

Form **990-PF**Department of the Treasury
Internal Revenue Service**Return of Private Foundation**

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

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

OMB No 1545-0052

2018

Open to Public Inspection

For calendar year 2018 or tax year beginning **JUL 1, 2018**, and ending **JUN 30, 2019**

Name of foundation

CHILDREN'S CARE FOUNDATION

Number and street (or P.O. box number if mail is not delivered to street address)

307 N. MICHIGAN AVE.

Room/suite

1005

City or town, state or province, country, and ZIP or foreign postal code

CHICAGO, IL 60601

A Employer identification number

36-6088708

B Telephone number

312-201-0540C If exemption application is pending, check here ☐D 1. Foreign organizations, check here ☐2. Foreign organizations meeting the 85% test, check here and attach computation ☐E If private foundation status was terminated under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

G Check all that apply:

☐ Initial return☐ Initial return of a former public charity☐ Final return☐ Amended return☐ Address change☐ Name change

H Check type of organization:

☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16)

\$ 62,168,515.J Accounting method: ☐ Cash ☐ Accrual☒ Other (specify) **MODIFIED CASH BAS**

(Part I, column (d) must be on cash basis.)

Part I Analysis of Revenue and Expenses
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)

(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

1 Contributions, gifts, grants, etc., received

338,270.**N/A**2 Check ☐ if the foundation is not required to attach Sch. B

3 Interest on savings and temporary cash investments

4 Dividends and interest from securities

1,130,673.**1,130,673.****STATEMENT 1**

5a Gross rents

b Net rental income or (loss)

6a Net gain or (loss) from sale of assets not on line 10

1,569,500.b Gross sales price for all assets on line 6a **33,253,069.**

7 Capital gain net income (from Part IV, line 2)

1,569,500.

8 Net short-term capital gain

9 Income modifications

10a Gross sales less returns and allowances

b Less: Cost of goods sold

c Gross profit or (loss)

Other income

4,069.**0.****STATEMENT 2**

12 Total. Add lines 2 through 11

3,042,512.**2,700,173.**

13 Compensation of officers, directors, trustees, etc

318,042.**0.****318,042.**

14 Other employee salaries and wages

15 Pension plans, employee benefits

16a Legal fees

b Accounting fees

STMT 3**26,150.****0.****26,150.**

c Other professional fees

STMT 4**107,352.****107,352.****0.**

17 Interest

18 Taxes

STMT 5**140,558.****0.****20,936.**

19 Depreciation and depletion

1,811.**0.**

20 Occupancy

32,730.**0.****32,730.**

21 Travel, conferences, and meetings

1,122.**0.****1,122.**

22 Printing and publications

23 Other expenses

STMT 6**21,382.****0.****21,382.**

24 Total operating and administrative expenses. Add lines 13 through 23

649,147.**107,352.****420,362.**

25 Contributions, gifts, grants paid

2,750,230.**2,750,230.**

26 Total expenses and disbursements. Add lines 24 and 25

3,399,377.**107,352.****3,170,592.**

27 Subtract line 26 from line 12:

-356,865.

a Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

2,592,821.

c Adjusted net income (if negative, enter -0-)

N/A

SCANNED JUL 01 2020

Operating and Administrative Expenses

Part II Balance Sheets

Attached schedules and amounts in the description column should be for end-of-year amounts only

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments	946,298.	938,350.	938,350.
	3 Accounts receivable ▶			
	Less: allowance for doubtful accounts ▶			
	4 Pledges receivable ▶			
	Less: allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations STMT 9	18,292,757.	21,288,583.	21,288,583.
	b Investments - corporate stock STMT 10	27,273,644.	25,308,365.	25,308,365.
	c Investments - corporate bonds STMT 11	2,252,325.	1,666,487.	1,666,487.
	11 Investments - land, buildings, and equipment, basis ▶			
Less: accumulated depreciation ▶				
12 Investments - mortgage loans				
13 Investments - other STMT 12	6,948,760.	6,101,396.	6,101,396.	
14 Land, buildings, and equipment: basis ▶ 11,859.				
Less: accumulated depreciation STMT 13 ▶ 11,859.	1,811.	0.	0.	
15 Other assets (describe ▶ STATEMENT 14)	7,038,481.	6,865,334.	6,865,334.	
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	62,754,076.	62,168,515.	62,168,515.	
Liabilities	17 Accounts payable and accrued expenses	35,488.		
	18 Grants payable	2,450,000.	.	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶ STATEMENT 15)	117,932.	0.	
	23 Total liabilities (add lines 17 through 22)	2,603,420.	0.	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26, and lines 30 and 31.			
	24 Unrestricted	46,379,863.	48,172,604.	
	25 Temporarily restricted			
	26 Permanently restricted	13,770,793.	13,995,911.	
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg., and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 Total net assets or fund balances	60,150,656.	62,168,515.	
	31 Total liabilities and net assets/fund balances	62,754,076.	62,168,515.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	60,150,656.
2 Enter amount from Part I, line 27a	2	-356,865.
3 Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 7	3	2,465,713.
4 Add lines 1, 2, and 3	4	62,259,504.
5 Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 8	5	90,989.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	62,168,515.

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Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADED SECURITIES			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a 33,253,069.		31,683,569.	1,569,500.
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(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	
a			1,569,500.
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	2	1,569,500.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		3	N/A

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

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

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

☐ Yes ☒ No

If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2017	2,793,904.	55,205,077.	.050610
2016	3,117,571.	52,573,032.	.059300
2015	3,119,722.	52,396,385.	.059541
2014	2,495,505.	54,320,378.	.045940
2013	2,408,192.	56,592,153.	.042553

2 Total of line 1, column (d)	2	.257944
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	.051589
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	54,940,596.
5 Multiply line 4 by line 3	5	2,834,330.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	25,928.
7 Add lines 5 and 6	7	2,860,258.
8 Enter qualifying distributions from Part XII, line 4	8	3,170,592.

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	25,928.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		2	0.
3 Add lines 1 and 2		3	25,928.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	25,928.
6 Credits/Payments:			
a 2018 estimated tax payments and 2017 overpayment credited to 2018	6a	55,000.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	0.	
d Backup withholding erroneously withheld	6d	0.	
7 Total credits and payments. Add lines 6a through 6d	7	55,000.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	0.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	29,072.	
11 Enter the amount of line 10 to be: Credited to 2019 estimated tax <input checked="" type="checkbox"/> 29,072. Refunded <input type="checkbox"/>	11	0.	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input checked="" type="checkbox"/> \$ 0. (2) On foundation managers. <input checked="" type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input checked="" type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <input checked="" type="checkbox"/> IL		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

N/A

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Part VII-A Statements Regarding Activities (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		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		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>WWW.CHILDRENSCAREFOUNDATION.ORG</u>	X	
14 The books are in care of ► <u>ROXANNE WARBLE</u> Telephone no. ► <u>312-201-0540</u> Located at ► <u>307 N. MICHIGAN AVE., CHICAGO, IL</u> ZIP+4 ► <u>60601</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax exempt interest received or accrued during the year		
16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►		X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(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.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If any answer is "Yes" to 1a(1) (6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here		X
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?		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):		
a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? If "Yes," list the years ►	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions.)	N/A	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ►		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
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 20, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10, 15, or 20 year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018.)	N/A	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
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?		X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year, did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions

N/A

c Organizations relying on a current notice regarding disaster assistance, check here

▶ ☐

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ 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?

☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

6b

X

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?

☐ Yes ☒ No**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, and foundation managers and their compensation.

(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) Expense account, other allowances
SEE STATEMENT 16		324,000.	5,000.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

0

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
CHICAGO EQUITY PARTNERS 180 N. LASALLE ST., CHICAGO, IL 60601	PROFESSIONAL FEES	107,352.

Total number of others receiving over \$50,000 for professional services

0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

1 NOT APPLICABLE

Expenses

0.

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**2**

All other program-related investments. See instructions.

3

Total. Add lines 1 through 3

0.

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	54,416,505.
b	Average of monthly cash balances	1b	1,360,750.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	55,777,255.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	55,777,255.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	836,659.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	54,940,596.
6	Minimum investment return. Enter 5% of line 5	6	2,747,030.

Part XI 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.)

1	Minimum investment return from Part X, line 6	1	2,747,030.
2a	Tax on investment income for 2018 from Part VI, line 5	2a	25,928.
b	Income tax for 2018. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	25,928.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,721,102.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2,721,102.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	2,721,102.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	3,170,592.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	3,170,592.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	25,928.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,144,664.

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.

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				2,721,102.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only			2,343,366.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013				
b From 2014				
c From 2015				
d From 2016				
e From 2017				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2018 from Part XII, line 4: ► \$ 3,170,592.				
a Applied to 2017, but not more than line 2a			2,343,366.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions) **	157,943.			
d Applied to 2018 distributable amount				669,283.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	157,943.			
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				2,051,819.
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)	157,943.			
8 Excess distributions carryover from 2013 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2014				
b Excess from 2015				
c Excess from 2016				
d Excess from 2017				
e Excess from 2018				

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount	
Name and address (home or business)					
a Paid during the year					
ASPIRE OF ILLINOIS 9901 DERBY LANE WESTCHESTER, IL 60154	NONE	PC	GENERAL SUPPORT	70,230.	
AUTOMOTIVE MENTORING GROUP 6522 LAVERGNE AVENUE BEDFORD PARK, IL 60638	NONE	PC	GENERAL SUPPORT	20,000.	
CHICAGO A CAPPELLA 2936 N. SOUTHPORT AVENUE, RM 226 CHICAGO, IL 60657	NONE	PC	GENERAL SUPPORT	10,000.	
CHICAGO ARCHITECTURE FOUNDATION 224 S MICHIGAN AVE CHICAGO, IL 60604	NONE	PC	GENERAL SUPPORT	25,000.	
CHICAGO HOPE ACADEMY 2189 W BOWLER ST CHICAGO, IL 60612	NONE	PC	GENERAL SUPPORT	20,000.	
Total			SEE CONTINUATION SHEET(S)	2,750,230.	
b Approved for future payment					
NORWEGIAN AMERICAN DENTAL PROGRAM 1044 NORTH FRANCISCO AVENUE CHICAGO, IL 60622	NONE	PC	GENERAL SUPPORT	1,071,000.	
Total					1,071,000.

Part XVII

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

- | | | Yes | No |
|---|--|-------|----|
| 1 | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | |
| a | Transfers from the reporting foundation to a noncharitable exempt organization of: | | |
| | (1) Cash | 1a(1) | X |
| | (2) Other assets | 1a(2) | X |
| b | Other transactions | | |
| | (1) Sales of assets to a noncharitable exempt organization | 1b(1) | X |
| | (2) Purchases of assets from a noncharitable exempt organization | 1b(2) | X |
| | (3) Rental of facilities, equipment, or other assets | 1b(3) | X |
| | (4) Reimbursement arrangements | 1b(4) | X |
| | (5) Loans or loan guarantees | 1b(5) | X |
| | (6) Performance of services or membership or fundraising solicitations | 1b(6) | X |
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees | 1c | X |
| d | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. | | |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

**Sign
Here**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee

Date _____

Title

VICE
PRESIDENT/ASSIS

May the IRS discuss this return with the preparer shown below? See instr

☒ Yes ☐ No

**Paid
Preparer
Use Only**

Print/Type preparer's name

Preparer's signature

Date _____

Check ☐ if self-employed

PTIN

MELISSA E. STRUCK

William Tins

~~02/24/20~~

P01310867

Firm's name ► CLIFTONLARSONALLEN LLP

Firm's EIN ► 41-0746749

Firm's address ▶ 1301 W. 22ND ST, STE 1100
OAK BROOK, IL 60523

Phone no. (630) 573-8600

Form **990-PF** (2018)

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

- ▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Name of the organization

CHILDREN'S CARE FOUNDATION

Employer identification number

36-6088708

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

- ☐ 501(c)() (enter number) organization
- ☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- ☐ 527 political organization

Form 990-PF

- ☒ 501(c)(3) exempt private foundation
- ☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
- ☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 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 totaling \$5,000 or more during the year. ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA 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)

Name of organization

Employer identification number

CHILDREN'S CARE FOUNDATION**36-6088708****Part I Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	<u>AVA W FARWELL TRUST</u> <u>231 S. LASALLE ST.</u> <u>CHICAGO, IL 60697</u>	\$ <u>59,077.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
<u>2</u>	<u>LYDIA FREDERICK TRUST</u> <u>50 S. LASALLE ST.</u> <u>CHICAGO, IL 60675</u>	\$ <u>20,667.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
<u>3</u>	<u>MARY MEDLOCK TRUST</u> <u>ONE FIRST NATIONAL PLAZA</u> <u>CHICAGO, IL 60670</u>	\$ <u>82,648.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
<u>4</u>	<u>WILLIAM WATSON TRUST</u> <u>ONE FIRST NATIONAL PLAZA</u> <u>CHICAGO, IL 60670</u>	\$ <u>43,880.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>	<u>LOUISE MAY WHITEHOUSE TRUST</u> <u>50 S. LASALLE ST.</u> <u>CHICAGO, IL 60675</u>	\$ <u>13,359.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
<u>6</u>	<u>CAROLINE WILLIAMS CHARITABLE TRUST</u> <u>231 S. LASALLE ST.</u> <u>CHICAGO, IL 60697</u>	\$ <u>6,765.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

CHILDREN'S CARE FOUNDATION

36-6088708

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	GEORGE WILLIAMS CHARITABLE TRUST 231 S. LASALLE ST. CHICAGO, IL 60697	\$ 9,310.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
8	HOBART W. WILLIAMS CHARITABLE TRUST 231 S. LASALLE ST. CHICAGO, IL 60697	\$ 82,790.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
9	THE CHICAGO COMMUNITY TRUST 111 EAST WACKER DR. #1400 CHICAGO, IL 60601	\$ 12,624.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization

Employer identification number

CHILDREN'S CARE FOUNDATION**36-6088708****Part II** **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization

Employer identification number

CHILDREN'S CARE FOUNDATION**36-6088708**

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info. once) ▶ \$

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CHICAGO SHAKESPEAR THEATER 800 EAST GRAND AVENUE CHICAGO, IL 60638	NONE	PC	GENERAL SUPPORT	50,000.
CHICAGO YOUTH SYMPHONY ORCHESTRAS 410 S MICHIGAN AVE, STE 833 CHICAGO, IL 60605	NONE	PC	GENERAL SUPPORT	25,000.
CHILDREN'S CLINIC F/K/A OAK PARK RIVER FOREST INFANT WELFARE SOCIET 320 LAKE ST OAK PARK, IL 60302	NONE	PC	GENERAL SUPPORT	50,000.
CLUSTER TUTORING 5460 WEST AUGUSTA BOULEVARD CHICAGO, IL 60651	NONE	PC	GENERAL SUPPORT	30,000.
CORAZON A CORAZON 8235 SOUTH SHORE DR, 2ND FL CHICAGO, IL 60617	NONE	PC	GENERAL SUPPORT	25,000.
ERIE FAMILY HEALTH CENTER 1701 W SUPERIOR ST CHICAGO, IL 60622	NONE	PC	GENERAL SUPPORT	75,000.
EXPERIMENTAL STATION 6100 S BLACKSTONE AVENUE CHICAGO, IL 60637	NONE	PC	GENERAL SUPPORT	30,000.
FAMILY CHRISTIAN HEALTH CENTER 31 W 155TH ST HARVEY, IL 60426	NONE	PC	GENERAL SUPPORT	100,000.
FREE SPIRIT MEDIA 1327 W WASHINGTON BLVD CHICAGO, IL 60607	NONE	PC	GENERAL SUPPORT	30,000.
HOLY FAMILY MINISTRIES 3415 W ARTHINGTON CHICAGO, IL 60624	NONE	PC	GENERAL SUPPORT	100,000.
Total from continuation sheets				2,605,000.

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
HOUSE OF THE GOOD SHEPHERD 114 W GRACE ST CHICAGO, IL 60613	NONE	PC	GENERAL SUPPORT	40,000.
INTONATION 4434 SOUTH LAKE PARK AVENUE CHICAGO, IL 60653	NONE	PC	GENERAL SUPPORT	15,000.
LOYOLA MOBILE PEDIATRIC CLINIC 2160 SOUTH FIRST AVENUE MAYWOOD, IL 60153	NONE	PC	GENERAL SUPPORT	325,000.
LYRIC OPERA OF CHICAGO 20 NORTH WACKER CHICAGO, IL 60606	NONE	PC	GENERAL SUPPORT	50,000.
NORWEGIAN AMERICAN HOSPITAL 1044 NORTH FRANCISCO AVENUE CHICAGO, IL 60622	NONE	PC	GENERAL SUPPORT	750,000.
PROJECT VISION 236 WEST 22ND PLACE, UNIT 1 CHICAGO, IL 60616	NONE	PC	GENERAL SUPPORT	20,000.
RESTORATION MINISTRIES 253 E 159TH STREET HARVEY, IL 60426	NONE	PC	GENERAL SUPPORT	30,000.
SAINT BERNARD HOSPITAL AND HEALTH CARE CENTER 326 W 64TH ST CHICAGO, IL 60621	NONE	PC	GENERAL SUPPORT	565,000.
SOUTH SHORE DRILL TEAM & PERFORMING ARTS ENSEMBLE 7218 S SOUTH CHICAGO AVE CHICAGO, IL 60619	NONE	PC	GENERAL SUPPORT	35,000.
THE LEADERSHIP 4903 S. WILLOW SPRINGS ROAD LA GRANGE, IL 60525	NONE	PC	GENERAL SUPPORT	25,000.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
UCP SEGUIN SERVICES OF GREATER CHICAGO 3100 S. CENTRAL AVENUE CICERO, IL 60804	NONE	PC	GENERAL SUPPORT	40,000.
URBAN INITIATIVES 650 W LAKE, SUITE 340 CHICAGO, IL 60661	NONE	PC	GENERAL SUPPORT	30,000.
CHICAGO YOUTH BOXING 2300 S. MILLARD AVE. CHICAGO, IL 60623	NONE	PC	GENERAL SUPPORT	10,000.
HYDE PARK SCHOOL OF DANCE 5650 S. WOODLAWN AVE #1623 CHICAGO, IL 60637	NONE	PC	GENERAL SUPPORT	10,000.
ILLINOIS COLLEGE OF OPTOMETRY 3241 S. MICHIGAN AVE CHICAGO, IL 60616	NONE	PC	GENERAL SUPPORT	30,000.
RESTORING THE PATH 1406 W. 64TH STREET CHICAGO, IL 60636	NONE	PC	GENERAL SUPPORT	10,000.
SAN MIGUEL FEBRES CORDERO SCHOOL 1954 W. 48TH ST CHICAGO, IL 60609	NONE	PC	GENERAL SUPPORT	20,000.
AUDITORIUM THEATRE OF ROOSEVELT UNIVERSITY 50 EAST IDA B. WELLS DRIVE CHICAGO, IL 60605	NONE	PC	GENERAL SUPPORT	15,000.
BLUE SKY BAKERY 3720 N. LINCOLN AVE CHICAGO, IL 60613	NONE	PC	GENERAL SUPPORT	30,000.
CHICAGO HOPES FOR KIDS 641 W LAKE ST. #200 CHICAGO, IL 60661	NONE	PC	GENERAL SUPPORT	30,000.
Total from continuation sheets				

3 Grants and Contributions Paid During the Year (Continuation)

[illegible]

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 1

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
US BANK	1,130,673.	0.	1,130,673.	1,130,673.	
TO PART I, LINE 4	1,130,673.	0.	1,130,673.	1,130,673.	

FORM 990-PF OTHER INCOME STATEMENT 2

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
COMMISSION RECAPTURE	3,997.	0.	
OTHER REVENUE	72.	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	4,069.	0.	

FORM 990-PF ACCOUNTING FEES STATEMENT 3

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	26,150.	0.		26,150.
TO FORM 990-PF, PG 1, LN 16B	26,150.	0.		26,150.

FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES	97,161.	97,161.		0.
INVESTMENT CUSTODIAL FEES	10,191.	10,191.		0.
TO FORM 990-PF, PG 1, LN 16C	107,352.	107,352.		0.

FORM 990-PF	TAXES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PAYROLL TAX	20,936.	0.		20,936.	
EXCISE TAXES	119,622.	0.		0.	
TO FORM 990-PF, PG 1, LN 18	140,558.	0.		20,936.	

FORM 990-PF	OTHER EXPENSES			STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
COMPUTER EXPENSE	63.	0.		63.	
INSURANCE	14,312.	0.		14,312.	
OFFICE EXPENSE	6,502.	0.		6,502.	
MISCELLANEOUS	505.	0.		505.	
TO FORM 990-PF, PG 1, LN 23	21,382.	0.		21,382.	

FORM 990-PF	OTHER INCREASES IN NET ASSETS OR FUND BALANCES	STATEMENT	7
DESCRIPTION	AMOUNT		
RESTATEMENT FOR CHANGE IN BASIS OF ACCOUNTING	2,465,713.		
TOTAL TO FORM 990-PF, PART III, LINE 3	2,465,713.		

FORM 990-PF	OTHER DECREASES IN NET ASSETS OR FUND BALANCES	STATEMENT	8
DESCRIPTION	AMOUNT		
UNREALIZED LOSS ON INVESTMENTS	24,977.		
CHANGE IN VALUE OF BENEFICIAL INTEREST IN TRUSTS	41,728.		
RESTATEMENT FOR CHANGE IN BASIS OF ACCOUNTING	24,284.		
TOTAL TO FORM 990-PF, PART III, LINE 5	90,989.		

FORM 990-PF U.S. AND STATE/CITY GOVERNMENT OBLIGATIONS STATEMENT 9

DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKET VALUE
US BANK	X		21,288,583.	21,288,583.
TOTAL U.S. GOVERNMENT OBLIGATIONS			21,288,583.	21,288,583.
TOTAL STATE AND MUNICIPAL GOVERNMENT OBLIGATIONS				
TOTAL TO FORM 990-PF, PART II, LINE 10A			21,288,583.	21,288,583.

FORM 990-PF CORPORATE STOCK STATEMENT 10

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
US BANK - SEE PDF ATTACHMENT	25,308,365.	25,308,365.
TOTAL TO FORM 990-PF, PART II, LINE 10B	25,308,365.	25,308,365.

FORM 990-PF CORPORATE BONDS STATEMENT 11

DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
US BANK - SEE PDF ATTACHMENT	1,666,487.	1,666,487.
TOTAL TO FORM 990-PF, PART II, LINE 10C	1,666,487.	1,666,487.

FORM 990-PF OTHER INVESTMENTS STATEMENT 12

DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
EXCHANGE-TRADED FUNDS - SEE PDF ATTACHMENT	FMV	6,101,396.	6,101,396.
TOTAL TO FORM 990-PF, PART II, LINE 13		6,101,396.	6,101,396.

FORM 990-PF DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 13

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
COMPUTER AND EQUIPMENT	11,859.	11,859.	0.
TOTAL TO FM 990-PF, PART II, LN 14	11,859.	11,859.	0.

FORM 990-PF OTHER ASSETS STATEMENT 14

DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
ACCRUED INVESTMENT INCOME	124,093.	0.	0.
SECURITY DEPOSIT	2,410.	0.	0.
OTHER ASSET	4,916.	0.	0.
BENEFICIAL INTEREST IN TRUSTS	6,907,062.	6,865,334.	6,865,334.
TO FORM 990-PF, PART II, LINE 15	7,038,481.	6,865,334.	6,865,334.

FORM 990-PF OTHER LIABILITIES STATEMENT 15

DESCRIPTION	BOY AMOUNT	EOY AMOUNT
DEFERRED COMPENSATION PAYABLE	70,000.	0.
DEFERRED EXCISE TAX	40,478.	0.
ACCRUED EXCISE TAX	7,454.	0.
TOTAL TO FORM 990-PF, PART II, LINE 22	117,932.	0.

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 16

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
BRUCE E. HUEY 307 N. MICHIGAN AVENUE, SUITE 1005 CHICAGO, IL 60601	PRESIDENT 1.00	0.	0.	0.
GEORGE S. TREES, JR. 307 N. MICHIGAN AVENUE, SUITE 1005 CHICAGO, IL 60601	VICE PRESIDENT 1.00	0.	0.	0.
MICHAEL REED 307 N. MICHIGAN AVENUE, SUITE 1005 CHICAGO, IL 60601	SECRETARY/TREASURER 1.00	0.	0.	0.
EDWARD X. CLINTON, JR. 307 N. MICHIGAN AVENUE, SUITE 1005 CHICAGO, IL 60601	DIRECTOR 1.00	0.	0.	0.
HELEN BLOVSKY 307 N. MICHIGAN AVENUE, SUITE 1005 CHICAGO, IL 60601	DIRECTOR 1.00	0.	0.	0.
PAUL GEAREN 307 N. MICHIGAN AVENUE, SUITE 1005 CHICAGO, IL 60601	DIRECTOR 1.00	0.	0.	0.
LEO LATZ 307 N. MICHIGAN AVENUE, SUITE 1005 CHICAGO, IL 60601	DIRECTOR 1.00	0.	0.	0.
DAVID CANFIELD 307 N. MICHIGAN AVENUE, SUITE 1005 CHICAGO, IL 60601	DIRECTOR 1.00	0.	0.	0.
ROBERT L. CAMPBELL 307 N. MICHIGAN AVENUE, SUITE 1005 CHICAGO, IL 60601	ASST. SEC. TREASURER/EXEC. DIRECTOR 40.00	176,000.	5,000.	0.
ROXANNE M. WARBLE 307 N. MICHIGAN AVENUE, SUITE 1005 CHICAGO, IL 60601	VICE PRES./ASSIST. EXEC. D 40.00	148,000.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		324,000.	5,000.	0.

FORM 990-PF

ELECTION UNDER REGULATIONS SECTION
53.4942(A)-3(D)(2) TO TREAT
EXCESS QUALIFYING DISTRIBUTIONS
AS DISTRIBUTIONS OUT OF CORPUS

STATEMENT 17

FORM 990PF, PART XIII, LINE 4C, COLUMN A

REGULATION REFERENCE 53.4942(A)-3(D)(2)

ELECTION:

PURSUANT TO INCOME TAX REGULATION SECTION 53.4942(A)-3(D)(2), THE
FOUNDATION ELECTS TO TREAT QUALIFYING DISTRIBUTIONS FOR 2018 OF
\$157,943 AS DISTRIBUTIONS OUT OF CORPUS.

ROXANNE WARBLE

ASSISTANT EXECUTIVE DIRECTOR