Return of Private Foundation

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

or security numbers on this form as it may be made public. 1908

▶ Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0052

2018

Department of the Treasury Open to Public Inspection Internal Revenue Service ▶ Go to www.irs.gov/Form990PF for instructions and the latest information. For calendar year 2018 or tax year beginning SEPTEMBER 1 , 2018, and ending **AUGUST 31** Name of foundation A Employer identification number HARKEN FOUNDATION 36-3712655 Room/suite Number and street (or P.O. box number if mail is not delivered to street address) B Telephone number (see instructions) 332 SKOKIE VALLEY ROAD 223 847-831-1133 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ► [HIGHLAND PARK, IL 60035 G Check all that apply: ☐ Initial return Initial return of a former public charity D 1. Foreign organizations, check here . Amended return Final return 2. Foreign organizations meeting the 85% test, □ Name change Address change check here and attach computation E If private foundation status was terminated under H Check type of organization: ✓ Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here . . Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at Accounting method:
Cash Accrual F If the foundation is in a 60-month termination end of year (from Part II, col. (c), under section 507(b)(1)(B), check here ☐ Other (specify) line 16) ▶ \$ 570051 (Part I, column (d) must be on cash basis.) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements for charitable (a) Revenue and (c) Adjusted net (b) Net investment expenses per books amounts in columns (b), (c), and (d) may not necessarily equal income purposes (cash basis only) ıncome the amounts in column (a) (see instructions).) 93134 Contributions, gifts, grants, etc., received (attach schedule) 2 Check ▶ ☐ if the foundation is not required to attach Sch. B 3 Interest on savings and temporary cash investments 8351 8351 24410 24410 4 Dividends and interest from securities . Gross rents 5a Ь Net rental income or (loss) -117111 Net gain or (loss) from sale of asse 6a Revenue Gross sales price for all assets Capital gain net income (from Part IV, line 2).

Net short-term capital gain. MAY .2 2 2020 7 Net short-term capital garge 8 Income modifications 9 10a Gross sales less returns and allowing DEN Less: Cost of goods sold-Gross profit or (loss) (attach schedule) 11 -371 Other income (attach schedule) . . 12 32761 Total. Add lines 1 through 11 . 8413 13 Compensation of officers, directors, trustees, etc. Administrative Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Received in Batching Ogden Accounting fees (attach schedule) Other professional fees (attach schedule) 17 5437 18 2301 Taxes (attach schedule) (see instructions) . . . 19 Depreciation (attach schedule) and depletion . . . 20 21 Travel, conferences, and meetings . . . 22 Printing and publications 14880 23 Other expenses (attach schedule) 7142 14880 Total operating and administrative expenses. 24 Add lines 13 through 23 14880 14880 14880 25 Contributions, gifts, grants paid 206065 206065 26 Total expenses and disbursements. Add lines 24 and 25 220945 14880 220945 27 Subtract line 26 from line 12: -212532 Excess of revenue over expenses and disbursements 17881 **Net investment income** (if negative, enter -0-) Adjusted net income (if negative, enter -0-)

Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	E	nd of	year
		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	\Box	(c) Fair Market Value
	1	Cash-non-interest-bearing	51314	25	700	25700
Ì	2	Savings and temporary cash investments			\neg	
	3	Accounts receivable ▶			7	
		Less: allowance for doubtful accounts ▶			- [
	4	Pledges receivable ▶				
- 1		Less: allowance for doubtful accounts ▶			i	
l	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
-		disqualified persons (attach schedule) (see instructions)			- 1	
	7	Other notes and loans receivable (attach schedule) ▶				
		Less: allowance for doubtful accounts ▶	. 1		- 1	
9	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
3	10a	Investments—U.S. and state government obligations (attach schedule)			一	
`	b	Investments—corporate stock (attach schedule)	644006	457	088	544351
- 1	c	Investments—corporate bonds (attach schedule)				
1	11	Investments—land, buildings, and equipment: basis			\dashv	
İ	••	Less: accumulated depreciation (attach schedule)			Ì	
	12	Investments—mortgage loans				
ļ	13	Investments—other (attach schedule)			\dashv	
- 1	14	Land, buildings, and equipment: basis ▶			-	
	••	Less: accumulated depreciation (attach schedule)			ł	
	15	Other accets (describe			\dashv	
	16	Total assets (to be completed by all filers—see the				
		instructions. Also, see page 1, item I)	695320	482	788	570051
	17	Accounts payable and accrued expenses				
	18	Grants payable				
Liabilities	19	Deferred revenue				
E	20	Loans from officers, directors, trustees, and other disqualified persons				
ap	21	Mortgages and other notes payable (attach schedule)				·········
_	22					
	23	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)		,		
		Foundations that follow SFAS 117, check here ▶ □				
Balances		and complete lines 24 through 26, and lines 30 and 31.				
2	24	Unrestricted	1			
a	25	Temporarily restricted				
_	26	Permanently restricted				
Net Assets or Fund		Foundations that do not follow SFAS 117, check here ▶ □				
E		and complete lines 27 through 31.				
or	27	Capital stock, trust principal, or current funds				
ş	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
386	29	Retained earnings, accumulated income, endowment, or other funds	<u> </u>			
A	30,7	Total net assets or fund balances (see instructions)		4824	द्रष्ठ	
ē	312	Total liabilities and net assets/fund balances (see				
~	1 00	instructions)	695320	482	2788	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances				
1	Tota	al net assets or fund balances at beginning of year-Part II, colu	mn (a), line 30 (mus	t agree with		
	end	-of-year figure reported on prior year's return)			1	695320
2	Ente	er amount from Part I, line 27a		[2	-212532
3	Oth	er increases not included in line 2 (itemize) ▶			3	
4	Add	i lines 1, 2, and 3			4	482788
5	Dec	creases not included in line 2 (itemize)			5	
6	Tota	al net assets or fund balances at end of year (line 4 minus line 5)-	Part II, column (b), lin	ne 30	6	482788
						Form 990-PF (2018)

	Capital Gains and L	osses for Tax on Investme	ent income				
		of property sold (for example, real esta or common stock, 200 shs. MLC Co.)	ate,	(b) How acquired P—Purchase D—Donation		te acquired , day, yr.)	(d) Date sold (mo., day, yr.)
1a	SEE ATTACHED						
b							
С							
d							
8							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale			or (loss) minus (g))
8							
<u>ь</u>							
c d							
	·						
θ	Complete only for assets showing	ng gain in column (h) and owned by	v the foundation	on 12/31/69	-		
	(i) FMV as of 12/31/69	(i) Adjusted basis as of 12/31/69	(k) Exces	s of col. (i)	(col. (k), but not	(h) gain minus less than -0-) or om col. (h))
						- ,	
b							
С							
d							
е					,		
2	Capital gain net income or (n		lso enter in Pa enter -0- in Pa		2		-117
3	If gain, also enter in Part I, I	r (loss) as defined in sections in the sections of the section	tions. If (loss)			- · · · · · ·	
	Part I, line 8	<u> </u>	<u></u>	<u></u> J	3		
as ti		ction 4942 tax on the distributa			oase pe	eriod?	☐ Yes ☐ I
1		t in each column for each year			aking a	ny entries.	 -
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions		(c) f nonchantable-use a		Dist	(d) ribution ratio livided by col. (c))
	2017	135	899	62	20752		.2189
	2016	133	917	56	63906		.2375
	2015	92	351	55	54594		
	2014	141	780				.1665
	2013			48	36606		.1665 .2914
		147	306		36606 92293		
2	Total of line 1, column (d)		306			2	.2914
	Average distribution ratio for		de the total or	49 	r by	2 3	.2914 .2992
3	Average distribution ratio for the number of years the four	r the 5-year base period—divid	de the total or f less than 5 ye	49 	r by		.2914 .2992
3 4	Average distribution ratio for the number of years the four		de the total or f less than 5 years	49 	r by	3	.2914 .2992 1.213
3 4 5	Average distribution ratio for the number of years the four Enter the net value of nonchi Multiply line 4 by line 3 .	the 5-year base period—dividual of the 5-year base period—dividual of the first the first three in three in the first three in three in the first three in the first three in three in t	de the total or f less than 5 years	49	r by	3	.2914 .2992 1.213 .2
4 5 6	Average distribution ratio for the number of years the four Enter the net value of nonch. Multiply line 4 by line 3 . Enter 1% of net investment in the street in the street investment in the street in the street investment in the street investment in the street in the street in the street investment in the street investment in the street investment in the street investment in the street in the street in the street in the street investment in the street in the street in the street investment in the street in the stre	r the 5-year base period—dividual time that the second control of	de the total or f less than 5 years	49	r by	3 4 5 6	.2914 .2992 1.213 .2 625
3 4 5	Average distribution ratio for the number of years the four Enter the net value of nonch. Multiply line 4 by line 3 . Enter 1% of net investment in Add lines 5 and 6	the 5-year base period—dividual of the 5-year base period—dividual of the first the first three in three in the first three in three in the first three in the first three in three in t	de the total or f less than 5 years	49	r by	3 4 5	.2914 .2992 1.213 .2 625

3

	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	nstru	ction	is)
18	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.)		Ţ	
•	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)		- 1	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		179	
	here ▶ ☐ and enter 1% of Part I, line 27b			
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-)			
3	Add lines 1 and 2		179	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		179	
6	Credits/Payments:			
a	2018 estimated tax payments and 2017 overpayment credited to 2018 6a			
b	Exempt foreign organizations—tax withheld at source 6b			
C	Tax paid with application for extension of time to file (Form 8868) . 6c 1200			
_d	Backup withholding erroneously withheld		1200	
7	Total Ground and paymonts. Final miss on an original miss of the control of the c		1200	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 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		1021	
11	Enter the amount of line 10 to be: Credited to 2019 estimated tax Refunded 11		1021	
	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	T	Yes	No
	participate or intervene in any political campaign?	1a		✓
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		1
	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.			
C	Did the foundation file Form 1120-POL for this year?	1c		1
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. ▶ \$(2) On foundation managers. ▶ \$			
0	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. ► \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2		/
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	3		1
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	48		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	<u> </u>	/
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		1
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?	6	1	
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	7	1	<u> </u>
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ILLINOIS			
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	8b	1	
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,"			
40	complete Part XIV	9	+	 •
10	names and addresses	10		1

Part	VIIFA Statements Regarding Activities (continued)			
,			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		1
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		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	1
	Website address ▶			
14	1110 00010 00 111 000 01	7-831-		
15	Located at ► 332 SKOKIE VALLEY ROAD, SUITE 223 ZIP+4 ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here	6003		▶ □
13	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		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		<u> </u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			L
	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? Yes No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here ▶ □			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?	1c		1
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)):			
8	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 ▶ 20 , 20 , 20 , 20, 20			į
	(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.)			
•	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	2b	-	-
·	▶ 20 ,20 ,20 ,20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or		1	
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2018.)	3b		1
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	ļ	1
þ	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?	4b		1

Part	VII-B Statements Regarding Activities	for W	hich Form	4720 N	May Be R	equire	d (contii	nued)			
5a	During the year, did the foundation pay or incur a	ny amo	ount to:							Yes	No
	(1) Carry on propaganda, or otherwise attempt to						☐ Yes	√ No			
	(2) Influence the outcome of any specific public		on (see section	on 495	5); or to ca	ırry on,					
	directly or indirectly, any voter registration dri						Yes	✓ No	i i		
	(3) Provide a grant to an individual for travel, stud						☐ Yes	✓ No			
	(4) Provide a grant to an organization other than			_		ibed in	_			1	
							☐ Yes	 ✓ No			
	(5) Provide for any purpose other than religious, purposes, or for the prevention of cruelty to c	hildren	or animals?				∐Yes	√ No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the in Regulations section 53.4945 or in a current not							scribed 	5b		
	Organizations relying on a current notice regarding	ng disa:	ster assistan	ce, che	ck here .						
C	If the answer is "Yes" to question 5a(4), does to	he foun	dation claim	exemp	otion from	the tax					
	because it maintained expenditure responsibility	for the	grant?				🔲 Yes	☐ No			
	If "Yes," attach the statement required by Regula										
6a	Did the foundation, during the year, receive any	funds, d	directly or inc	directly,	to pay pre	miums			1		
	on a personal benefit contract?						☐ Yes		١		
b	Did the foundation, during the year, pay premium	ns, dire	ctly or indired	ctly, on	a personal	benefit	contract	t? .	6b		
	If "Yes" to 6b, file Form 8870.							_			
7a							Yes		1		
b	If "Yes," did the foundation receive any proceeds							ก? .	7b		
8	Is the foundation subject to the section 4960 tax										
D	remuneration or excess parachute payment(s) du										<u></u>
Par	VIII Information About Officers, Direct	tors, i	rustees, F	ounda	uon mana	agers,	nigniy	Palo E	mpioy	ees,	
1	and Contractors List all officers, directors, trustees, and found	ation n	nanagers an	d their	compone	ation S	See instr	uctions			
	List all Officers, directors, dissess, and round		, and average		mpensation		Contribution		<u>, </u>		
	(a) Name and address	hour	rs per week ed to position		ot paid, ter -0-)		yee benefit erred comp		(e) Expe	allowar	1000mi, 1088
RONA	LD FOREMAN		DIR AS								
	OKIE VALLEY RD, HIGHLAND PARK IL 60035	NEEDE			-0-	ĺ		-0-	İ		-0-
JAN C	RANT	SEC, D	IR AS								
332 S	OKIE VALLEY RD, HIGHLAND PARK, IL 60035	NEEDE	D		-0-	1		-0-	1.		-0-
KENN	ETH FOREMAN	VP, DIF	RAS					-0-			-0-
332 S	(OKIE VALLEY RD, HIGHLAND PARK, IL 60035	NEEDE	D		-0-	L		-0-			-0-
				<u>L</u>		<u> </u>					
2	Compensation of five highest-paid employee "NONE."	es (oth	er than tho:	se incl	uded on li	ne 1	see inst	ruction	s). If n	one,	enter
	(a) Name and address of each employee paid more than \$50,00	0	(b) Title, and a hours per v devoted to p	veek ~	(c) Compe	nsation	(d) Contrit employee plans and comper	benefit deferred	(e) Expe	ense ac allowar	
"NON	<u> </u>		 				 		<u> </u>		
									}		
		•						***		•	
			1		İ		1				
			1				<u> </u>				
					E .						
											
										 -	
Total	number of other employees paid over \$50,000 .							. •	Form 95		

Part ,	t VIII°	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	
3	Five h	ghest-paid independent contractors for professional services. See instructions. If none, enter "NONI	. "
		(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
"NON	VE"		
****			1
			}
Total	Inumbe	of others receiving over \$50,000 for professional services	
	t IX-A	Summary of Direct Charitable Activities	
List	t the foun	dation's four largest durect charitable activities during the tax year. Include relevant statistical information such as the number of	Evacence
		and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	"NONE"		
-			1
-			
2			
-			
-			
3			
-			
4			
			1
			<u></u>
Part	t IX-B	Summary of Program-Related Investments (see instructions)	
Des	scribe the	two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 .	"NONE"	***************************************	
2 .		***************************************	1
			ļ
_	other prog	ram-related investments. See instructions.	
3		***************************************	
-			
otal.	ı. Add lir	es 1 through 3	Form 990-PF (201

Part	· · · · · · · · · · · · · · · · · · ·	gn founda	ations,
	see instructions.)		
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	565967
b	Average of monthly cash balances	1b	69496
C	Fair market value of all other assets (see instructions)	1c	
đ	Total (add lines 1a, b, and c)	1d	635463
0	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	635463
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	9532
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	625931
6	Minimum Investment return. Enter 5% of line 5	6	31297
Part		oundation	is
	and certain foreign organizations, check here ▶ ☐ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	31297
2a	Tax on investment income for 2018 from Part VI, line 5		
ъ	Income tax for 2018. (This does not include the tax from Part VI.)	1	
c	Add lines 2a and 2b	2c	179
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	31118
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	31118
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	-	
	line 1	7	31118
Part	XII Qualifying Distributions (see instructions)	<u> </u>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	T T T	
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	220945
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
ь	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	220945
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	179
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	220766
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	ــــــــــــــــــــــــــــــــــــــ	
	qualifies for the section 4940(e) reduction of tax in those years.	y wnemer	uie loungation
	quantee for the section to toley reduction of tax in those years.		- 000 DE 2010

⊇art	XIII Undistributed Income	e (see instruction	ns)			
•			(e) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1	Distributable amount for 2018 line 7	from Part XI,				31118
2	Undistributed income, if any, as of					
а					NONE	
b	Total for prior years: 20, 2	20, 20	"他们的是这种	NONE	想到在神经学者	
3	Excess distributions carryover,	if any, to 2018:				
а	From 2013	123246				
b	From 2014	118850				
C	From 2015	64374				
d	From 2016	106241				
e	From 2017	104861				
•			517572			
<u>'</u>	Qualifying distributions for 2018		THE STATE OF THE S	THE VEHICLE OF	Mac T. duy-Tay the Biracolous-	
4		o Holli Part All,		建设计算基础的		
_	line 4: ► \$ 220766 Applied to 2017, but not more t	han lina Oa		所被學生古典整理	NONE	
a			CARLON CONTRACTOR OF	(1) [2] [2] [2] [4] [2] [4] [4] [4] [4] [4] [4] [4] [4] [4] [4	する性にはってに 対しる情報を発	CHEATAC PRINTERS
ь	Applied to undistributed income (Election required—see instruct			NONE		
C	Treated as distributions out of or required—see instructions) .		NONE		STANGET STANGE	
	Applied to 2018 distributable ar			THE SHEET IN COMPANY		NONE
d	Remaining amount distributed of		189648	**	25322 203	HONE
•	•	-	103040	1.1 7	SOLETANCINES OF COMPANY	·····
5	Excess distributions carryover a			24 m. 24 25 million et et es de	education of the second	
	(If an amount appears in colum amount must be shown in colum		NONE	Control of the state of the state of the state of		NONE
•	Enter the net total of eac			To the second of the second of the	7. No. 1. Mark - 2 Y 25 1. 9 1. 925 1. 10	ian-usuaputerinasme rehim
6	indicated below:	ai Column as		(N.15)		
_	Corpus. Add lines 3f, 4c, and 4e.	Cubtract line 5	707220	ه سمعته و المرابي و المرابي و المرابي المرابي و المرابي	etaphie boxeste di allabere s	人名西班牙尔特里的第三人称
a	•					
b	Prior years' undistributed incline 4b from line 2b		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	NONE		and the second
C	Enter the amount of prior years	s' undistributed	and the second of the second o		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	income for which a notice of		1)			
	been issued, or on which the					, · · -
	tax has been previously assess	ed	· , · { ·	NONE	<u> </u>	,
d	Subtract line 6c from line	6b. Taxable				
	amount-see instructions .		3	NONE		·
е	Undistributed income for 2017	7. Subtract line			Ì	
	4a from line 2a. Taxable	amount-see	-'			
	instructions			:	NONE	
f	Undistributed income for 2018	. Subtract lines				
•	4d and 5 from line 1. This ar		-			
	distributed in 2019				ł	NONE
7	Amounts treated as distribution	a aut of comin		,	<u> </u>	······································
′	to satisfy requirements impos					
	170(b)(1)(F) or 4942(g)(3) (Ele					
	required—see instructions) .		NONE	,		
	•		NOIL .	<u> </u>		
8	Excess distributions carryover		122246		į	
_	applied on line 5 or line 7 (see in	•	123246			
9	Excess distributions carryo	_	50007.4	i	l	1
4.5	Subtract lines 7 and 8 from line	6a	583974		 	
10	Analysis of line 9:			1	1	
а	Excess from 2014	118850		1	<u> </u>	
b	Excess from 2015	64374	j]
C	Excess from 2016	106241]			
d	Excess from 2017	104861]			
е	Excess from 2018	189648		1	I	

Form 99	0-PF (2018)					Page 10
Part	XIV Private Operating Foundate	t ions (see instru	ctions and Part	VII-A, question 9)	
1a .	If the foundation has received a ruling					
	foundation, and the ruling is effective for				N/	
	Check box to indicate whether the four		operating founda		ection	3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2018	(b) 2017	(c) 2016	(4) 2015	
	each year listed					
b	85% of line 2a			 		
C	Qualifying distributions from Part XII,					
	line 4 for each year listed			+ /		
đ	for active conduct of exempt activities				1	
	Qualifying distributions made directly			/		
0	for active conduct of exempt activities.					
	Subtract line 2d from line 2c				İ	
3	Complete 3a, b, or c for the			1		
•	alternative test relied upon:					
8	"Assets" alternative test enter:	,				
	(1) Value of all assets					i
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					<u> </u>
b	"Endowment" alternative test—enter 2/s of minimum investment return shown in			\	\	
	Part X, line 6 for each year listed					
C	"Support" alternative test-enter:					
	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments on					
	securities toans / (section					Ì
	512(a)(5)), or royalties)				`	
	(2) Support from géneral public and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)		1			
	(3) Largest amount of support from		<u> </u>	1		
	an exempt organization					
	(4) Gross investment income					
Part				the foundation I	nad \$5,000 or m	ore in assets at
	any time during the year-	-see instruction	1s.)			
1	Information Regarding Foundation					
a	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	only if they have co	oumpared more n	nan \$5,000). (See :	section 507 (a)(2).)	
	LD FOREMAN, KENNETH FOREMAN List any managers of the foundation	who own 1094 o	r more of the sta	ock of a comporation	on (or an equally is	erge portion of the
D	ownership of a partnership or other e					ago pordon or ale
NONE	· · ·	,		, , o , o o o g. o a a a		
2	Information Regarding Contribution	n. Grant. Gift. Los	n. Scholarship.	etc Programs:		
-	Check here ▶ ☐ if the foundation				organizations and	does not accept
	unsolicited requests for funds. If the f					
	complete items 2a, b, c, and d. See it					
8	The name, address, and telephone no	umber or email ad	dress of the perso	on to whom applic	ations should be a	ddressed:
RONA	LD FOREMAN, 332 SKOKIE VALLEY RO	AD, SUITE 223, HIG	HLAND PARK, IL	60035 847-831-1133		
	The form in which applications should					
THER	E IS NO STANDARD SUBMISSION FORM	. A LETTER REQUE	ESTING A CONTRI	BUTION IS SUFFICE	ENT.	
	Any submission deadlines:					
NONE		words arch as h	v goographical	arage charitable	fields kinds of in-	stitutions or other
đ	Any restrictions or limitations on a	waros, such as D	y geographical i	arcas, Criaritable 1	iicius, Kiiius VI III	501000115, OF OUR
ODC 4	factors:	ELIGIQUE OP CHA	DITARI E AS DES	NEU IIWUED IDU GI	FC 501(C)3	
UKG	NIZATIONS MUST BE EDUCATIONAL, R	ELIGIOUS UK CHA	WILMOTE WO DELI	HED GINDER INC SI	-0 30 1(0)3	

Part XV Supplementary Information (continuous Grants and Contributions Paid During to	nued) he Year or Approv	ed for Fu	ture Payment	
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year				
SEE ATTACHED SHEET	NON	501(C)3	SEE ATTACHED	206065
	}			
	}			
			}	
		}		
	1	Ì		
	<u> </u>	ļ		
b Approved for future payment	<u> </u>		▶ 3a	206065
• Approved for fatare payment			j	
		1		
		}		
	<u> </u>	<u> </u>		
Total			▶ 21-	

ı IL U Ţ	gro	oss amounts unless otherwise indicated.	Unrelated bu	usiness income	Excluded by sect	on 512, 513, or 514	4 (0)
	D		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions.
1		gram service revenue:					
	a 5						
	b						
	d C		ļ	 	 		
	u ^			 -	 		
	•				 		
	1 -	Face and contracts from government agencies					
_	_	Fees and contracts from government agencies		ļ	 		
		mbership dues and assessments					
		rest on savings and temporary cash investments	 				
		idends and interest from securities	The state of the s	METERS IN SECTIONARY	122-144-4000-1480-3	s Reviewe	78-407-40-42-50-48-2
5		rental income or (loss) from real estate:	C. Barrier	是其實			
		Debt-financed property	ļ				
		Not debt-financed property					<u></u>
		t rental income or (loss) from personal property					
		ner investment income			<u> </u>		<u> </u>
8	Gai	n or (loss) from sales of assets other than inventory			<u> </u>		
9	Net	t income or (loss) from special events					l
		oss profit or (loss) from sales of inventory					
11	Oth	ner revenue: a					
	b						
	C						
	d						
	0			Ī			
12	Sul	ototal. Add columns (b), (d), and (e)	Action to the same				
	Tot	tal. Add line 12, columns (b), (d), and (e)				13	
13						13	
13 See	woi	ksheet in line 13 instructions to verify calculation	ns.)			13	
i3 ee ar	woi	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) \ccomplish m	ent of Exemp	t Purposes		importantly to the
13 See Par Line	wor	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) \ccomplish m	ent of Exemp	t Purposes		importantly to the
3 ee ar Line	WOI t X	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) \ccomplish m	ent of Exemp	t Purposes		importantly to tr
3 ee ar Line	WOI t X	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) \ccomplish m	ent of Exemp	t Purposes		importantly to tr ctions.)
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3 ee ar Line	WOI t X	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) \ccomplish m	ent of Exemp	t Purposes		importantly to the ctions.)

		Organizatio	ons									
1	in se	ection 501(c) (o nizations?	ther than section	engage in any of the follo 501(c)(3) organizations a noncharitable exemp) or in section	on 527, rei					Yes	No
_	(1) C	=								1a(1)	23.00 QBC26	1
		ther assets .			• • • •	• • •	• •	• •	• •	1a(2)		7
_		transactions:				• • • •	• •					300000
D										4 - (4)		
			a noncharitable exe	· -		• • • •	• •	• •		1b(1)		/
				ıble exempt organizatioı	1				• •	1b(2)		1
			, equipment, or othe	rassets						1b(3)		/
	(4) R	eimbursement a	rrangements							1b(4)		1
	(5) L	oans or loan gua	rantees							1b(5)		✓
	(6) P	erformance of se	ervices or membersh	ip or fundraising solicita	itions					16(6)		✓
C	Shari	ng of facilities, e	quipment, mailing lis	its, other assets, or paid	employees .					1c		√
d		_		s," complete the following		Column (b) s	should	d alwa	vs sho	w the	fair m	narket
_				ces given by the reporti								
	value	in any transaction	on or sharing arrange	ement, show in column	(d) the value of	the goods.	other	asset	s. or s	ervices	recei	ived.
(a) Line		b) Amount involved		aritable exempt organization		ption of transfe						
		-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			1.4						3	
	-+									-		
	+									.		——
												
												
												
												
				·-								
				·-								
				· ·								
						• • • • • • • • • • • • • • • • • • • •						
	<u> </u>											
2a	Is the	foundation dire	ectly or indirectly af	filiated with, or related	to, one or mo	ore tax-exer	not o	roaniz	ations			
				ction 501(c)(3)) or in sec						□ Ye	es [) No
ь			following schedule.				-	-	•	۰٬۰	~ _	, 140
		(a) Name of organ		(b) Type of organiz	ation		(c) Des	cription	of relati	onship		
							,,,					
												
												
	,					·						
	T 11-2-		<u></u>	AMERICAN AND AND AND AND AND AND AND AND AND A			A- 01 1					
Q:				d this return, including accompar in taxpayer) is based on all inform				Destof⊓ ■	y Know	edge and	Deilef, i	is true,
Sign	1 x 4/) ^ _			^	^				IRS discu		
Here		modelre	, tocemen	414/20	Fresic	WA				preparer s uctions.		
	Sign	ature of officer or true	stee	Date	Title							
Paid		Print/Type preparer	's name	Preparer's signature		Date		Check	□ r	PTIN		
	arer '					1	- 1		nployed	{		
Prep		Firm's name ▶	·	<u> </u>			Firm's	EIN >				
Use (Unity	Firm's address ▶		· · · · · · · · · · · · · · · · · ·	·		Phone					

Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization

HARKEN FOUNDATION

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

Employer identification number

36-3712655

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

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

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

Name of organization
HARKEN FOUNDATION

Employer identification number

36-3712655 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) **(b)** (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions KENNETH FOREMAN** Person П **Payroll** \checkmark 82920 Noncash 108 SIPPESISSET (Complete Part II for **FALMOUTH, MA** noncash contributions.) (a) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution **EVANS SCHOLARS FOUNDATION** Person П **Payroli** 10214 Noncash (Complete Part II for noncash contributions.) (a) (c) **(d)** Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) **(d)** (c) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II for noncash contributions.) (a) (b) (d) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroli** П Noncash (Complete Part II for noncash contributions.) (a) (b) (c) <u>(a)</u> Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person **Payroll** Noncash

(Complete Part II for noncash contributions.)

Name of organization
KENNETH FOREMAN

Employer identification number 36-3712655

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	1000 SHARES MERCK	. 92020	02/25/2010
		\$82920	03/26/2019
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See Instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
		3	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
		Y	
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		•	
		\$	

HARKEN FOUNDATION 36-3712655

8/31/2019

PART I, LINE 11 FROM PARTNER SHIPS		-37	<u>'1</u>
PART I, LINE 23			
FEES		228	31
FILING FEES		2	25
FROM PARTNERSHIPS		483	36
TOTAL		714	12
PART II, LINE 10b			
(Beg. Year	End Year	F

•	Beg. Year	End Year	FMV
Old Republic	84084	84084	114464
Bank of New York	57008	0	
Kindermorgan	171429	0	
III Tool	84020	84020	74930
Compass	93795	93434	113530
Energy transfer		43766	42683
Union Pacific	96129	85448	129568
Kimberly Clark	57541	0	
Merck	0	66336	69176
	644006	457088	544351

PART IV							
Stock Sold	Acquired	Date Acquired	Date Sold	Gross Sales	Cost	(Gain/Loss
Bank of New York	D	12/22/2015	10/25/2018	64460		7008	7452
Kimberly Clark	D	4/12/2017	4/2/2019	60920		57541	3379
Merck	D	3/26/2019	4/2/2019	16653	1	16584	69
Union Pacific	D	1/5/2017	4/2/2019	17094	1	10681	6413
Kindermorgan	D	8/1/2017	10/22/2018	120599	17	71429	-50830
Consolidated	Р	11/14/2018	6/3/2019	43738	12	27332	-83594
				323464	44	10575	-117111

HARKEN FOUNDATION 36-3712655 8/31/2019

PART XV

EACH OF THE CONTRIBUTIONS LISTED BELOW WAS MADE FOR THE
GENERAL CHARITABLE, RELIGIOUS EDUCTIONAL OR SCIENTIFIC PURPOSE
OF THE DONEE ORGANIZATION

Payee	Amount Address	
American Farmland Trust	500 1150 Connecticut NW	Washington, DC
American Heart Assn	500 300 5th Ave. S	Waltham, MA
American Red Cross	250 286 South St	Hyannis, Ma
Mass. Audobon Society	500 208 S. Great Road	Lincoln, MA 01733
Assn for Preservation Cape Cod	500 482 Main St.	Dennis, MA
Cape Abilities	250 895 Mary Dunn Rd.	Hyannis, MA
Doctors Without Borders USA	2000 PO Box 5030	Haggerstown, MD
Falmouth Housing Trust	500 200 Main	Falmouth, MA
Falmouth Service Center	1000 611 Gifford St.	Falmouth, MA
Feeding America	1000 PO Box 96749	Washington, DC
FINCA	250 1201 15th St NW	Washington, DC
Friends of Hopkins	300 120 Ocean View Blvd	Portland, OR
Friends of Nobska Light	29750 PO Box 183	Falmouth, MA
Friends of Spohr Gardens	250 45 Falls Rd	Falmouth, MA
Greater Boston Food Banks	50 70 S. Bay Ave	Boston, MA
Gulf of Maine Institute	10000 350 Commerical	Portland, ME
H. Frank Cary High School	3500 230 Poppy Ave	Franklin Sq, NY
Habitat Humanity Cape Cod	25000 411 MA 6A	Yarmouth Port, MA
Highfield Hall and Gardens	100 58 Highfield Dr.	Falmouth, MA
Intl Planned Parenthood	1500 125 Maiden Lane	New York, NY
Lake Forest College	1000 555 N. Sheridan	Lake Forest, IL
MADD	100 511 E. John Carpenter	Irving, TX
Make A Wish MA & RI	150 133 Federal St.	Boston, MA
March of Dimes	100 1550 Crystal Dr.	Arlington, VA
Marine Biological Laboratory	17500 7 MBL Street	Woods Hole, MA

Mercy Corp	500 PO Box 2669	Portland, OR
NAMI	100 529 Main St.	Boston, MA
Natural Resoruce Defense Council	2000 40 West 20th Street	New York, NY
Parents Helping Parents	100 108 Water Street	Watertown, MA
Parkinsons Foundation	500 72 E. Concord St.	Boston, MA
Partners in Health	2000 PO Box 996	Frederick, MD
Ravinia Festival	1330 200 Ravinia Park	Highland Park, 1L
Rensselaer Polytechnic Institute	3500 110 8th Street	Troy, NY
Save the Children Federation	2000 501 Kings Highway East	Fairfield, CT
The 300 Committee	33334 157 Locust St	Falmouth, MA
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The Gunnery	10000 22 Kirby Rd	Washington, CT
The National Park Foundation	200 1110 Vermont, NW	Washington, DC
The Nature Conservancy	500 74 Lamberts Cove Rd.	West Tisbury, MA
The Samaritans of Cape Cod	250 211 Willow St	Yarmouth, MA
Tiger Haven	50 237 Harvey Rd.	Kingston, TN
Unitarian Universal Fellowship	1500 840 Sandwich Road	East Falmouth, MA
United Negro College Fund	100 1805 7th Street, NW	Washington DC
WGBH	365 One Guest St	Boston, MA
Woods Hole Library	100 581 Woods Hole	Woods Hole, MA
Woods Hole Research Center	500 149 Woods Hole Road	Falmouth, MA
Yosemite Conservancy	100 101 Montgomery St	San Francisco, CA
Camp for All Kids	750 PO Box 50194	St. Louis, MO
Charles M Schwartz Fdn	50 333 W WACKER DR STE 1700	Chicago, IL
Connections for the Homeless	33 2121 Dewey Ave.	Evanston, IL
Delta Gamma Foundation	100 2222 S. Josephine st	Denver, CO
Emory University	2500 201 Dowman Dr.	Atlanta, GA
Evans Scholars Foundation	250 One Briar Rd	Golf, IL
Focus on the Arts	500 433 Vine	Highland Park, IL
GLASA	66 27864 Imma Lee Cir	Lake Forest, IL
Grow Community Chicago	200 4550 N. Hermitage	Chicago, IL
JDRF	200 1 N. LaSalle #1200	Chicago, IL
Lambs Farm	100 14245 W. Rockland Rd	Libertyville, IL
Natl Fish & Wildlife	66 1133 15th St. NW	Washington, DC

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Orphans of the Storm	33 2200 Riverwoods Rd	Deerfield, iL
Ounce of Prevention	250 33 W. Monroe	Chicago, IL
Ovarian Cancer Research	100 4 Pennsylvania Pl. #211	New York, NY
Project YME	200 524 N Wolcott	Chicago, IL
Ravinia Festival	2670 200 Ravinia Park	Highland Park, IL
Smile Train	5000 41 Madison Ave	New York, NY
Special Gifts Theatre	1560 PO Box 2231	Northbrook, IL
Tarrant County College	1500 245 E. Belkrap St.	Fort Worth, TX
The Wolcott School	750 524 N Wolcott	Chicago, IL
Tree of Life Synagogue	250 5898 Wilkins Ave	Pittsburgh, PA
Volunteer Pool of Highland Park	25 1936 Green Bay	Highland Park, IL

Total

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