OMB No 1545-0047

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public. Department of the Treasury Internal Revenue Service ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

F	or calen	dar year 2019 or tax year beginning 01-01	1	, 2019, and		12-31	, 20	19_
Na	me of four	ndation			A Employe	r identification number	er	
.0	<u>iver-Hoff</u>	mann Foundation		84-3100228				
N	Number and street (or P.O. box number if mail is not delivered to street address) Room/suite Ste 146					e number (see instruct	ons)	
19						(630)357-3300)	
Ci	y or town,	state or province, country, and ZIP or foreign postal code			C If exemp	tion application is pend	ing, check here	∍ ► 🔲
<u>Y</u> (orkville, l	L 60560			}			
G	Check	all that apply: <a>Initial return Initial return	-	oublic charity	D 1. Foreig	n organizations, check	here .	▶ □
		☐ Final return ☐ Amended r			2. Foreia	n organizations meeting	the 85% test.	
		Address change Name char				here and attach compl		`▶□
Н		type of organization: Section 501(c)(3) exempt per				foundation status was		. —
		n 4947(a)(1) nonexempt charitable trust 🛛 Other tax			section 5	07(b)(1)(A), check here		▶□
ı		arket value of all assets at J Accounting method	: 🗹 Cash	☐ Accrual	F If the fou	ndation is in a 60-mont	h termination	_
		year (from Part II, col. (c),			under se	ction 507(b)(1)(B), chec	k here .	▶ 🔲
ł _	line 16	0 (Part I, column (d), must be	e on cash basi	s.)				
'	Part I	Analysis of Revenue and Expenses (The total of	(a) Revenue		t investment	(c) Adjusted net	(d) Disbursen for chantal	
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses p		ncome	Income	purposes	s
_	.,	the amounts in column (a) (see instructions))					(cash basis	oniy)
	1	Contributions, gifts, grants, etc., received (attach schedule)					<u> </u>	<u>!</u>
	2	Check ► ☐ If the foundation is not required to attach Sch. B					<u></u>	}
	3	Interest on savings and temporary cash investments			 			<u> </u>
	4	Dividends and interest from securities						<u></u>
	5a	Gross rents	ļ					<u></u>
	b	Net rental income or (loss)						
9	6a	Net gain or (loss) from sale of assets not on line 10		-				
- 5	5 b	Gross sales price for all assets on line 6a					<u> </u>	
202 1 Devenie	7	Capital gain net income (from Part IV, line 2) .						
_	_	Net short-term capital gain						
9 7	9	Income modifications	ļ					
	10a	Gross sales less returns and allowances						
APR	b	Less: Cost of goods sold	<u> </u>					——- ¦
_	C	Gross profit or (loss) (attach schedule)						-
SCANNED	11	Other income (attach schedule)	}	f				
Z -	12	Total. Add lines 1 through 11		/ 0	0	0		
Æ 8	13	Compensation of officers, directors, trustees, etc.						
\mathcal{Q}_{i}	14	Other employee salaries and wages						
တ	15	Legal fees (attach schedule)	CEIVED	<u> </u>				
Ú	16a b	Accounting fees (attach schedule)		181		-		
Ş		Other professional fees (attach schedule)	R 2 2 2020	161		-		
į	17 C	Interest	H 7 7 2023	<u>」作</u>				
į	18	Taxes (attach schedule) (see instructions)		ir I	· · · · · · · · · · · · · · · · · · ·		<u> </u>	
	19	Depreciation (attach schedule) and depletion	DEN, L				<u>_ · ,</u>	1
-	20	Occupancy						—— ·
~	21	Travel, conferences, and meetings						
7	22	Printing and publications						
,	23	Other expenses (attach schedule)						
Ì	24	Total operating and administrative expenses.	-					
Occupation Administration Eve	<u> </u>	Add lines 13 through 23		o	0	0		0
8	25	Contributions, gifts, grants paid						
Č	26	Total expenses and disbursements. Add lines 24 and 25		0	0	0		0
-	27	Subtract line 26 from line 12:						ij
	a	Excess of revenue over expenses and disbursements		o				ł
	b	Net investment income (if negative, enter -0-)		1	0			1
	1	Adjusted net income (if negative, enter -0-)				0		

Par Ö ll		Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year
		should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
,	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments			
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less: allowance for doubtful accounts ▶			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ϋ́	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments - corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			_
	12	Investments-mortgage loans			
	13	Investments – other (attach schedule)			
1	14	Land, buildings, and equipment: basis ▶			
Ì		Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers-see the		1	1 /
ļ		ınstructions. Also, see page 1, item I)	0	i X o	1 × 0
	17	Accounts payable and accrued expenses		··	<u> </u>
ဖွ	18	Grants payable			
≝	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			i
≝	21	Mortgages and other notes payable (attach schedule)	<u></u>		
	22 23	Other liabilities (describe ►) Total liabilities (add lines 17 through 22)	0		
"	23		U	0	
alances		Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. □			•
a	24	Net assets without donor restrictions			}
ब्रु	25	Net assets with donor restrictions		-	i
ᅙ		Foundations that do not follow FASB ASC 958, check here ▶ □			
5		and complete lines 26 through 30.			1
ב _ו	26	Capital stock, trust principal, or current funds			}
S	27	Paid-in or capital surplus, or land, bldg., and equipment fund			1
ĕ	28	Retained earnings, accumulated income, endowment, or other funds			
š	29	Total net assets or fund balances (see instructions)	0	0	
Net Assets or Fund B	30	Total liabilities and net assets/fund balances (see			
		ınstructions)	0	0	
	rt III	Analysis of Changes in Net Assets or Fund Balances	··	_ _	
1		I net assets or fund balances at beginning of year-Part II, colur			
_		of-year figure reported on prior year's return)			0
_		r amount from Part I, line 27a			0
3		er increases not included in line 2 (itemize)			
4		lines 1, 2, and 3			0
ح 2	Uecr	reases not included in line 2 (itemize) ► I net assets or fund balances at end of year (line 4 minus line 5)—F	Part II column (b) lin	5 e 29 6	
0	Tota	i net assets of fund parances at end of year (line 4 minus line 5)—F	art ii, column (b), lin	C 2 3	0

Part	V Capital Gains an	d Losses for Tax on Investr	nent Income	<u> </u>		
		and(s) of property sold (for example, real e use, or common stock, 200 shs. MLC Co.		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr)
1a						
<u>b</u>						
<u>c</u>						
d						·
е		19 Demonstrate allowed	(=) Cook on		(h) C	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		n or (loss) f) minus (g))
<u>a</u>						
<u> </u>						
c						
<u>a</u>	 		<u> </u>			
	Complete only for assets she	owing gain in column (h) and owned	by the foundation	on 12/31/69.	Ø Cara (Ca	(A)
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	s of col. (i) (j), if any	col. (k), but no	i. (h) gain minus t less than -0-) or rom col (h))
а				-		
b						
С				<u></u>		···-
d	_					
е			<u> </u>			
2	Capital gain net income of	or mercaphanossi 7 ° '	also enter in Pa , enter -0- in Pai		2	
3	If gain, also enter in Part	ın or (loss) as defined in sections t I, line 8, column (c). See instru	ctions. If (loss)	, enter -0- ın }	3	
Part		der Section 4940(e) for Redu				 · · · · · · · · · · · · · · · · ·
		rivate foundations subject to the				
	ion 4940(d)(2) applies, leav					
		esection 4942 tax on the distribu qualify under section 4940(e). Do			base period?	☐ Yes ☐ No
1	Enter the appropriate am	ount in each column for each yea	ar; see the instru	uctions before ma	aking any entries.	
Cale	(a) Base penod years Indar year (or tax year beginning ir	(b) Adjusted qualifying distribution	s Net value of	(c) f nonchantable-use a		(d) inbution ratio divided by col. (c))
	2018					
	2017					
	2016					
	2015			· · · · · · · · · · · · · · · · · · ·		–
	2014			- 		
2	Total of line 1, column (d)			. 2	
3	•	,		line 2 by 5.0 or		
3		oundation has been in existence			· I _ I	
4	Enter the net value of nor	ncharitable-use assets for 2019 f	rom Part X, line	5	. 4	
5	Multiply line 4 by line 3				. 5	
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		. 6	·
7	Add lines 5 and 6				. 7	
8		ons from Part XII, line 4 ater than line 7, check the box in			. 8	% tax rate See the
	Part VI instructions	ator triair into 1, officer the DOX II	a vi, iii ic 1D	, and complete t	part doing a 1	, a tax rate, See the

Part:	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see	instru	ction	<u>1S)</u>				
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶☐ and enter "N/A" on line 1.			I				
•	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)		,					
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check							
	here ▶ ☐ and enter 1% of Part I, line 27b			- 1				
С	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							
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							
6	Credits/Payments:			- 1				
а	2019 estimated tax payments and 2018 overpayment credited to 2019 6a 6a							
b	Exempt foreign organizations—tax withheld at source			ŀ				
С	Tax paid with application for extension of time to file (Form 8868) 6c			İ				
đ	Backup withholding erroneously withheld							
7	Total credits and payments. Add lines 6a through 6d							
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached							
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9							
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10							
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax ▶ Refunded ▶ 11							
	VII-A Statements Regarding Activities		V	Na				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1	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		~				
	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						
d								
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$							
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed							
_	on foundation managers. ► \$	2		_				
2	If "Yes," attach a detailed description of the activities.							
⁻ 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						
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a						
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	-	-				
^	If "Yes," attach the statement required by <i>General Instruction T</i> .			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						
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						
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						
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			1				
ਬ	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV	9	·					
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their							
10	names and addresses	10		~				

Par	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		~
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		~
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	~	
	Website address ► http://www.oliver-hoffmannfoundation.com/			
14	12.0000000000000000000000000000000000	2)626-	1600	
	Located at ▶ 1905 Marketview Dr. Suite 146, Yorkville, IL ZIP+4 ▶	6056	0	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here			▶ □
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority	16	Yes	No
	over a bank, securities, or other financial account in a foreign country?	10		
	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.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			ĺ
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes			
	(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? Yes No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(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 2019?	1c		
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)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years ▶ 20, 20, 20, 20	1 !		1
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.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3a	▶ 20, 20, 20, 20			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or			
b	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 Form 4720, Schedule C, to determine if the			
	foundation had excess business holdings in 2019.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		~
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?	4b		

_			4
Р	'aa	Θ	k

Par	:/VII-B	Statements Regarding Activities	s for W	hich Form	4720 I	May Be R	equire	d (contii	nued)_			
5a	During th	e year, did the foundation pay or incur	any am	ount to:							Yes	No
•	(1) Carry	on propaganda, or otherwise attempt t	o influe	nce legislatio	n (sect	ion 4945(e)))? .	☐ Yes	✓ No	•		
	(2) Influe	nce the outcome of any specific public	election	on (see secti	on 495	5); or to ca	arry on,					
	direc	tly or indirectly, any voter registration dr	ive?					☐ Yes	✓ No			
	(3) Provi	de a grant to an individual for travel, stu	dy, or c	ther similar	ourpose	es?		Yes	✓ No	1 :		
		de a grant to an organization other thar								-		
								☐ Yes	✓ No	1		
		de for any purpose other than religious oses, or for the prevention of cruelty to o							☑ No			
b	If any an in Regula	swer is "Yes" to 5a(1)–(5), did any of thations section 53.4945 or in a current no	e trans tice reg	actions fail t jarding disas	o qualıf ter assi	iy under the istance? Se	e excep ee instru	otions des uctions	scribed 	5b		
	Organiza	tions relying on a current notice regardi	ng disa	ster assistan	ce, che	ck here .						
С	If the an	swer is "Yes" to question 5a(4), does t	he four	ndation claim	exem	ption from	the tax					
	because	it maintained expenditure responsibility	for the	grant?				Yes	☐ No			
		attach the statement required by Regula										
6a		oundation, during the year, receive any		_			emiums	_				
	•							☐ Yes	☑ No			
b		oundation, during the year, pay premiun	ns, dire	ctly or indire	ctly, on	a personal	benefit	contract	? .	6b	-	~
_		o 6b, file Form 8870.										
7a		ne during the tax year, was the foundation										
ь		did the foundation receive any proceeds andation subject to the section 4960 tax							n.,	7b		
8		ation or excess parachute payment(s) di							✓ No			
Par		Information About Officers, Direc									ees.	
ı aı		and Contractors	, .	1401000, 1	Janua	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				,	
1		fficers, directors, trustees, and found	ation n	nanagers ar	d their	compens	ation. S	See instru	ctions) <u>.</u>		
			(b) Title	e, and average	(c) Cor	mpensation	(d) (Contribution	s to	(e) Expe	nse acc	count,
		(a) Name and address		rs per week ed to position		not paid, iter -0-)		yee benefit erred compe		other	allowan	ces
haro	n Mason, D	irector & President	1						ĺ			
905 N	1arketview	Drive, Suite 146 Yorkville, IL 60560	0			0			0	_		0
Vindy	Kopecky,	Director & Secretary	1									
		Drive, Suite 146 Yorkville, IL 60560	0		ļ	0			0			0
ick L	aw, Directo	or & Treasurer							i			
905 N	<u>larketview</u>	Drive, Suite 146 Yorkville, IL 60560	0			0			0			0
					ŀ							
		N. A. Charachian and a second assessment	- (-46	an Alaan Alaa		نا حد ادداد،		inch	tion) If m		
2	"NONE."	sation of five highest-paid employed	es (our	er man mo	se mon	uded on II	ne i —:	see msu	uctions	əy. 11 11	Jile, (enter
	- HOITE.			·		1		(d) Contribi	utions to			
	(a) Name and	d address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to p	veek	(c) Comper	nsation	employee plans and compen	benefit deferred	(e) Expe	nse acc allowan	
								Compen	sation			
IONE												
								<u></u>				
								1				
						<u> </u>						
								i				
otal	number of	other employees paid over \$50,000 .							. ▶			

	highest-paid independent contractors for professional services. See instructions. If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
	per of others receiving over \$50,000 for professional services	<u> </u>
Part IX-A	Summary of Direct Charitable Activities	
	andation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ins and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
	ns and other beneficialities served, conferences convenien, research papers produced, etc.	
1		
2		
3		
4		
art IX-B	Summary of Program-Related Investments (see instructions)	
Describe th	e two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1		
2		
	ogram-related investments. See instructions.	
All other pr		
All other pro		
3	lines 1 through 3	

Part∞	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn fou	undations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
	Average monthly fair market value of securities	1a	
	Average of monthly cash balances	1b	
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	
е	Reduction claimed for blockage or other factors reported on lines 1a and	1 1	
_	1c (attach detailed explanation)	 	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	1 . 1	
	instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Part 2	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f and certain foreign organizations, check here ► and do not complete this part.)	ounda	ations
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2019 from Part VI, line 5 2a		
b	Income tax for 2019. (This does not include the tax from Part VI.) 2b]	
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	<u> </u>
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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	0
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	
	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 IHS approval required)	3a	
	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	0
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0
J	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	-	<u></u>
	qualifies for the section 4940(e) reduction of tax in those years.	9 11110	and and redundation
	desimine to the continuous settle set		Form 990-PF (2019)

Part	Undistributed income (see instruction	ons)			
•		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				o
2	Undistributed income, if any, as of the end of 2019:				
а	Enter amount for 2018 only				
b	Total for prior years: 20, 20, 20				
3	Excess distributions carryover, if any, to 2019:				
а	From 2014				
þ	From 2015				
C	From 2016				
d	From 2017				
e	From 2018	· 			
f 4	Total of lines 3a through e				
4	Qualifying distributions for 2019 from Part XII, line 4: > \$				
a	Applied to 2018, but not more than line 2a .				
	Applied to undistributed income of prior years (Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2019 distributable amount				
e	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract line 4b from line 2b	· · · · · · · · · · · · · · · · · · ·			
С	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				
d	Subtract line 6c from line 6b. Taxable amount—see instructions				
е	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions				
f	Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9:				
а	Excess from 2015				
b	Excess from 2016				
С	Excess from 2017				
d	Excess from 2018				
_	Evenes from 2010		I	(1

Page 10	
4942(j)(5) Fotal	

Form 990-PF (2Q19)

Part	XIV Private Operating Founda	tions (see instru	ctions and Part	VII-A, question 9)	
, 1a ,	If the foundation has received a ruling foundation, and the ruling is effective for					
					etion [] 4040(V)	0) 07 0 4040(3/5)
b	Check box to indicate whether the four		operating toungar		ction [] 4942(J)(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	(1) (2) (2)	(e) Total
	investment return from Part X for	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
	each year listed					
b	85% of line 2a					
C	Qualifying distributions from Part XII,					
	line 4, for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test-enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-enter 2/3					
-	of minimum investment return shown in					
	Part X, line 6, for each year listed					
С	"Support" alternative test-enter:					
·	• •		/			
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income	/				
Part				he foundation h	ad \$5,000 or mo	ore in assets at
	any time during the year-		าร.)			
1	Information Regarding Foundation					
а	List any managers of the foundation of before the close of any tax year (but of					by the foundation
b	List any managers of the foundation ownership of a partnership or other el					rge portion of the
2	Information Regarding Contribution	Grant Gift Los	n Scholarshin e	to Programs		
2	Check here ▶ ☐ if the foundation unsolicited requests for funds. If the f complete items 2a, b, c, and d. See in	only makes controundation makes	ributions to prese	lected charitable		
а	The name, address, and telephone nu		dress of the perso	n to whom applica	tions should be ac	ldressed:
						· · · · · · · · · · · · · · · · · · ·
b	The form in which applications should	be submitted and	d information and	materials they sho	uld include:	
С	Any submission deadlines:					
d	Any restrictions or limitations on av	vards, such as b	y geographical a	reas, charitable fi	elds, kinds of inst	titutions, or other

Form 9	90-PF (20,19)				Page			
Parl	Supplementary Information (con	tinued)						
_3	Grants and Contributions Paid During	id During the Year or Approved for Future Payment						
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount			
	Name and address (home or business)	or substantial contributor	Tecipient					
а	Paid during the year							
					1			
				'				
					ļ			
		,						
	•				j			
	T-A-1	<u> </u>		<u> </u>	Ba			
	Total	 			oa			
D	Approved for future payment				1			
				•				
			-					
					-			
	<u></u>							
	Total				Bb			

	-A Analysis of Income-Producing Ac	tivities				
Enter gross	s amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by secti	on 512, 513, or 514	(e)
•		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
1 Progr	ram service revenue:	<u> </u>				,
a _						
b						
c _						
d _						
e _						
f _						
-	ees and contracts from government agencies					
	bership dues and assessments					
	est on savings and temporary cash investments		_			
	ends and interest from securities					
	ental income or (loss) from real estate:					
	ebt-financed property					
	ot debt-financed property					
	ental income or (loss) from personal property			-		
	r investment income					
	or (loss) from sales of assets other than inventory					
	ncome or (loss) from special events					
	s profit or (loss) from sales of inventory			 	<u> </u>	
	r revenue: a					
ь _						
°. –					····	
d						
e _	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		<u> </u>	-		
12 Subt	otal. Add columns (b), (d), and (e)					<u>l</u>
					40	
					13	· · · · · ·
See works	sheet in line 13 instructions to verify calculation	s.)			13	
See works Part XVI	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		
See works Part XV Line No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		mportantly to the
See works Part XVI	sheet in line 13 instructions to verify calculation	s.) .ccomplishm	ent of Exemp	t Purposes		mportantly to the
See works Part XV Line No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		mportantly to the stions.)
See works Part XV Line No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		mportantly to the trions.)
See works Part XV Line No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		mportantly to the tions.)
See works Part XV Line No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		mportantly to the
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See works Part XV Line No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		mportantly to the
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See works Part XV Line No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		mportantly to the
See works Part XV Line No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		mportantly to the
See works Part XV Line No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		mportantly to the
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See works Part XV Line No.	sheet in line 13 instructions to verify calculation -B Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	t Purposes		mportantly to the ctions.)

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Par®.	XVII	Informatio Organizati	n Regarding Tran	sfers to and Tran	sactions and R	Relationships W	ith Nonchari	table Exc	empt	
` 1	Did H			engage in any of the	following with any	other organization	n described	Yes	No	
	in se	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political								
	_	nizations?				- t-	·			
			porting foundation to	a noncharitable exe	empt organization	ot:	ŀ			
	(1) C	ash					[1a(1)	~	
	(2) (ther assets .					[1a(2)	~	
b	Othe	r transactions:					1.			
	(1) S	ales of assets to	a noncharitable exer	mpt organization			[lb(1)	~	
	(2) P	urchases of asse	ets from a noncharita	ble exempt organiza	ation		[lb(2)	~	
	(3) R	ental of facilities	, equipment, or other	assets			[1b(3)	~	
	(4) R	eimbursement a	rrangements				[1b(4)	~	
		oans or loan gua	-) -	b(5)	~	
		-	ervices or membershi				-	Ib(6)	~	
			equipment, mailing lis	•				1c	~	
		-	of the above is "Yes				_		arket	
			ther assets, or service							
			on or sharing arrange							
(a) Line		b) Amount involved		antable exempt organizat		iption of transfers, tran				
(a) Line	10 1	b) Amount involved	(C) Name of Honoria	antable exempt organizat	(d) Descr	phon of transfers, train	sactions, and snam		91115	
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			ectly or indirectly aff			ore tax-exempt o	rganizations			
			501(c) (other than sec	tion 50 F(c)(3)) or in	section 527? .		L	」Yes ∟	No	
b	If "Ye		e following schedule.	<u></u>						
	(a) Name of organization			(b) Type of organization			(c) Description of relationship			
							·····			
			declare that I have examined				pest of my knowledge	and belief, it	is true,	
Sign	corre	correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge							return	
lere		143-20 Wosid and Diractor with the pres					oarer shown b	elow?		
.010	Sian.	Signature of officer or trustee Date Title See instruc				ons Yes	□No			
	g-1	Print/Type preparer		Preparer's signature		Date	PI PI	IN .		
Paid				,			Check if self-employed	-		
repa		Ryan Oberly				<u> </u>		00404=5		
Jse C	nly		Wagenmaker & Oberly					-2346478		
		Firm's address ▶	53 W. Jackson Blvd St	te 1734, Chicago, IL 6	0604	Phone)626-1600		
							Forr	n 990-PF	(2019)	