

Form **990-PF**
 Department of the Treasury
 Internal Revenue Service

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

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

OMB No 1545-0052
2018
Open to Public Inspection

For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018

Name of foundation Colonel James N Pritzker Library of the Citizen Soldier % SHARI KOEHLER		A Employer identification number 36-4477083
Number and street (or P O box number if mail is not delivered to street address) 104 S Michigan Ave Suite No 500	Room/suite	B Telephone number (see instructions) (312) 374-9455
City or town, state or province, country, and ZIP or foreign postal code Chicago, IL 60603		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ <u>23,842,492</u>	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis)</i>	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	7,058,617			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	7,071	6,910	7,071	
	5a Gross rents	101,605	92,807	101,605	
	b Net rental income or (loss)	101,605			
	6a Net gain or (loss) from sale of assets not on line 10	201,330			
	b Gross sales price for all assets on line 6a	201,330			
	7 Capital gain net income (from Part IV, line 2)		200,088		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances	67,137			
b Less Cost of goods sold	125,373				
c Gross profit or (loss) (attach schedule)	-58,236		-58,236		
11 Other income (attach schedule)	-105,007	-39,258	-105,007		
12 Total. Add lines 1 through 11	7,205,380	260,547	-54,567		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	133,421			133,421
	14 Other employee salaries and wages	1,427,291			1,427,291
	15 Pension plans, employee benefits	517,419			517,419
	16a Legal fees (attach schedule)	3,566	0	0	3,566
	b Accounting fees (attach schedule)	33,873	30,372	0	33,873
	c Other professional fees (attach schedule)	638,399	230,175	0	35,856
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	540,100	0	0	540,100
	19 Depreciation (attach schedule) and depletion	1,088,108			
	20 Occupancy	518,754			518,754
	21 Travel, conferences, and meetings	58,482			58,482
	22 Printing and publications				
	23 Other expenses (attach schedule)	1,034,613	0	0	1,034,718
	24 Total operating and administrative expenses. Add lines 13 through 23	5,994,026	260,547	0	4,303,480
	25 Contributions, gifts, grants paid	500,164			500,164
26 Total expenses and disbursements. Add lines 24 and 25	6,494,190	260,547	0	4,803,644	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	711,190				
b Net investment income (if negative, enter -0-)		0			
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	6,501,218	6,672,371	6,672,371
	2 Savings and temporary cash investments	560,792	564,190	564,190
	3 Accounts receivable ▶ <u>139,117</u> Less allowance for doubtful accounts ▶ _____		139,117	139,117
	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 ▶ _____			
	8 Inventories for sale or use	0	390,183	390,183
	9 Prepaid expenses and deferred charges	0	148,446	148,446
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	6,456	10,382	10,382
	c 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)	7,536,062	13,139,391	13,139,391
	14 Land, buildings, and equipment basis ▶ <u>13,582,955</u> Less accumulated depreciation (attach schedule) ▶ <u>11,304,543</u>	3,385,512	2,278,412	2,278,412
15 Other assets (describe ▶ _____)	☞ 431,748	☞ 500,000	☞ 500,000	
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	18,421,788	23,842,492	23,842,492	
Liabilities	17 Accounts payable and accrued expenses	0	719,266	
	18 Grants payable			
	19 Deferred revenue	0	44,912	
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	764,178	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted	12,176,185	16,564,377	
	25 Temporarily restricted	6,245,603	6,513,937	
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg, and equipment fund			
29 Retained earnings, accumulated income, endowment, or other funds				
30 Total net assets or fund balances (see instructions)	18,421,788	23,078,314		
31 Total liabilities and net assets/fund balances (see instructions) .	18,421,788	23,842,492		

Part III Analysis of Changes in Net Assets or Fund Balances		
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	18,421,788
2 Enter amount from Part I, line 27a	2	711,190
3 Other increases not included in line 2 (itemize) ▶ _____ ☞	3	7,287,792
4 Add lines 1, 2, and 3	4	26,420,770
5 Decreases not included in line 2 (itemize) ▶ _____ ☞	5	3,342,456
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	23,078,314

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1 a BPEA K-1 INCOME	P		
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 200,088			200,088
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			200,088
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	200,088
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	2,328,500	15,797,180	0.1474
2016	3,674,810	816,557	4.500372
2015	6,052,426	7,186,878	0.84215
2014	3,008,835	5,701,838	0.527696
2013	2,725,248	3,026,643	0.900419
2 Total of line 1, column (d)			6.918037
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years			1.383607
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5			19,934,041
5 Multiply line 4 by line 3			27,580,879
6 Enter 1% of net investment income (1% of Part I, line 27b)			0
7 Add lines 5 and 6			27,580,879
8 Enter qualifying distributions from Part XII, line 4			4,803,644

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

Table with 11 rows for excise tax calculations. Includes fields for exempt foundations, tax under section 511, subtitle A tax, and total credits. Total amount owed is 19,129.

Part VII-A Statements Regarding Activities

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

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions.
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement See instructions
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW PRITZKERMILITARY.ORG
14 The books are in care of SHARI KOEHLER Telephone no (312) 374-9455

Located at 104 S MICHIGAN AVE NOS00 CHICAGO IL ZIP+4 60603

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 -check here and enter the amount of tax-exempt interest received or accrued during the year 15

16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes", enter the name of the foreign country

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a During the year did the foundation (either directly or indirectly)
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?
(6) Agree to pay money or property to a government official?
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?
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))
a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018?
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?
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?
b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or 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?
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.			5b		
Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <i>If "Yes" to 6b, file Form 8870</i>			6b		No
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No			

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(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	(e) Expense account, other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
JOHN LAPINE 104 S MICHIGAN AVE NO 500 CHICAGO, IL 60603	COLLECTIONS SERVICE 40 0	107,770	17,249	0
THERESA EMBREY 104 S MICHIGAN AVE NO 500 CHICAGO, IL 60603	SENIOR LIBRARIAN 40 0	87,140	16,680	0
MEGAN WILLIAMS 104 S MICHIGAN AVE NO 500 CHICAGO, IL 60603	DR OF EXT AFFAIRS 40 0	78,246	12,032	0
BRADLEY GUIDERA 104 S MICHIGAN AVE NO 500 CHICAGO, IL 60603	PRODUCTION MANAGER 40 0	68,253	7,168	0
LEE MAY 104 S MICHIGAN AVE NO 500 CHICAGO, IL 60603	DEVELOPMENT OFFICER 40 0	67,189	7,094	0
Total number of other employees paid over \$50,000.			9	

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

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services. ▶		

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 THE PRITZKER MILITARY LIBRARY WAS FORMED TO ACQUIRE AND MAINTAIN A COLLECTION OF MATERIALS AND DEVELOP APPROPRIATE PROGRAMS FOCUSING ON THE CONCEPT OF THE CITIZEN SOLDIER AS	4,803,644
2	
3	
4	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
1 NONE	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3 ▶	

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	15,047
b	Average of monthly cash balances.	1b	7,083,167
c	Fair market value of all other assets (see instructions).	1c	13,139,391
d	Total (add lines 1a, b, and c).	1d	20,237,605
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	20,237,605
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	303,564
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	19,934,041
6	Minimum investment return. Enter 5% of line 5.	6	996,702

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	
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	

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	4,803,644
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	0
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	0
b	Cash distribution test (attach the required schedule).	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	4,803,644
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	4,803,644

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				0
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.				
b Total for prior years 20___, 20___, 20___				
3 Excess distributions carryover, if any, to 2018				
a From 2013.				
b From 2014.				
c From 2015.				
d From 2016.				
e From 2017.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ _____				
a Applied to 2017, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2018 distributable amount.				
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2018 (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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
b Prior years' undistributed income Subtract line 4b from line 2b				
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 assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019				0
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 2013 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9				
a Excess from 2014.				
b Excess from 2015.				
c Excess from 2016.				
d Excess from 2017.				
e Excess from 2018.	0			

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. 2002-12-26

b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year				(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	0				0
b 85% of line 2a	0				0
c Qualifying distributions from Part XII, line 4 for each year listed	4,803,644	2,328,500	3,674,810	6,052,426	16,859,380
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	4,803,644	2,328,500	3,674,810	6,052,426	16,859,380
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets	0	0	0	0	0
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.	664,468	526,573	27,219	239,563	1,457,823
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)					0
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					0
(3) Largest amount of support from an exempt organization					0
(4) Gross investment income					0

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

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))
COL IL JN PRITZKER IL ARNG RET

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

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

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

a The name, address, and telephone number or email address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV **Supplementary Information** (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year US Foundation of Commemorative World Wars 701 Pennsylvania Avenue NW 123 WASHINGTON, DC 200040725	No Relationship	PC	To support the US Foundation purpose	500,000
Total				▶ 3a
b Approved for future payment				
Total				▶ 3b

Part XVI-A Analysis of Income-Producing Activities

Table with 5 main columns: (a) Business code, (b) Amount, (c) Exclusion code, (d) Amount, and (e) Related or exempt function income. Rows include categories like Program service revenue, Membership dues, Dividends, and Subtotal.

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Table with 2 columns: Line No. and description. Line 1 describes the library's activities and their contribution to exempt purposes.

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Part XVII

1 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 organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No

d If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

*****	2019-11-15	*****
Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below (see instr)? Yes No

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	Bridget T Roche				P00666837
	Firm's name ▶	GRANT THORNTON LLP			
Firm's address ▶	171 N CLARK ST SUITE 200 CHICAGO, IL 60601				Phone no (312) 856-0200

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
Col IL JN Pritzker IL ARNG RET	CHAIR	0	0	0
104 S Michigan Ave Chicago, IL 60603	1 0			
Mary F Parthe - BEG 0318	Secretary	0	0	0
104 S Michigan Ave Chicago, IL 60603	1 0			
James Mukoyama	Director	0	0	0
104 S Michigan Ave Chicago, IL 60603	1 0			
Arie Friedman	Director	0	0	0
104 S Michigan Ave Chicago, IL 60603	1 0			
Tyrone Fahner	Director	0	0	0
104 S Michigan Ave Chicago, IL 60603	1 0			
John Williams	Director	0	0	0
104 S Michigan Ave Chicago, IL 60603	1 0			
Kevin Farrell	Director	0	0	0
104 S Michigan Ave Chicago, IL 60603	1 0			
Robert Sarazen	Director	0	0	0
104 S Michigan Ave Chicago, IL 60603	1 0			
Ginny Narsete - Thru 0618	Director	0	0	0
104 S Michigan Ave Chicago, IL 60603	1 0			
Norman Bobins	Director	0	0	0
104 S Michigan Ave Chicago, IL 60603	1 0			
John Rowe	Director	0	0	0
104 S Michigan Ave Chicago, IL 60603	1 0			
Kenneth Clarke - THRU 0118	President & CEO	0	0	0
104 S Michigan Ave Chicago, IL 60603	40 0			
John Schwan	Interim President & CEO	130,307	0	0
104 S Michigan Ave Chicago, IL 60603	40 0			

TY 2018 Accounting Fees Schedule

Name: Colonel James N Pritzker Library of the
Citizen Soldier

EIN: 36-4477083

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	33,873		30,372	33,873

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

TY 2018 Depreciation Schedule

Name: Colonel James N Pritzker Library of the
Citizen Soldier

EIN: 36-4477083

TY 2018 Legal Fees Schedule

Name: Colonel James N Pritzker Library of the
Citizen Soldier

EIN: 36-4477083

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	3,566			3,566

TY 2018 Other Assets Schedule

Name: Colonel James N Pritzker Library of the
Citizen Soldier

EIN: 36-4477083

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
DUE FROM RELATED ORGANIZATION	431,748	500,000	500,000

TY 2018 Other Decreases Schedule

Name: Colonel James N Pritzker Library of the
Citizen Soldier

EIN: 36-4477083

Description	Amount
GIFT IN KIND - RENT EXPENSES	1,114,152
DONATED LEASE ASSET	2,228,304

TY 2018 Other Expenses Schedule

Name: Colonel James N Pritzker Library of the
Citizen Soldier

EIN: 36-4477083

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOUNDERS PROJECTS	282,296	0	0	282,296
HONORARIUMS	112,500	0	0	112,500
ADVERTISING AND PROMOTION	75,414	0	0	75,414
INSURANCE	73,691	0	0	73,691
BOOKS AND PUBLICATIONS	69,923	0	0	69,923
SECURITY SERVICES	69,107	0	0	69,107
ARCHIVES AND EXHIBITS	57,402	0	0	57,402
TECHNOLOGY	34,204	0	0	34,204
PROJECTS	32,973	0	0	32,973
OFFICE SUPPLIES	23,677	0	0	23,677

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SHIPPING AND POSTAGE	18,585	0	0	18,585
BANK AND CREDIT CARD FEES	17,507	0	0	17,507
INSTITUTIONAL MEMBERSHIPS	11,818	0	0	11,818
PERMITS AND LICENSES	1,580	0	0	1,580
OTHER EXPENSES	153,936	0	0	153,935
CONTRIBUTIONS - PASSTHROUGHS	0	0	0	106

TY 2018 Other Income Schedule

Name: Colonel James N Pritzker Library of the
Citizen Soldier

EIN: 36-4477083

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
Net Income from Special Events	-202,583		-202,583
Membership Fees	53,107		53,107
Program Revenue	77,989		77,989
Other Income	-33,520		-33,520
INCOME FROM PASSTHROUGHS	0	-39,258	0

TY 2018 Other Increases Schedule

Name: Colonel James N Pritzker Library of the
Citizen Soldier

EIN: 36-4477083

Description	Amount
UNREALIZED GAIN ON INVESTMENTS	2,525,623
CONVERSION TO GAAP ADJUSTMENT	4,762,169

TY 2018 Other Professional Fees Schedule

Name: Colonel James N Pritzker Library of the
Citizen Soldier

EIN: 36-4477083

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT MANAGEMENT FEES	602,543	230,175	0	0
TEI PROFESSIONAL SERVICES	30,000	0	0	30,000
APPRAISAL FEES	5,856	0	0	5,856

**TY 2018 Substantial Contributors
Schedule**

Name: Colonel James N Pritzker Library of the
Citizen Soldier

EIN: 36-4477083

Name	Address
Col IL JN Pritzker IL ARNG RET	104 S Michigan Ave NO 500 Chicago, IL 60603
Pritzker Military Foundation	104 S Michigan Ave NO 500 Chicago, IL 60603

TY 2018 Taxes Schedule

Name: Colonel James N Pritzker Library of the
Citizen Soldier

EIN: 36-4477083

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROPERTY TAXES	466,753	0	0	466,753
TAXES	73,347	0	0	73,347

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors
▶ Attach to Form 990, 990-EZ, or 990-PF
▶ Go to www.irs.gov/Form990 for the latest information

OMB No 1545-0047
2018

Name of the organization
Colonel James N Pritzker Library of the
Citizen Soldier

Employer identification number
36-4477083

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

- 501(c)() (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹ 3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions 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 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
 Colonel James N Pritzker Library of the
 Citizen Soldier

Employer identification number
 36-4477083

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
—	See Additional Data Table	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

Name of organization Colonel James N Pritzker Library of the Citizen Soldier	Employer identification number 36-4477083
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Part II **Noncash Property**

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
20	STOCK SALE	\$ 10,432	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization Colonel James N Pritzker Library of the Citizen Soldier	Employer identification number 36-4477083
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed

(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, and 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 Transferee's name, address, and 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 Transferee's name, address, and 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 Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____

Additional Data

Software ID:

Software Version:

EIN: 36-4477083

Name: Colonel James N Pritzker Library of the
Citizen Soldier

Form 990 Schedule B, 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	45 Committee Inc	\$ 20,000	Person <input checked="" type="checkbox"/>
	PO Box 710993		Payroll <input type="checkbox"/>
	Herndon, VA 20171		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
2	Akerman LLP	\$ 5,000	Person <input checked="" type="checkbox"/>
	71 S Wacker Dr 47th Fl		Payroll <input type="checkbox"/>
	Chicago, IL 60606		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
3	Albert Ratner	\$ 10,000	Person <input checked="" type="checkbox"/>
	5150 Three Village Dr P-d		Payroll <input type="checkbox"/>
	Lyndhurst, OH 441243772		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
4	Audrey Ratner	\$ 50,000	Person <input checked="" type="checkbox"/>
	5150 Three Village Dr P-D		Payroll <input type="checkbox"/>
	Lyndhurst, OH 441243772		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
5	BJ Schultz	\$ 10,000	Person <input checked="" type="checkbox"/>
	7505-B Walton Ln		Payroll <input type="checkbox"/>
	Annandale, VA 22003		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
6	Berglund Construction Co	\$ 10,000	Person <input checked="" type="checkbox"/>
	8410 S Chicago Ave		Payroll <input type="checkbox"/>
	Chicago, IL 60617		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Form 990 Schedule B, 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	Brooke Private Equity Assoc Mgt	\$ 10,000	Person <input checked="" type="checkbox"/>
	20 Custom House St Ste 610		Payroll <input type="checkbox"/>
	Boston, MA 02110		Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions)			
8	Bruce Diane Ratner	\$ 10,000	Person <input checked="" type="checkbox"/>
	720 Rosewood Ave		Payroll <input type="checkbox"/>
	Winnetka, IL 60093		Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions)			
9	Charles E Dobrusin Assoc	\$ 25,000	Person <input checked="" type="checkbox"/>
	104 S Michigan Ave Ste 1000		Payroll <input type="checkbox"/>
	Chicago, IL 606035977		Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions)			
10	Chicago History Museum	\$ 5,000	Person <input checked="" type="checkbox"/>
	1601 N Clark St		Payroll <input type="checkbox"/>
	Chicago, IL 606146038		Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions)			
11	Citadel	\$ 5,000	Person <input checked="" type="checkbox"/>
	131 S Dearborn St		Payroll <input type="checkbox"/>
	Chicago, IL 606035517		Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions)			
12	Colette Holt	\$ 5,000	Person <input checked="" type="checkbox"/>
	3350 Brunell Dr		Payroll <input type="checkbox"/>
	Oakland, CA 946024103		Noncash <input type="checkbox"/>
(Complete Part II for noncash contributions)			

Form 990 Schedule B, 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
13	Craig Duchossois	\$ 25,000	Person <input checked="" type="checkbox"/>
	444 W Lake St Ste 2000		Payroll <input type="checkbox"/>
	Chicago, IL 60606		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
14	Daniel Dayton	\$ 5,200	Person <input checked="" type="checkbox"/>
	701 Pennsylvania Ave NW Ste 123		Payroll <input type="checkbox"/>
	Washington, DC 200042688		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
15	David Herro	\$ 15,000	Person <input checked="" type="checkbox"/>
	159 E Walton Pl 31		Payroll <input type="checkbox"/>
	Chicago, IL 606111971		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
16	David Pelizzon	\$ 12,600	Person <input checked="" type="checkbox"/>
	49 Wells Rd		Payroll <input type="checkbox"/>
	Granby, CT 060351206		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
17	David Truitt	\$ 20,000	Person <input checked="" type="checkbox"/>
	505 N Lake Shore Dr Apt 2710		Payroll <input type="checkbox"/>
	Chicago, IL 606113406		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
18	Exelon Corp	\$ 25,075	Person <input checked="" type="checkbox"/>
	10 S Dearborn St Fl 53		Payroll <input type="checkbox"/>
	Chicago, IL 606032398		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Form 990 Schedule B, 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
19	Fred Krehbiel	\$ 5,000	Person <input checked="" type="checkbox"/>
	2215 York Rd Ste 410		Payroll <input type="checkbox"/>
	Oak Brook, IL 60523		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
20	Frederick Waddell	\$ 10,432	Person <input checked="" type="checkbox"/>
	42 Indian Hill Rd		Payroll <input type="checkbox"/>
	Winnetka, IL 600933939		Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
21	Haymarket	\$ 5,000	Person <input checked="" type="checkbox"/>
	500 N Dearborn St Ste 1150		Payroll <input type="checkbox"/>
	Chicago, IL 606545801		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
22	Henry Crown Company	\$ 5,000	Person <input checked="" type="checkbox"/>
	222 N LaSalle St Ste 2000		Payroll <input type="checkbox"/>
	Chicago, IL 606011120		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
23	Illinois Institue of Technology	\$ 5,000	Person <input checked="" type="checkbox"/>
	10 W 35th St 1700		Payroll <input type="checkbox"/>
	Chicago, IL 606163717		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
24	James Gidwitz	\$ 5,000	Person <input checked="" type="checkbox"/>
	440 S LaSalle St Ste 3100		Payroll <input type="checkbox"/>
	Chicago, IL 60605		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Form 990 Schedule B, 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
25	Jay Mary Pritzker	\$ 10,000	Person <input checked="" type="checkbox"/>
	111 S Wacker Dr Ste 4000		Payroll <input type="checkbox"/>
	Chicago, IL 60606		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
26	Jeff Brincat	\$ 25,000	Person <input checked="" type="checkbox"/>
	300 S Green Bay Rd		Payroll <input type="checkbox"/>
	Waukegan, IL 60085		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
27	Col IL JN Pritzker IL ARNG RET	\$ 5,425,200	Person <input checked="" type="checkbox"/>
	104 S Michigan Ave NO 500		Payroll <input type="checkbox"/>
	Chicago, IL 60603		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
28	John Rita Canning	\$ 10,000	Person <input checked="" type="checkbox"/>
	70 W Madison St Ste 4600		Payroll <input type="checkbox"/>
	Chicago, IL 60602		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
29	John Deblasio	\$ 11,250	Person <input checked="" type="checkbox"/>
	1550 N State Pkwy Unit A1		Payroll <input type="checkbox"/>
	Chicago, IL 606108602		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)
30	John Rowe	\$ 25,000	Person <input checked="" type="checkbox"/>
	PO Box 805398		Payroll <input type="checkbox"/>
	Chicago, IL 606804183		Noncash <input type="checkbox"/>
			(Complete Part II for noncash contributions)

Form 990 Schedule B, 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
31	John Schwan	\$ 32,000	Person <input checked="" type="checkbox"/>
	27 Watergate Dr		Payroll <input type="checkbox"/>
	South Barrington, IL 600107125		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
32	Kevin Farrell	\$ 5,000	Person <input checked="" type="checkbox"/>
	1020 Forest Glen		Payroll <input type="checkbox"/>
	New Windsor, NY 12553		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
33	Lewis Collens	\$ 5,000	Person <input checked="" type="checkbox"/>
	1555 N Astor St Apt 6W		Payroll <input type="checkbox"/>
	Chicago, IL 606105750		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
34	Mary Parthe	\$ 5,000	Person <input checked="" type="checkbox"/>
	1754 Harrison St		Payroll <input type="checkbox"/>
	Glenview, IL 600255065		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
35	Mayari Pritzker	\$ 26,000	Person <input checked="" type="checkbox"/>
	1740 N Cleveland Ave		Payroll <input type="checkbox"/>
	Chicago, IL 606145603		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
36	Motoroa Solutions Inc	\$ 20,000	Person <input checked="" type="checkbox"/>
	1303 E Algonquin Rd		Payroll <input type="checkbox"/>
	Schaumburg, IL 60196		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Form 990 Schedule B, 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
37	Northern Trust Company 50 S LaSalle St	\$ 25,000	Person <input checked="" type="checkbox"/>
			Payroll <input type="checkbox"/>
	Chicago, IL 606031003		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
38	Norwich University 158 Harmon Dr	\$ 37,500	Person <input checked="" type="checkbox"/>
			Payroll <input type="checkbox"/>
	Northfield, VT 056631000		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
39	Paul Mary Finnegan 1133 Michigan Ave	\$ 5,000	Person <input checked="" type="checkbox"/>
			Payroll <input type="checkbox"/>
	Evanston, IL 60202		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
40	Pepper Construction 643 N Orleans St	\$ 10,000	Person <input checked="" type="checkbox"/>
			Payroll <input type="checkbox"/>
	Chicago, IL 606543690		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
41	Plante Moran - Mark Blumenthal 10 S Riverside Plz Ste 900	\$ 15,000	Person <input checked="" type="checkbox"/>
			Payroll <input type="checkbox"/>
	Chicago, IL 606063770		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
42	PNC Financial Services Group 1 North Franklin St Ste 2700	\$ 5,000	Person <input checked="" type="checkbox"/>
			Payroll <input type="checkbox"/>
	Chicago, IL 60606		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Form 990 Schedule B, 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
43	Pritzker Military Foundation	\$ 670,000	Person <input checked="" type="checkbox"/>
	104 S Michigan Ave NO 500		Payroll <input type="checkbox"/>
	Chicago, IL 60603		(Complete Part II for noncash contributions)
44	Pritzker Traubert Foundation	\$ 5,000	Person <input checked="" type="checkbox"/>
	444 W Lake St Ste 3400		Payroll <input type="checkbox"/>
	Chicago, IL 60606		(Complete Part II for noncash contributions)
45	Reed Smith LLP	\$ 10,000	Person <input checked="" type="checkbox"/>
	10 S Wacker Dr Ste 4000		Payroll <input type="checkbox"/>
	Chicago, IL 606067506		(Complete Part II for noncash contributions)
46	Richard Duchossois	\$ 50,000	Person <input checked="" type="checkbox"/>
	PO BOX 7		Payroll <input type="checkbox"/>
	Arlington Heights, IL 600060007		(Complete Part II for noncash contributions)
47	Rob Sarazen	\$ 5,000	Person <input checked="" type="checkbox"/>
	2230 N Magnolia Ave		Payroll <input type="checkbox"/>
	Chicago, IL 606143104		(Complete Part II for noncash contributions)
48	Tandem Construction Inc	\$ 5,000	Person <input checked="" type="checkbox"/>
	700 N Carpenter St		Payroll <input type="checkbox"/>
	Chicago, IL 60642		(Complete Part II for noncash contributions)

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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
49	The Concord Group	\$ 5,000	Person <input checked="" type="checkbox"/>
	55 E Monroe St Ste 2850		Payroll <input type="checkbox"/>
	Chicago, IL 60603		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
50	The Army Historical Foundation Inc	\$ 5,000	Person <input checked="" type="checkbox"/>
	2425 Wilson Blvd Ste 457		Payroll <input type="checkbox"/>
	Arlington, VA 222013326		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
51	The Boeing Company	\$ 10,000	Person <input checked="" type="checkbox"/>
	PO Box 516 M/C 5084-7000		Payroll <input type="checkbox"/>
	St Louis, MO 63166		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
52	The Daniel J Edelman Family	\$ 5,000	Person <input checked="" type="checkbox"/>
	200 E Randolph Street 63Rd		Payroll <input type="checkbox"/>
	Chicago, IL 60601		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
53	The Elizabeth Dole Foundation	\$ 10,000	Person <input checked="" type="checkbox"/>
	600 New Hampshire Ave NW		Payroll <input type="checkbox"/>
	Washington, DC 20037		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
54	The National World War II Museum I	\$ 5,000	Person <input checked="" type="checkbox"/>
	945 Magazine St		Payroll <input type="checkbox"/>
	New Orleans, LA 701303813		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
55	The Pritzker Pucker Family Foundati	\$ 5,000	Person <input checked="" type="checkbox"/>
	2141 N Southport Ave		Payroll <input type="checkbox"/>
	Chicago, IL 606144017		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
56	The Robert Thomas Bobins Foundation	\$ 10,000	Person <input checked="" type="checkbox"/>
	209 E Lake Shore Dr 10E		Payroll <input type="checkbox"/>
	Chicago, IL 606111307		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
57	The Satter Foundation	\$ 10,000	Person <input checked="" type="checkbox"/>
	676 N Michigan Ave Ste 4000		Payroll <input type="checkbox"/>
	Chicago, IL 606112895		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
58	The Seedlings Foundation	\$ 25,000	Person <input checked="" type="checkbox"/>
	984 Main St		Payroll <input type="checkbox"/>
	Branford, CT 064053730		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
59	Tyrone Fahner	\$ 10,000	Person <input checked="" type="checkbox"/>
	71 S Wacker Dr Ste 1000		Payroll <input type="checkbox"/>
	Chicago, IL 60606		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
60	US Fnd For The Comm of THE World WA	\$ 110,000	Person <input checked="" type="checkbox"/>
	701 Pennsylvania Ave NW 123		Payroll <input type="checkbox"/>
	Washington, DC 20004		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
61	Wells Fargo Clearing Svcs LLC	\$ 5,000	Person <input checked="" type="checkbox"/>
	425 N Martingale Rd Ste 200		Payroll <input type="checkbox"/>
	Schaumburg, IL 60173		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
62	William Obenshan	\$ 10,100	Person <input checked="" type="checkbox"/>
	2236 N Lincoln Park W 1-G		Payroll <input type="checkbox"/>
	Chicago, IL 606143814		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
63	Wirtz Corporation	\$ 5,000	Person <input checked="" type="checkbox"/>
	680 N Lake Shore Dr Ste 1900		Payroll <input type="checkbox"/>
	Chicago, IL 60611		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
64	WITH HONOR ACTION INC	\$ 5,000	Person <input checked="" type="checkbox"/>
	PO BOX 1115		Payroll <input type="checkbox"/>
	ALEXANDRIA, VA 22313		Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)