	Form	990-T	E	Exempt Organization Bus		•		า	OMB No 1545-0687	
				(and proxy tax und	ler se	ection 6033(e))			2040	
		,	For ca	lendar year 2018 or other tax year beginning		, and ending		_	2018	
		ment of the Treasury I Revenue Service	>	► Go to www.irs.gov/Form990T for in Do not enter SSN numbers on this form as it may				,	Open to Public Inspection for 501(c)(3) Organizations Only	
	ΑL	Check box if address changed		Name of organization (Check box if name c THE PRITZKER FAMILY	hange	d and see instructions.)	-	(Emp	ployer identification number ployees' trust, see ructions)	23
		empt under section	Print	PHILANTHROPIC FUND			_	3	36-3623264	93
	X	501(c.)(3_)	or Type	Number, street, and room or suite no. If a P.O. box					elated business activity code instructions)	9
	<u></u>	408(e)220(e)	Type	150 N. RIVERSIDE PLAZA] `	•	ဆ
		408A 530(a) 529(a)		City or town, state or province, country, and ZIP o CHICAGO, IL 60606-159	4			900	0000	332
	C Boo	k value of all assets nd of year		F Group exemption number (See instructions.) G Check organization type ▶ X 501(c) corp	>	N/A				
		169,144,4	<u>90.</u>	G Check organization type ► X 501(c) corp	poratio	n 501(c) trust	401(a) trust	Other trust	存
	H Ent	er the number of the c	organiza	ition's unrelated trades or businesses.	1		the only (or first) ur	related	d	
		-		VESTMENT IN PARTNERSHIP			complete Parts I-V.		•	+
				ce at the end of the previous sentence, complete Pa	arts I ar	nd II, complete a Schedule	M for each addition	nal trad	le or	0
		iness, then complete								Ś
				poration a subsidiary in an affiliated group or a parer	nt-subs	sidiary controlled group?	▶ l	Y	es X No	
				tifying number of the parent corporation.	(O) (E	CODD ~··		1.0	<u> </u>	9
				DIVERSIFIED FINANCIAL M de or Business Income	GMT		one number > 3			7
				de or Business income	1	(A) Income	(B) Expense	S	(C) Net	-
		Gross receipts or sale		- Patraca						`
		Less returns and allov		c Balance	10				<u> </u>	
		Cost of goods sold (S Gross profit. Subtract		•	3				<u> </u>	
		Capital gain net incom			4a	-	-		,	
				art II, line 17) (attach Form 4797)	4a 4b				 	
		Capital loss deduction		• •	40 4c					
		•		ship or an S corporation (attach statement)	5	<333,215.	> STMT 1		<333,215.	
		Rent income (Schedul		on por an o corporation (attach statement)	6	(333) 2231	01111 1		(333, 213.	
		Unrelated debt-finance	•	ne (Schedule F)	7	<4,881.	> 34,2	08.	<39,089.	>
	_			and rents from a controlled organization (Schedule F)	8	12,0021	01,1		(33,003)	
		-		on 501(c)(7), (9), or (17) organization (Schedule G)	-				 	
		Exploited exempt activ			10				`	
ì		Advertising income (S	-	,	11					
•1		Other income (See ins		•	12					
	13	Total. Combine lines	3 throu	gh 12	13	<338,096.	> 34,2	08.	<372,304.	>
	;Par	t II Deduction	ns No	ot Taken Elsewhere (See instructions fo	r limit	ations on deductions)				
		(Except for c	ontribu	utions, deductions must be directly connected	d with	the unrelated business	s income)			
	14	Compensation of offi	icers, di	rectors, and trustees (Schedule K)		<u> </u>		14		
	15	Salaries and wages		//	13	7 2019 100 1 2019 100 DEN, UT		15		
	16	Repairs and maintena	ance	RE	شكر	- 101		16		
	17	Bad debts		\	_ ,	1 5012 PEL		17		
	18	Interest (attach sche	dule) (se	ee instructions) ' \sqrt{n}	1 NO	1		18		
	19	Taxes and licenses		e instructions for limitation rules)	٠ _			19		
	20			e instructions for limitation rules)	-65)EIV,		20		
	21	Depreciation (attach l		(562)	309	21				
	22	•	umed or	n Schedule A and elsewhere on return		22a		22b		
	23	Depletion						23		
	24	Contributions to defe		mpensation plans				24		
	25	Employee benefit pro	-	shedula IX		•		25	-	
	26	Excess exempt exper		•				26		
	27	Excess readership co	•	,				27	ļ	
	28	Other deductions (att		•				28		
	29	Total deductions Ad		-	م مسالة	O from line 10		29	0.	
	30			ncome before net operating loss deduction. Subtrac				30	<372,304.	>
	31 32			oss arising in tax years beginning on or after Janua ncome. Subtract line 31 from line 30	ıy 1, 20	o (see instructions)		31	<372,304.>	
•				work Reduction Act Notice, see instructions				<u> 32</u>	772,304.5 m 990-T (2018)	
	22370	01-00-10 LII/	apvi					1		

Form 990-T (2018) PHILANTHROPIC FUND

Part I	II Total Unrelated Business Taxable Income				
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (so	ee instructions)		33	<372,304.
34	Amounts paid for disallowed fringes			34	<u> </u>
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instr	ructions) S.	гмт 2	35	0.
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the s	sum of			
	lines 33 and 34			36	<372,304.
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)			37	1,000.
38	Unrelated business taxable income Subtract line 37 from line 36. If line 37 is greater than line	36,			
	enter the smaller of zero or line 36			38	<372,304.
Part I	V Tax Computation				
39	Organizations Taxable as Corporations Multiply line 38 by 21% (0.21)		>	39	0.
40	Trusts Taxable at Trust Rates See instructions for tax computation. Income tax on the amount	on line 38 from			
	Tax rate schedule or Schedule D (Form 1041)		>	40	
41	Proxy tax See instructions		>	41	
42	Alternative minimum tax (trusts only)			42	
43	Tax on Noncompliant Facility Income See instructions			43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies			44	0.
Part \				, ,	
45 a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a		4	
b	Other credits (see instructions)	45b		4	
C	General business credit. Attach Form 3800	45c		4	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d		Ji	
е	Total credits Add lines 45a through 45d			45e	
. 46	Subtract line 45e from line 44			46	0.
47	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 88	366 L Other	(attach schedule)	47	
48	Total tax. Add lines 46 and 47 (see instructions)			48	0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	1 1 -		49	0.
	Payments: A 2017 overpayment credited to 2018		L00,000	4 `	
	2018 estimated tax payments	50b		4	
	Tax deposited with Form 8868		L25,000	4	
	Foreign organizations: Tax paid or withheld at source (see instructions)	50d		4	
	Backup withholding (see instructions)	50e		1 1	
	Credit for small employer health insurance premiums (attach Form 8941)	50f		↓	
g	Other credits, adjustments, and payments: Form 2439			1	
	☐ Form 4136 ☐ ☐ Other ☐ Total ►	50g			005 000
51	Total payments. Add lines 50a through 50g			51	225,000.
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached		_	52	
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed			53	225 000
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	,000. Re		54	225,000.
Part V			efunded >	55	175,000.
			•		I Van I Na
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization		-		Yes No
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the	•			
	here	; ioreign country			- x
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or tr	ropotoror to a fo	roign trunt?		$-\frac{x}{x}$
37		ansieror io, a io	ireigii irustr		A
58	If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year > \$				
	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and	statements, and to	the best of my kno	wledge and	belief, it is true.
Sign	correct and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer				,
Here	11/14/19 NICE PR	RESIDENT		-	iscuss this return with
	Signature of officer Date Title	(LDIDIN)		ie preparer si istructions)?	hown below (see No
	Print/Type preparer's name Preparer's signature Da	ıte T		ıf PTIN	
5	Tropard Signature		self- employed		
Paid			Jon Gripioyeu		
Prepa	Francis asses 8		Firm's EIN		
Use C	TIIIY				
	Firm's address		Phone no.		
823711 01					orm 990-T (2018)

THE PRITZKER FAMILY Form 990-T (2018) PHILANTHROPIC FUND

	s Sold. Enter method	a or mverit	ory valuation 🕨 N/A					
1 Inventory at beginning of year	1		6 Inventory at end of year	ır		6		
2 Purchases	2		7 Cost of goods sold. Su	ubtract lii	ne 6			
3 Cost of labor	3		from line 5. Enter here	and in P	art I,	1		
4a Additional section 263A costs			line 2		•	7		
(attach schedule)	4a		8 Do the rules of section	263A (w	vith respect to		Yes	No
b Other costs (attach schedule)	4b		property produced or a					\vdash
5 Total Add lines 1 through 4b	5		the organization?	•	,,			.
Schedule C - Rent Income	(From Real Prop	erty and		Lease	ed With Real Pro	perty	v)	
(see instructions)	•	•					,,	
Description of property								
(1)			_					
(2)								
(3)								
(4)	•							
	2. Rent received or acci				3(a)Deductions directl	v 60000	ted with the income	
(a) From personal property (if the per rent for personal property is more 10% but not more than 50%	e than	of rent for per	d personal property (if the percentarsonal property exceeds 50% or if its based on profit or income)	age	columns 2(a) a	nd 2(b) (a	attach schedule)	""
(1)								
(2)								
(3)								
(4)	_							
Total	0 . Total			0.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column				0.	(b) Total deductions Enter here and on page 1, Part I, line 6, column (B)	•		0.
Schedule E - Unrelated Del	ot-Financed Inco	me (see ir	nstructions)					
		`	2 Gross income from		3 Deductions directly conto debt-finan	nected v ced prop	with or allocable erty	
1 Description of debt-fi			or allocable to debt- financed property	(a) s	Straight line depreciation (attach schedule)		(b) Other deductio	,
. Description of dest in	nanced property				,	1	(attach schedule)	
				ļ		ST	ATEMENT	3
(1) UBTI FROM DEBT F		IVITY	<4,881.	>		ST		_
(1) UBTI FROM DEBT F		IVITY	<4,881.	>		ST	ATEMENT	_
(1) UBTI FROM DEBT F (2) (3)		IVITY	<4,881.	>		ST	ATEMENT	_
(1) UBTI FROM DEBT F		IVITY	<4,881.	>		ST	ATEMENT	_
(1) UBTI FROM DEBT F (2) (3)		basis o perty	<4,881. 6 Column 4 divided by column 5	>	7 Gross income reportable (column 2 x column 6)		ATEMENT	208.
(1) UBTI FROM DEBT F (2) (3) (4) 4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	INANCED ACT 5. Average adjusted of or allocable t debt-financed prop	basis o perty	6 Column 4 divided	>	7 Gross income reportable (column	(c	8 Allocable deduc	tions
(1) UBTI FROM DEBT F (2) (3) (4) 4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) STATEMENT 4 (1) 2,693,942.	5. Average adjusted of or allocable to debt-financed property of the control of t	basis o perty	6 Column 4 divided by column 5	>	7 Gross income reportable (column 2 x column 6)	(0	8 Allocable deduction of x total of co	tions
(1) UBTI FROM DEBT F (2) (3) (4) 4 Amount of everage acquisition debt on or allocable to debt-financed property (attach schedule) STATEMENT 4 (1) 2,693,942.	5. Average adjusted of or allocable to debt-financed property of the control of t	basis o perty	6 Column 4 divided by column 5	>	7 Gross income reportable (column 2 x column 6)	(0	8 Allocable deduction of x total of co	tions
(1) UBTI FROM DEBT F (2) (3) (4) 4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) STATEMENT 4 (1) 2,693,942. (2) (3)	5. Average adjusted of or allocable to debt-financed property of the control of t	basis o perty	6 Column 4 divided by column 5	>	7 Gross income reportable (column 2 x column 6)	(0	8 Allocable deduction of x total of co	tions
(1) UBTI FROM DEBT F (2) (3) (4) 4 Amount of everage acquisition debt on or allocable to debt-financed property (attach schedule) STATEMENT 4 (1) 2,693,942.	5. Average adjusted of or allocable to debt-financed property of the control of t	basis o perty	6 Column 4 divided by column 5 100 . 00% %	En	7 Gross income reportable (column 2 x column 6)	(c	8 Allocable deduction of x total of co	tions olumns
(1) UBTI FROM DEBT F (2) (3) (4) 4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) STATEMENT 4 (1) 2,693,942. (2) (3)	5. Average adjusted of or allocable to debt-financed property of the control of t	basis o perty	6 Column 4 divided by column 5 100 . 00% %	En	7 Gross income reportable (column 2 x column 6) <4 , 881	(c	8 Allocable deduction 6 x total of circles (3(a) and 3(b)) 34,2	tions olumns
(1) UBTI FROM DEBT F (2) (3) (4) 4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) STATEMENT 4 (1) 2,693,942. (2) (3) (4)	5. Average adjusted of or allocable t debt-financed property STATEMENT 2,693	basis o perty	6 Column 4 divided by column 5 100 . 00% %	En	7 Gross income reportable (column 2 x column 6) <4 , 881	(c	8 Allocable deduction 6 x total of consum 7 x	tions olumns

Form 990-T (2018) PHILANTHROPIC FUND Schedule F - Interest, Annuities, Royalties, and Rents From

- Interest, 7	Timulies, Hoya	intico, un		Controlled O				13 (500 1113	in decitor is	9)
1 Name of controlled organizate	identif	nployer lication nber	3 Net unre	elated income instructions)	4. Tota	al of specified nents made	includ	t of column 4 ed in the cont ation's gross i	rolling	6 Deductions directly connected with income in column 5
(1)						·	<u> </u>			
(2)					-					
(3)										
(4)	1						l —			
Nonexempt Controlled Organiz	zations									
7 Taxable Income	8. Net unrelated incor (see instruction		9 Total	of specified payr made	nents	10 Part of column the controllingross	nn 9 thai ng organ income	iization's		ductions directly connected income in column 10
(1)										
(2)										
(3)					,					
(4)					Î					
						Add colun Enter here and line 8, c		1, Part I,	Enter h	d columns 6 and 11 ere and on page 1, Part I, line 8, column (B)
Totals					<u>▶</u>			0.		0.
Schedule G - Investme		Section	501(c)(7), (9), or	(17) Or	ganization)			
:	ription of income			2 Amount of	income	3. Deduction directly connected (attach schedu	cted	4. Set-		5. Total deductions and set-asides (col 3 plus col 4)
(1)										(60) 6 pide 601 4)
(2)					1					
(3)										†
(4)		•								
				Enter here and o Part I, line 9, co						Enter here and on page 1, Part I, line 9, column (B)
Totals			▶		0.					0.
Schedule I - Exploited (see instru		y Income	e, Other	r Than Ad	vertisi	ng Income	;			
Description of exploited activity	2 Gross unrelated business income from trade or business	3 Exp directly co with pro- of unre business	onnected duction plated	4. Net incom from unrelated business (co minus columi gain, compute through	trade or lumn 2 n 3) If a cols 5	5. Gross inco from activity to is not unrelate business inco	hat ed	6 Exp attributa colun	able to	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)										
(2)					1					
(3)										
(4)									/	
Totals	Enter here and on page 1, Part I, line 10, col (A)	Enter here page 1, line 10, c	Part I,			•				Enter here and on page 1, Part II, line 26
Schedule J - Advertisir		instructions				_				-
Part I Income From F				solidated	Basis	•				
1. Name of periodical	2 Gross advertising income		Direct	4. Adverti or (loss) (co col 3) If a ga cols 5 th	ol 2 minus iin, compute	5 Circulat income		6 Reade		7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)										
(2)										
(3)										i
(4)										
Totals (carry to Part II, line (5))	•	0.	0							0.
	,									Form 990-T (2018)

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1 Name of periodical	2 Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)					-	
Totals from Part I	· 0.	0.		-	•	0.
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)			ŧ	Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	0.	0.			,	/ 0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	, 2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total Enter here and on page 1, Part II, line 14		>	0.

Form 990-T (2018)

THE PRITZKER FAMILY PHILANTHROPIC FUND

FORM 990-T INCOME (LOSS) FR	ROM PARTN	ERSHIPS	STATEMENT	1
DESCRIPTION			NET INCOME OR (LOSS)	
UBTI FROM PASSTHROUGHS - ORDINARY BUSINE	ESS INCOM	E (LOSS)	<333,21	.5 . >
TOTAL INCLUDED ON FORM 990-T, PAGE 1, L	INE 5		<333,21	.5 •>
FORM 990-T NET OPERATING I	LOSS DEDU	CTION	STATEMENT	2
LOSS PREVIOUSI TAX YEAR LOSS SUSTAINED APPLIES		LOSS REMAINING	AVAILABLE THIS YEAR	
12/31/17 105,632.	0.	105,632.	105,632	2.
NOL CARRYOVER AVAILABLE THIS YEAR		105,632.	105,632	2.
			.,	
FORM 990-T SCHEDULE E - OTHER	R DEDUCTI	ONS	STATEMENT	3
FORM 990-T SCHEDULE E - OTHER DESCRIPTION	ACTIVIT NUMBER		STATEMENT	
	ACTIVIT NUMBER	Y	TOTAL	,
DESCRIPTION UBTI FROM DEBT FINANCED ACTIVITY	ACTIVIT NUMBER	Y AMOUNT	TOTAL)8.
DESCRIPTION UBTI FROM DEBT FINANCED ACTIVITY - SUBTOTAL	ACTIVIT NUMBER - 1 3(B)	Y AMOUNT 34,208.	TOTAL 34,20)8.
DESCRIPTION UBTI FROM DEBT FINANCED ACTIVITY - SUBTOTAL TOTAL OF FORM 990-T, SCHEDULE E, COLUMN FORM 990-T AVERAGE ACQUISITION	ACTIVIT NUMBER - 1 3(B)	AMOUNT 34,208. OR OPERTY	34,20 34,20)8.
DESCRIPTION UBTI FROM DEBT FINANCED ACTIVITY - SUBTOTAL TOTAL OF FORM 990-T, SCHEDULE E, COLUMN FORM 990-T AVERAGE ACQUISITION ALLOCABLE TO DEBT-FIN	ACTIVIT NUMBER - 1 3(B) N DEBT ON NANCED PR ACTIVIT NUMBER	AMOUNT 34,208. OR OPERTY	34,20 34,20 STATEMENT	08.

FORM 990-T AVERAGE ADJUSTED ALLOCABLE TO DEBT-FI	ERTY	STATEMENT		
DESCRIPTION	ACTIVITY NUMBER	AMOUNT	TOTAL	
UBTI FROM DEBT FINANCED ACTIVITY - SUBTOTAL -	- 1	2,693,942.	2,693,94	12.
TOTAL OF FORM 990-T, SCHEDULE E, COLUMN	5		2,693,94	12.