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

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

<del></del>	venue Service	1 0010			Open to 1 dans mopeonism
For calen	idar year 2019 or tax year beginning JUL	1, 2019	, and ending	<u>JUN 30, 2020</u>	
Name of	foundation			A Employer identification	number
_	YLON FOUNDATION		·-	36-6033583	
	nd street (or P O box number if mail is not delivered to street a	ddress)	Room/suite	B Telephone number	
	0 W. ARTHINGTON STREET			312-666-77	00
-	own, state or province, country, and ZIP or foreign p CAGO , IL 60612	ostal code		C If exemption application is p	ending, check here
G Check	all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	s, check here
	Final return	Amended return		2 5	atura the REW toot
	Address change	Name change		Foreign organizations me check here and attach co	imputation
	type of organization: X Section 501(c)(3) ex		M	E If private foundation sta	tus was terminated
		Other taxable private founda		under section 507(b)(1)	(A), check here
	arket value of all assets at end of year   J Accounti	=	Accrual	F If the foundation is in a	
•		ther (specify)	<u> </u>	under section 507(b)(1)	(B), check here
<b>▶</b> \$	25,715,122. (Part I, colun				(d) Disbursements
Parti	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) )	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
		627,500.		N/A	(Casil Dasis Offiy)
1 2	Contributions, gifts, grants, etc., received  Check I I the foundation is not required to attach Sch. 8	027,300.			
3	Interest on savings and temporary cash investments	176,033.	176,033.		STATEMENT 1
٨	Dividends and interest from securities	413,510.	413,510.		STATEMENT 2
5a	<b>σ.Λ</b>				
Г,	XH				
_ 6a	Net gain or (loss) from sale of assets not on line 10	-1,913,776.			
a g	Gross sales price for all assets on line 6a 27,434,003.				1
Revenue 2	Capital gain net income (from Part IV, line 2)		0.		
œ 8	Net short-term capital gain				
9	Income modifications Gross sales less returns				
10a			<del>-</del>		
	Less Cost of goods sold				
11	Gross profit or (loss) Other income	67,600.	20,433.	-	STATEMENT 3
12	Total. Add lines 1 through 11	-629,133.	609,976.		
13	Compensation of officers, directors, trustees, etc	0.	0.		0.
14	Other employee salaries and wages				
15	Pension plans, employee benefits			RECE	IVED
ပ္ရွိ 16a	Legal fees				
P GIS	Accounting fees			4	S S
Expe	Other professional fees STMT 4	198,551.	198,551.	MAR 1	6 2021 9 0.
			40.604	<del>                                     </del>	
Administrative 12 0 12 14 15 15 15 15 15 15 15 15 15 15 15 15 15	Taxes STMT 5	48,631.	13,631.	OGDE	N UT 0.
.달 19	Depreciation and depletion			<u> </u>	
20	Occupancy				
7	Travel, conferences, and meetings			-	<del> </del>
Pue 22	Printing and publications			+	
23 24 25	Other expenses Total operating and administrative				1
e 24	expenses. Add lines 13 through 23	247,182.	212,182.		0.
Ö 25	Contributions, gifts, grants paid	1,545,309.		***	1,545,309.
120	Total expenses and disbursements.				1
"	Add lines 24 and 25	1,792,491.	212,182.		1,545,309.
27		, ,	,		1
	Excess of revenue over expenses and disbursements	-2,421,624.			
	Net investment income (If negative, enter -0-)		397,794.		
	Adjusted net income (if pegative enter -0-)			N/A	1

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions.

1	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)	1	27,390,317.
2	Enter amount from Part I, line 27a	2	-2,421,624.
3	Other increases not included in line 2 (itemize) COST BASIS ADJUSMENT	3	12,276.
4	Add lines 1, 2, and 3	4	24,980,969.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	24,980,969.

Form 990-PF (2019) CAR	YLON	FOUNDATION						36	<u>5-603:</u>	3583	Page 3
Part IV Capital Gains					1763						
(a) List and describe 2-story brick wa	the kind(s arehouse;	<ul> <li>of property sold (for examor common stock, 200 shs.</li> </ul>	nple, real esta MLC Co.)	te,	(B) D	- Purci - Dona	quired hase ation	(c) Date a (mo., da	icquired iy, yr.)	( <b>d)</b> Dat (mo., d	
18 PUBLICLY TRADE											
b CAPITAL GAINS	DIVIE	ends			↓						
<u>c</u>		-			-						
d	_		<del>.</del>	<del></del>	╂						
<u>e</u>	(4)	Description allowed	(=) Co.	at or other book	٠,			/h) C:	un or (loce)		-
(e) Gross sales price	(1)	Depreciation allowed (or allowable)		st or other basis expense of sale					un or (loss) (f) minus (		
a 27,432,106.		` ' '	2	9,347,77	9.					1,915	673.
b 1,897.		-		. ,							,897.
C			-								
0											
<u>e</u>	L										
Complete only for assets showing	<u> </u>	1							ol. (h) gaın ot less than		
(i) FMV as of 12/31/69	(	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any			coi.		from col. (I		
		as 01 12/31/05		coi. (j/, ii aliy						1,915	673
a b										1	,897.
C								<del></del>			, 05, 10
d											
e											
		∫ If gain, also enter	ın Part I, line	7	J						-
2 Capital gain net income or (net ca	apıtal loss)		ın Part I, line	7	<i>[</i> ]	2	_			1,913	<u>,776.</u>
3 Net short-term capital gain or (los	ss) as defi	ned in sections 1222(5) and	d (6):		١ , ١						
If gain, also enter in Part I, line 8,		c).			→l	_			NT / 7		
If (loss), enter -0- in Part I, line 8 [Part Val Qualification U	nder S	ection 4940(a) for l	Reduced	Tay on Net	Inve	3 estm	ent Inco	me	N/A		
(For optional use by domestic private											
(For optional use by domestic private	Fiouriualic	ons subject to the section 4:	340(a) tax on	net investment in	icome	•)					
If section 4940(d)(2) applies, leave to	his part bl	ank.									-
Was the foundation liable for the sec	tion 4942	tax on the distributable amo	ount of any ye	ar in the base per	riod?					Yes	X- No
If "Yes," the foundation doesn't qualif	fy under se	ection 4940(e). Do not comp	plete this part								
1 Enter the appropriate amount in	each colur	nn for each year; see the ins	structions bef	ore making any ei	ntries.	•				711	
(a) Base period years		(b)		National and a second	(c)				Distrib	(d) ution ratio	
Calendar year (or tax year beginni	ng in)	Adjusted qualifying distr		Net value of no					col. (b) div		
2018			3,651. 5,941.				3,606 9,141				46084 47728
2017	<del></del>		5,734.				9,141 $9,036$				47800
2015			4,958.				1,832				49165
2014	<del>-</del>		1,465.				3,154				46518
						•					
2 Total of line 1, column (d)								2		. 2	37295
3 Average distribution ratio for the	5-year bas	se period - divide the total o	n line 2 by 5.0	D, or by the numb	er of y	years					
the foundation has been in existe	nce if less	than 5 years						3		.0	47459
									•		556
4 Enter the net value of noncharitat	le-use ass	sets for 2019 from Part X, II	ne 5					4	2	8 <u>,</u> 778	<u>, 756.</u>
								_		1 365	011
5 Multiply line 4 by line 3								5		1,365	, 011.
6 Enter 19/ of not investment incom	na / 10/- of	Part I line 27h\						6		3	,978.
6 Enter 1% of net investment incom	10 (1/0 0)	i aiti, iiiit 2/U)									<u>, , , , , , , , , , , , , , , , , , , </u>
7 Add lines 5 and 6								7	:	1,369	,789.
8 Enter qualifying distributions from	n Part XII,	line 4						8		1,545	<u>,309.</u>
If line 8 is equal to or greater than	n line 7, ch	neck the box in Part VI, line	1b, and comp	lete that part usin	ng a 1°	% tax r	ate.				
		•	•	•	-						

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Form **990-PF** (2019)

See the Part VI instructions.

Form 990-PF (2019) CARYLON FOUNDATION		-6033583	
Part VI Excise Tax Based on Investment Income (Section	1 4940(a), 4940(b), 4940(e), or 4948	- see instruc	ctions)
1a Exempt operating foundations described in section 4940(d)(2), check here	l I		•
Date of ruling or determination letter: (attach copy of lett		_	
<b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V, check h	nere 🕨 🔀 and enter 1%	<del></del>	3,978.
of Part I, line 27b		Ì	1
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, 6			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations			0.
3 Add lines 1 and 2	3		3,978.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations	-		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter	-0- <u>5</u>	<del></del>	3,978.
6 Credits/Payments:	6a   12,338.		1
a 2019 estimated tax payments and 2018 overpayment credited to 2019		į	ļ
b Exempt foreign organizations - tax withheld at source	F 000	ŀ	Ì
c Tax paid with application for extension of time to file (Form 8868)	6c 5,000.	İ	1
d Backup withholding erroneously withheld	7	-\ <del></del> 1	7,338.
<ul> <li>7 Total credits and payments. Add lines 6a through 6d</li> <li>8 Enter any penalty for underpayment of estimated tax. Check here X if Form 222</li> </ul>	<del></del>		0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	<del></del>	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount over			3,360.
11 Enter the amount of line 10 to be. Credited to 2020 estimated tax	13,360. Refunded > 1		0.
Part VII-A   Statements Regarding Activities	, , , , , , , , , , , , , , , , , , , ,		
1a During the tax year, did the foundation attempt to influence any national, state, or los	cal legislation or did it participate or intervene in		Yes No
any political campaign?		1a	X
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political	al purposes? See the instructions for the definition	1b	X
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.		<u> </u>	
c Did the foundation file Form 1120-POL for this year?		_1c	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed du			[
(1) On the foundation. ► \$ (2) On foundation m			
e Enter the reimbursement (if any) paid by the foundation during the year for political	expenditure tax imposed on foundation		
managers. > \$0.			
2 Has the foundation engaged in any activities that have not previously been reported	to the IRS?	_ 2	X
If "Yes," attach a detailed description of the activities.		İ	-
3 Has the foundation made any changes, not previously reported to the IRS, in its gov		<del></del>	<del>-</del> x
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chang		3 4a	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during b If "Yes," has it filed a tax return on Form 990-T for this year?		N/A 4b	<del></del>
5 Was there a liquidation, termination, dissolution, or substantial contraction during the		5	x
If "Yes," attach the statement required by General Instruction T	io your -	<u> </u>	<del>                                     </del>
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) sati	isfied either		
By language in the governing instrument, or			
By state legislation that effectively amends the governing instrument so that no management is a second control of the second c	andatory directions that conflict with the state law		l l l
remain in the governing instrument?	•	6	X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes	s," complete Part II, col. (c), and Part XV	7	х
8a Enter the states to which the foundation reports or with which it is registered. See in	structions. ►		
IL			]
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to	to the Attorney General (or designate)		
of each state as required by General Instruction G? If "No," attach explanation		8b	Х
9 Is the foundation claiming status as a private operating foundation within the meaning	ng of section 4942(j)(3) or 4942(j)(5) for calendar		_ _ <i> </i>
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Ye		9	<u> </u>
10 Did any persons become substantial contributors during the tax year? If "Yes," attach	a schedule listing their names and addresses	10	X
		Form <b>99</b> 0	<b>D-PF</b> (2019)

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Pa	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address WWW.CARYLONCORP.COM			
14	The books are in care of ► MARCIE HEMMELSTEIN Telephone no. ► 312-66	6-7	700	
	Located at ▶ 2500 ARTHINGTON STREET, CHICAGO, IL ZIP+4 ▶60			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			$\overline{\Box}$
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16			Yes	No
	securities, or other financial account in a foreign country?	16		х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			l
Pa	art VII-B   Statements Regarding Activities for Which Form 4720 May Be Required			<u>`</u>
	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?			
	(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			ŀ
	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	٠.		
	termination of government service, if terminating within 90 days.)			
ь	of any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		1	' [
_	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions  N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	<del></del>		
c	E Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			- 1
•	before the first day of the tax year beginning in 2019?	10		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			1
_	defined in section 4942(j)(3) or 4942(j)(5)):			J
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?			l
	If "Yes," list the years \(\bigs\),			i
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
_	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.)  N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
	· · · · · · · · · · · · · · · · · · ·			i
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			- 1
	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			1
	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,			- 1
	Schedule C, to determine if the foundation had excess business holdings in 2019.)  N/A	3b		
Δa	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	48		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	"		<del></del> -,
•	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X
_			) DE	(2019)

Form 990-PF (2019) CARYLON FOUNDATION	4500 14 50 50	<del></del>	<u>36-60335</u>	<u>83</u>	F	age <b>6</b>
Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be Re	equired (contin	ued)	- 15		
5a During the year, did the foundation pay or incur any amount to:		_		\ <b>Y</b>	/es	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No			1
(2) Influence the outcome of any specific public election (see section 4955); o				ł	.	
any voter registration drive?			es X No			' 1
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es X No		1	- 1
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				l	1
4945(d)(4)(A)? See instructions		Y	es X No			- 1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo	)r			1	j
the prevention of cruelty to children or animals?		Y	es X No		- 1	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations				
section 53.4945 or in a current notice regarding disaster assistance? See instru	uctions		N/A	5b		
Organizations relying on a current notice regarding disaster assistance, check h	nere			ŀ		1
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it maintain	ned				٠, ا
expenditure responsibility for the grant?			es 🔲 No 📙			- 1
If "Yes," attach the statement required by Regulations section 53.4945-5(d).						- 1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on					- 1
a personal benefit contract?		Y	es 🗓 No 📜		<u>.                                    </u>	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b		<u>X</u>
If "Yes" to 6b, file Form 8870.					-	. 1
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y	es 🗶 No 💄			
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A _	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration or			1	- 1	- 1
excess parachute payment(s) during the year?			es X No			<u>.                                    </u>
Part VIII Information About Officers, Directors, Truste	es, Foundation Man	agers, Highly				
Paid Employees, and Contractors	<u></u>					
1 List all officers, directors, trustees, and foundation managers and the		1	I (d) 0			
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	acc al	Expe ount, llowar	ense other ices
MARCIE HEMMELSTEIN	DIRECTOR					
2500 W. ARTHINGTON ST.						
CHICAGO, IL 60612	1.00	0.	0.			0.
RICHARD REISIN	VICE PRESIDEN	þ				
2500 W. ARTHINGTON ST.						
CHICAGO, IL 60612	1.00	0.	0.			0.
JONATHAN MERVIS	SECRETARY					
2500 W. ARTHINGTON ST.						
CHICAGO, IL 60612	1.00	0.	0.			0.
	[					
				L		
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to		1 Ev-	nc^
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred	acc	Expe	other
	devoted to position	` ` `	compensation	al	llowan	ices
NONE						
				├—		
				├—		
	1					
	<del></del>			├─		
				$\vdash$		
Table number of other ampleyees paid ave- 050 000	<u> </u>	<u> </u>	<u> </u>	Ь		0
Total number of other employees paid over \$50,000	<del></del>	<del></del>	Form	990-	PF /	<u> </u>
			1 01111		(	

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Total. Add lines 1 through 3

All other program-related investments. See instructions.

LF.	art's Minimum investment Return (All domestic foundations must complete this part. Foreign four	idations,	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	28,138,590.
b	Average of monthly cash balances	1b	1,078,421.
c	Fair market value of all other assets	16	
d	Total (add lines 1a, b, and c)	1d	29,217,011.
е	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	0.
3	Subtract line 2 from line 1d	3	29,217,011.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	438,255.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	28,778,756.
6	Minimum investment return. Enter 5% of line 5	6	<u>1,438,938.</u>
ĮP,	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	id certain	
	foreign organizations, check here  and do not complete this part.)	<del>, , , , , , , , , , , , , , , , , , , </del>	
1	Minimum investment return from Part X, line 6		1,438,938.
2a	Tax on investment income for 2019 from Part VI, line 5		
þ	Income tax for 2019. (This does not include the tax from Part VI.)		
C	· · · · · · · · · · · · · · · · · · ·	2c	3,978.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,434,960.
4	Recoveries of amounts treated as qualifying distributions	4	47,167.
5	Add lines 3 and 4	5	1,482,127.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,482,127.
ĮP,	art XII Qualifying Distributions (see instructions)		
Ξ	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
'.	T	1a	1,545,309.
a b		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a		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	1,545,309.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		· · · · · · · · · · · · · · · · · · ·
•	income. Enter 1% of Part I, line 27b	5	3,978.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,541,331.
-	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies 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
1 Distributable amount for 2019 from Part XI,				1,482,127.
2 Undistributed income, if any, as of the end of 2019	·			
a Enter amount for 2018 only			1,438,655.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2019:				
a From 2014				
<b>b</b> From 2015				
c From 2016				
d From 2017				
e From 2018				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from				
Part XII, line 4: ► \$ 1,545,309.			4 400 655	
a Applied to 2018, but not more than line 2a			1,438,655.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)	·	0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			106 654
d Applied to 2019 distributable amount				106,654.
e Remaining amount distributed out of corpus	0.			
Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a) )	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously		0.		
assessed		<u> </u>		
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions				
e Undistributed income for 2018. Subtract line			0.	
4a from line 2a. Taxable amount - see instr.  f Undistributed income for 2019. Subtract			- 0.	
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				1,375,473.
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)	0.			
8 Excess distributions carryover from 2014			-	
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020.				
Subtract lines 7 and 8 from line 6a	0.			
0 Analysis of line 9:		· <del>-</del>		
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018	ļ	,		
e Excess from 2019				Form 990-DE (2010)

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	FOUNDATION				033583 Page 10
Part·XIV:   Private Operating F	-		II-A, question 9)	N/A	/
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo			▶ ∟_		/
<b>b</b> Check box to indicate whether the foun		ng foundation described		4942(j)(3)_or	1942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	1 111 0010	-
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d),2016	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					<u> </u>
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					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c			i		
3 Complete 3a, b, or c for the					
alternative test relied upon: a "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	<del>/</del>		+	<del>                                     </del>	<del> </del>
c "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)	ļ				
(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					<del> </del>
an exempt organization					
(4) Gross investment income					+
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during t				40,000 01	
1 Information Regarding Foundation	n Managers:	•			
a List any managers of the foundation wh	-	than 2% of the total cont	ributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed r			. Ibadiono roccivos by the		oo or any tax
NONE					
b List any managers of the foundation wh			or an equally large port	on of the ownership of a p	artnership or
other entity) of which the foundation ha	s a 10% or greater interes	5 <b>t.</b>			
2 Information Regarding Contributi	on Grant Gift Loan	Scholarchin etc. Dr	oarame:		
Check here 🕨 🔲 if the foundation of	only makes contributions t	to preselected charitable	organizations and does	not accept unsolicited requ	uests for funds. If
the foundation makes gifts, grants, etc.,	to individuals or organiza	itions under other condit	ions, complete items 2a	, b, c, and d.	
a The name, address, and telephone num	per or email address of th	e person to whom applic	ations should be addres	sed;	
MARCIE HEMMELSTEIN	_ ~~~~	60610			
2500 W. ARTHINGTON S					
b The form in which applications should be IN WRITING, INCLUDE					
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographica	ıl areas, charitable fields,	kinds of institutions, or	other factors:	_
NONE					

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation status of Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year AMERCIAN MACULAR DEGENERATION CHARITY PС FOUNDATION PO BOX 515 NORTHAMPTON, MA 01061 500. AMERICAN COMMITTE FOR WEIZMANN PC CHARITY INSTITUTE 180 N LASALLE ST, STE 3110 CHICAGO, IL 60601 25,000. AMERICAN FRIENDS OF ALYN HOSPITAL CHARITY 122 E 42ND ST, STE 1519 NEW YORK, NY 10168 2,500. AMERICAN FRIENDS OF LEKET ISRAEL CHARITY ÞС 101 CEDAR LN, STE 306 TEANECK, NJ 07666 10,000. AMERICAN JEWISH COMMITTEE PC RELIGIOUS 55 E MONROE ST CHICAGO, IL 60603 1,500. SEE CONTINUATION SHEET(S) 1,545,309. **▶** 3a Total **b** Approved for future payment NONE ▶ 3b Total

Part XV Supplementary Informatio 3 Grants and Contributions Paid During the				<u> </u>
Recipient	If recipient is an individual,	Τ	<u> </u>	<del>                                     </del>
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
,	or substantial contributor	recipient		<u> </u>
ANCHOR CROSS SOCIETY - RUMC		PC	CHARITY	
1201 W HARRISON, STE 300				F 000
CHICAGO, IL 60607				5,000
			DEL TATOMA	
BIRTHRIGHT ISRAEL FOUNDATION		PC	RELIGIOUS	
PO BOX 21615				2,500
NEW YORK, NY 10087				2,300
D.T.D.E. CVAIA GOGUE		PC	PEI TOTOUG	
BJBE SYNAGOGUE		ľ	RELIGIOUS	
1201 LAKE COOK RD DEERFIELD, IL 60015				2,630
28881188D, 18 00013	:		<del>                                     </del>	2,000
CENTRAL SYNAGOGUE		PC	RELIGIOUS	
845 N MICHIGAN AVE				
CHICAGO, IL 60611				5,000
,				·
CHABAD OF EAST LAKEVIEW		PC	RELIGIOUS	
655 W IRVING PARK RD, STE 207				
CHICAGO, IL 60613				1,000
CHAI LIFELINE		PC	CHARITY	`-
6600 N LINCOLN AVE				*-
LINCOLNWOOD, IL 60712				5,000
CHEVRA KADISHA		₽C	RELIGIOUS	
2701 W HOWARD ST CHICAGO, IL 60645				5,000
CHICAGO COALITION FOR THE HOMELESS		₽C	CHARITY	
70 E LAKE ST, STE 720				
CHICAGO, IL 60601		<del> </del>		500
CHICAGO JEWISH DAY SCHOOL		PC	EDUCATION	
3730 N CALIFORNIA AVE				
CHICAGO, IL 60618				10,000
CHICAGO PUBLIC LIBRARY FOUNDATION		PC	EDUCATION	
20 N MICHIGAN AVE, STE 520 CHICAGO, IL 60602				5,000
Total from continuation sheets		•		1,505,809

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or contribution show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor CHARITY CLEARBROOK CENTER ÞС 1835 W CENTRAL RD 6,000. ARLINGTON HEIGHTS, IL 60005 CONGREGATION ANSHE SHOLOM B'NAI ÞС RELIGIOUS ISRAEL 540 W MELROSE ST 11,775. CHICAGO, IL 60657 DETROIT NATIONAL CENTER FOR CIVIL EDUCATION DISCOURSE 5000 MIRROR LAKE CT WEST BLOOMFIELD, MI 48322 50,000. EFRAT DEVELOPMENT FOUNDATION USA CHARITY 190 WILLIS AVE MINEOLA, NY 11501 1,000. FEEDING AMERICA CHARITY 35 E WACKER DR, STE 2000 20,000. CHICAGO, IL 60601 FREE WHEELCHAIR MISSION CHARITY 15279 ALTON PKWY, STE 300 IRVINE, CA 92618 2,500. CHARITY GREATER CHICAGO FOOD DEPOSITORY 4100 W ANN LURIE PL 5,000. CHICAGO, IL 60632 EDUCATION HADASSAH ÞС 40 WALL ST NEW YORK, NY 10005 15,000. HEARTLAND ALLIANCE ÞС CHARITY 208 S LASALLE ST, STE 1300 20,000. CHICAGO, IL 60601 ICEE - ISRAEL CENTER FOR EXCELLENCE PC EDUCATION 9 S 753 CIRCLE AVE 100,000. WILLOWBROOK, IL 60527 Total from continuation sheets

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or contribution show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor JEWISH FOUNDATION FOR THE RIGHTEOUS ÞС CHARITY 80 MAIN ST STE 380 250. WEST ORANGE, NJ 07052 JEWISH LEARNING FOUNDATION EDUCATION 2014 ORRINGTON AVE 15<u>,</u>000. EVANSTON, IL 60201 JEWISH LEARNING INSTITUTE ÞС EDUCATION 822 EASTERN PARKWAY BROOKLYN, NY 11213 85,000. CHARITY JEWISH UNITED FUND ÞС 30 S WELLS ST 310,000. CHICAGO, IL 60606 JEWISH UNITED FUND ÞС EDUCATION 30 S WELLS ST 15,140. CHICAGO, IL 60606 JOHN HOWARD ASSOCIATION РC EDUCATION 70 E LAKE ST, STE 410 40,000. CHICAGO, IL 60601 CHARITY MISERICORDIA ÞС 6300 N RIDGE AVE 25,000. CHICAGO, IL 60660 RELIGIOUS MISHKAN CHICAGO ÞС 4001 N RAVENSWOOD AVE, STE 101 CHICAGO, IL 60613 5,000. MUSEUM OF CONTEMPORARY ART EDUCATION 220 E CHICAGO AVE 27,500. CHICAGO, IL 60611 RELIGIOUS NORTH SUBURBAN SYNAGOGUE BETH EL 1175 SHERIDAN RD 60,000. HIGHLAND PARK, IL 60035 Total from continuation sheets

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor CHARITY NORTHSHORE UNIVERSITY HEALTH SYSTEM PC 6810 N MCCORMICK BLVD 200,000. LINCOLNWOOD, IL 60712 CHARITY OLLI ÞС 339 CHICAGO AVE 3,000. CHICAGO, IL 60611 CHARITY OVARIAN CANCER RESEARCH ALLIANCE 14 PENNSYLVANIA PLAZA, STE 210 NEW YORK, NY 10122 10,000. RELIGIOUS PALM BEACH SYNAGOGUE ЪC 120 N COUNTY RD PALM BEACH, FL 33480 25,000. PARKINSON'S FOUNDATION ÞС CHARITY 1028 N RUSH ST 500. CHICAOG, IL 60611 PKD FOUNDATION ÞС CHARITY 1001 E 101ST TER, STE 220 KANSAS CITY, MO 64131 15,000. CHARITY ÞС RAICES 1305 N FLORES ST 10,000. SAN ANTONIO, TX 78212 ÞС CHARITY RONALD MCDONALD HOUSE 211 E GRAND AVE CHICAGO, IL 60611 20,000. RUSH UNIVERSITY MEDICAL CENTER РC CHARITY 1620 W HARRISON ST 250,500. CHICAGO, IL 60612 SINAI HEALTH SYSTEM ₽C EDUCATION 1500 S FAIRFIELD AVE 10,000. CHICAGO, IL 60608 Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor CHARITY SMILE TRAIN ₽C 633 3RD AVE, STE 9 25,000. NEW YORK, NY 10017 STAND WITH US EDUCATION 601 SKOKIE BLVD 10,000. NORTHBROOK, IL 60062 STUDIO MUSEUM HARLEM ÞС CHARITY 144 WEST 125TH ST NEW YORK, NY 10027 10,000. RELIGIOUS TEMPLE BETH EL 3610 DUNDEE RD 1,254. NORTHBROOK, IL 60062 TEXAS CIVIL RIGHTS PROJECT ₽C CHARITY 502 CLOVER CT AUSTIN, TX 78745 5,000. CHARITY THE ARK ÞС 6450 N CALIFORNIA AVE CHICAGO, IL 60645 3,500. ÞС CHARITY THE FLORENCE PROJECT PO BOX 86299 5,000. TUSCON, AZ 85754 THE HINDU INSTITUTE ÞС EDUCATION 9401 N MARGAIL DESPLAINES, IL 60016 3,500. THE JEWISH MUSEUM CHARITY 1109 5TH AVE 360. NEW YORK, NY 10128 UIC CHABAD JEWISH CENTER ÞС EDUCATION 1074 W POLK ST 3,000. CHICAGO, IL 60607 Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to any foundation manager or substantial contributor Amount status of contribution Name and address (home or business) recipient UIC URBAN HEALTH EARLY OUTREACH РC EDUCATION PROGRAM 808 S WOOD ST, STE 173 CHICAGO, IL 60612 10,000. CHARITY US HOLOCAUST MEMORIAL MUSEUM ÞС 100 RAOUL WALLENBERG PL SW WASHINGTON, DC 20024 25,000. WBEZ ÞС CHARITY 848 E GRAND AVE N CHICAGO, IL 60611 2,400. WOMEN FOR WOMEN ÞС EDUCATION 2000 M STREET, NW STUIE 200 1,000. WASHINGTON, DC 20036 ÞС YIDDISH BOOK CENTER EDUCATION 1021 WEST ST 1,000. AMHERST, MA 01002 Total from continuation sheets

Form 990-PF (2019)	CARYLON	FOUNDATION

Enter gross amounts unless otherwise indicated.	Unrelated	business income	Exclud	ed by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	Allount	code	Amount	Tunction income
a	- <del>                                    </del>				
b	-		$\vdash$		
<u> </u>			<del>├</del> -		
d	-	_	$\vdash$		
e	_		┼──┤		
· • • • • • • • • • • • • • • • • • • •	-	·	╁		
g Fees and contracts from government agencies	1 +		$\vdash$		
2 Membership dues and assessments		·	1		. <u>.</u>
3 Interest on savings and temporary cash			14	176 033	
investments  4 Dividends and interest from securities	h	<del></del>	14	176,033. 413,510.	
5 Net rental income or (loss) from real estate:	<u> </u>	<del></del>	1	413,310.	
a Debt-financed property	<del>-</del>		-		
b Not debt-financed property	<del></del>		† †		
6 Net rental income or (loss) from personal	<del>                                     </del>		1 1		-
property					
7 Other investment income			01	20,433.	<del></del>
8 Gain or (loss) from sales of assets other	<u> </u>				<del></del>
than inventory			18	-1,913,776.	
9 Net income or (loss) from special events	<u> </u>				
O Gross profit or (loss) from sales of inventory					· · · · · ·
1 Other revenue				-	
a PY GRANT RECOVERY			01	47,167.	
b					· ·
c	-				
d				<del>"</del>	
e	_				
2 Subtotal. Add columns (b), (d), and (e)		0.		-1,256,633.	0 -1,256,633
3 Total. Add line 12, columns (b), (d), and (e)				13	-1,256,633
See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accor	nplishment of Ex	empt	Purposes	
Line No. Explain below how each activity for which income the foundation's exempt purposes (other that	come is reported in	column (e) of Part XVI-A	contribi	uted importantly to the accom	plishment of
the foundation's exempt purposes (other that NOT APPLICABLE	ir by providing rain	13 101 3uch purposos).			·
NOT AFFIICABLE					
				· -	
					<u> </u>
				- · · · · -	
-					
-					
		-	_		
	·		_		

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Form 990-PF (	2019) <b>CARYL</b>	ON FOUNDA	TION			36-6033	<u> 3583</u>	Pa	ige <b>13</b>
Part XVII	Information Re Exempt Organ		sfers to a	nd Transactions a	nd Relationsh	ips With Noncharit	able		
1 Did the o	rganization directly or indi	rectly engage in any	of the followin	g with any other organizati	on described in sect	on 501(c)		Yes	No
				to political organizations?					1
a Transfers	from the reporting found	ation to a noncharitat	ole exempt org	ganization of:					
(1) Cash	1						18(1)		X
(2) Othe	r assets						1a(2)		X
<b>b</b> Other trai							l		<del></del>
* -	s of assets to a noncharita						1b(1)		X
` '	hases of assets from a no	•	rganization				1b(2)		X
	al of facilities, equipment,						1b(3)		X
• •	nbursement arrangements						1b(4) 1b(5)		X
* *	is or loan guarantees	mharahin ar fundrais	una colucitatio	20			1b(6)		X
` '	ormance of services or me of facilities, equipment, ma	•	-				10(0)		X
-			•		lwavs show the fair r	market value of the goods, o		ets.	
	•		-	• •	-	or sharing arrangement, sh		,	
	d) the value of the goods,				,	,			
(a) Line no	(b) Amount involved			exempt organization	(d) Description	n of transfers, transactions, and s	haring arr	angemer	nts
			N/A						
					-			_	
		<del>"-</del>							
	-		-						
					<del></del>	·		<u> </u>	
	. <u>.</u>			···					
			**						
							•		
			•					_	
				····					
			<u></u>						
				<u> </u>					
ın sectior	501(c) (other than sectio	n 501(c)(3)) or in se		or more tax-exempt organ	izations described		Yes	X	] No
b If "Yes," c	omplete the following sch			(b) Type of organization	1	(c) Description of relations	hin		
	(a) Name of org	jainzauvii		(b) Type of Organization	<del>                                     </del>	(e) Description of relations	Υ.Υ.		
	N/A	·							
					<u> </u>				
		-							
Sign and b				accompanying schedules and s taxpayer) is based on all informa	ation of which preparer h してこと	as any knowledge retu sho	the IRS rn with th wn below	e prepare ? See ins	ar
Here	1 /			13-4.21	DIRECT	ror [2	X Yes	<u> </u>	_ No
Sig	nature/of officer or trustee		I D	Date	Title	Check If PTIN			
	Print/Type preparer's na	ime	Preparer's s	iynature	Date	Check if PTIN self- employed			
Paid	DANTELLE M	WINDID	DANTET.	T.P. M. WINET.	02/22/21	' '	079	656	
Preparer	DANIELLE M Firm's name ► OST			LE M. WINKL	LTD.	Firm's EIN ► 36-29			
Use Only	Times manie > OBI	MON METOT.	MINIT PA	w initially		TAIN SEIN P SO 2.			
•	Firm's address ▶ 45	5 N CITYF	RONT P	LAZA DR, SUI	TE 1500	<del>                                     </del>			
		ICAGO, IL				Phone no. 312-6'	70-7	444	
							rm <b>99</b>		(2019)

## Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

Employer identification number

2019

36-6033583 CARYLON FOUNDATION 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 X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** [X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II

religious, charitable, etc., contributions totaling \$5,000 or more during the year

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

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

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

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

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

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

prevention of cruelty to children or animals. Complete Parts I, II, and III

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization

Employer identification number

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CALIUN	T. OOMD	$\mathbf{v} + \mathbf{v}$

36-6033583

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BEARY PROPERTIES, INC.  2500 WEST ARTHINGTON  CHICAGO, IL 60612	\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	DEEP SOUTH INDUSTRIAL SERVICES  515 INDUSTRIAL DR  ROCKMART, GA 30153	\$15,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	METROPOLITAN ENVIRONMENTAL SERVICES  5055 NIKE DRIVE  HILLIARD, OH 43026	\$ <u>127,500.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	MOBILE DREDGING & PUMPING  3100 BETHEL RD.  CHESTER, PA 19013	\$25,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	NATIONAL INDUSTRIAL MAINTENANCE - MI 4400 STECKER DEARBORN, MI 48126	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	NATIONAL PLANT SERVICES  1461 HARBOR AVENUE  LONG BEACH, CA 90813	\$10,000.	Person X Payroll  Noncash  (Complete Part II for noncash contributions)

Name of organization

Employer identification number

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36-6033583

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	NATIONAL POWER RODDING  2500 WEST ARTHINGTON  CHICAGO, IL 60612	\$ <u>150,000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	ROBINSON PIPE CLEANING  2656 IDLEWOOD RD.  PITTSBURGH, PA 15205	\$ 75,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	SELECT TRANSPORTATION  5055 NIKE DRIVE  HILLIARD, OH 43026	\$ <u>15,000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	VIDEO INDUSTRIAL SERVICES  7721 2ND AVENUE NORTH  BIRMINGHAM, AL 35206	\$60,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)

Name of organization

Employer identification number

## CARYLON FOUNDATION

36-6033583

Part II	Noncash Property (see instructions) Use duplicate copies of Part II	ıf addıtıonal space is needed	
(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
		s	
(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

Name of o	organization		Employer identification number
CARYL	ON FOUNDATION		36-6033583
Part III	Exclusively religious, charitable, etc., contribute	I through (e) and the following line entri	tion 501(c)(7), (8), or (10) that total more than \$1,000 for the year
	completing Pert III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	charitable, etc., contributions of \$1,000 or le space is needed.	ss for the year (Enter this info once)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Turn formalla manna addinana an		Delational in of two references to two references
	Transferee's name, address, a	10 ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
			_
		(e) Transfer of gift	
	•		Deletion white of the surfaces to the surfaces
•	Transferee's name, address, a	10 ZIP + 4	Relationship of transferor to transferee
	<del></del>		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		<del></del>	
		(e) Transfer of gift	
	Transferee's name, address, ar	nd 7IP + 4	Relationship of transferor to transferee
	in ansier de 5 maine, auuress, ar		Houselight of Ballotelet to Ballotelee

FORM 990-PF	TRIMEDECM A	NT CAUTHOC	רוזא ג	TEMPOD V DV	CACU	TARTECOMENTOC	CONTRACTOR 1
rorm yyu-rr	INTEREST U	M SWATINGS	MIND	TEMPURARI	CASI	THAPSIMPMIS	STATEMENT I

	(A) REVENUE	(B) NET INVESTMENT	(C) ADJUSTED
SOURCE	PER BOOKS	INCOME	NET INCOME
MORGAN STANLEY #019211 MORGAN STANLEY #019211 -	43,207.	43,207.	
ACCURED INTEREST	-46,329.	-46,329.	
MORGAN STANLEY #019211 - BOND	•	•	
AMORTIZATION	-43,800.	-43,800.	
MORGAN STANLEY #019213	7.	7.	
MORGAN STANLEY #019217	22.	22.	
MORGAN STANLEY #019220	3.	3.	
MORGAN STANLEY #019221	49.	49.	
MORGAN STANLEY #019226	22.	22.	
MORGAN STANLEY #019228	70.	70.	
MORGAN STANLEY #019232	282,562.	282,562.	
MORGAN STANLEY #019232 ACCRUED			
INT	-11,584.	-11,584.	
MORGAN STANLEY #019232 BOND			
AMORT	-48,468.	-48,468.	
MORGAN STANLEY #019238	26.	26.	
MORGAN STANLEY #019241	73.	73.	
MORGAN STANLEY #021607	33.	33.	
MORGAN STANLEY #026331	36.	36.	
MORGAN STANLEY #02966	12.	12.	
STATE OF ISRAEL BONDS	92.	92.	
TOTAL TO PART I, LINE 3	176,033.	176,033.	

FORM 990-PF	DIVIDENDS	AND INT	EREST	FROM SECUI	RITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	S	(A) REVENUE PER BOOKS	(B) NET INVEST MENT INCOM	
MORGAN STANLEY						
#019211	11,418.		0.	11,418	. 11,418	3.
MORGAN STANLEY #019213	31,227.	1	897.	29,330	. 29,330	1
MORGAN STANLEY	31,227.	Ι,	057.	25,550	25,550	, •
#019217	26,312.		0.	26,312	. 26,312	2.
MORGAN STANLEY	,		-	, .	•	
#019220	2,408.		0.	2,408	. 2,408	3.
MORGAN STANLEY						
#019221	170,298.		0.	170,298	. 170,298	3.
MORGAN STANLEY	45 504		•	45 504	45 504	
#019226	15,731.		0.	15,731	. 15,731	• •
MORGAN STANLEY #019228	20,607.		0.	20,607	. 20,607	7
MORGAN STANLEY	20,607.		υ.	20,007	. 20,00	•
#019238	4,683.		0.	4,683	4,683	3.
MORGAN STANLEY	1,005.		•	1,005	. 1,000	, •
#019241	32,524.		0.	32,524	. 32,524	<b>!</b> •
MORGAN STANLEY	•					
#021607	78,520.		0.	78,520	. 78,520	).
MORGAN STANLEY						
#026331	331.		0.	331	. 331	<b>.</b> •
MORGAN STANLEY	2 420		•	2 420	2 420	•
#026966	3,438.		0.	3,438	. 3,438	<b>5</b> •
VANGUARD INTERNATIONAL						
EXPLORER FUND	17,910.		0.	17,910	. 17,910	) <sub>-</sub>
EMI BORER TONE						
TO PART I, LINE 4	415,407.	1,	897.	413,510	413,510	). =
HODW 000 DE		OMUED	TNCO	ME		STATEMENT 3
FORM 990-PF		OTHER	INCO	<u> </u>		STATEMENT 3
DESCRIPTION			RE		(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
<del></del>						
MISCELLANEOUS INCOM PY GRANT RECOVERY	Œ			20,433. 47,167.	20,433. 0.	
TOTAL TO FORM 990-P	F. PART T. I	TNE 11	· <u>···</u>	67,600.	20,433.	

<del></del>	OTHER PROFES	SIONAL FEES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
INVESTMENT MANAGEMENT FEES	198,551.	198,551	.•	0
TO FORM 990-PF, PG 1, LN 16C	198,551.	198,551	.•	0
FORM 990-PF	TAX	ES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
FEDERAL EXCISE TAX FOREIGN TAXES	35,000. 13,631.	13,631	•	0
TO FORM 990-PF, PG 1, LN 18	48,631.	13,631	. •	
_			-	<del></del>
FORM 990-PF U.S. AND S DESCRIPTION	STATE/CITY G U.S GOV'		LIGATIONS	STATEMENT 6 FAIR MARKET VALUE
DESCRIPTION	U.S	• OTHER		
DESCRIPTION  MORGAN STANLEY #019211  TOTAL U.S. GOVERNMENT OBLIGAT	U.S GOV' X	OTHER GOV'T B	OOK VALUE	FAIR MARKET VALUE 9,518,522
	U.S GOV'' X TIONS VERNMENT OBL	OTHER GOV'T B	9,460,986.	FAIR MARKET VALUE 9,518,522

566,677.

4,307,996.

4,874,673.

BOOK VALUE

FAIR MARKET

VALUE

646,038.

4,384,675.

5,030,713.

VANGUARD INT'L EXPLORER

TOTAL TO FORM 990-PF, PART II, LINE 10B

MORGAN STANLEY #019211

DESCRIPTION

FORM 990-PF C	CORPORATE BONDS	STATEMENT 8
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
STATE OF ISRAEL BONDS MORGAN STANLEY #019232	5,000. 8,598,732.	5,000. 9,119,309.
TOTAL TO FORM 990-PF, PART II, LI	ENE 10C 8,603,732.	9,124,309.