

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](http://www.irs.gov/Form990PF) for instructions and the latest information.

OMB No 1545-0052  
**2019**  
**Open to Public Inspection**

**For calendar year 2019, or tax year beginning 01-01-2019 , and ending 12-31-2019**

Name of foundation Small Moves Foundation		<b>A Employer identification number</b> 46-3551508	
% ERIC & ELIZABETH LEFKOFSKY			
Number and street (or P O box number if mail is not delivered to street address) 600 West Chicago Ave Suite 510	Room/suite	<b>B Telephone number (see instructions)</b> (312) 906-7477	
City or town, state or province, country, and ZIP or foreign postal code Chicago, IL 60654		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>	
<b>G</b> Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
<b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
<b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ <u>412,603</u>		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
<b>J</b> Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)			

<b>Part I Analysis of Revenue and Expenses</b> <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc , received (attach schedule)	0			
	<b>2</b> Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
	<b>3</b> Interest on savings and temporary cash investments				
	<b>4</b> Dividends and interest from securities				
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10				
	<b>b</b> Gross sales price for all assets on line 6a				
	<b>7</b> Capital gain net income (from Part IV, line 2)				
	<b>8</b> Net short-term capital gain				
	<b>9</b> Income modifications				
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less Cost of goods sold					
<b>c</b> Gross profit or (loss) (attach schedule)					
<b>11</b> Other income (attach schedule)					
<b>12 Total.</b> Add lines 1 through 11	0	0			
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc	0			
	<b>14</b> Other employee salaries and wages				
	<b>15</b> Pension plans, employee benefits				
	<b>16a</b> Legal fees (attach schedule)				
	<b>b</b> Accounting fees (attach schedule)	3,250	0	0	3,250
	<b>c</b> Other professional fees (attach schedule)				
	<b>17</b> Interest				
	<b>18</b> Taxes (attach schedule) (see instructions)	15	0	0	15
	<b>19</b> Depreciation (attach schedule) and depletion				
	<b>20</b> Occupancy				
	<b>21</b> Travel, conferences, and meetings				
	<b>22</b> Printing and publications				
	<b>23</b> Other expenses (attach schedule)	9,251	0	0	9,251
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	12,516	0	0	12,516
	<b>25</b> Contributions, gifts, grants paid	82,197			82,197
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	94,713	0	0	94,713	
<b>27</b> Subtract line 26 from line 12					
<b>a Excess of revenue over expenses and disbursements</b>	-94,713				
<b>b Net investment income</b> (if negative, enter -0-)		0			
<b>c Adjusted net income</b> (if negative, enter -0-)					

<b>Part II Balance Sheets</b> Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	507,316	412,603	412,603
	<b>2</b> Savings and temporary cash investments . . . . .			
	<b>3</b> Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>4</b> Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .			
	<b>10a</b> Investments—U S and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .			
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b> Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .			
	<b>14</b> Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
<b>15</b> Other assets (describe ▶ _____)				
<b>16 Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	507,316	412,603	412,603	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .			
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)			
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	0	0	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow FASB ASC 958, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 24, 25, 29 and 30.</b>			
	<b>24</b> Net assets without donor restrictions . . . . .			
	<b>25</b> Net assets with donor restrictions . . . . .			
	<b>Foundations that do not follow FASB ASC 958, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 26 through 30.</b>			
	<b>26</b> Capital stock, trust principal, or current funds . . . . .	507,316	412,603	
	<b>27</b> Paid-in or capital surplus, or land, bldg, and equipment fund			
	<b>28</b> Retained earnings, accumulated income, endowment, or other funds			
<b>29 Total net assets or fund balances</b> (see instructions) . . . . .	507,316	412,603		
<b>30 Total liabilities and net assets/fund balances</b> (see instructions) .	507,316	412,603		

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	507,316
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	-94,713
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	412,603
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	<b>6</b>	412,603

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., 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.)
<b>1a</b>			

(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)
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss)	2	
<b>3</b> 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) (see instructions) If (loss), enter -0- in Part I, line 8	3	

**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 does not qualify under section 4940(e). Do not complete this part.

**1** Enter the appropriate amount in each column for each year, see 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))
2018	116,197	555,473	0.209186
2017	105,224	679,288	0.154903
2016	125,351	792,258	0.15822
2015	81,016	895,923	0.090427
2014	186,901	356,040	0.524944

<b>2</b> Total of line 1, column (d)	<b>2</b>	1.13768
<b>3</b> 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	<b>3</b>	0.227536
<b>4</b> Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	<b>4</b>	475,120
<b>5</b> Multiply line 4 by line 3	<b>5</b>	108,107
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)	<b>6</b>	0
<b>7</b> Add lines 5 and 6	<b>7</b>	108,107
<b>8</b> Enter qualifying distributions from Part XII, line 4	<b>8</b>	94,713

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)

Table with 11 rows for excise tax calculations. Includes questions about exempt foundations, tax under section 511, and tax due. Includes sub-tables 6a-6d for credits and payments.

Part VII-A Statements Regarding Activities

Table with 10 rows for statements regarding activities. Includes questions about political campaigns, political expenditures, and state reporting requirements. Includes Yes/No columns.

Part VII-A Statements Regarding Activities (continued)

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.
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
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address SmallMoves.org
14 The books are in care of ERIC & ELIZABETH LEFKOFSKY Telephone no (312) 906-7477

Located at 600 WEST CHICAGO AVE SUITE 510 CHICAGO IL ZIP+4 60654

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 15

16 At any time during calendar year 2019, 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

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.

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?
(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?
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?
(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)?
(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. Organizations relying on a current notice regarding disaster assistance check here.
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 2019?
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 2019, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2019? If "Yes," list the years 20, 20, 20, 20
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).
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20, 20, 20, 20
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?
b If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2019).
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
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 2019?



**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation

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

**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	Expenses
<b>1</b> 	
<b>2</b> 	
<b>3</b> 	
<b>4</b> 	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b> 	
<b>2</b> 	
All other program-related investments. See instructions <b>3</b> 	

**Total.** Add lines 1 through 3 . . . . . ▶

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

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities.	<b>1a</b>	0
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	482,355
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	482,355
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	482,355
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	7,235
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	475,120
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	23,756

**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.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	23,756
<b>2a</b>	Tax on investment income for 2019 from Part VI, line 5.	<b>2a</b>	0
<b>b</b>	Income tax for 2019 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	0
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	23,756
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	
<b>5</b>	Add lines 3 and 4.	<b>5</b>	23,756
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	23,756

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	94,713
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	0
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	0
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	0
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	94,713
<b>5</b>	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.	<b>5</b>	
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	94,713

**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.

**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
<b>1</b> Distributable amount for 2019 from Part XI, line 7				23,756
<b>2</b> Undistributed income, if any, as of the end of 2019				
<b>a</b> Enter amount for 2018 only. . . . .			0	
<b>b</b> Total for prior years 2017, 2016, 2015		0		
<b>3</b> Excess distributions carryover, if any, to 2019				
<b>a</b> From 2014. . . . .	169,099			
<b>b</b> From 2015. . . . .	36,220			
<b>c</b> From 2016. . . . .	85,738			
<b>d</b> From 2017. . . . .	71,260			
<b>e</b> From 2018. . . . .	88,423			
<b>f</b> Total of lines 3a through e. . . . .	450,740			
<b>4</b> Qualifying distributions for 2019 from Part XII, line 4 ▶ \$ <u>94,713</u>				
<b>a</b> Applied to 2018, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b> Applied to 2019 distributable amount. . . . .				23,756
<b>e</b> Remaining amount distributed out of corpus	70,957			
<b>5</b> Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a) )				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	521,697			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .		0		
<b>c</b> 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. . . . .				
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2019 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2020 . . . . .				0
<b>7</b> 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). . . . .				
<b>8</b> Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions). . . . .	169,099			
<b>9</b> Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a . . . . .	352,598			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2015. . . . .	36,220			
<b>b</b> Excess from 2016. . . . .	85,738			
<b>c</b> Excess from 2017. . . . .	71,260			
<b>d</b> Excess from 2018. . . . .	88,423			
<b>e</b> Excess from 2019. . . . .	70,957			

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

<b>1a</b> If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling. . . . . ▶					
<b>b</b> Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .	Tax year	Prior 3 years			<b>(e) Total</b>
	<b>(a) 2019</b>	<b>(b) 2018</b>	<b>(c) 2017</b>	<b>(d) 2016</b>	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)**

**Part XV**

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )  
ERIC LEFKOFSKY ELIZABETH LEFKOFSKY

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**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

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**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**

Check here  if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc to individuals or organizations under other conditions, complete items 2a, b, c, and d See instructions

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**a** The name, address, and telephone number or e-mail address of the person to whom applications should be addressed  
Small Moves Foundation  
600 W Chicago Ave Suite 510  
Chicago, IL 60654  
(312) 906-7477

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**b** The form in which applications should be submitted and information and materials they should include  
SUBMIT A WRITTEN GRANT APPLICATION TO THE ADDRESS ON LINE 2A ALL APPLICATIONS SHOULD INCLUDE THE NAME, ADDRESS, TELEPHONE NUMBER, AND EMAIL ADDRESS OF APPLICANT, THE AMOUNT OF GRANT REQUESTED, THE PURPOSE OF THE GRANT, AND A DESCRIPTION OF WHY THE GRANT IS NEEDED

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**c** Any submission deadlines  
NONE

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**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors  
GRANTS ARE FOR INDIVIDUALS WITH HARDSHIPS

**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)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b> ▶ <b>3a</b>				82,197
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b> ▶ <b>3b</b>				





**Form 990PF Part XV Line 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)				
<b>a</b> <i>Paid during the year</i>				
Cainzos Maria1 Utah Ct Jackson, NJ 08527	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Hart Brian700 Tanyard Rd Rocky Mount, VA 24151	NONE	I	To aid in unexpected expenses due to medical crisis	1,000
Yacoob Mayah8439 Hunter Dr Rancho Cucamonga, CA 91701	NONE	I	To aid in education expenses	1,000
<b>Total . . . . . ▶ 3a</b>				82,197

**Form 990PF Part XV Line 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)				
<b>a</b> <i>Paid during the year</i>				
Moore Kristy 1716 North Etna Road Huntington, IN 46750	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Mathews Sharon 3722 Lifford Circle Tallahassee, FL 32309	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Meginstu Genet 4848 North Winthrop Chicago, IL 60640	NONE	I	To aid in unexpected expenses due to family crisis	1,000
<b>Total . . . . . ▶ 3a</b>				82,197

**Form 990PF Part XV Line 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)				
<b>a</b> <i>Paid during the year</i>				
Song Yang2948 South Keeley St Apt 1R Chicago, IL 60608	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Rakolta Melissa34023 Glouster Circle Farmington Hills, MI 48331	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Corral Lionel Rene437 S La Jolla Tucson, AZ 85711	NONE	I	To aid in unexpected expenses due to family crisis	1,000
<b>Total . . . . . ▶ 3a</b>				82,197

**Form 990PF Part XV Line 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)				
<b>a</b> <i>Paid during the year</i>				
Contreras Alicia 1470 Fruitvale Ave Oakland, CA 94601	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Shaft Donna 637 N Grove Ave Oak Park, IL 60302	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Dumas Lindsey 12751 S Stormy Meadow Dr Riverton, UT 84096	NONE	I	To aid in unexpected expenses due to family crisis	1,000
<b>Total . . . . . ▶ 3a</b>				82,197

**Form 990PF Part XV Line 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)				
<b>a</b> <i>Paid during the year</i>				
Konderas Niko57 Brown Street Weston, MA 02493	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Nabukeera Resty1614 Main Street Kents Hills, ME 04349	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Oakes Tim55 Carolina Way Boxford, MA 01921	NONE	I	To aid in unexpected expenses due to family crisis	1,000
<b>Total . . . . . ▶ 3a</b>				82,197

**Form 990PF Part XV Line 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)				
<b>a</b> <i>Paid during the year</i>				
Nitschke Mark119 Highland Shore Dr Warehman, MA 02571	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Vaughn Sharrell 2489 North Skyline Circle Memphis, TN 38127	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Lawson Tynisha4234 Alice Dr Memphis, TN 38109	NONE	I	To aid in unexpected expenses due to family crisis	1,000
<b>Total . . . . . ▶ 3a</b>				82,197

**Form 990PF Part XV Line 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)				
<b>a</b> <i>Paid during the year</i>				
Brown Michael 5547 Knight Arnold Rd Memphis, TN 38115	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Brunetti Elnora 2440 Capewood Dr Memphis, TN 38127	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Booker Gwen 874 Williams Ave Memphis, TN 38126	NONE	I	To aid in unexpected expenses due to family crisis	1,000
<b>Total . . . . . ▶ 3a</b>				82,197

**Form 990PF Part XV Line 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)				
<b>a</b> <i>Paid during the year</i>				
Johnson April2347 Hubbard Ave Memphis, TN 38108	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Brooks Sylvia1485 Havana St Memphis, TN 38106	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Jones Latoya2589 Henderson St Memphis, TN 38127	NONE	I	To aid in unexpected expenses due to family crisis	1,000
<b>Total . . . . . ▶ 3a</b>				82,197

**Form 990PF Part XV Line 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)				
<b>a</b> <i>Paid during the year</i>				
Walker Cynthia7572 Woodshire Dr Horn Lake, MS 38637	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Armstrong Patricia3716 Benson Rd Memphis, TN 38109	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Weakley Miracle1479 Beaver Trail Cordova, TN 38016	NONE	I	To aid in unexpected expenses due to family crisis	1,000
<b>Total . . . . . ▶ 3a</b>				82,197

**Form 990PF Part XV Line 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)				
<b>a</b> <i>Paid during the year</i>				
Crutcher Mary3219 Scheibler Rd Memphis, TN 38128	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Bryant Jerry Dean538 Northpark Dr Jackson, MS 39206	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Koko Amnah2925 Kenneth St Memphis, TN 38128	NONE	I	To aid in unexpected expenses due to family crisis	1,000
<b>Total . . . . . ▶ 3a</b>				82,197

**Form 990PF Part XV Line 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)				
<b>a</b> <i>Paid during the year</i>				
Starks Antericka4220 Rhodes Ave Memphis, TN 38111	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Marshall Felicia Davis4021 Auburn Rd Memphis, TN 38116	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Armstrong Kevin8941 River Sound Memphis, TN 38016	NONE	I	To aid in unexpected expenses due to family crisis	1,000
<b>Total . . . . . ▶ 3a</b>				82,197

**Form 990PF Part XV Line 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)				
<b>a</b> <i>Paid during the year</i>				
Batts Eric 1736 Lapaloma St Memphis, TN 38114	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Rosas Jose 1017 SW 26th St Oklahoma City, OK 73109	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Benson Anne 10900 S Pennsylvania 617 Oklahoma City, OK 73170	NONE	I	To aid in unexpected expenses due to family crisis	1,000
<b>Total . . . . . ▶ 3a</b>				82,197

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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)				
<b>a</b> <i>Paid during the year</i>				
Pena-Perez Mercedes 2600 SW 49th St Oklahoma City, OK 73119	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Martinez Elisha 3108 Lakewood Dr Edmond, OK 73034	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Favor Melissa 767 Independence Dr Apr A209 Hyannis, MA 02610	NONE	I	To aid in unexpected expenses due to family crisis	1,000
<b>Total . . . . . ▶ 3a</b>				82,197

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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)				
<b>a</b> <i>Paid during the year</i>				
Gilles Kate 690 E Georgia Ave Memphis, TN 38126	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Maria Reina 1025 Parsons St Norman, OK 73069	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Schwab Lacey 3520 NW 51st Oklahoma City, OK 73112	NONE	I	To aid in unexpected expenses due to family crisis	1,000
<b>Total . . . . . ▶ 3a</b>				82,197

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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)				
<b>a</b> <i>Paid during the year</i>				
Russo Robert 4826 Calle De Oro Oakley, CA 94561	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Asturi Bailey 4416 S Oklahoma Ave Apt A Oklahoma City, OK 73129	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Mack LeAndrea 1880 Jackson Street Apt 104 Oakland, CA 94612	NONE	I	To aid in unexpected expenses due to family crisis	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				82,197

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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)				
<b>a</b> <i>Paid during the year</i>				
Moore Andre 1723 85th Ave Oakland, CA 94621	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Rohrabaugh Krista 2995 E 850 N Roanoke, IN 46783	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Richards William 877 Jefferson Ave Memphis, TN 38103	NONE	I	To aid in unexpected expenses due to medical crisis	1,000
<b>Total . . . . . ▶ 3a</b>				82,197

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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)				
<b>a</b> <i>Paid during the year</i>				
Stanton Jalessa914 Tampa Ave Memphis, TN 38106	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Blaylock Gregory1 Chiefs Dr Senatobia, MS 38668	NONE	I	To aid in unexpected expenses due to medical crisis	1,000
Khalil Ibi175 N Beacon St Watertown, MA 02472	NONE	I	To aid in unexpected expenses due to medical crisis	1,000
<b>Total . . . . . ▶ 3a</b>				82,197

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Wilson Aaron 1212 S Princeton Ave Chicago, IL 60628	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Landrum Holly 785 E Riverside Rd Huntington, IN 46750	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Flores Virginia 3132 Buord Hwy Apt H6 Brokhaven, GA 30329	NONE	I	To aid in unexpected expenses due to family crisis	1,000
<b>Total . . . . . ▶ 3a</b>				82,197

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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)				
<b>a</b> <i>Paid during the year</i>				
Lefkofsky Foundation 600 W Chicago Ave Suite 775 Chicago, IL 60654	NONE	PF	CHARITABLE	5,000
Diosadado Mildred 3812 McElroy Rd Apt B2 Atlanta, GA 30340	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Giron Quispe Lourdes 3530 Buford Hwy NE Atlanta, GA 30329	NONE	I	To aid in unexpected expenses due to family crisis	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				82,197

**Form 990PF Part XV Line 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)				
<b>a</b> <i>Paid during the year</i>				
Zayas Jose6358 Baker CT Apt B Norcross, GA 30092	NONE	I	To aid in unexpected expenses due to medical crisis	1,000
Pulido Sugey 1750 Briarwood Rd NE Apt B8 Brookhaven, GA 30329	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Perez Zarate Flor3547 Buford Hwy NE Atlanta, GA 30329	NONE	I	To aid in unexpected expenses due to medical crisis	1,000
<b>Total . . . . . ▶ 3a</b>				82,197

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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)				
<b>a</b> <i>Paid during the year</i>				
Meeks Christal 6646 S Bishop Apt 1 Chicago, IL 60636	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Blessings in a Backpack 303 East Street Rochester, MI 48307	NONE	PC	To aid in education expenses	2,500
Jones Manida 4911 W Rice St Chicago, IL 60651	NONE	I	To aid in unexpected expenses due to family crisis	1,950
<b>Total . . . . . ▶ 3a</b>				82,197

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Woods Terrance 2106 S 24th Ave Broadview, IL 60155	NONE	I	To aid in unexpected expenses due to family crisis	7,000
Meza Narda 3903 Golden Eye Dr Concord, NC 28025	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Valencia Rocio 3648 Buford Hwy NE Apt 5 Brookhaven, GA 30329	NONE	I	To aid in unexpected expenses due to family crisis	1,000
<b>Total . . . . . ▶ 3a</b>				82,197

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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)				
<b>a</b> <i>Paid during the year</i>				
Mendez Darianna Pimentel 40 Lawrence Ave Boston, MA 02121	NONE	I	To aid in education expenses	1,000
Malovana Olena 127 Boylston St Watertown, MA 02472	NONE	I	To aid in unexpected expenses due to family crisis	1,000
Kennedy Lawrence Bethel World Outreach Ministries At 4861 Glen Level Drive Sugar Hill, GA 30518	NONE	I	To aid in unexpected expenses due to family crisis	1,250
<b>Total . . . . .</b> ▶ <b>3a</b>				82,197

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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)				
<b>a</b> <i>Paid during the year</i>				
Miller KimberlyNash Elementary School 4837 W Erie St Chicago, IL 60644	NONE	I	To aid in education expenses	197
Flor De Maria Palma2158 N LaPorte Chicago, IL 60639	NONE	I	To aid in unexpected expenses due to family crisis	300
<b>Total . . . . . ▶ 3a</b>				82,197

**TY 2019 Accounting Fees Schedule****Name:** Small Moves Foundation**EIN:** 46-3551508

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
ACCOUNTING FEES	3,250			3,250

**Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.**

## **TY 2019 Depreciation Schedule**

**Name:** Small Moves Foundation

**EIN:** 46-3551508

**TY 2019 Other Expenses Schedule****Name:** Small Moves Foundation**EIN:** 46-3551508**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MARKETING & COMMUNICATION	397	0	0	397
WEBSITE EXPENSE	1,147	0	0	1,147
POSTAGE & MAILING SERVICE	974	0	0	974
TELECOMMUNICATIONS	1,140	0	0	1,140
MISCELLANEOUS EXPENSE	24	0	0	24
CONTRACTORS	5,000	0	0	5,000
TRAVEL & MEETINGS	569	0	0	569

**TY 2019 Taxes Schedule****Name:** Small Moves Foundation**EIN:** 46-3551508

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
IL CHARITY BUREAU FUND	15	0	0	15