SCANNED JAN 0 2 2019

Form 990-PF

Department of the Treasury

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.

_			goviru	ininggorrior instr	2019 and and			, 20
		Ilendar year 2018 or tax year beginning foundation NANCY A LAUTER & A	ים מם	T MCDOTICA	, 2018, and end		Employer identific	
		ID DATED 11/5/2001	TLKEI	I INCDUUGE	T CHARITABLE			7240158
න			o street	address)	Room/suit	- R	Telephone number	
.01	raini Dei	r and street (or P O box number if mail is not delivered t	0 30 660	audi ess;	,		relephone number	(See matractions)
). BOX 803878					210	2-630-6000
_		own, state or province, country, and ZIP or foreign post.	al code					. 030 0000
•	•						f exemption application	
NO.	СНТ	CAGO, IL 60680				'	pending, check here.	
ui G	Che	eck all that apply: Initial return		Initial return	of a former public cha	rity	f Foreign organizatio	no shook horo
₩		Final return	_ F	Amended re	turn	. -	Foreign organizatio	· —
20		Address change	_	Name chang	e	ŀ	85% test, check her computation	e and attach
및춫 H	Che	eck type of organization: X Section 501	(c)(3)	exempt private f	oundation N	∇ $ $		
		eck all that apply: Initial return Final return Address change		Other taxable pr	ivate foundation	- \	f private foundation s inder section 507(b)(► I I
180	Fair	market value of all assets at J Acco	unting	method: X C	ash Accrual			a 60-month termination
Ω,	end	l of year (from Part II, col. (c), line	ther (s	pecify)			under section 507(b)(1 1
_	16)	▶ \$ 20,240,857. (Part I,	column	(d) must be on ca	sh basis)			
	Part	Analysis of Revenue and Expenses (The	(a)	Revenue and	(h) Not investment	(a) A	functed set	(d) Disbursements for charitable
L		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in		xpenses per	(b) Net investment income		djusted net ncome	purposes
١ _	,	column (a) (see instructions))	ļ	books				(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule) .		500,000.				
	2	Check Fig. 1 If the foundation is not required to attach Sch	<u> </u>				r	
	3	Interest on savings and temporary cash investments-						
	4	Dividends and interest from securities		529,420.	529,420.			STMT 1
	5a	Gross rents	<u> </u>					
	1	Net rental income or (loss)		772 200			-	
en	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all		773,388.				
Revenue		assets on line 6a 3, 100, 370			773,388.			
ē	7	Capital gain net_income (from Part IV, line 2) .	<u> </u>		113,300.			
	8	Net short-term capital @@.C.C.L.	H					
	10a	Income modifications Gross sales less returns	si -					
	١.	Less Cost of goods sold NV 26 2019	51					
		Gross profit or (loss) (attach schedule)	21					
	11	Other income (attach schedulet N. 117.	-	-5,944.	-15,715.			STMT 2
	12	Total. Add lines-1-through 11		1,796,864.	1,287,093.			
	13	Compensation of officers, directors, trustees, etc.		86,687.	78,018.			8,669
es	114	Other employee salaries and wages			NONE		NONE	
ens		Pension plans, employee benefits			NONE		NONE	
Ž	16a	Legal fees (attach schedule)			•			
e) LU	ь	Accounting fees (attach schedule) STMT. 3.		2,500.	1,250.		NONE	1,250
Ę.	C	Other professional fees (attach schedule)						
tra	17	Interest	<u> </u>	20 525	15 50	_		
nis	18	Taxes (attach schedule) (see instructions, 4.	ļ	32,536.	17,536.			
Ē	19	Depreciation (attach schedule) and depletion.						<u>.</u>
Ad	20	Occupancy		 :	MONTE		NONTE	
Б	15 16a b c 17 18 19 20 21 22 23 24	Travel, conferences, and meetings			NONE NONE		NONE NONE	
ā	22	Printing and publications Other expenses (attach schedule) STMT. 5 .	_	15.	NONE		NONE	15
Ë	23							10
ra	24	Total operating and administrative expenses. Add lines 13 through 23		121,738.	96,804.		NONE	9,934
Ď	25	Contributions, gifts, grants paid		3,000,000.	20,004.		110111	3,000,000
0	25 26	Total expenses and disbursements Add lines 24 and 25		3,121,738.	96,804.		NONE	3,009,934
_	27	Subtract line 26 from line 12		-,,,50.	50,001.		1,01,1	0,00,701
	a	Excess of revenue over expenses and disbursements	-	1,324,874.				
		Net investment income (if negative, enter -0-)	<u> </u>		1,190,289.			~
	1	Adjusted net income (if negative, enter -0-).						Ĭ
JSA F		perwork Reduction Act Notice, see instructions						Form 990-PF (2018)

Part	Attached schedules and amounts in the Balance Sheets description column should be for end-of-year	Beginning of year	End of	<u> </u>
rait	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	750,859.	372,052.	372,052
3	Accounts receivable			<u> </u>
	Less allowance for doubtful accounts ▶			<u> </u>
4	Pledges receivable ▶			
	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)			
-	Less, allowance for doubtful accounts ► NONE			
8 13	Inventories for sale or use			
Assets	Prepaid expenses and deferred charges			
🎖 10a	·			
t	Investments - corporate stock (attach schedule) . STMT .6	11,805,728.	10,904,189.	11,226,107
0	COMPANY OF THE PROPERTY OF THE	4,959,127.	4,458,720.	4,304,669
11	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation (attach schedule)			
12	Investments - mortgage loans			
13	Investments - other (attach schedule) STMT .8	1,000,000.	2,966,853.	4,338,029
14	Land, buildings, and equipment basis			
	Less accumulated depreciation (attach schedule)			
15	Other assets (describe	1,803,653.		
16	Total assets (to be completed by all filers - see the			
	instructions Also, see page 1, item I)	20,319,367.	18,701,814.	20,240,857
17	Accounts payable and accrued expenses			-
18	Grants payable			j
	Deferred revenue			
19 20 21 22 22 22 22 22 22 22 22 22 22 22 22	Loans from officers, directors, trustees, and other disqualified persons.			Ì
Ā 21	Mortgages and other notes payable (attach schedule)			
تا 22 ات	Other liabilities (describe)			
				Ī
23	Total liabilities (add lines 17 through 22)		NONE	
	Foundations that follow SFAS 117, check here ▶			
es	and complete lines 24 through 26, and lines 30 and 31.			
일 24	Unrestricted			(
24 25	Temporarily restricted			<u> </u>
	Permanently restricted			1
Net Assets or Fund B	Foundations that do not follow SFAS 117, check here ► X			
	and complete lines 27 through 31.			
0 27	Capital stock, trust principal, or current funds	20,319,367.	18,701,814.	1
S 28	Paid-in or capital surplus, or land, bldg , and equipment fund.			
S 29	Retained earnings, accumulated income, endowment, or other funds			· I
30	Total net assets or fund balances (see instructions)	20,319,367.	18,701,814.	
2 31	Total liabilities and net assets/fund balances (see			<u> </u>
	instructions)	20,319,367.	18,701,814.	
	Analysis of Changes in Net Assets or Fund Balar	ices		
1 To	tal net assets or fund balances at beginning of year - Part II	, column (a), line 30 (m	nust agree with	
	d-of-year figure reported on prior year's return)			20,319,367.
	ter amount from Part I, line 27a			-1,324,874.
3 Ot	her increases not included in line 2 (itemize) ▶		3	
	d lines 1, 2, and 3			18,994,493.
5 De	creases not included in line 2 (itemize) ► TAX COST ADJUSTMEN	r	5	292,679.
6 To	tal net assets or fund balances at end of year (line 4 minus lin	ne 5) - Part II, column (b)	, line 30 6	18,701,814.
				Form 990-PF (2018)

Par	Capital Gains	s and Losses for rax on live	Stillent income			
•	* *	scribe the kind(s) of property sold (for exrick warehouse, or common stock, 200	•	(b) How acquired P - Purchase	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 -	PUBLICLY TRADED			D - Donation	<u>'</u>	
_ <u>a</u>		SECORTITES	• • • • • • • • • • • • • • • • • • • •			
C				····		
d				<u> </u>		
<u>u</u>				1		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo	
a	3,106,376.		2,332,988.	1		773,388.
<u>a</u>			273327300.			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
d						
e						
		nowing gain in column (h) and owned by	y the foundation on 12/31/69	(1)	Gains (Col (h) ga	iin minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		(k), but not less t Losses (from co	han -0-) or
a						773,388.
b						·
С			·	ļ		
d						
е				ļ. ,		
2	Capital gain net income		nin, also enter in Part I, line 7 sss), enter -0- in Part I, line 7-	2		773,388.
3		ain or (loss) as defined in sections 1				
	If gain, also enter in P	Part I, line 8, column (c). See inst	tructions. If (loss), enter -0- in $\}$			
				3		
		Inder Section 4940(e) for Redu				
(For	optional use by domestic	private foundations subject to the	section 4940(a) tax on net investr	ment inco	me.)	
If se	ction 4940(d)(2) applies,	leave this part blank.				
		Ab				Vec V Ne
		the section 4942 tax on the distrib		ase perio	oar	Yes X No
		't qualify under section 4940(e). Do		20 201/ 01	trioc	
1	(a)	mount in each column for each year		ing any er	(d)	
Cala	Base period years	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets		Distribution ra (col (b) divided by	
Cale	2017	2,501,982.	23,578,635.	 	(cor (b) divided by	0.106112
_	2016	2,011,336.	20,057,913.	<u> </u>		0.100276
	2015	499,000.	12,813,626.	<u> </u>		0.038943
	2013	355,724.	6,808,751.	 		0.052245
	2013	188,541.	6,588,820.	<u> </u>		0.028615
_	2010	1007311.	0/300/0201	 	**	************
2	Total of line 1 column	(d)		2		0.326191
3		io for the 5-year base period - divid				
,	_	foundation has been in existence i		3		0.065238
	the number of years the		Those than by yours 1111111			
4	Enter the net value of ne	oncharitable-use assets for 2018 fro	om Part X, line 5	4	21,	796,676.
•						
5	Multiply line 4 by line 3			5	1,	421,972.
-						
6	Enter 1% of net investm	ent income (1% of Part I, line 27b)		6		11,903.

Part VI instructions.

1,433,875.

3,009,934.

Add lines 5 and 6.......

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	(*)			
n 990-PF (:	2018) 52-7240158		Pa	ige 4
rt²VI	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ctions)
	operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1)			-
Date of	ruling or determination letter			
	tic foundations that meet the section 4940(e) requirements in Part V, check		11,9	03.
	X and enter 1% of Part I, line 27b			
	ner domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of		_	
	ine 12, col (b)			
-	ider section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		N	ONE
	nes 1 and 2		11,9	03.
	e A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		N	ONE
	sed on investment income. Subtract line 4 from line 3 If zero or less, enter -0		11,9	03.
	/Payments			
	estimated tax payments and 2017 overpayment credited to 2018 6a 93,970.			
	t foreign organizations - tax withheld at source			
	d with application for extension of time to file (Form 8868) 6c NONE	1 111111		,
•	withholding erroneously withheld			
	redits and payments Add lines 6a through 6d		93,9	70.
Enter a	iny penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
	e. If the total of lines 5 and 8 is more than line 7, enter amount owed			
	eyment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		82,0	67.
	the amount of line 10 to be. Credited to 2019 estimated tax ▶ 20,517. Refunded ▶ 11		61,5	50.
t VII-A	Statements Regarding Activities			
	the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	pate or intervene in any political campaign?	1a		Х
	spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	tions 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			
	ned or distributed by the foundation in connection with the activities			
	e foundation file Form 1120-POL for this year?	1c		Σ
	he amount (if any) of tax on political expenditures (section 4955) imposed during the year			
(1) On t	he foundation ► \$ (2) On foundation managers ► \$			
Enter	the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	ndation managers \$			
	e foundation engaged in any activities that have not previously been reported to the IRS?	2		χ
	" attach a detailed description of the activities			
Has th	ne foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	rporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		}
	e foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Σ
	" has it filed a tax return on Form 990-T for this year?	4b		
Was th	ere a liquidation, termination, dissolution, or substantial contraction during the year?	5		}
	" attach the statement required by General Instruction T.	1 1		
Are the	e requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
By I	language in the governing instrument, or			
 By 	state legislation that effectively amends the governing instrument so that no mandatory directions that			
	t with the state law remain in the governing instrument?	6	Х	
	e foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х	
	he states to which the foundation reports or with which it is registered. See instructions.			
	IL			
If the	answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
	ignate) of each state as required by General Instruction G?If "No," attach explanation	8b	Х	
	foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV If "Yes,"			

X Form **990-PF** (2018)

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

Par	t*VII-A Statements Regarding Activities (continued)	T0-12-04-0	137	
			Yes	No
`11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement See instructions	12	ļ <u>.</u>	<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	l
	Website address ► N/A			
14	The books are in care of ▶ NORTHERN TRUST COMPANY Telephone no ▶ (312) 630	-600	0	
	Located at ▶ P.O. BOX 803878, CHICAGO, IL ZIP+4 ▶ 60680			т
15		• • •	▶	· []
	and enter the amount of tax-exempt interest received or accrued during the year ▶ 15		V	- Bl-
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority		Yes	No
-	over.a bank, securities, or other financial account in a foreign country?	16	i osateta t	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of			
	the foreign country	J. 73		13.E.F.3
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	Naki: 17	Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	E. da .	FES	140
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? Yes X No			
	(1) 2.19990 110 2.10 2.10 2.10 2.10 2.10 2.10			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
		25.7		
	(c) the same of th		整	
	(4) Tay compensation to or pay or companies and expenses and analysis and			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the Bellett of also of a disqualified personnel of the second of the sec		13	
	(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.)			
h	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
U	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		Х
	Organizations relying on a current notice regarding disaster assistance, check here	鑑.	1872.	TEV
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
٠	were not corrected before the first day of the tax year beginning in 2018?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			報信
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		1	
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?			
	If "Yes," list the years		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
ь	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		事并	TT 12
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		推设	
	all years listed, answer "No" and attach statement - see instructions)	2b	100000000000000000000000000000000000000	- Gleran
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		100 mg	
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise		差错	
	at any time during the year?			
b	olf "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			医 2
	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		W. Y.	2-13
	foundation had excess business holdings in 2018)	3b		 -,-
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	\$55 7 55.7**	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			變選
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b	n.PF	/2019

Par	Statements Regarding Activities f	or Which Form 4	720 May Be Req	uired (continued)			_
5a	During the year, did the foundation pay or incur any amo	ount to				Yes	No
•	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (sectio	n 4945(e))?	. Yes X No			[
	(2) Influence the outcome of any specific public ele						
	directly or indirectly, any voter registration drive?			. Yes X No			1
	(3) Provide a grant to an individual for travel, study, or o	ther similar purposes	?	. Yes X No			
	(4) Provide a grant to an organization other than a						
	section 4945(d)(4)(A)? See instructions			Yes X No			
	(5) Provide for any purpose other than religious, ch	naritable, scientific,	literary, or educations				
	purposes, or for the prevention of cruelty to children	or animals?		. Yes X No			
Ь	If any answer is "Yes" to 5a(1)-(5), did any of the	transactions fail to	qualify under the e	xceptions described in	ı <u></u>		
	Regulations section 53.4945 or in a current notice regar	ding disaster assistan	ce? See instructions .		5b_		
	Organizations relying on a current notice regarding disas	ster assistance, check	here	▶			
c	If the answer is "Yes" to question 5a(4), does the	foundation claim e	xemption from the t	ax			
	because it maintained expenditure responsibility for the	grant?	. .	. Yes No	·		
	If "Yes," attach the statement required by Regulations se	ction 53.4945-5(d)					
6a	Did the foundation, during the year, receive any fur	nds, directly or indir	ectly, to pay premiu				
	on a personal benefit contract?				·		
b	Did the foundation, during the year, pay premiums, direct	tly or indirectly, on a	personal benefit contra	act?	6b		X
	If "Yes" to 6b, file Form 8870						ŀ
7a	At any time during the tax year, was the foundation a pa	rty to a prohibited tax	shelter transaction?.	. Yes X No			
b	If "Yes," did the foundation receive any proceeds or have	•		ion?	7b		
8	Is the foundation subject to the section 4960 tax on pay	ment(s) of more than	\$1,000,000 in				
	remuneration or excess parachute payment(s) during the	year?		. Yes X No]
Par	Information About Officers, Directo and Contractors	rs, Trustees, Fou	indation ivianagei	rs, Highly Pald Emp	noyees,		
1	List all officers, directors, trustees, and foundatio	n managers and the	neir compensation.	See instructions.			
	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expens other all		
NORTH	(a) Name and address ERN TRUST COMPANY	(b) Title, and average hours per week	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation			
NORTH	(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid.	(d) Contributions to employee benefit plans			
NORTH	(a) Name and address ERN TRUST COMPANY	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation			es
NORTH	(a) Name and address ERN TRUST COMPANY	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation			es
NORTH	(a) Name and address ERN TRUST COMPANY	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation			es
NORTH	(a) Name and address ERN TRUST COMPANY	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation			es
NORTH	(a) Name and address ERN TRUST COMPANY	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation			es
NORTH P.O.	(a) Name and address ERN TRUST COMPANY BOX 803878, CHICAGO, IL 60680	(b) Title, and average hours per week devoted to position TRUSTEE 40	(c) Compensation (If not paid, enter -0-) 86,687.	(d) Contributions to employee benefit plans and deferred compensation	other all	owance	-0-
NORTH P.O.	(a) Name and address ERN TRUST COMPANY BOX 803878, CHICAGO, IL 60680 Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position TRUSTEE 40	(c) Compensation (If not paid, enter -0-) 86,687.	(d) Contributions to employee benefit plans and deferred compensation	other all	owance	-0-
NORTH P.O.	(a) Name and address ERN TRUST COMPANY BOX 803878, CHICAGO, IL 60680 Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position TRUSTEE 40 (other than those	(c) Compensation (lf not paid, enter -0-) 86,687.	(d) Contributions to employee benefit plans and deferred compensation -0-	other all	one,	-0- enter
NORTH P.O.	(a) Name and address ERN TRUST COMPANY BOX 803878, CHICAGO, IL 60680 Compensation of five highest-paid employees	(b) Title, and average hours per week devoted to position TRUSTEE 40 (other than those hours per week hours per week	(c) Compensation (If not paid, enter -0-) 86,687.	(d) Contributions to employee benefit plans and deferred compensation -()- (d) Contributions to employee benefit plans and deferred	other all	one,	-0- enter
NORTH P.O.	(a) Name and address ERN TRUST COMPANY BOX 803878, CHICAGO, IL 60680 Compensation of five highest-paid employees "NONE."	(b) Title, and average hours per week devoted to position TRUSTEE 40 (other than those (b) Title, and average	(c) Compensation (lf not paid, enter -0-) 86,687.	(d) Contributions to employee benefit plans and deferred compensation -()- e 1 - see instruction (d) Contributions to employee benefit	other all	one,	-0- enter
NORTH P.O.	(a) Name and address ERN TRUST COMPANY BOX 803878, CHICAGO, IL 60680 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 40 (other than those hours per week hours per week	(c) Compensation (If not paid, enter -0-) 86,687. 8e included on lin (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation -()- (d) Contributions to employee benefit plans and deferred compensation	other all ons). If no (e) Expens other all	one,	-0- enter
NORTH P.O.	(a) Name and address ERN TRUST COMPANY BOX 803878, CHICAGO, IL 60680 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 40 (other than those hours per week hours per week	(c) Compensation (lf not paid, enter -0-) 86,687.	(d) Contributions to employee benefit plans and deferred compensation -()- (d) Contributions to employee benefit plans and deferred	other all ons). If no (e) Expens other all	one,	-0- enter
NORTH P.O.	(a) Name and address ERN TRUST COMPANY BOX 803878, CHICAGO, IL 60680 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 40 (other than those hours per week hours per week	(c) Compensation (If not paid, enter -0-) 86,687. 8e included on lin (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation -()- (d) Contributions to employee benefit plans and deferred compensation	other all ons). If no (e) Expens other all	one,	-0- enter
NORTH P.O.	(a) Name and address ERN TRUST COMPANY BOX 803878, CHICAGO, IL 60680 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 40 (other than those hours per week hours per week	(c) Compensation (If not paid, enter -0-) 86,687. 8e included on lin (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation -()- (d) Contributions to employee benefit plans and deferred compensation	other all ons). If no (e) Expens other all	one,	-0- enter
NORTH P.O.	(a) Name and address ERN TRUST COMPANY BOX 803878, CHICAGO, IL 60680 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 40 (other than those hours per week hours per week	(c) Compensation (If not paid, enter -0-) 86,687. 8e included on lin (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation -()- (d) Contributions to employee benefit plans and deferred compensation	other all ons). If no (e) Expens other all	one,	-0- enter
NORTH P.O.	(a) Name and address ERN TRUST COMPANY BOX 803878, CHICAGO, IL 60680 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 40 (other than those hours per week hours per week	(c) Compensation (If not paid, enter -0-) 86,687. 8e included on lin (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation -()- (d) Contributions to employee benefit plans and deferred compensation	other all ons). If no (e) Expens other all	one,	-0- enter
NORTH P.O.	(a) Name and address ERN TRUST COMPANY BOX 803878, CHICAGO, IL 60680 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 40 (other than those hours per week hours per week	(c) Compensation (If not paid, enter -0-) 86,687. 8e included on lin (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation -()- (d) Contributions to employee benefit plans and deferred compensation	other all ons). If no (e) Expens other all	one,	-0- enter
NORTH P.O.	(a) Name and address ERN TRUST COMPANY BOX 803878, CHICAGO, IL 60680 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 40 (other than those hours per week hours per week	(c) Compensation (If not paid, enter -0-) 86,687. 8e included on lin (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation -()- (d) Contributions to employee benefit plans and deferred compensation	other all ons). If no (e) Expens other all	one,	-0- enter
NORTH P.O.	(a) Name and address ERN TRUST COMPANY BOX 803878, CHICAGO, IL 60680 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 40 (other than those hours per week hours per week	(c) Compensation (If not paid, enter -0-) 86,687. 8e included on lin (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation -()- (d) Contributions to employee benefit plans and deferred compensation	other all ons). If no (e) Expens other all	one,	-0- enter
NORTH P.O.	(a) Name and address ERN TRUST COMPANY BOX 803878, CHICAGO, IL 60680 Compensation of five highest-paid employees "NONE." Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position TRUSTEE 40 (other than thos (b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-) 86,687. 86 compensation (c) Compensation	(d) Contributions to employee benefit plans and deferred compensation -0- (d) Contributions to employee benefit plans and deferred compensation NONE	other all (e) Expensother all	one,	-0- enter

Part	VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employ and Contractors (continued)	ees,
3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE.	"
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	3	NONE
	· · · · · · · · · · · · · · · · · · ·	
		
—		
		17017
	number of others receiving over \$50,000 for professional services	NONE
Part		
	the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of anizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 NC	DNE	
		·
2		
3		
4 —		
_		
Dout	IX-B Summary of Program-Related Investments (see instructions)	
	cribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NC		
. 110	Mu — — — — — — — — — — — — — — — — — — —	
2		<u> </u>
Aii c	other program-related investments. See instructions	
3 N C	DNE	
_		
Total.	Add lines 1 through 3 · · · · · · · · · · · · · · · · · ·	

Page 7

Page 8

Par	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign fou	ndations,
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	22,128,605.
	Average of monthly cash balances	1b	NONE
	Fair market value of all other assets (see instructions)	1c	NONE
	Total (add lines 1a, b, and c)	1d	22,128,605.
	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	NONE
3	Subtract line 2 from line 1d	3	22,128,605.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
•	instructions)	4	331,929.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V. line 4	5	21,796,676.
6	Minimum investment return. Enter 5% of line 5	6	1,089,834.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	1,089,834.
	Tax on investment income for 2018 from Part VI, line 5 2a 11,903.		
ь	Income tax for 2018. (This does not include the tax from Part VI.).		
c	Add lines 2a and 2b.	2c	11,903.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,077,931.
4	Recoveries of amounts treated as qualifying distributions	4	NONE
5	Add lines 3 and 4	5	1,077,931.
6	Deduction from distributable amount (see instructions)	6	NONE
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
•	line 1	7	1,077,931.
Par	Qualifying Distributions (see instructions)		
		T	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		2 000 024
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	3,009,934.
	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	NONE
3	Amounts set aside for specific charitable projects that satisfy the:		
_	Suitability test (prior IRS approval required)	3a	NONE
b	Cash distribution test (attach the required schedule)	3b	NONE
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	3,009,934.
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	11,903.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,998,031.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca qualifies for the section 4940(e) reduction of tax in those years	lculating	y whether the foundation

Form **990-PF** (2018)

Page **9**

Par	t XIII Undistributed Income (see instr	uctions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2018 from Part XI,	Corpus	Years prior to 2017	2017	2018
	line 7				1,077,931.
2	Undistributed income, if any, as of the end of 2018				1
а	Enter amount for 2017 only			NONE	
b	Total for prior years 20,20,20		NONE		
3	Excess distributions carryover, if any, to 2018:				
а	From 2013 NONE				
Ь	From 2014 NONE				
¢	From 2015 NONE				1
d	From 2016 396, 187.				
е	From 2017 1,340,076.	1 705 050			
	Total of lines 3a through e	1,736,263.			<u>'</u>
4	Qualifying distributions for 2018 from Part XII,				
	line 4 ▶ \$3,009,934.			МОМН	
a	Applied to 2017, but not more than line 2a			NONE	
b	Applied to undistributed income of prior years		NONE		
	(Election required - see instructions)		NONE		
C	Treated as distributions out of corpus (Election	NONT			
	required - see instructions)	NONB			1 077 021
	Applied to 2018 distributable amount	1 022 002			1,077,931.
	Remaining amount distributed out of corpus Excess distributions carryover applied to 2018	1,932,003.			· · · · · · · · · · · · · · · · · · ·
•	(If an amount appears in column (d), the same	NONE			NONE
	amount must be shown in column (a))	NONB			NONE
6	Enter the net total of each column as				
	indicated below:	3,668,266.			
	Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,000,200.			1
Ь	Prior years' undistributed income Subtract		NONE		
c	Inne 4b from line 2b	-	1,01,0		
Ī	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a) tax has been previously assessed		NONE		
	Subtract line 6c from line 6b Taxable				1
u	amount - see instructions		NONE		
е	Undistributed income for 2017 Subtract line				
	4a from line 2a Taxable amount - see instructions			NONE	
	Hadatahad assault for 2018 Subtreet lines				
1	Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2019				NONE
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)	NONB			
8	Excess distributions carryover from 2013 not				·
	applied on line 5 or line 7 (see instructions)	NONE			I
9	Excess distributions carryover to 2019.	2 662 266			1
	Subtract lines 7 and 8 from line 6a	3,668,266.			
	Analysis of line 9				
	Excess from 2014 NONE				
	Excess from 2015 NONE				
	Excess from 2016 396, 187.				
	Excess from 2017 1,340,076.				1
е	Excess from 2018 1,932,003.	1			- 000 DC

h						
Form 9	990-PF (2018)				240158	Page 10
Part	"XIV Private Ope	rating Foundations	(see instructions	and Part VII-A, questio	n 9)	NOT APPLICABLE
		,		iat it is a private opera	7	
		•		9	· · · · · · · · · · · · · · · · · · ·	
Ь	Check box to indicate w	hether the foundation	is a private operating	foundation described in	section 4942	2(j)(3) or 4942(j)(5)
	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
-	usted net income from Part or the minimum investment	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
	eturn from Part X for each				/	
1	/ear listed					
b 8	35% of line 2a					
	Qualifying distributions from Part					
	(II, line 4 for each year listed	···				
ι	used directly for active conduct of exempt activities					
	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					
	Assets* alternative test - enter					
(1) Value of all assets					
(Value of assets qualifying under section					
	4942(j)(3)(B)(i)					
	Endowment* alternative test-					
	nent return shown in Part X,					
	ine 6 for each year listed				· · · · · · · · · · · · · · · · · · ·	
	Support alternative test - enter 1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 53/(a)(5)), or royalties).					
(Support from general public and 5 or more exempt organizations as provided in section 4942					
	Ja1(3)(B)(m) · · · · · ·			 		
	2) Largest amount of sup- port from an exempt					
/,	4) Gross investment income .				· · · · · · · · · · · · · · · · · · ·	
Part	XV Supplement	ary Information (Cring the year - see		t only if the foundat	ion had \$5,000	or more in assets at
1 1	nformation Regarding			· · · · · · · · · · · · · · · · · · ·	·····	
				ore than 2% of the total more than \$5,000). (Se		ived by the foundation)
	N/A					
	ist any managers of t					lly large portion of the
(ownership of a partners	hip or other entity) of	which the foundation	on has a 10% or greater i	nterest	
2 1	N/A nformation Regarding	Contribution Grant	Gift Loan Scholard	hin etc Programs		
					abla a-ma-!4!	
ι	Check here ► [X] if th unsolicited requests for complete items 2a, b, c,	funds. If the founda	tion makes gifts, g	to preselected charit rants, etc., to individual	able organizations or organizations	and does not accept under other conditions,
				e person to whom applic	cations should be a	ddressed [.]

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

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid Duri Recipient Name and address (home or business)	ng the Year or App	roved for	Future Payment	
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	
a Paid during the year				
		}		İ
SEE STATEMENT 12				3,000,000.
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Total	<u></u>		▶ 3a	3,000,000.
b Approved for future payment		ļ]	
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		}	:	•
			}	
	J	<u></u>		
Total			▶ 3b	1

JSA 8E1491 1 000 Form **990-PF** (2018)

nter gross ar	mounts unless otherwise indicated	Unrelat	ted business income	Excluded by	section 512, 513, or 514	(e)
4 D		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income
-	service revenue			 		(See instructions)
			·	 		
						-
. —						
ĭ						
	nd contracts from government agencies					
	nip dues and assessments					
	savings and temporary cash investments -					
	and interest from securities			14	529,420.	
5 Net rental	income or (loss) from real estate					
a Debt-fi	nanced property					
b Not de	bt-financed property					
6 Net rental	income or (loss) from personal property			 	5 244	
7 Other inve	estment income			14	-5,944.	
8 Gain or (los	s) from sales of assets other than inventory			18	773,388.	
	e or (loss) from special events • • •		 			
	it or (loss) from sales of inventory					
_	enue a					<u> </u>
				 		
c			·	- 		
4						
				l i		
е					1 296 864	
e 2 Subtotal /	Add columns (b), (d), and (e)				1,296,864.	1 296 864
e2 Subtotal / 3 Total Add						1,296,864
e2 Subtotal / 3 Total Add	Add columns (b), (d), and (e) [I line 12, columns (b), (d), and (e) et in line 13 instructions to verify calcu	lations)			13	1,296,864
e 2 Subtotal / 3 Total. Add See workshee 2 art XVI-B	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) et in line 13 instructions to verify calcumate Relationship of Activities	to the Ac	complishment of	Exempt Purp	oses	
e	Add columns (b), (d), and (e)	to the Ac y for which	complishment of l	Exempt Purp	ooses) of Part XVI-A contribu	ted importantly to th
e 2 Subtotal / 3 Total. Add See workshee 2 art XVI-B	Add columns (b), (d), and (e) I line 12, columns (b), (d), and (e) et in line 13 instructions to verify calcumate Relationship of Activities	to the Ac y for which	complishment of l	Exempt Purp	ooses) of Part XVI-A contribu	ted importantly to th
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e2 Subtotal // 3 Total. Add see workshee Part XVI-B Line No.	Add columns (b), (d), and (e)	to the Ac y for which	complishment of l	Exempt Purp	ooses) of Part XVI-A contribu	ted importantly to th
e2 Subtotal // 3 Total. Add see workshee Part XVI-B Line No.	Add columns (b), (d), and (e)	to the Ac y for which	complishment of l	Exempt Purp	ooses) of Part XVI-A contribu	ted importantly to th
e2 Subtotal // 3 Total. Add see workshee Part XVI-B Line No.	Add columns (b), (d), and (e)	to the Ac y for which	complishment of l	Exempt Purp	ooses) of Part XVI-A contribu	ted importantly to th
e2 Subtotal // 3 Total. Add see workshee Part XVI-B Line No.	Add columns (b), (d), and (e)	to the Ac y for which	complishment of l	Exempt Purp	ooses) of Part XVI-A contribu	ted importantly to th
e2 Subtotal // 3 Total. Add see workshee Part XVI-B Line No.	Add columns (b), (d), and (e)	to the Ac y for which	complishment of l	Exempt Purp	ooses) of Part XVI-A contribu	ted importantly to th
e2 Subtotal // 3 Total. Add see workshee Part XVI-B Line No.	Add columns (b), (d), and (e)	to the Ac y for which	complishment of l	Exempt Purp	ooses) of Part XVI-A contribu	ted importantly to th
e2 Subtotal // 3 Total. Add see workshee Part XVI-B Line No.	Add columns (b), (d), and (e)	to the Ac y for which	complishment of I	Exempt Purp In column (en by providing	ooses) of Part XVI-A contribu	ted importantly to th
e2 Subtotal // 3 Total. Add see workshee Part XVI-B Line No.	Add columns (b), (d), and (e)	to the Ac y for which	complishment of l	Exempt Purp In column (en by providing	ooses) of Part XVI-A contribu	ted importantly to th
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e2 Subtotal // 3 Total. Add see workshee Part XVI-B Line No.	Add columns (b), (d), and (e)	to the Ac y for which	complishment of I	Exempt Purp In column (en by providing	ooses) of Part XVI-A contribu	ted importantly to th
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e	Add columns (b), (d), and (e)	to the Ac y for which	complishment of I	Exempt Purp In column (en by providing	ooses) of Part XVI-A contribu	ted importantly to th
e	Add columns (b), (d), and (e)	to the Ac y for which	complishment of I	Exempt Purp In column (en by providing	ooses) of Part XVI-A contribu	ted importantly to th
e	Add columns (b), (d), and (e)	to the Ac y for which	complishment of I	Exempt Purp In column (en by providing	ooses) of Part XVI-A contribu	ted importantly to th
e	Add columns (b), (d), and (e)	to the Ac y for which	complishment of I	Exempt Purp In column (en by providing	ooses) of Part XVI-A contribu	ted importantly to th
e	Add columns (b), (d), and (e)	to the Ac y for which	complishment of I	Exempt Purp In column (en by providing	ooses) of Part XVI-A contribu	ted importantly to th
e	Add columns (b), (d), and (e)	to the Ac y for which	complishment of I	Exempt Purp In column (en by providing	ooses) of Part XVI-A contribu	ted importantly to th

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_	990-PF	<u> </u>	·		4.	52-7240158			ge 1 :
Par	t°XVII	Information R Exempt Organ		fers to and Transa	ctions a	and Relationships With Nor	chari	table	•
1						any other organization described		Yes	No
	in se	ection 501(c) (other	than section 50	1(c)(3) organizations)	or in se	ection 527, relating to political		ļ	
	-	nizations?							
а				oncharitable exempt org				ļ	l
						• • • • • • • • • • • • • • • • • • • •		_	X
				• • • • • • • • • • •		• • • • • • • • • • • • • • • • • • • •	. 1a(2)	l	X
Ь		transactions:							
			•	-		• • • • • • • • • • • • • • • • • • • •		1	X
						• • • • • • • • • • • • • • • • • • • •		Т	X
						• • • • • • • • • • • • • • • • • • • •			X
						• • • • • • • • • • • • • • • • • • • •			X
									X
						• • • • • • • • • • • • • • • • • • • •		ļ	X
			-					<u> </u>	X
đ						e. Column (b) should always sho			
						on. If the foundation received les ue of the goods, other assets, or			
(-)					 				-
(a) L	ine no	(b) Amount involved	(c) Name of nonch	aritable exempt organization	(0)	Description of transfers, transactions, and sh	aring arr	angeme	ents _
					 				
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		<u> </u>			+				
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		f	- 111 - 11 - 151 - 1						
Za			· ·			nore tax-exempt organizations		[V
L				501(c)(3)) or in section	152/1.		۲ لـــا٠	es 🔼	X No
<u>D</u>	IT "Yes	s," complete the follow		(h) To ((a) Description of colors			
		(a) Name of organizatio	<u> </u>	(b) Type of organizatio	<u> </u>	(c) Description of relation	nsnip		
						 			
					<u>. </u>	 			
									
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	Had	er penalties of person I dealer	are that I have examined the	ns return including accompanie	na schedules	and statements, and to the best of my knowle	dos and	helief it	is true
				er) is based on all information of w			J. 29		
:	. I s	A							

10/22/2019

Date

Preparer's signature

Form **990-PF** (2018)

the preparer shown

Check

Firm's EIN

Phone no

self-employed

Here

Paid

Preparer

Use Only

signature of officer or trustee

Firm's name

Firm's address

NORTHERN TRUST, TRUSTEE Print/Type preparer's name

VP

Title

Date

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/Form990for the latest information. OMB No 1545-0047

2018

Employer identification number

52-7240158 NANCY A LAUTER & ALFRED L MCDOUGAL CHARITABLE Organization type (check one): Section: Filers of 501(c)() (enter number) organization Form 990 or 990-EZ 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 X 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 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (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,

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

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).

Employer identification number 52-7240158

Part I	Contributors (see instructions). Use duplicate copi	es of Part I if additional space is n	eeded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	ALFRED L. MCDOUGAL TRUST C/O NORTHERN TRUST COMPANY CHICAGO, IL 60680	\$ 500,000.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)

SECURITIES	
FROM	
INTEREST	
AND	
DIVIDENDS	
1	İ
PART I	
990PF,	
FORM	

NET INVESTMENT INCOME	529,420.
REVENUE AND EXPENSES PER BOOKS	529,420.
	TOTAL
DESCRIPTION	DIVIDENDS & INTEREST

FAX749 549H 10/22/2019 15:48:30

INCOME	
OTHER	
ı	II
PART I	
990PF,	
FORM	

	NET	INVESTMENT	INCOME	 		-26,622.	10,907.		-15,715.	
REVENUE	AND	EXPENSES	PER BOOKS	1 1 1 1 1 1	-5,944.			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	-5,944.	
									TOTALS	
			DESCRIPTION		DEFERRED INCOME	PRIVATE EQUITY CORE FUND VI, LP	ALPHA CORE STRATEGIES FUND			

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FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	1,250. 1,250. ====================================
ADJUSTED NET INCOME	NONE
NET INVESTMENT INCOME	1,250.
REVENUE AND EXPENSES PER BOOKS	2,500.
	TOTALS
DESCRIPTION	TAX PREPARATION FEE

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RM 990PF, PART I - TAXES		
~ ;;	1 990PF, PART I -	

NET INVESTMENT INCOME	17,536. 17,536. ===========
REVENUE AND EXPENSES PER BOOKS	15,000. 17,536. 32,536. ====================================
	TOTALS
DESCRIPTION	FEDERAL EXCISE TAX FOREIGN TAXES

FORM 990PF, PART I - OTHER EXPENSES

REVENUE AND EXPENSES PER BOOKS

15.

STATE FILING FEE

DESCRIPTION

15.

15.

TOTALS

CHARITABLE PURPOSES

1111111

STATEMENT

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FORM 990PF, PART II - CORPORATE STOCK

DESCRIPTION

SEE ATTACHED SCHEDULE

ENDING BOOK VALUE

ENDING FMV

10,904,189.

TOTALS

10,904,189.

11,226,107.

11,226,107.

02-26170

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FORM 990PF, PART II - CORPORATE BONDS

DESCRIPTION

SEE ATTACHED SCHEDULE

ENDING BOOK VALUE

ENDING FMV

4,458,720.

4,304,669. 4,304,669.

4,458,720.

TOTALS

25

02-26170

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26

FORM 990PF, PART II - OTHER INVESTMENTS

COST/ FMV	C OR F	1 1 1 1 1 1	U
	DESCRIPTION		SEE ATTACHED SCHEDULE

TOTALS

ENDING FMV	 	4.338
ENDING BOOK VALUE		2.966.853.

4,338,029. 2,966,853.

4,338,029.

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NANCY A LAUTER & ALFRED L MCDOUGAL CHARITABLE 52-7240158 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: CHICAGO SYMPHONY ORCHESTRA ADDRESS: 220 SOUTH MICHIGAN AVE. CHICAGO, IL 60604 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 330,000. RECIPIENT NAME: ART INSTITUTE OF CHICAGO ADDRESS: 111 S. MICHIGAN AVE. CHICAGO, IL 60603 **RELATIONSHIP:** NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: RECIPIENT NAME: EPWORTH CHURCH ASSOCIATION ADDRESS: 1161 N. LAKESHORE DR. LUDINGTON, MI 49431 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT:

PC

NANCY A LAUTER & ALFRED L MCDOUGAL CHARITABLE 52-7240158 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID _______ RECIPIENT NAME: HUBBARD STREET DANCE CHICAGO ADDRESS: 1147 W. JACKSON BLVD. CHICAGO, IL 60607 RELATIONSHIP:

NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID

180,000.

RECIPIENT NAME: CHICAGO THEATRE GROUP INC. ADDRESS: 170 N. DEARBORN ST. CHICAGO, IL 60601 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL

FOUNDATION STATUS OF RECIPIENT:

AMOUNT OF GRANT PAID 180,000.

RECIPIENT NAME: LYRIC OPERA OF CHICAGO ADDRESS: 20 N. WACKER DRIVE CHICAGO, IL 60606 RELATIONSHIP: NONE PURPOSE OF GRANT:

GENERAL

FOUNDATION STATUS OF RECIPIENT: PC

AMOUNT OF GRANT PAID 330,000. NANCY A LAUTER & ALFRED L MCDOUGAL CHARITABLE 52-7240158 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: MUSEUM OF CONTEMPORARY ART ADDRESS: 220 E. CHICAGO AVE. CHICAGO, IL 60611 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: PC AMOUNT OF GRANT PAID 330,000. RECIPIENT NAME: OPPORTUNITY INTERNATIONAL INC. ADDRESS: 550 W. VAN BUREN CHICAGO, IL 60607 **RELATIONSHIP:** NONE PURPOSE OF GRANT: **GENERAL** FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 630,000. RECIPIENT NAME: UNIVERSITY OF CHICAGO ADDRESS: 5235 S. HARPER COURTH CHICAGO, IL 60615 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL

AMOUNT OF GRANT PAID

180,000.

PC

FOUNDATION STATUS OF RECIPIENT:

NANCY A LAUTER & ALFRED L MCDOUGAL CHARITABLE 52-7240158 FORM 990PF, PART XV, LINE 3a - CONTRIBUTIONS, GIFTS, GRANTS PAID ______ RECIPIENT NAME: UNIVERSITY OF ILLINOIS FOUNDATION ADDRESS: 1305 W. GREEN ST. URBANA, IL 61801 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: AMOUNT OF GRANT PAID 60,000. RECIPIENT NAME: YALE UNIVERSITY ADDRESS: P.O. BOX 2038 NEW HAVEN, CT 06521 RELATIONSHIP: NONE PURPOSE OF GRANT: GENERAL FOUNDATION STATUS OF RECIPIENT: 300,000. AMOUNT OF GRANT PAID

3,000,000.

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TOTAL GRANTS PAID: