JUDE'S CHILDREN'S RESEARCH	N/A	CHARITABLE	SUPPORT	
HOSPITAL				
501 ST JUDE PLACE				
MEMPHIS, TN 38105	-	+		1,000.
SUNRISE DAY CAMP-CHILD CANCER	N/A	CHARITABLE	SUPPORT	
15 NEIL CT				
OCEANSIDE, NY 11572				1,000.
THE HERREN PROJECT	N/A	CHARITABLE	SUPPORT	
PO BOX 131	,,,,		DOLLOW	
PORTSMOUTH, RI 02871				2,000.
WOUNDED WARRIOR PROJECT	N/A	CHARITABLE	SUPPORT	
4899 BELFORT JACKSONVILLE, FL 32256				1,000.
onenservinas, in susse				1,000.
			 	
				
			1	
Total from continuation sheets				

C/O JANICE MADER

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Part XVI A*	Analysis of Income-Producing Activities
-------------	---

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ided by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue	code		code	, who are	-
a		· · · · · · · · · · · · · · · · · · ·	-		
b			ļ		
C					
d					
e	L .				
f					
g Fees and contracts from government agencies					-
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities	-		14	34,985.	
	-				
5 Net rental income or (loss) from real estate			, A		
a Debt-financed property		• • • • • • • • • • • • • • • • • • • •			
b Not debt-financed property	ļ		-		
6 Net rental income or (loss) from personal					
property					
7 Other investment income			14		
8 Gain or (loss) from sales of assets other					
than inventory					-4,545.
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
			ŀ		
			 		
b			\vdash		
c					
d	— 		 		
e		^	7.9449E	34 005	4 545
12 Subtotal Add columns (b), (d), and (e)		0.			
13 Total Add line 12, columns (b), (d), and (e)				13 _	30,440.
(See worksheet in line 13 instructions to verify calculation	ns)				
Relationship of Activitie	es to the Acco	mplishment of Exe	empt	Purposes	
\$138-100 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
Line No Explain below how each activity for which	n income is reported i	n column (e) of Part XVI-A	contrit	outed importantly to the accon	aplishment of
▼ the foundation's exempt purposes (other	than by providing fur	nds for such purposes)			
	•				
		<u> </u>			
					
	· · · · · · · · · · · · · · · · · · ·				
	· · · · · · · · · · · · · · · · · · ·				

Form 990-PF (2018)

C/O JANICE MADER

[PartiXVIII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

	(other that Transfers (1) Cash (2) Other Other tran (1) Sales (2) Purc (3) Rental	in section 501(c)(3) organ from the reporting founda- r assets asactions: s of assets to a noncharital hases of assets from a nor al of facilities, equipment,	izations) or in sectio ation to a noncharital ble exempt organizat ncharitable exempt o	n 527, relating ole exempt org	g with any other organizati to political organizations? panization of		tion 501(c)	1a(1) 1a(2) 1b(1) 1b(2) 1b(3)	Yes	X X X X X X
	(5) Loan (6) Perfo Sharing of If the ans or service		iling lists, other asse "Yes," complete the foundation. If the four	ts, or paid em following sche idation receive	ployees dule. Column (b) should al	-	market value of the goods, c n or sharing arrangement, sh			X X X
a)L	ine no	(b) Amount involved	(c) Name of	noncharitable	exempt organization	(d) Description	n of transfers, transactions, and s	haring ari	angemer	ıts
	ın section	501(c) (other than section	n 501(c)(3)) or in se		or more tax-exempt organ	izations described		Yes	X	
b	If "Yes," c	omplete the following sche					- : 			
		(a) Name of org	anization		(b) Type of organization		(c) Description of relations	nip		
Się He	gn and b		plete Declaration of pre	parer (other than	accompanying schedules and staxpayer) is based on all information of the Date		nas any knowledge May retu sho	rn with th	discuss the prepare of See ins	er
	<u>~</u>	Print/Type preparer's na DANIEL A. V Firm's name ► WIP Firm's address ► 10	me WOLF FLI LLP 0 TRI-STA		gnature ERNATIONAL,	Date 04/02/19 SUITE 300	Firm's EIN ► 39 - 07		49	
		LI	NCOLNSHIR	변, 1년 (60069		Phone no 847.94		100 0-PF	(00.10)
							Fr.	ırm əs	V-FF	CHILLIAN

FORM 990-PF	DIVIDEND	S AND INTER	EST FROM SECU	RITIES S'	PATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
MESIROW FINANCIAL	34,985	•	0. 34,985	. 34,985.	
TO PART I, LINE 4	34,985	•	34,985	34,985.	
FORM 990-PF		ACCOUNTI	NG FEES	S	FATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
WIPFLI LLP		3,000.	0.		3,000.
TO FORM 990-PF, PG	1, LN 16B	3,000.	0.		3,000.
				W. M. J.	
FORM 990-PF		TAX	ES ————————————————————————————————————	S'	TATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DESCRIPTION FEDERAL TAX FOREIGN TAXES PAID		EXPENSES	NET INVEST-	ADJUSTED	CHARITABLE
FEDERAL TAX		EXPENSES PER BOOKS	MENT INCOME 0.	ADJUSTED	CHARITABLE PURPOSES 0.
FEDERAL TAX FOREIGN TAXES PAID	1, LN 18	PER BOOKS 1,112. 986.	NET INVEST- MENT INCOME 0. 986.	ADJUSTED NET INCOME	CHARITABLE PURPOSES 0. 0.
FEDERAL TAX FOREIGN TAXES PAID TO FORM 990-PF, PG	1, LN 18	1,112. 986. 2,098.	NET INVEST- MENT INCOME 0. 986.	ADJUSTED NET INCOME	CHARITABLE PURPOSES 0. 0.
FEDERAL TAX FOREIGN TAXES PAID TO FORM 990-PF, PG FORM 990-PF	1, LN 18	PER BOOKS 1,112. 986. 2,098. OTHER E	NET INVEST- MENT INCOME 0. 986. 986. XPENSES (B) NET INVEST-	ADJUSTED NET INCOME S' (C) ADJUSTED	CHARITABLE PURPOSES 0. 0. TATEMENT 4 (D) CHARITABLE
FEDERAL TAX FOREIGN TAXES PAID TO FORM 990-PF, PG FORM 990-PF DESCRIPTION FILING FEES	-	OTHER E (A) EXPENSES PER BOOKS 2,098.	NET INVEST- MENT INCOME 0. 986. 986. XPENSES (B) NET INVEST- MENT INCOME 0.	ADJUSTED NET INCOME S' (C) ADJUSTED	CHARITABLE PURPOSES 0. 0. 10. CHARITABLE PURPOSES 25.

FORM 990-PF	CORPORATE STOCK		STATEMENT 5
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
VERIZON		10,000.	79,495.
AMEREN		63,076.	145,854.
DUKE ENERGY		34,088.	112,190.
SPECTRA ENERGY/ENBRIDGE		24,561.	59,611.
DNP SELECT INCOME FUND INC		16,194.	21,122.
PACIFIC GAS & ELECTRIC		17,777.	47,500.
AT&T		18,991.	105,284.
EXELON		22,511.	78,925.
HEALTH CARE PROPERTY INVESTORS IN	1C.	39,221.	62,843.
FRONTIER COMMUNICATION		0.	. 52 .
TOTAL TO FORM 990-PF, PART II, L	INE 10B	246,419.	712,876.
FORM 990-PF OT	THER INVESTMENTS		STATEMENT 6
FORM 990-PF OT DESCRIPTION	VALUATION METHOD	BOOK VALUE	STATEMENT 6 FAIR MARKET VALUE
	VALUATION		FAIR MARKET
DESCRIPTION	VALUATION METHOD		FAIR MARKET VALUE
DESCRIPTION PRUDENTIAL SHORT-TERM CORPORATE	VALUATION METHOD	BOOK VALUE	FAIR MARKET